Compliance Plan
for Health Sciences Billing and Patient Services
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## Standards of Conduct

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Introduction

Creighton University (Creighton) is anchored in ethics, pledged to excellence and committed to service in educating future health care providers and delivering quality health care to our patients. As our employees and agents, you are an extension of Creighton and are expected to conduct your activities in compliance with all applicable laws, regulations, and Creighton policies, as well as the Ethical and Religious Directives for Catholic Health Care Services.

Creighton's Compliance Plan for Health Sciences Billing and Patient Services (the Plan) serves as a guide and resource to you to ensure that quality health care is provided in an ethical and legal manner and is appropriately billed. It is important that you recognize the role the Plan plays in maintaining Creighton’s high ethical standards because the success of our compliance program depends in large part on your support and cooperation.

Due to the on-going changes in the health care industry, the Plan may be updated and revised periodically. In addition, policies/procedures and compliance memoranda addressing compliance standards may be issued and will become part of the Plan.

As President of Creighton, and Vice President for Health Sciences and Dean of the School of Medicine, we fully endorse the Compliance Plan for Health Sciences Billing and Patient Services on behalf of Creighton and Creighton Medical Associates (CMA). The Plan supports Creighton’s commitment to maintaining high ethical standards in our delivery and billing of quality health care services.

We ask that you carefully read the Plan and assist us and your colleagues in supporting Creighton’s standard of ethics, excellence and service. Your support and adherence to the Plan are critical to Creighton’s future.

President, Creighton University

Vice President, Health Sciences and Dean of the School of Medicine
Mission Statement

The mission of the Plan is to provide adequate resources to faculty, staff, residents and others involved in patient care activities to ensure proper billing of health care services and items, according to federal and private payer requirements. This mission is designed to support the strategic objectives outlined in the Health Sciences Schools mission statement.

Purpose of the Plan

The purpose of the Plan is to define the scope of conduct expected of you as our Employees and Agents. With the Plan, Creighton will promote compliance with the legal duties applicable to it as a health care provider (in addition to those already contained in Creighton’s policies), foster ethical conduct, and provide guidance to Creighton’s Employees and Agents. The Plan is not intended to be, nor can it be, all-inclusive and therefore, we rely upon your sense of fairness, honesty and integrity to meet the challenges you may face in providing and billing for quality health care.

Scope of the Plan

The Plan applies to all Employees and Agents as defined herein. Although the Plan may primarily impact Creighton Medical Associates, the faculty practice of the School of Medicine, it also applies to the School of Dentistry’s clinical activities, the School of Pharmacy and Health Professions’ outpatient pharmacies and clinical services, as well as all Health Sciences Schools’ faculty providing patient care activities on behalf of Creighton.

The Plan also addresses and supports health care quality initiatives and privacy issues administered and implemented through other components of CMA and/or the Health Sciences Schools, as more specifically outlined in the Standards of Conduct section of the Plan.
Definitions

For purposes of the Plan, these terms shall have the following meaning:

1. **“Employees”** are those persons employed by Creighton, as either faculty or staff, who bill for health care services or items under Creighton’s tax identification number, as well as other faculty support staff as determined by the Billing Compliance Committee. This may include, but is not limited to, CMA Physicians and Non-Physician Providers, Dentists, Nurses, Occupational and Physical Therapists, and Pharmacists, as well as any administrative, clinical and billing personnel.

2. **“Agents”** are those individuals and entities that have contracted with Creighton or any of its Health Science Schools to provide health care-related services, supplies, equipment or other items, and includes all Residents within the Health Sciences Schools.

3. **“Creighton Medical Associates” or “CMA”** is the faculty practice plan of Creighton's School of Medicine which provides academic instruction and training to Residents who have graduated from an accredited medical school and provides medical services to the community through faculty physician members and providers who are either Employees or Agents.

4. **“Teaching Physician”** is a CMA physician Employee or Agent (other than a Resident) who involves Residents in the care of his or her patients. Non-physician providers and Residents are not Teaching Physicians.

