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Director FIHN Ops &
Phys
FIHN*

Area:
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References:

FIHN Compliance Plan



What Is The Purpose of This Compliance Plan?

The purpose of this Compliance Plan is to seek to prevent, detect and correct conduct that may be unlawful. This Compliance Plan is the foundation for our commitment to an ethical organizational culture and compliance with laws and regulations. It is the responsibility of all FIHN employees and contractors, participating providers and members of the Board of Managers and its Committees to adhere to the requirements of this Compliance Plan and to FIHN's policies and procedures.

Who Does this Compliance Plan Apply To?

This Compliance Plan applies to employees and contractors of FIHN, FIHN participating providers, and anyone else performing functions or services related to FIHN's activities.

Employees and Contractors – Are expected to conduct business ethically and with integrity, and to be honest in all dealings with other employees or contractors, participating providers, patients of FIHN participating providers, vendors, government agencies and third party payors. Employees and contractors must also follow the laws, regulations and policies that apply to their work.

Participating Providers– Are expected to demonstrate and promote a commitment to ethical and legal behavior that is consistent with FIHN values. Participating providers must also follow the laws, regulations and policies that apply to their work.

Who Is Responsible For Overseeing this Compliance Plan?

FIHN has a designated compliance official, Craig Rosendale, the FIHN Chief Compliance Officer, who is responsible for overseeing this Compliance Plan. The FIHN Chief Compliance Officer reports directly to the FIHN Board of Managers.

Does FIHN Conduct Compliance Training?

Yes, the FIHN Chief Compliance Officer conducts periodic compliance training for FIHN employees and contractors, and FIHN Participating Providers.

What Do I Do if I Know or Suspect That a Compliance Issue Exists?

If you identify a compliance issue or suspect that one exists, or if you have a question, follow this two-step process:

1. Report the issue in one of the following ways:

- Talk to the FIHN Executive Director or any member of the FIHN Board of Managers. They are most familiar with the laws, regulations and policies that relate to the activities of FIHN and its participating providers.
- Contact the FIHN Chief Compliance Officer directly at 240-566-3860 or crosendale@frederick.health.
- Call the Compliance Hotline at 1-888-742-1152 if you are not comfortable with talking directly to any of the individuals above or simply prefer to report the issue anonymously. The Hotline is available 24 hours per day, seven days a week. Callers who do not wish to provide their names can remain

anonymous. Calls to the Corporate Compliance Hotline will not be traced.

Please be sure to give enough information and specific details about the issue you are reporting. All calls made to the Hotline will be reviewed by the Chief Compliance Officer and will be carefully investigated with management before any action is taken. The rights of all staff, including anyone who is the subject of a Compliance Hotline call, will be respected and protected. Actions taken will not be made public.

2. Follow up:

No matter who you contact, be sure to follow up on the issue until you are sure that it is either resolved or that the right person in your organization knows the facts and is taking action.

What Will Happen if I Report a Compliance Issue?

You will not receive any disciplinary action or retaliation when you report a possible compliance issue to the FIHN Executive Director, any member of the FIHN Board of Managers, the Chief Compliance Officer or the Compliance Hotline. You must make the report in good faith, actually believing that there is a possible compliance issue.

If you report an activity that you are directly involved in or responsible for, the fact that you reported the matter will be taken into consideration. However, the policy against retaliation will not prevent you from being held accountable for your part in the activity.

How Are Potential Compliance Problems Identified?

FIHN investigates reported potential compliance issues. FIHN also conducts periodic compliance assessments of its activities.

How Are Compliance Problems Handled?

The FIHN Chief Compliance Officer investigates all reports of suspected violations, and examines internal compliance reports, assessments and activities. Following an investigation and determination of a compliance issue, FIHN will take appropriate corrective and/or remedial action, as determined by the FIHN Board of Managers and FIHN Chief Compliance Officer. Remedial action may include reporting of probable violations of law to the appropriate law enforcement agency.

What Types of Laws, Regulations and Policies Are Part of Our Compliance Plan?

This Compliance Policy helps everyone understand and comply with the laws and regulations that affect the activities of FIHN and its participating providers. Here is a brief overview of some of the laws, regulations and policies that this Compliance Plan covers, and how FIHN complies with these laws.

Fraud and Abuse in Billing and The False Claims Act

These laws do not allow submitting false claims, fraudulent or misleading claims to the government or a third party payor.

FIHN Participating Providers send bills to patients and third party payors (including Medicare, Medicaid, insurance companies, employers and others) that are accurate and that follow federal and state laws and regulations. We are responsible for accurately coding and describing our services, treatments and charges. We make accurate statements, spoken or written, to any government agency, intermediary, or other payor. When we discover billing issues, we report them and promptly repay any overpayments.

Anti-kickback and Anti-influence Laws

The federal anti-kickback law states that no one may offer, pay, or receive a payment (in the form of cash, discount, rebate or property) in exchange for referring patients. The law also states that no one may give a patient any free or discounted goods or services in order to influence that patient's decision to receive care from a certain provider.

