

BAPTIST HEALTHCARE SYSTEM

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SYSTEM POLICY AND PROCEDURES

SUBJECT: Protocol for Sanctioned Individuals or Companies

SCOPE: This policy applies to all employees of Baptist Healthcare System and all facilities of Baptist Healthcare System.

AUTHORIZATION: Compliance Officers, Human Resources Directors, Materials Managers, and Medical Staff Coordinators are responsible for the administration of the policy.

PURPOSE

Baptist Healthcare System and its Affiliates (BHS) is precluded from employing or contracting with any sanctioned practitioner, provider or supplier to provide any items or services that are reimbursed, directly or indirectly, by a federally funded healthcare program. Prohibition extends to administrative and management services not directly related to patient care.

The purpose of this policy is to:

- Ensure that Baptist Healthcare System does not employ or contract with any sanctioned individual or company;
- Ensure that sanctioned physicians and other health care practitioners are not on the Medical Staffs of Baptist Healthcare System hospitals.

POLICY

DEFINITIONS:

1. Sanctioned Individual or Sanctioned Company – Any individual or company that is listed by a federal agency as debarred, excluded, or otherwise ineligible for participation in federally-funded health care programs.
2. Federally-funded health care programs mean the Medicare, Medicaid, Tri Care and Veterans programs.

3. Hiring of Sanctioned Individuals - No BHS facility will make an offer of employment to an applicant who is listed by a federal agency as debarred, excluded, or otherwise ineligible for participation in a federally-funded health care program. All facilities will relieve of duty any current employee who is listed by a federal agency as debarred, excluded, or otherwise ineligible for participation in a federally-funded health care program pending investigation.
4. Contracting with Sanctioned Individuals or Companies - No BHS facility may contract with any individual or company who has been convicted of a criminal offense related to health care or who is listed by a federal agency as debarred, excluded, or otherwise ineligible for participation in a federally-funded health care program.
5. Medical Staff Appointments - No physician who is listed by a federal agency as debarred, excluded, or otherwise ineligible for participation in a federally-funded health care program, may be appointed or re-appointed to a BHS facility's medical staff or be allowed to continue to admit and provide services to patients if already on its medical staff. In addition, no other health care practitioners who are listed by a federal agency as debarred, excluded or otherwise ineligible for participation in a federally funded health care program, may have privileges or be given privileges to provide services at a BHS facility or be allowed to continue to provide services to patients at a BHS facility.

PROCEDURES

1. Hiring Sanctioned Individuals
 - a. Prior to hiring an employee, Human Resources must check the two OIG Cumulative Sanction Reports, which can be accessed on the Internet in a searchable format at <http://epls.arnet.gov> and <http://www.exclusions.oig.hhs.gov/search.html> .
 - b. Human Resources will compare the name and address of each potential candidate for employment to these reports. Should an individual appear on the report, BHS may not employ that individual until the charges are resolved and it is clear that the individual is not excluded, debarred or be otherwise ineligible for participation in a federally-funded health care program.
 - c. Should an individual provide satisfactory evidence that he/she is not the individual that appears on the report, that individual may be considered eligible for employment.
2. Contracting with Sanctioned Individuals or Companies
 - a. Prior to contracting with an individual or company, Materials Management or the hospital compliance officer or designee must check the two OIG Cumulative Sanction Reports, which can be accessed on the Internet in a searchable format at <http://epls.arnet.gov> and <http://www.exclusions.oig.hhs.gov/search.html>. Materials Management will compare the name and address of each potential supplier to these reports. Should the supplier appear on the report, BHS may not contract with that individual or company until the charges are resolved and it is clear that the individual or company is not excluded or debarred, or otherwise ineligible for participation in a federally-funded health care program.
 - b. Should a supplier provide satisfactory evidence that it is not the individual or company that

- appears on the report, that individual may be considered eligible to do business with BHS.
- c. The following language is to be included in all Requests for Information (RFIs) submitted to potential contractors:

“BHS complies with all federal and state laws and regulations including the requirement not to contract with sanctioned individuals or companies under any federally-funded health care program. Has your company or any individual employed by your company been listed by a Federal Agency as debarred, excluded or otherwise ineligible for participation in federally-funded health care programs?”