5. **“Resident”** is an individual who participates in an approved graduate medical education (GME) program, including interns and fellows in GME programs recognized as approved for purposes of direct GME payments made by the fiscal intermediary. Residents and fellows who are not in an approved GME program, are considered either Employees or Agents under the Plan.

6. **“Designated health services”** means: (a) clinical laboratory services; (b) physical therapy, occupational therapy, speech-language pathology services; (c) radiology and certain other imaging services; (d) radiation therapy services and supplies; (e) durable medical equipment and supplies; (f) parenteral and enteral nutrients, equipment, and supplies; (g) prosthetics, orthotics, and prosthetic devices and supplies; (h) home health services; (i) outpatient prescription drugs; and (j) inpatient and outpatient hospital services.

7. **“Health care services and items”** refers to all medical, pharmaceutical, occupational/physical therapy and/or dental care services or items provided by Employees and Agents.
Billing Compliance Structure

UNIVERSITY OVERSIGHT

Governing Authority
The Creighton Board of Directors is responsible for Creighton’s operations. The Board’s Subcommittee on Hospital and Health Affairs (Subcommittee) has responsibility for the oversight of health care programs conducted through the Health Sciences Schools, as well as the Plan. The Subcommittee has delegated responsibility for day-to-day oversight of the Plan to the Office of General Counsel and the Billing Compliance Committee. The Subcommittee receives annual reports on the Plan, as well as periodic reports, as appropriate for it to ensure adequate compliance oversight.

Organizational Leadership
Creighton’s President is responsible for the day-to-day operations of Creighton. The Vice Presidents, including the Vice President for Health Sciences, report to the President, who reports directly to the Board of Directors.

The Vice President for Health Sciences is responsible for the operations of the Health Sciences Schools, which include the School of Medicine, School of Nursing, School of Dentistry and School of Pharmacy and Health Professions. Each professional school is managed by a Dean who reports directly to the Vice President for Health Sciences.

General Counsel
The General Counsel reports to the President and to the Board of Directors, including the Subcommittee. The General Counsel has full and complete access to the Board and Subcommittee.

THE BILLING COMPLIANCE PROGRAM

Billing Compliance Committee
The Billing Compliance Committee is responsible for implementing the Plan. It meets monthly to advise on billing compliance issues and provide guidance and support to the Billing Compliance Director.

The President appoints the Billing Compliance Committee based on recommendations from the Billing Compliance Committee and/or the Vice President for Health Sciences. The Billing Compliance Committee shall include, at a minimum, the Compliance Director, the Vice President for Health Sciences or his/her designee, the Dean of the School of Medicine or his/her designee, the Dean of the School of Dentistry or his/her designee, the Dean of the School of Pharmacy and Health Professions or his/her designee, the CMA President/ Senior Associate Dean for Clinical and Academic Affairs for the School of Medicine, and at least one physician representative from the Compliance Liaison Committee–School of Medicine. The Director of
Internal Audit shall serve as an ex-officio (non-voting) member of the Committee. Current members of the Billing Compliance Committee are listed at http://www.creighton.edu/billingcompliance.

Compliance Director
The Compliance Director is responsible for the day-to-day operation of billing compliance consistent with the Plan and other applicable standards. The Compliance Director reports to the General Counsel and the Billing Compliance Committee. The Compliance Director is responsible for recommending policies and procedures, providing orientation and basic compliance training, handling Hotline calls and coordinating any necessary billing compliance investigations, and conducting periodic risk assessments. The Compliance Director also supervises billing compliance staff. The Compliance Director or his/her designee chairs the Billing Compliance Committee and the Compliance Liaison Committee—School of Medicine.

Compliance Liaison Committee - School of Medicine
The Compliance Liaison Committee—School of Medicine (Compliance Liaison Committee) serves as a liaison between each clinical department in the School of Medicine and the Compliance Director to address compliance issues at a department level. The Compliance Liaison Committee is composed of the Compliance Director and a physician appointed by each clinical department or his/her designee. The Compliance Liaison Committee meets at least every two months as determined by its members.

