



National MedTrans Network & IPA
"Transporting members to better health"

**Transporting You to Better Health
Since 2005**



Compliance / FWA Training



National MedTrans Network & IPA
"Transporting members to better health"

Fraud, Waste, and Abuse (FWA) Training must include

- Laws and regulation related to MA and Part D FWA
- Must be completed within 90 days of signing a contract with NMN or CMS
- Must be completed annually
- Conflict of interest, Non-Retaliation
- Reporting Mechanisms
- Types of potential non-compliance and/or FWA that can occur in the settings in which provider work

Recognizing Fraud, Waste, and Abuse



National MedTrans Network & IPA
"Transporting members to better health"

- **Health Care Fraud**
Intentionally, or knowingly and willfully attempting to execute a scheme to falsely obtain money from any health care benefit program
- **Medicare Fraud**
Purposely billing Medicare for services that were never provided or received
- **Waste**
Health care spending that can be eliminated without reducing the quality of care
- **Abuse**
Improper behaviors or billing practices that create unnecessary costs

NOTE: Fraud is distinguished from Abuse in that, in the case of fraudulent acts, there is clear evidence that the acts were committed knowingly, willfully, and intentionally or with reckless disregard.

General FWA Standards, Laws & Policies



National MedTrans Network & IPA
"Transporting members to better health"

There are a number of laws that address Health Care Fraud

These laws define Fraud and establish the framework for the prosecution of criminal acts and the initiation of civil suits by injured parties

For more information, listed below are a few of the laws that address Health Care Fraud:

- Civil False Claims Act - 31 United States Code § 3729-3733
- Anti-Kickback Statute - 42 United States Code §1320a-7b(b)
- Stark Statute (Physician Self Referral Law) - 42 United States Code §1395nn

Civil False Claims Act



National MedTrans Network & IPA
"Transporting members to better health"

Prohibits:

- Presenting a false claim for payment or approval;
- Making or using a false record or statement in support of a false claim;
- Conspiring to violate the False Claims Act;
- Falsely certifying the type/amount of property to be used by the Government;
- Certifying receipt of property without knowing if it's true;
- Buying property from an unauthorized Government officer; and
- Knowingly concealing or knowingly and improperly avoiding or decreasing an obligation to pay the Government.

Damages and Penalties

The damages may be tripled. Civil Money Penalty between \$5,000 and \$10,000 for each claim.

Criminal Fraud Penalties

If Convicted, the individual shall be fined, imprisoned, or both. If the violations resulted in death, the individual may be imprisoned for any term of years, or for life, or both.

Anti-Kickback Statute



National MedTrans Network & IPA
"Transporting members to better health"

Prohibits:

Knowingly and willfully soliciting, receiving, offering or paying remuneration (including any kickback, bribe, or rebate) for referrals for services that are paid in whole or in part under a federal health care program (which includes the Medicare program).

42 United States Code §1320a-7b(b)

Damages and Penalties:

Fine of up to \$25,000, imprisonment up to five (5) years, or both fine and imprisonment.

Stark Statute

(Physician Self Referral Law)



National MedTrans Network & IPA
"Transporting members to better health"

Prohibits:

Prohibits a physician from making a referral for certain designated health services to an entity in which the physician (or a member of his or her family) has an ownership/investment interest or with which he or she has a compensation arrangement (exceptions apply). 42 United States Code §1395nn

Damages and Penalties:

Medicare claims tainted by an arrangement that does not comply with Stark are not payable. Up to a **\$15,000** fine for each service provided. Up to a **\$100,000** fine for entering into an arrangement or scheme.

Prevalent FWA forms related to NEMT



National MedTrans Network & IPA
"Transporting members to better health"

Billing for Cancelled Trips & Standing Orders

A member calls the transportation provider directly and the provider does not notify NMN of the cancellation and bills the trip as having been completed instead of cancelled

Duplicate Billing For Trips & Standing Orders

A provider submits several bills for the same trip to the Member, NMN, and The Plan

Misrepresentations of the member

The member allows family members or friends to take trips using their name

Member asks provider to accommodate "special" stops and favors on the way or back from a medically related transport

The member books trips when they know they no longer have coverage to pay for the trip

Member books non medically related trips and claims they are medically related

Member alters the destination of the trip without NMN or plan approval

Misrepresentations of the provider who performs the transport

Provider alters the route of the trip or the destination of the trip without NMN's approval