- d. The following clause should be added to all contracts with suppliers:

Contractor hereby represents and warrants that it/he/she is not and at no time has been sanctioned, debarred, suspended or excluded, or proposed for sanctions, debarment, suspension or exclusion by any federally funded health care program, including Medicare and Medicaid. Contractor hereby agrees to immediately notify BHS of any threatened, proposed or actual sanctions, debarment, suspension or exclusion by or from any federally-funded health care program, including Medicare and Medicaid. In the event that Contractor is sanctioned, debarred, suspended or excluded from participation in any federally-funded health care program during the term of this Agreement, or if at any time after the effective date of this Agreement it is determined that Contractor is in breach of this paragraph, then this Agreement shall, as of the effective date of such sanction, debarment, suspension, exclusion or breach, automatically terminate. Contractor shall indemnify and hold BHS harmless against all actions, claims, demands and liabilities, and against all loss, damage, costs and expenses, including reasonable attorney’s fees, arising out of or related to, directly or indirectly: (i) any breach by Contractor of the representation and warranty of this paragraph, and/or (ii) the sanction, debarment, suspension or exclusion of Contractor by or from any federally-funded health care program, including without limitation Medicare or Medicaid.

A negative response to the question is required before a supplier may be qualified to contract with BHS.

3. Medical Staff Appointments

- a. Prior to granting appointment of a physician to the medical staff, the Medical Staff Coordinator must check the two OIG Cumulative Sanction Reports, which can be accessed on the Internet in a searchable format at <http://epls.arnet.gov> and <http://www.exclusions.oig.hhs.gov/search.html>. The Medical Staff Coordinator will compare the name and address of each applicant to these reports. Should an applicant appear on the report, BHS may not appoint or grant privileges to the individual until the charges are resolved and it is clear that the individual is not excluded, debarred, or otherwise ineligible for participation in a federally funded health care program.
- b. Should an applicant provide satisfactory evidence that he/she is not the individual who appears on the report, that applicant may be considered eligible for appointment or reappointment or privileges.

- c. If it comes to the attention of any BHS facility that a physician on its Medical Staff has been debarred, excluded or is otherwise ineligible to participate in a federally-funded health care program, then this information shall be brought to the attention of Administration and/or the Hospital Administrative Board for further investigation and action.
4. Quarterly Comparison to OIG Cumulative Sanction Reports
- a. Each quarter, the Internal Audit Department will perform a computerized comparison of each facility's database of active employees, vendors, medical staff physicians, and other health care practitioners against the OIG Cumulative Sanctions database and the General Services Administration database.
 - b. Any potential matches resulting from the comparison will be forwarded to each hospital's Compliance Officer/designee for review.
 - c. The Compliance Officer/designee will compare the name, address, sanction date, and other information on the report to determine if the sanctioned individual or company actually is an employee, vendor, physician, or other health care practitioner on the hospital's medical staff.
 - 1. Should an employee appear on the report, the employee will be suspended with pay pending an investigation. If the reported information proves to be valid, the employee's employment will be terminated.
 - 2. Should a vendor of the facility appear on the report, BHS must immediately cease conducting business with that individual or company until the facility can determine if the vendor has been debarred, excluded or is otherwise ineligible to participate in a federally-funded health care program.
 - 3. Should a physician on the facility's medical staff appear on the report, the facility must further investigate to determine if the physician or other health care practitioner has been debarred, excluded or is otherwise ineligible to participate in a federally-funded health care program.
 - d. Should an individual provide satisfactory evidence that he/she is not the individual who appears on the report, that individual may be considered eligible for employment, providing services to BHS facilities, or appointment or reappointment or the granting of privileges to the medical staff.

APPROVED:

Donald R. Riggs
BHS Compliance Officer

Date: _____