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| KS Plan Administrators | SUBJECT: Background Checking OIG Exclusions | POLICY NO: CP 9 PAGE 1 of 5 |
| Reference: Medicare Managed Care Manual Ch 21 Compliance Program Guidelines | DATE: October 2012 REVISION: December 2018 | |
| DISTRIBUTION: All Departments | FUNCTIONAL AREAS: All Departments | |
| SUPERCEDES POLICY: N/A | REFERENCE/ATTACHMENT: | |
| PREPARED BY: Johnathan Randle, Revised by Susan Matthews and Nellie Chavez | DATE APPROVED: October 11, 2012 | |

I. Goal

To avoid the civil monetary penalties associated with hiring an individual or entity that has been excluded from Federally-funded health care programs and to ensure that all payments will be provided for items or services properly furnished, ordered, or prescribed by KS Plan Administrators and its employees.

BACKGROUND: No payment will be made by any Federal health care program, such as Medicare or Medicaid, for any items or services furnished, ordered, or prescribed by an excluded individual or entity, regardless of whether they are health care or non-health care related. Furthermore, no Part C or D Sponsor or first-tier, downstream, or related entity (FDR) may submit for payment any item or service provided by an excluded person or entity, or at the medical direction or on the prescription of a physician or other authorized person who is excluded.

The Department of Health and Human Services, Office of Inspector General (OIG) has the authority to exclude individuals and entities from Federally-funded health care programs and maintains a list of all currently excluded individuals and entities called the List of Excluded Individuals and Entities (LEIE). Anyone who hires an individual or entity on the LEIE may be subject to civil monetary penalties. The General Services Administration (GSA) also maintains a database called the Excluded Parties List System (EPLS), which is the official government-wide system of records of debarments, suspensions, and other exclusionary actions. While the LEIE contains just the exclusion actions taken by the OIG, the EPLS contains debarment actions taken by various Federal agencies, including the OIG. Also, in addition to health care providers (that are also included on the OIG's LEIE) the GSA list includes non-health care contractors with whom Sponsors may contract.

Effective in 2019, CMS has added a Precluded Provider List that is a list of providers and prescribers who are precluded from receiving payment for Medicare Advantage (MA) items and services or Part D drugs furnished or prescribed to Medicare beneficiaries.

II. Policy

KSPA is strongly committed to the reduction of prospective fraudulent, wasteful, and abusive activity and to employing and working with individuals and entities that will not hinder its ability to administer health care coverage to its beneficiaries. As a part of this commitment, it is KSPA's policy to review the OIG's LEIE, the GSA's EPLS and the CMS Preclusion List to ensure that it works and contracts with responsible parties only and

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does not allow individuals or entities to participate in a Federal health care program if he, she, or it has been debarred, suspended, or otherwise excluded from participation.

| Procedure / Guidelines for Compliance | Responsible Party |
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| <p>1. Potential KSPA Employees: As part of the background screening conducted by Human Resources (HR). HR will determine whether any future prospective or potential employee (e.g., permanent employee, temporary employee, volunteer, consultant, governing body member) is listed on the OIG's LEIE, GSA's EPLS, or CMS Preclusion List prior to hiring by submitting a Background Check Request to its contracted background check company (e.g., Employer Investigation Services).</p> | Human Resources |
| <p>2. New and Existing KSPA Employees:</p> <p>A. HR Duties:</p> <p>i. Screening: At least once a month, HR must review the LEIE and EPLS to ensure that KSPA's employees, board members, and officers are not listed.</p> <p>The LEIE is available at the following link: http://exclusions.oig.hhs.gov/. The LEIE is updated monthly, 15 days prior to the exclusion effective date. HR must subscribe to the OIG LISTSERVE via the OIG Website at http://oig.hhs.gov/maillinglist.asp to receive immediate notice of updates to the LEIE.</p> <p>The EPLS is available through the System for Award Management (SAM) at the following link: https://www.sam.gov. The EPLS is updated in real time.</p> <p>The CMS Preclusion List will be provided by the Compliance department via the CMS Enterprise Portal.</p> <p>When searching the LEIE, EPLS, and CMS Preclusion List be sure to check all possible variations of the individual's name (e.g., maiden names, nicknames, reversed first and last names, each last name in hyphenated last names).</p> <p>ii. Resolving Possible False Hits: If an individual's name appears on the LEIE and/or EPLS, verify that the name on the exclusion list is, in fact, the individual being searched. This can be done by verifying that other information specific to the individual (e.g., date of birth DOB), address, social security number (SSN), tax identification number, unique physician identification number (UPIN), national provider identifier (NPI), employment identification number (EIN)) is also a match.</p> | Human Resources and KSPA Compliance |

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1) **LEIE:** Search results on the LEIE may include the individuals DOB, UPIN, NPI, and address. It also includes a function through which an individual's SSN or EIN can be verified. Use this information to conclude whether the name on the excluded list is the individual being searched.