Provider claims they showed up for the trip and waited, but they did not call NMN to let us know they were waiting. In this situation we cannot confirm definitively the provider was available at the location to provide the transport

Other Examples of Fraud



National MedTrans Network & IPA
"Transporting members to better health"

Identity Theft

Using a member's I.D. card that does not belong to that person to obtain prescriptions, services, equipment, supplies, doctor visits, and/or hospital stays

Doctor Shopping

Visiting a number of doctors to obtain multiple prescriptions for painkillers or other drugs. Might point to an underlying scheme (stockpiling or black market resale)

Resale of Drugs on Black Market

Falsely reporting loss or theft of drugs or feigns illness to obtain drugs for resale on the black market

Improper Coordination of Benefits

Beneficiary fails to disclose multiple coverage policies, or leverages various coverage policies to "game" the system

NMN Policy on Health Care Fraud



National MedTrans Network & IPA
"Transporting members to better health"

- **Integrity, Honesty and Trustworthiness** are all characteristics at the heart of National MedTrans Network's core values
- As such, any violation with respects to Health Care Fraud is not acceptable or tolerated at National MedTrans Network
- Any employee suspicious of Health Care Fraud at any level, should report their suspicions through proper channels
- Any employee involved in Health Care Fraud will be disciplined accordingly

NMN Policy on Health Care Fraud



National MedTrans Network & IPA
"Transporting members to better health"

If you become aware of a possible violation of any federal or state rule, law, regulation or policy, immediately report it to National MedTrans Chief Compliance Officer, Ron O'Grady

Email: rogrady@natmedtrans.com

You may report any FWA concerns to either of the following authoritative entities:

U.S. Department of Health and Human Services (HHS)

<http://www.hhs.gov/>

Office of Inspector General (OIG)

OIG's National Hotline: 1-800-447-8477

Fax: 1-800-223-8164

E-mail: HHSTips@oig.hhs.gov

Centers for Medicare & Medicaid Services (CMS)

1-800-633-4227

Web site: <http://www.cms.hhs.gov>

Consequences For Non-Compliance



National MedTrans Network & IPA
"Transporting members to better health"

A provider, supplier or health care organization that has been convicted of Fraud may receive a significant fine, prison sentence or be temporarily or permanently excluded from the Medicare program or other Federal healthcare programs, and in some states, lose their license.

Failure to comply with Fraud and Abuse laws may result in:

- Investigations referred to the Office of Inspector General (OIG)
- Criminal Conviction/Fines
- Civil monetary penalties that can result in up to \$10,000 per violation and exclusion from the Medicare program
- Denial or revocation of a Medicare Provider Number
- Suspension of payment
- Imprisonment

Employee Protections When Reporting FWA



National MedTrans Network & IPA
"Transporting members to better health"

Whistleblower (Qui Tam) Protection – 31 United States Code Service (USC) 3730 (h)

- The whistleblower provision **protects employees or transportation provider who assist the federal government in investigation and prosecution of violations** of the False Claims Act.
- Whistleblower **protections applies only to actions taken in furtherance of a viable False Claims Act case**, which has been, or is about to be, filed.
- The provision **prevents retaliation against employees or transportation providers such as firing** them for assisting in the investigation and prosecution.
- If any retaliation does occur, the **employee and transportation providers have a right to obtain legal counsel** to defend the actions taken.

How to Take Action



National MedTrans Network & IPA
"Transporting members to better health"

You and your business are important in preventing, detecting and reporting FWA and Medicare non-compliance.

These are the steps that need to be taken?

1. Comply with all applicable statutory, regulatory and other Medicare Part C or Part D requirements, including adopting and using an effective compliance program.
2. Report any compliance concerns, and suspected or actual violations that you may be aware of. Do not be concerned about whether it is fraud, waste, or abuse. Just report any concerns to the NMN compliance department.
3. Follow your organization's Code of Conduct that articulates you and your organization's commitment to standards of conduct and ethical rules of behavior.

How to Prevent FWA



National MedTrans Network & IPA
"Transporting members to better health"

1. Look for suspicious activity
2. Conduct yourself in an ethical manner
3. Ensure accurate and timely data/billing
4. Ensure you coordinate with NMN
5. Keep up to date FWA policies and procedures, standards of conduct, laws, regulation, and the Centers for Medicare and Medicaid Services (CMS) guidance
6. Verify all information provided to you.