We do not pay patients, physicians or other health care providers or professionals for referrals. We may not ask for or accept payment of any kind for a referral.

Stark Self-referral Law

This law does not allow physicians to make referrals of Medicare and Medicaid patients for additional types of health care services to facilities or programs with which the physician has a financial interest. However, the law permits the doctors to refer patients to these services if the financial relationship meets certain standards.

We structure our financial arrangements with physicians to be compliant with the Stark Law.

Antitrust Laws

Antitrust laws support competition and free trade by not allowing anti-competitive practices or restraints of trade. The laws do not allow anti-competitive agreements between providers that are designed to control or affect prices by dividing markets, allocating customers, or boycotting payors or vendors. The antitrust laws do not allow joint ventures, mergers or acquisitions between competitors that will harm competition. The determination of whether or not an arrangement is harmful to competition involves an analysis of each individual arrangement.

We carefully evaluate, with the help of legal counsel, all proposed relationships with competitors that have the potential to harm competition.

Please see the FIHN Antitrust Compliance Policy for additional information.

Tax Laws

FIHN's sole member, Frederick Health Inc., is a not-for-profit, tax exempt organization. That means we function as a charitable organization for the purpose of serving the community. In order for Frederick Health Inc. to maintain its tax exempt status, we need to use our resources for charitable purposes and not for any private person's benefit.

We do not pay excess benefits to any person or take part in any joint venture or partnership that provides excess benefits to someone working with us. We do not allow others to buy, lease or use our property or services for less than fair market value.

And we do not pay more than fair market value to buy, lease or use other people's property or services.

Environmental Laws

There are many laws that regulate how businesses and their employees affect the environment. These laws regulate, among other things, the handling, storing, labeling, using, transporting, and disposing of toxic and hazardous materials. These laws also require that we take certain health and safety measures in the workplace to keep employees, patients and visitors safe.

We follow accepted procedures for handling, storing, labeling, using, transporting, and disposing of solid, liquid, hazardous and infectious wastes. And we require that employees be familiar with safety practices and promptly report any spills or contaminations. We follow all workplace health and safety rules.

Labor and Employment Laws

There are a number of laws that regulate the relationship between an employer and its employees, including employment discrimination, wages and hours, sexual harassment, employee safety, collective bargaining and health and welfare.

We hire, promote and contract with people who are best qualified and who share our values. Employees are hired, trained, and promoted without regard to race, color, gender, sexual orientation, age, disability or other areas protected by law. We do not tolerate harassment or discrimination. We follow all wage and hour rules. We do not hire, employ or grant medical staff privileges to anyone who has been disbarred or excluded from participating in a federal health care program. All employees and medical staff members, new and existing, are screened to verify that they are not among the excluded providers.

Confidentiality Laws and Information Security Policy

Under these laws, such as the Health Information Portability and Accountability Act of 1996 (HIPAA), the privacy of patient information is protected. Information can be found in a paper medical record, on computer screens, in faxed information, in phone messages, or in discussion. Patients have the right to keep information from being disclosed without their consent.

We follow our information security and privacy policies to protect information from being revealed or used without approval from the patient. We use only the information we need to take care of the patient.

Conflicts of Interest Policy

Conflicts of interest arise when a person uses his or her position to profit personally or to assist others in profiting at the expense of the organization.

We follow our policy of avoiding actual, or what may look like, conflicts of interest, that would cause someone to question our motives. We may not ask for money, rewards, gifts, or anything of value from patients, family members, contractors, or vendors (except as approved for charity fundraising). We may not accept gifts that have more than a courtesy or token value.

Copyrights, Patents and Trademarks

There are a number of laws that limit the use of protected "intellectual property" including things like books, articles, music, pictures, drawings, names, equipment and computer software programs.

We follow licensing agreements for protected intellectual property. For example, we do not copy computer software for personal use or make copies of copyrighted articles and books.

Take the time to "T.H.I.N.K." when encountering compliance issues

There are words and phrases that raise "red flags" about potential compliance problems and should send a warning signal to you. Examples of such words and phrases are:

"Well, maybe just this once." "Everyone does it."

"No one will ever know." "No one will get hurt."

If you hear or begin to say comments like these, or if you are unsure whether an activity or situation is unethical or does not comply with this Compliance Plan, take time to **T.H.I.N.K.** AND FOLLOW THESE STEPS:

Take time to understand the issue and the facts.

How do our values apply to the facts?

Is there a law, regulation or policy that can give proper guidance?

Notify those who need to know about the issue.

Keep pursuing the issue until it is resolved.

Attachments

No Attachments

Approval Signatures

Step Description	Approver	Date
Senior Leader Approval	Jennifer Teeter: VP Clin Integration & Con	03/2021
	Christian Gomes: Director FIHN Ops & Phys	03/2021
	Christian Gomes: Director FIHN Ops & Phys	03/2021