Billing Compliance Resources
Each of the Health Sciences Schools is governed by complex and ever-changing rules and regulations as they relate to the billing of health care services and items. Creighton recognizes that this can create areas of uncertainty for Employees and Agents. Questions and concerns about the appropriate way to handle various situations may, and often do, arise. Creighton has several resources that are available to you should you encounter any situation that raises a billing compliance question or concern. Many of the resources available can be found on the Billing Compliance website at: http://www.creighton.edu/billingcompliance.

THE CODING HELPLINE ((402) 280-5846)
The Coding Helpline is a resource that provides information on billing health care services or items, including Current Procedural Terminology (CPT) and International Classification of Diseases (ICD) coding issues. You should use the Coding Helpline if you have any questions on how to document, code, or bill a health care service or item.
BILLING COMPLIANCE REPORTING LADDER

First and foremost, if you believe that any conduct is wrong or is questionable, do not proceed until you are convinced that the conduct is appropriate. If you believe any conduct may violate the Plan, follow Creighton’s “Reporting Ladder” process as outlined below.

1. **Step One:** Discuss it with a co-employee or your immediate supervisor. If you do not feel comfortable about raising it at this level, then go to Step Two.

2. **Step Two:** Discuss the issue with higher level management. If you do not feel comfortable about discussing it at this level, then go to Step Three.

3. **Step Three:** Call the Confidential Billing Hotline ((402) 280-2107).

Confidential Billing Hotline
(402) 280-2107

The Confidential Billing Hotline (the Billing Hotline) is an internal resource that allows Employees and Agents to seek guidance, or to report potential or actual violations of the Plan or related billing policies without fear of retaliation or retribution. Employees or Agents are permitted to report potential or actual violations anonymously. If the reporter chooses to identify himself/herself, his/her identity will be maintained confidential to the extent allowed by law.

Employees and Agents are required to report any known or suspected billing noncompliance. No person shall be retaliated against for making a good-faith report of known or suspected noncompliant billing conduct. Failure to report known noncompliant conduct/activity is considered a violation of the Plan. Any supervisor or other management personnel who receives a report of known or suspected noncompliant billing conduct shall forward the information to the Compliance Director or Billing Hotline.

Any Employee or Agent who makes an intentionally false report of billing noncompliance or who misuses the Billing Hotline, shall be subject to discipline and/or termination of his/her affiliation with Creighton.
Standards of Conduct

Creighton acknowledges that as a health care provider, it operates under complex and rapidly changing laws and regulations in its provision of quality health care and billing for services and items. Numerous federal and state laws and regulations, and provider contracts define and establish the obligations with which Creighton, and its Employees and Agents must comply. Any Employee or Agent who violates these laws, regulations, and/or contractual provisions, not only risks possible individual criminal prosecution, monetary penalties and exclusion from federal health care programs, but also subjects Creighton to the same risks and penalties. These Standards of Conduct are based upon general ethical and legal obligations. Any Employee or Agent who violates these Standards of Conduct will be subject to discipline, which could include termination of employment or affiliation with Creighton.

A. Patient Care  E. Conflicts of Interest
B. Ethical and Legal Responsibilities  F. Proper Referrals
C. Proper Coding and Billing Practices  G. Internal and External Investigations
D. Confidentiality

These Standards are implemented through various policies and procedures adopted by Creighton or its various Schools and Departments, including the Health Sciences Schools and CMA. Policies related to billing compliance are approved by the Billing Compliance Committee and forwarded, as appropriate, to either the Health Sciences Deans or the CMA Board for approval. All approved billing policies are posted on the Billing Compliance website at: http://www.creighton.edu/billingcompliance.

A. PATIENT CARE: Deliver compassionate and appropriate quality health care services and items to all of our patients.

Pursuant to Creighton's policies, no patient will be denied medically necessary treatment based upon his/her source of payment. All of our patients are treated with respect and dignity regardless of their age, race, color, disability, national origin, religion or sex.

Each Creighton health care professional shall be duly licensed and shall only provide health care services or items to patients within the scope of his/her license. All health care services or items recommended and/or provided by our Employees or Agents shall be medically necessary as determined by the accepted professional standards of the relevant health professional.

Patients are entitled to a full understanding of their individual medical needs. Therefore, it is essential that the patient (or his/her legal representative) be fully
informed of the benefits and risks of any health care treatment. As applicable, informed consent will be obtained in writing from the patient or his/her legal representative prior to providing any treatment.