How to Prevent FWA



National MedTrans Network & IPA
"Transporting members to better health"

Reporting FWA to Government authorities:

- Can be reported to the OIG, the Department of Justice, or CMS.
- Individuals or entities who provide self-discovered potential fraud to the OIG can do so without retaliation under the self-Disclosure Protocol (SDP). This allows the provider the opportunity to avoid the cost and disruptions associated with a government-directed investigation and civil or administrative litigation.

When Reporting include the following:

- Contact info for the source of the information, suspects, and witnesses
- Details of the alleged FWA
- Identification of the specific Medicare rules allegedly Violated; and
- The suspected history of compliance, education, training, and communication with your organization or other entities.

How to Report FWA



National MedTrans Network & IPA
"Transporting members to better health"

- **HHS office of Inspector General**
Phone: 1-800-HHS-Tips (1-800-447-8477) or TTY 1-800-377-4950
Fax: 1-800-223-8164
Email: HHSTips@[oig.hhs.gov/hotlineoperations](mailto:HHSTips@oig.hhs.gov/hotlineoperations)
- **Medicare Part C and D**
National Benefit Integrity Medicare Drug Integrity Contractor (NBI MEDIC) at
1-877-7SafeRX (1-877-772-3379)
- **All other Federal healthcare programs**
CMS Hotline at 1-800-MEDICARE (1-800-633-4227) OR TTY 1-877-486-2048
- **HHS and U.S Department of Justice (DOJ)**
<https://www.stopmedicarefraud.gov>

CMS Online FWA Training



To obtain your CMS official FWA training please log on to:
<https://learner.mlnlms.com/Default.aspx>

Here you can take the CMS FWA training, take the quiz, and print off your certificate.

HIPAA Basics



National MedTrans Network & IPA
"Transporting members to better health"

What is HIPAA?

- **Health Insurance Portability and Accountability Act**
National standards to protect patient confidentiality, security of electronic healthcare transaction, & code sets for electronic transmission of health information
- Protects people from losing their health insurance if they change jobs or have pre-existing health conditions
- Developed to protect the privacy and security of health information and provide certain rights to their health information
- HIPAA is for Privacy, Security, and Breach Notification Rules

Who must comply?

Healthcare Providers
Healthcare Clearinghouse

Health plans
Business Associates

Why comply with HIPAA?

- To improve the efficiency and effectiveness of the healthcare system
- Because it is Public Law (public Law 104 -191)
- Can be enforced by local OIG
- Risk to your organization, including financial and reputational harm
- Personal penalties and sanctions

HIPAA Basics



National MedTrans Network & IPA
"Transporting members to better health"

The purposes of HIPAA

- Create and maintain standards and requirements to protect the privacy and security of personal Health information
- Reduce the costs and administrative burdens of healthcare by creating standards electronic formats for many administrative transactions that are currently carried out on paper
- Protects people from losing their health insurance if they change jobs or have pre-existing health conditions

HIPAA Basics



National MedTrans Network & IPA
"Transporting members to better health"

Definitions:

- SAG: State Attorney General
- HIPPA: Health Insurance Portability and Accountability Act
- PHI: Protected Health Information; any oral, written or electronic individual-identifiable health information collected or stored.
- SPHI: Sensitive Protected Health Information: PHI that if breached could cause the member financial, reputational or emotional harm.
- EDI = Electronic Data Exchange
 - Defines transfer format of electronic information between providers and payers to carry out financial or administrative activities related to health care.
 - Information includes coding, billing and insurance verification.
 - Goal of using the same formats is to ultimately make billing process more efficient.

HIPAA Basics



National MedTrans Network & IPA
"Transporting members to better health"

What does PHI include?

PHI includes information by which the identity of a patient can be determined with reasonable accuracy and speed either directly or by reference to other publicly available information

- Information such as:
 - Transportation information such as provider address
 - Time of Transportation
 - Appointment dates and times
 - Member name
 - Member Date Of Birth
- Member address
- Telephone numbers
- Health plan numbers
- Invoices
- Any other unique identifying number, characteristic or code

HIPAA Protection



National MedTrans Network & IPA
"Transporting members to better health"

Federal Government

- Civil penalties up to 1,500,00/year for identical types of violation
- Willful neglect violations are mandatory

Criminal penalties:

- 50,000.00 fine and one (1) year in prison for knowingly obtaining and wrongfully sharing information
- 100,000 fine and five (5) years in prison for obtaining and disclosing through false pretenses
- 250,000 fine and ten (10) years in prison for obtaining and disclosing for commercial advantage, personal gain, or malicious harm.