If a search result does not contain a DOB, UPIN, NPI, or SSN, it is not available from the OIG. In this case, contact the Exclusions Staff to determine if there is any other information available.

- a. E-mail Address: sanction@oig.hhs.gov
- b. **Telephone:** (410) 281-3060
- c. **Fax:** (410) 265-6780
- d. Mailing Address:

HHS, OIG, OI
Exclusions Staff
7175 Security Boulevard, Suite 210
Baltimore, MD 21244

NPI information may also be attainable through CMS' Medicare Exclusion Database (MED) via the MED online system, which includes information from the LEIE and the NPI. An "Individuals Authorized Access to the CMS Computer Services" (IACS) ID is required to access MED online and/or download the files. An IASC ID may be obtained through the IACS registration process at <http://www.eushelpdesk.com/IACS/med.html>.

2) **EPLS:** Search results on the EPLS include a function through which an individual's address can be verified. Use this information to help determine whether the name on the excluded list is the individual being searched. If further verification is needed beyond what the record information provides, contact the federal agency that took the action against the listed employee. Agency points of contacts names and telephone numbers are available at the following link:

<https://www.sam.gov/SAM/pages/public/generalInfo/contactUs.jsf>

iii. **Documentation:** All findings must be documented, including the following:

- 1) Name of the searched individual, including the searched variations.
- 2) Date on which the screening was conducted.
- 3) Names of the exclusion lists and any other databases searched.
- 4) Dates on which the searched databases were last updated.
- 5) Indication of whether the individual is excluded.

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| 3. | <p>Excluded Individuals:</p> <p>A. Potential Employee: If a potential employee is named on the LEIE and/or EPLS he or she must not be hired.</p> <p>B. New or Existing Employee: If a new or existing employee is named on the LEIE and/or EPLS, he or she must be immediately excluded or removed from any work related directly or indirectly to all Federal health care programs. HR must also immediately inform Compliance, which shall initiate the following:</p> <p>i. Remedial Steps: Compliance shall begin taking any appropriate remedial steps.</p> <p>ii. Claims: Claims must identify and prevent payment for claims at point-of-sale for any drugs or services prescribed, dispensed, or delivered by excluded providers. When Claims identifies these claims at point-of-sale, the claims must be denied. Claims must investigate and determine whether other claims were submitted by the excluded person or entity, or by any other excluded entity.</p> <p>iii. Overpayments: Finance shall identify any potential overpayments and ensure that they are all repaid within sixty (60) days of identification.</p> <p>iv. Prescription Drug Event Data (PDE): Pharmacy shall adjust the PDE accordingly. Any PDE data related to claims not rejected on/after the effective date of the exclusion must be deleted to ensure the dollars are not inadvertently included in reconciliation. Who bears the payment responsibility for claims not rejected on/after the effective date of the exclusion is a matter of payment terms between the parties and should be resolved accordingly. These claims need not be reversed. KSPA, however, may not include the costs of these claims in its Part D bid.</p> <p>v. Self-Disclosure: Compliance should follow the Self-Disclosure Protocol available here: http://www.oig.hhs.gov/compliance/self-disclosure-info/index.asp.</p> | Human Resources, Compliance, Claims, Finance and Pharmacy Services |
| 4. | <p>First-Tier, Downstream, and Related Entities: KSPA shall not pay for services, equipment, or drugs prescribed or provided by a provider or supplier excluded by either the OIG, GSA or CMS. Prior to contracting with an FDR, and monthly thereafter, Credentialing must review the LEIE and EPLS to ensure that the entity is not listed. This applies to both health care and non-health care entities.</p> | Compliance and Credentialing |

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| | <p>Furthermore, KSPA must ensure that:</p> <p style="padding-left: 40px;">A. Its FDRs:</p> <p style="padding-left: 80px;">i. Develop and implement policies and procedures that require the review of the LEIE and EPLS (1) prior to the initial hire of employees and (2) monthly thereafter to ensure that no employees are excluded from Federal health care programs. The FDR must document such reviews.</p> <p style="padding-left: 80px;">ii. Have processes in place to identify and prevent payment for claims at point-of-sale for any drugs or services prescribed, dispensed, or delivered by excluded providers.</p> <p style="padding-left: 40px;">B. Its FDRs and their employees, to whom KSPA's core functions are delegated under its Part C and D contract, immediately, disclose any exclusions or other event that makes them ineligible to perform work related directly or indirectly to Federal health care programs.</p> <p>KSPA must perform appropriate monitoring and auditing of these entities to ensure that they are fulfilling these requirements.</p> | |
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