Employees and Agents shall comply with all federal and state regulations and laws regarding the evaluation, admission, treatment and/or transfer of patients with emergency medical conditions regardless of the nature of the medical condition, as well as women in active labor.

CMA, the Pharmacy School and the Dental School have each established quality programs which are responsible for developing and implementing appropriate programs to address quality issues in the clinical setting. Questions or concerns regarding patient quality of care should be addressed through these programs.

B. ETHICAL AND LEGAL RESPONSIBILITIES: Exercise and display good judgment and obey all laws in performing your job duties.

As a Jesuit University, Creighton is committed to ensuring that it operates under the highest ethical and moral standards and that its business activities comply with applicable laws, and with the Ethical and Religious Directives for Catholic Health Care Services. This level of integrity is evidenced through truthfulness, the absence of deception or fraud, and respect for, and adherence to, applicable laws. Most of these ethical duties are grounded on moral principles and are represented in our legal obligations. Our Employees and Agents are expected to follow the standards of Creighton, the standards set forth in the Plan, as well as all applicable laws, and conduct their business and personal activities with the highest level of integrity.
No person shall make, file or use any false, fictitious, or fraudulent statements or documents in connection with the delivery of, or payment for, health care services or items. No person shall falsify, conceal or cover up a material fact in the performance of his/her duties. No information shall be given with respect to coverage of inpatient services that the person knows is false and could influence the decision regarding when to discharge an individual from any health care facility.

If, during the course of performing your job obligations, you feel that some activity is ethically or legally wrong, you should seek immediate guidance through your Supervisor(s), the Compliance Director, or General Counsel before continuing such activity.

C. PROPER CODING AND BILLING PRACTICES: Ensure that health care services are accurately coded and timely billed according to payer requirements.

Creighton’s billing practices comply with all applicable federal and state payer requirements, as well as all private payer contracts and agreements. Any Agents engaged by Creighton to provide billing or coding services must have appropriate procedures to ensure the accuracy of all billings. Employees and Agents shall abide by the Creighton Billing and Claims Submission Standards outlined on the back cover of the Plan.

It is important, for payment purposes that each patient’s medical record accurately reflects the health care services and items provided. All billing claims and patient records are expected to be accurate, complete and detailed to the extent required by law, Creighton policies and professional standards.

Health care services and items must be supported by adequate documentation in the patient’s medical record. Employees and Agents should operate under the assumption that if it is not documented, it did not happen and cannot be billed. Payer and CMA policies and procedures should be referenced to determine proper documentation for health care services and items.

Medicare’s Teaching Physician Rules (42 CFR 415.170-415.280) regarding teaching physician presence and participation apply to all payers, unless otherwise stated in payer standards, or written guidance or policy, or through written waiver from the Billing Compliance Committee or the Compliance Director. CMA policies addressing Medicare’s Teaching Physician requirements are at http://www.creighton.edu/billingcompliance.
All Evaluation and Management (E/M) Services, regardless of payer, shall be documented according to the E/M Guidelines issued by the American Medical Association (AMA) and Center for Medicare and Medicaid Services (CMS) and implemented by CMS.

Employees and Agents are expected to know and follow Creighton’s written billing policies and procedures, located at http://www.creighton.edu/billingcompliance, as they apply to their activities.

Creighton shall promptly refund any identified overpayments received from any payer.

**D. CONFIDENTIALITY:** Preserve confidential Creighton business information, and patient health records.

**Patient Information**
Sensitive information is obtained from patients in order to provide the best possible care. Our patients have the right to expect that their privacy will be protected and that individually identifiable health information will only be released as allowed by law.
Creighton’s Privacy Officer is responsible for developing and implementing appropriate policies and procedures regarding the privacy of patient information in accordance with federal and state laws and regulations.

All patient information, including all oral and written patient information, created, obtained or used within the clinical setting (e.g., clinics, hospital) must be treated in a confidential manner. Patient-specific information is not released or discussed with others unless it is necessary to treat the patient or is allowed or otherwise required to be released by law. Patient-specific information will only be released to authorized persons or by the patient’s written authorization. Patient information shall be maintained and retained in accordance with written policies and the law. Questions regarding the release or disclosure of patient information should be directed to your Supervisor or to Creighton’s Privacy Officer (280-3469 or privacy@creighton.edu).