Patient Rights Under HIPAA



National MedTrans Network & IPA
"Transporting members to better health"

- The right to individual privacy
- The right to expect health care providers to know and protect these rights.
- The ability to Access, Alternate Communication, Amend Records, Accounting of Disclosures, Notice of Privacy Practices, and Reminders, and the right to file a complaint.

Notice of Privacy Practice (NPP)



Educate patients on

- Their right to privacy
- Our responsibility to their PHI
- How we use and disclose their PHI
- Directs patients where to ask questions related to their PHI

Access and Inspect PHI



National MedTrans Network & IPA
"Transporting members to better health"

Patient's have the right to inspect and copy their PHI

Is access ever denied?

- Yes only when
 - Psychotherapy notes.
 - PHI compiled for civil, criminal or administrative action or proceedings.
 - PHI subject to CLIA Act of 1988 when access is prohibited by law.
 - If access would endanger a person's life or safety based upon professional judgment.
 - If a correctional inmate's request may jeopardize health and safety of the inmate, other inmates or others at the correctional institution.
 - If a research study has previously secured agreement from the individual to deny access.
 - If access is protected by Federal Privacy Act.
 - If PHI was obtained under promise of confidentiality and access would reveal the source of the PHI.

Alternate Communication



Patient's has the right to receive communication by alternative means or location

- The patient may request bill be sent directly to him instead of to his insurance company
- The patient may request we contact her on cell phone instead of home telephone number

Special Access Request



National MedTrans Network & IPA
"Transporting members to better health"

If a patient request that we always call a family member instead of her directly, what are some options:

- Your organization may have specific form to complete
- Your organization may have a policy to refer such requests to patient relations or another customer service department
- Usually, organization will have a process in place to document the patient's wishes in his/her medical record

Request Amendment



National MedTrans Network & IPA
"Transporting members to better health"

Patient has the right to request an amendment of correction to PHI.

Request Restriction



National MedTrans Network & IPA
"Transporting members to better health"

- May be requested by the patient if he/she wishes to change or restrict how your organization uses and discloses your PHI
- Organization must honor request to restrict disclosure to a health plan
- For all other requests for restrictions, organization must make reasonable effort to honor request, but approval is not required
- Organization typically has a form to complete to request the restriction
- Patient may later revoke a request for record restriction

Accounting of Disclosures



National MedTrans Network & IPA
"Transporting members to better health"

Accounting of Disclosures is a request for a list of disclosures of a patient's PHI that did not require an authorization or the opportunity for the patient to agree or object

- Organization typically has a form to complete to request the accounting
- The HIPAA rules require the organization to provide certain information about the disclosure, such as date, name of person who received the PHI, a description of the PHI and the purpose of the disclosure

Individual may requesting accounting of disclosure as far back as six years before the time of the request

- Organization must provide the first accounting without charge. Subsequent must provide the first accounting without charge. Subsequent requests for accountings by the same individual within a 12 month period may be charged a reasonable, cost-based fee, as long as the organization provides notice to the individual

Minimum Necessary



National MedTrans Network & IPA
"Transporting members to better health"

Part of the privacy rule:

Utilizes the minimum necessary rule and defines that entities must make reasonable efforts to use, disclose, and request only the minimum amount of protected health information needed to accomplish the intended purpose of the use, disclosure or request.

- Privacy Rule went into effect **April 14, 2003**.
- Privacy refers to protection of an individual's health care data.
- Defines how patient information used and disclosed.
- Gives patients privacy rights and more control over their own health information.
- Outlines ways to safeguard Protected Health Information (PHI).
- Limit the PHI on a "need to know" basis

Treatment, Payment, & Health Care Operations



National MedTrans Network & IPA
"Transporting members to better health"

HIPAA allows use and/or disclosure of PHI for the purpose of

- Treatment- providing care to patients
- Payment – the provision of benefits and premium payment
- Health Care Operations- Normal business activities such as reporting, quality improvement, training, auditing, customer service, and resolution of grievances data collection, and eligibility checks, and accreditation

When can you use or disclose PHI?



