Intermountain Healthcare Compliance Boot Camp

In-person Training Content:

- Compliance Resources (including PPGs)
- Reporting Guidance
- Discipline
- High-risk areas:
  - Privacy/Security
  - Stark and AKS
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Non-Discrimination
Intermountain Healthcare complies with applicable federal and state civil rights laws and as an organization does not discriminate against any individual on the basis of the following:

<table>
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<tr>
<th>Age</th>
<th>Race</th>
<th>Color</th>
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<tbody>
<tr>
<td>Ethnicity or national origin</td>
<td>Religion</td>
<td>Culture</td>
</tr>
<tr>
<td>Language</td>
<td>Physician or mental disability</td>
<td>Socio-economic status</td>
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<tr>
<td>Sex</td>
<td>Sexual orientation</td>
<td>Gender identity or expression</td>
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<tr>
<td>Veteran status</td>
<td>The ability to pay</td>
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Intermountain also provides freedom from retaliation and humiliation.

Examples of discrimination of patients, visitors, members and guests include, but are not limited to:

- Refusing to accept a patient with a disability (e.g., diabetes, obesity, hearing or sight impairment)
- Not providing interpretation assistance or refusing to see patients who speak a different language
- Refusing to allow a service animal to accompany a patient or guest
- Unequal access to care or refusing to provide treatment for individuals with HIV / AIDS
- Refusing to address an individual by their expressed gender identity, name and/or pronouns

Scenario: **Use Voting Button to Select Correct Response (Options / Use Voting Buttons)**

During a patient visit, the patient asks for an on-site interpreter. What should you do?

A: Ask the patient to reschedule the appointment.
B: Request an on-site interpreter to provide communication services based on what method serves the patient best.
C: Tell the patient it would take too long to get an on-site interpreter and for this visit they will have to use telephonic interpretation.

Resources:
Communication Assistance Policy
Compliance Communications: Language Services – Communication Assistance
Compliance Communications: Non-Discrimination Non-Retaliation
Language Services Website -- Request an Interpreter
Non-Discrimination Policy
Harassment-Free Workplace

We are committed to having a respectful workplace where discrimination, harassment and retaliation are not tolerated. Intermountain caregivers are expected to act professionally and refrain from making comments, gestures, or acting in any manner that can be construed as harassing or disruptive.

We do not tolerate unwelcome conduct or sexual advances which affects or interferes with an individual’s work performance or creates an intimidating, hostile or offensive work environment.

All credentialed providers serve as an example and are expected to conduct themselves in a professional and mutually respectful manner. Timely, appropriate actions are expected when misconduct occurs.

<table>
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<th>Examples of Harassment/Intimidation:</th>
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<td>Offensive name calling, slurs</td>
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<td>Bullying (use or force, threats – overt or veiled, or coercion)</td>
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<td>Offensive pictures, cartoons or drawings</td>
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<table>
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<tr>
<th>Examples of Inappropriate/Disruptive Behaviors:</th>
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<tr>
<td>Verbal outbursts</td>
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<tr>
<td>Reluctance to answer questions or return phone calls</td>
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<tr>
<td>Refusing to communicate</td>
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Scenario: Use Voting Button to Select Correct Response (Options | Use Voting Buttons)

Dr. George and APRN Michelle work on the same unit. Dr. George often flirts with APRN Michelle, rubbing her shoulders and making suggestive comments about her physical appearance. APRN Michelle doesn’t tell Dr. George to stop. Is Dr. George’s behavior appropriate?

A: The behavior is NOT appropriate. Verbal or physical conduct of a sexual nature is unprofessional and inappropriate behavior in the workplace.

B: The behavior is okay because APRN Michelle has not explicitly told Dr. Paul to stop.

C: The behavior is NOT appropriate. Aggressive domination especially involving a real or perceived power imbalance is a form of intimidation and is not appropriate.

D: Both A and C are correct

Resources:

Disruptive Behavior Workplace Violence Policy
- Actions, behaviors and communications that are abusive, threatening, or disruptive to the work or well-being of caregivers is prohibited. This includes actions involving a real or perceived power imbalance used to intimidate or aggressively dominate others.