Creighton Business Information

Information obtained, developed or produced by Creighton, its Employees and/or Agents is confidential and shall not be disclosed to anyone outside Creighton without proper authorization. Confidential information includes, but is not limited to, patient lists, personnel data, fee schedules, clinical information, research data, financial data, legal advice/opinions and marketing strategies. Confidential information should be maintained in a secure location. Information expressly identified as “confidential” may only be disclosed or released as required in the performance of your job or as expressly authorized to appropriate Employees, Agents or payer representatives.

E. CONFLICTS OF INTEREST: Conduct our business activities to avoid any conflict of interest or the appearance of a conflict of interest.

A conflict of interest exists if your actions or activities on behalf of Creighton also involve the receipt of an improper gain or advantage to you, or if an adverse effect is created toward Creighton. A conflict of interest can also occur when it prevents you from exercising due care, skill and judgment on behalf of Creighton in performance of your assigned duties. Employees and Agents are to avoid engaging in any activity or practice that violates Creighton’s conflict of interest policies, or federal or state laws.

Because health care providers have a unique trust relationship with their patients, Employees shall not participate in any activity that would jeopardize our patients’ trust in Creighton. No Employee or Agent shall offer or give anything of value to any patient that influences or appears to influence the patient’s judgment in the selection of health care providers/suppliers. Co-pays or deductibles may be waived in accordance with CMA policy and applicable law without violating this standard. No Employee or Agent shall accept any
payment that induces them to reduce or limit health care services or influences a decision to discharge a patient from a health care facility.

Negotiated insurer discounts are acceptable. Legitimate price discounts must be properly disclosed and appropriately reflected in the charges for health care services or items, as applicable.

F. PROPER REFERRALS: Referrals are based upon the patient’s health care needs and are made and accepted in accordance with the law.

Employees and Agents shall not pay for health care referrals or accept payments for health care referrals. No payment or other items of value shall be accepted by, or paid to, anyone that would influence the referral of a patient to a particular provider for the provision of health care services or items. Such payments or other items of value would be considered bribes, kickbacks or inducements and are prohibited under the Federal Anti-kickback Statute. Examples of prohibited payments include minimal or no rent for office space or leased medical equipment. Further, the volume or value of referrals that a provider has made to Creighton shall not be considered when referring a patient to another healthcare provider.

Creighton providers are prohibited, under the Stark Law, from referring Medicare or Medicaid patients to an entity in which the provider, or his/her immediate family member (i.e., spouse, parents, children, siblings, grandparents (and their spouses), grandchildren (and their spouses), and in-laws), has a financial relationship, for the provision of designated health services. No claims shall be submitted to Medicare or Medicaid for any designated health services provided as a result of a prohibited referral.

All proposed contractual relationships involving Health Sciences Schools are reviewed and approved by General Counsel prior to acceptance by Creighton to ensure compliance with both the Anti-kickback Statute and Stark Law.
G. INTERNAL AND EXTERNAL INVESTIGATIONS AND ACCREDITING BODIES: Cooperate with all internal investigations and all legitimate government investigations. Cooperate with accrediting bodies.

Internal Investigations
As part of the Plan, it may be necessary to conduct an internal investigation to determine whether or not noncompliant activity or conduct is occurring or has occurred. Employees and Agents are expected to cooperate and assist as requested in any internal investigation.
**External Investigations**
Creighton will cooperate with all reasonable demands made in any government investigation of Creighton, its Employees or Agents. If you are approached by someone who identifies himself/herself self as a government agent, you must immediately notify your supervisor who shall follow the procedures under the Government Investigations policy (http://www.creighton.edu/complianceprog/HSSPP.htm) and immediately notify the General Counsel (280-5589). General Counsel shall determine the legitimacy and scope of any investigation and establish the proper procedures for cooperating with the investigation. You may agree or refuse to talk with a government investigator and you have the right to seek legal counsel before responding to any questions from a government agent. In all cases, tell the truth.

