

Background

As a condition of participation in federal health and social services programs, Sections 1128 and 1156 of the Social Security Act prohibits the employment of, or contracting with, any individual or entity who has been excluded from participation in federal programs as a result of any offense listed in 42 USC § 1320. The United States Department of Health and Human Services, Office of Inspector General has the authority to impose civil monetary penalties against excluded individuals and entities that seek reimbursement from federal health care programs and health care providers that employ or enter into contracts with excluded individuals to provide items or services to federal program beneficiaries.

Definition

Ineligible Person

An ‘ineligible person’ is any individual or entity who is currently excluded, suspended, debarred, or otherwise ineligible to participate in the federal health care programs, including Medicare/Medicaid programs or who has been convicted of a criminal offense related to conduct that would or could trigger an exclusion under 42 U.S.C. § 1320a-7, including criminal offenses related to the delivery of health care items or services.

Policy

Cayuga Health System (CHS) will review the Office of the Inspector General’s (OIG), the Office of the Medicaid Inspector General’s (OMIG), and the General Services Administrations’ (GSA) exclusion listings on a monthly basis to make certain that CHS does not employ or do business with any individuals or companies excluded from participation in the Medicare or Medicaid programs.

Reviews will also be conducted on a real-time basis for new employees, physicians, and vendors to ensure they are discovered prior to employment for or with Cayuga Health System.

This process will be facilitated by CHS’s use of the EPStaffCheck software which combines all three lists. An initial upload of a full file in each of the below areas will be run as a baseline, and any matches will be verified and either cleared or investigated further. Any true matches will be reported to the Compliance Officer immediately. The process below will be followed for ongoing updates.

Procedure

Employees

1. Human Resources will search each new CHS candidate on the EPStaffCheck website concurrently as they do their other new hire checks (criminal background, etc). The printout from that check becomes part of the employee’s HR file. All current employees are checked against the exclusion listings on a monthly basis.
2. If any new or current employees are found on the exclusion listings, HR will notify the Compliance Officer immediately.

Physicians

1. When applying for appointment to CHS, physician application contents are verified by the Physician Credentialing Specialist who will check the physician against the excluded provider list via EPStaffCheck. If there are no matches the information will be printed and added to the file. All current physicians are checked against the exclusion listings on a monthly basis.
2. If any new or current physicians are found on the exclusion listings, Credentialing will notify the Compliance Officer immediately.
3. If someone is found on the excluded provider lists, that person would be suspended from the medical staff per the medical staff by-laws.

4. For physicians who are not part of the hospital Medical Staff, but instead are entered into the provider dictionary by I.S. the same process applies. I.S. will check the physician against the excluded provider list via EPStaffCheck. If there are no matches the information will be noted and the physician added to the file. All physicians are checked against the exclusion listings on a monthly basis. If any matches are found, I.S. will notify the Compliance Officer immediately.

Vendors

1. The Materials Management and/or A/P staff will check any new CHS vendors against the EPStaffCheck website to make certain they are not excluded from participation. All current vendors are checked against the exclusion listings on a monthly basis.
2. If any new or current vendors are found on the exclusion listing, the A/P coordinator will notify the Compliance Officer immediately, as well as the Director of Materials Management.