Non-Discrimination Harassment Retaliation Free Workplace Policy
- Unwelcome conduct or sexual advances which interferes with an individual’s work performance or creates an intimidating, hostile or offensive work environment is prohibited.
- Prohibited activities include conduct directed at an individual because of race, color, ethnicity, religion, gender, sexual orientation, gender identity, national origin, age, disability, veteran status, and pregnancy. It also includes unwelcome sexual advances, request for sexual favors, and other verbal or physical conduct of a sexual nature.

Respectful Work Environment Education
## Drug Diversion

The Fit For Duty Policy gives direction to protect the health and safety of staff, visitors, and patients by providing an environment where all staff is unimpaired when performing on the job.

Staff is defined as any individual who provides care or renders services with the organization, whether employed by or affiliated with by Intermountain Healthcare. Medical Staff bylaws and the Fit for Duty Policy direct corrective action when a provider’s fitness is questioned.

### What is Drug Diversion?

- Intentionally and without proper authorization, using or taking medication from Intermountain, patients or through Intermountain prescriptions, ordering or dispensing systems.

### Drug Diversion vs Impairment

- Drug Diversion is different than impairment. A caregiver can be impaired and not diverting drugs. If this is the case, please follow the Fit for Duty Policy.

### Preventing and Reporting drug diversion is essential to the safety of Intermountain patients and Intermountain caregivers

- Reporting of drug diversion, whether physician or another caregiver, should be made to
  - the Compliance Hotline – 1-800-442-4845, the reporter can remain anonymous
  - to the facility pharmacy director,
  - or to any member of the Drug Diversion Task Force.

- Drug Diversion can lead to substandard care by the diverter, denial of essential pain medication or therapy to the patient, and risk of infection if a provider tampers with injectable drugs.

### What is the Drug Diversion Task Force?

- A task force formed to investigate and prevent drug diversion at Intermountain. The Task Force is comprised of Compliance, Legal, HR, Nursing, Pharmacy and a member of the medical staff.

Resources:
- Drug Diversion Reporting and Response Policy
- Fit for Duty Policy
Conflicts of Interest

All Intermountain leaders, physicians and APPs are required to review and recertify their Conflict of Interest disclosure annually.

### Relationships to Disclose

<table>
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<th>Medical Directorships</th>
<th>Ownership in any healthcare company</th>
<th>Speaking/teaching engagements</th>
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<tbody>
<tr>
<td>Family members working for healthcare companies</td>
<td>Serving on organizational Boards</td>
<td>Selling items to Intermountain</td>
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Discuss all potential activities with your supervisor to determine if a conflict might exist.

Expectations of caregivers:

- Make a full, honest disclosure for review. Caregivers should not decide from themselves if a conflict of interest exists.
- Do not use their position to personally profit or to assist others in profiting at the expense of Intermountain.
- Use Intermountain resources only for Intermountain activities (including time, supplies and equipment).
- Obtain approval prior to service as a member of a board of any organization whose interest would impact or conflict with those of Intermountain.
- Without prior approval don’t work for or render services to any Intermountain competitor or supplier.

Resources:
- Conflict of Interest Policy
- Supplier Relations Medical Group Guideline
- Conflict of Interest Resources Page
False Claims Act
The False Claims Act is a federal law that makes it a crime to knowingly file a false or fraudulent claim for payment from government payers.

Knowingly Means:

| Knowledge a claim is false and have not reported or corrected the error. |
| Deliberately adding false information or ignoring errors on the encounter or claim or both. |
| Disregarding registration, charging, coding, billing, auditing, posting and collection regulations and rules causing the encounter or claim to have erroneous information. |

If you have or should have knowledge of an overpayment, you are required to correct the payment with the payer.

A penalty up to $11,000 plus damages can be assessed per false claim.

Scenario: Use Voting Button to Select Correct Response (Options / Use Voting Buttons)
You overhear a conversation in the hallway. A provider says to another provider that she is so busy she is documenting services and procedures that did not take place. You are concerned that the false documentation is leading to false charges.

You should:
A. Ignore it. It seems this caregiver is doing the best she can.
B. Do what the caregiver is doing. Sounds like a great way to get some ‘me time’.
C. Report the concern to Compliance.

Resources:
False Claims Prevention Procedure
False Claims Prevention Policy
Community Care and CHIP False Claim Act Policy
Claim Overpayment Policy