You must not prevent, obstruct, mislead, delay, or attempt to prevent, obstruct, mislead or delay the communication of information or records to a government investigator. All policies regarding the destruction of documents shall be suspended until the investigation has been completed and General Counsel has reinstated the policies. If you receive a subpoena or other legal document (such as a Civil Investigative Demand) from any government agency, you should immediately contact your supervisor who should then contact the General Counsel (280-5589).

**Accrediting Bodies**
Creighton deals with all accrediting bodies in a direct, open and honest manner. No action should ever be taken that would mislead the accreditor or its survey teams, either directly or indirectly. All standards of the accrediting group will be followed.

**Personnel Screening and Evaluation**

**Employees**
All new Employees undergo a criminal background check, which includes a search of applicable government sanction/exclusion lists, including the Office of Inspector General’s (OIG) list. The credentialing process for Employees who are faculty physicians includes a criminal background check and search of the OIG sanction list. Each year, the Human Resources Department conducts a search of all Employees (including faculty) against the most current OIG sanction list. Additional lists may be checked as required by law.
Agents

All new Residents are checked against the current OIG sanction list. Thereafter, Residents are included in Human Resource’s annual OIG sanction check process. Purchasing conducts a search of new vendors and an annual check of the OIG sanction list. All other Agents affirm that they have not been excluded from participation in any federal health care program.

Creighton shall implement procedures to terminate any Employee or its relationship with any Agent who, or which, fails or refuses to act in good faith with respect to the compliance duties imposed by the Plan. Creighton shall implement procedures to address its continuing relationship with any Employee, or Agent, who, while employed by or affiliated with Creighton, is convicted of a health care-related crime or is excluded from participation in federal programs, and shall immediately remove him/her/it from direct responsibility or involvement in any federal or state funded health care programs. Creighton shall implement procedures to closely monitor any Employee or Agent with pending criminal charges relating to health care, or proposed exclusion from participation in any federal or state funded health care programs.

Adherence to the Plan shall be considered as part of the annual employee evaluation. Compliance with the Plan and laws and regulations applicable to entities participating in health care programs is a condition of employment or association with Creighton.
Training and Education Programs

It is important that Creighton’s Board of Directors and its Employees and Agents are aware of the Plan and the standards which apply to Creighton as a health care provider. Appropriate training shall be provided at all levels at Creighton. Training may be provided in various forms, including live training, videotaped sessions, web-based training, newsletters and other written materials.

All Board Members, Employees and Agents shall receive the Plan. Members of the Subcommittee on Hospital and Health Affairs, as well as all Employees and Residents shall receive initial orientation to the Plan and periodic training on relevant risk areas. Employees and/or Agents may be required to participate in specific billing compliance training as mandated by the Billing Compliance Committee, CMA, the Pharmacy School or the Dental School. The Compliance Director has authority to accept training obtained from other institutions or sources in substitution for Creighton mandated billing compliance training. Employees and Residents are expected to attend all mandatory compliance education and training sessions. Failure to attend mandatory training shall result in appropriate disciplinary action. The Compliance Director is responsible for ensuring that training is updated at regular intervals to include new developments in the law and shall keep the Billing Compliance Committee advised of such developments and the need for any additional training.
The Billing Compliance Office provides training on annual coding changes as well as annual training on billing compliance audit procedures. CMA provides instruction to qualified Employees to enable them to take the American Academy of Professional Coders’ exam for certification as a professional coder. The Billing Compliance Office and CMA also provide continuing education opportunities for certified coders through internal education sessions.

Monitoring and Auditing Systems

MONITORING AND AUDITING

Creighton’s monitoring and auditing system is reasonably designed to detect noncompliance and criminal conduct in order to achieve compliance with standards, policies, procedures, laws and regulations.

Audit policies and procedures have been implemented within CMA which are designed, in part, to determine the accuracy and validity of coding and billing submitted to all payors, detect instances of noncompliance, and identify appropriate corrective actions. Monitoring and auditing of patient care and billing activities at other Health Sciences Schools may be required and will be determined on a case-by-case basis.

The Billing Compliance Office oversees monitoring and auditing activities for the professional fee and billing system to ensure that compliance objectives set forth by the Plan are achieved. Integral and vital to this oversight function is ensuring that identified instances of noncompliance are resolved and corrective actions implemented in a timely manner to prevent future noncompliance.

The Internal Audit Department reviews the activities of the Billing Compliance Office and may conduct audits of schools, clinical departments, or individual providers as part of an evaluation of Creighton’s system of internal control over patient billing services. In addition, the Internal Audit Department may assist with investigations or other regulatory matters at the request of the Compliance Director or General Counsel.

The Billing Compliance Committee may recommend corrective actions to the appropriate institutional officials and may recommend that an independent organization be hired to review the billing process, policies and practices of Creighton to ensure that governmental and third party payors are billed accurately.
Response to Noncompliance

INVESTIGATION OF SUSPECTED NONCOMPLIANCE

All instances of suspected or known noncompliance shall be promptly investigated.

Clinical departments may initiate an investigation of suspected or known billing noncompliance, but must promptly notify the Compliance Director. The Compliance Director shall determine whether the department can continue its investigation or whether the matter should be investigated by the Billing Compliance Office, Internal Audit Department or General Counsel.

The Compliance Director shall determine the manner and method of investigating any suspected or known billing noncompliance identified through the Billing Hotline. At any time, General Counsel may request that the Compliance Director conduct an investigation under the control of General Counsel.

After completion of the investigation, a written report must be prepared, identifying the alleged noncompliance and the findings of the investigation, including any corrective action implemented and response to noncompliance to prevent it from reoccurring.
RESPONSES TO NONCOMPLIANCE

Responses to noncompliant conduct can include, but are not limited to, one or more of the following:

- Modification of the coding and billing system where necessary;
- Adjustment of policies and procedures;
- Engaging in steps necessary to reduce the error rate; or
- Increasing auditing and/or monitoring activity

PROCEDURES AFTER DETECTION OF NONCOMPLIANCE

Negligence or Inadvertent Noncompliance
If it is determined, after investigation, that noncompliant conduct occurred as a result of negligence or inadvertence, the Compliance Director shall determine a corrective action plan, which shall be communicated to and implemented by the appropriate supervisor. Any individual dissatisfied with the corrective action imposed by the Compliance Director may appeal the decision to the Billing Compliance Committee within ten (10) business days from receipt of the corrective action plan. Such appeal shall be by written letter to the Billing Compliance Committee chairperson stating the reasons why the proposed corrective action is not appropriate. The Billing Compliance Committee shall schedule a meeting within a reasonable time to review the request and either affirm or modify the corrective action. The Compliance Director shall have no vote in such matters.

Willful, Knowing Misconduct or Gross Negligence
If it is determined, after investigation, that noncompliant conduct occurred as a result of willful and knowing action or gross negligence, then the matter shall be referred to the Billing Compliance Committee for corrective action. The Billing Compliance Committee shall determine the response and appropriate corrective action, in light of all available information. An individual dissatisfied with the corrective action imposed by the Billing Compliance Committee may appeal directly to Creighton's President within ten (10) business days from receipt of the
written decision of the Billing Compliance Committee. Such appeal shall be by written letter to the President stating the reasons why the proposed corrective action is not appropriate. The President shall respond in writing within a reasonable time and either affirm or modify the corrective action and/or response.

Enforcement

Those individuals and/or Departments found to be noncompliant as defined by these policies and procedures will be subject to corrective action.

Corrective action will be taken against:

- those involved in noncompliant conduct/activity;

- those who fail to report known noncompliant conduct/activity;

- Department Chairs and/or Administrators who were aware or should have been aware of noncompliant conduct or activity and/or failed to take necessary steps to achieve compliance with the Plan; and

- Supervisors who negligently fail to detect compliance violations that occur.
Appropriate corrective action measures shall be determined on a case-by-case basis or as otherwise established by written policy of CMA or the other Health Sciences Schools. Corrective action can include, but is not limited to:

- Additional training
- Verbal warning
- Written warning
- Suspension without pay
- Demotion
- Termination

- Recalculation and forfeiture of past clinical compensation based upon noncompliant activity.

- Suspension of billing
Employee/Agent Acknowledgement

I acknowledge that I:

1. Have received, and agree to read, the Creighton University Compliance Plan for Health Sciences Billing and Patient Services (the “Plan”).

2. Will comply fully with the standards contained in the Plan and any compliance policies/procedures applicable to my responsibilities at Creighton.

3. Will report any conduct that I believe to be illegal or to violate the Plan or any compliance policies/procedures to my Supervisor, the Compliance Director or through the Billing Hotline (280-2107).

4. Will seek advice from my Supervisor, through the Reporting Ladder, the Coding Helpline (280-5846) or the Billing Hotline (280-2107) regarding any actions required to comply with the Plan or related policies/procedures.

5. Understand that my failure or refusal to comply with the Plan or related policies/procedures will result in disciplinary action.

6. Understand that this Plan does not, in any way, constitute an employment contract or an assurance of continued employment.

Creighton reserves the right to occasionally amend, modify or update the Plan.

____________________________________  __________________________________________
Name (Please Print)                  Signature

____________________________________  __________________________________________
Department                           Position

____________________________________
Date

* COMPLETE, SIGN AND RETURN TO THE COMPLIANCE OFFICE *
Employee/Agent Acknowledgement

I acknowledge that I:

1. Have received, and agree to read, the Creighton University Compliance Plan for Health Sciences Billing and Patient Services (the “Plan”).

2. Will comply fully with the standards contained in the Plan and any compliance policies/procedures applicable to my responsibilities at Creighton.

3. Will report any conduct that I believe to be illegal or to violate the Plan or any compliance policies/procedures to my Supervisor, the Compliance Director or through the Billing Hotline (280-2107).

4. Will seek advice from my Supervisor, through the Reporting Ladder, the Coding Helpline (280-5846) or the Billing Hotline (280-2107) regarding any actions required to comply with the Plan or related policies/procedures.

5. Understand that my failure or refusal to comply with the Plan or related policies/procedures will result in disciplinary action.

6. Understand that this Plan does not, in any way, constitute an employment contract or an assurance of continued employment.

Creighton reserves the right to occasionally amend, modify or update the Plan.

Name (Please Print) ______________________  Signature ______________________

Department ______________________  Position ______________________

Date ______________________

EMPLOYEE/AGENT COPY
Creighton Billing and Claims Submission Standards

It is a violation of the Plan to:

1. Bill for services or supplies not provided.
2. Misrepresent the diagnosis to justify the services or equipment furnished.
3. Alter claim forms to obtain a higher payment amount.
4. Engage in a pattern of duplicate billing to obtain reimbursement to which Creighton is not entitled.
5. Offer, pay, solicit or receive any kickback, bribe or rebate.
6. Unbundle or “explode” charges to inappropriately enhance payment.
7. Complete Certificates of Medical Necessity (CMNs) for patients not personally and professionally known by the provider.
8. Misrepresent the services rendered, amounts charged for services rendered, identity of the person receiving the services, dates of services, or similar facts.
9. Bill for noncovered services as covered services.
10. Utilize split billing schemes.
11. Engage in a pattern of billing, certifying, prescribing or ordering services that are not medically necessary or, if medically necessary, not to the extent rendered.
12. Request or obtain additional payments for covered services from the patient other than co-payments or deductibles.
13. Bill or submit claims that involve over-utilization of services without proper regard for results, the patient’s ailments, condition, medical needs, or the provider’s orders.
14. Misrepresent dates, frequency, duration, or description of services rendered, or the identity of the services or of the individual who rendered the services.
15. Fail to comply with limiting charge requirements on billing federal programs.
16. Intentionally submit incorrect, misleading or fraudulent information to any payer.
17. Intentionally falsify, destroy or withhold records relating to the billing and claims submission process.
18. Submit a claim for services not provided by a qualified health care provider.
19. Fail to maintain patient confidentiality in accordance with applicable federal and state laws as part of the billing and claims submission process.

If you suspect or become aware of any activity listed above, you must promptly report such activity in accordance with the Compliance Reporting Ladder or to the Billing Hotline.