National MedTrans Network & IPA
"Transporting members to better health"

- To the individual or their authorized representative
- For treatment, payment, or health care operations
- When the individual has the opportunity to agree or object, such as when the patient brings another person into the exam room for their office visit
- Incidental to an otherwise permitted u
- For the purpose of research or public health

Safeguards



National MedTrans Network & IPA
"Transporting members to better health"

- Implementation of administrative, physical and technical safeguards (work in tandem with security rule)
- Safeguard PHI from any intentional or unintentional use or disclosure
- Limit incidental uses and disclosures that occur as a result of otherwise permitted or required uses and disclosures
- Organizations should create safeguards to prevent others from overhearing PHI

File Privacy Complaint



National MedTrans Network & IPA
"Transporting members to better health"

- Individuals may file complaints with privacy official regarding health information privacy violations or privacy compliance program
- Individuals may file complaints with the department of Health and Human Services Office of Civil Rights

Retaliatory Acts



National MedTrans Network & IPA
"Transporting members to better health"

Organizations may not intimidate, threaten, coerce, discriminate against, or take other retaliatory action against:

- Individuals for exercising their rights or filing a complaint;
- Individuals and others for
 - Filing a complaint with the secretary
 - Testifying assisting, or participating in an investigation, compliance review, proceeding, or hearing; or
 - Good faith opposition to a prohibited act or practice

Waiver of Rights



National MedTrans Network & IPA
"Transporting members to better health"

Organizations cannot require an individual to waive their rights provided under this rule for the purpose of providing treatment, payment or enrollment in a health plan or eligibility for benefits

Policies and Procedures



National MedTrans Network & IPA
"Transporting members to better health"

- Organizations must implement policies and procedures designed to comply with the Breach and Privacy Rules
- Organizations must change policies and procedures as necessary and appropriate to comply with changes in the law and maintain consistency between policies, procedures and the Notice of Privacy Practices
- Organizations must document all changes made to policies and procedures and maintain all policies for six years
- Organizations must train employees on changes made to policies and procedures

Documentation



National MedTrans Network & IPA
"Transporting members to better health"

Organization Must maintain all documentation for six years from the date of its creation, including:

- Policies and procedures in written or electronic form
- Communications in written or electronic form when such communications are required in writing
- Written or electronic records of actions, activities, or designations as required

Definition of PHI Misuse



National MedTrans Network & IPA
"Transporting members to better health"

The following activities occurring in the absence of patient authorization are considered misuse of Protected Health Information:

- Access
- Using
- Taking
- Possession
- Release
- Editing
- Destruction

Types of Privacy Violations



National MedTrans Network & IPA
"Transporting members to better health"

Inadvertent or Unintentional Disclosure

- Inadvertent, unintentional or negligent act which violates policy and which may or not result in PHI being disclosed.
- Disciplinary action will typically be a verbal warning, re-education, and review and signing of the confidentiality agreement.
- However, disciplinary action is determined with the collaboration of the privacy officer, Director of Human Resources and the department manager.

Intentional Disclosure:

- Intentional act which violates the organization's policies pertaining to that PHI which may or may not result in actual harm to the patient or personal gain to the employee.
- Breach notification processes will be followed as described in the Breach Notification Policy.



National MedTrans Network & IPA
"Transporting members to better health"

HIPAA Breach Notification Rule

Is the use and disclosure of PHI (Protected Health Information) without permission. PHI is presumed to be in breach unless it is utilized by a covered entity, a person authorized to access the PHI under a covered entity, or a business associate related to the care of the individual.

- Requires covered entities to notify affected individual, HHS and in some case, the media of a breach of unsecured PHI;
- Must be reported not later than 60 days following the discovery of a breach;
- Must report the nature, the extent of the PHI released, and identify whom the disclosure was made;
- Must report on if the PHI was actually acquired or viewed;
- And the extent to which the risk to the PHI has been mitigated.

HIPAA Breach Notification Rule



National MedTrans Network & IPA
"Transporting members to better health"

- Guidance Specifying the Technologies and Methodologies that Render
- Protected Health Information Unusable, Unreadable, or Indecipherable to Unauthorized Individuals
- No breach notification required for PHI that is encrypted in accordance with the guidance.

HIPAA Discovery of Breach



National MedTrans Network & IPA
"Transporting members to better health"

A breach is treated as discovered:

- On first day the breach is known to the covered entity, or
- In the exercise of reasonable diligence, it should have been known to the covered entity.

Notification time period for a breach begins when the organization did or should have known it existed.

Release of Information (ROI)



National MedTrans Network & IPA
"Transporting members to better health"

When releasing PHI, it is important to know when a patient's authorization is required. Patient authorizations are governed by state and federal law.

Uses and disclosures of PHI of TPO:

1. Treatment
2. Payment
3. Health Care Operations

Disclosure required or permitted by law

If use of the information does not fall under one of these categories you must have the patient's signed authorization (written permission) before sharing that information with anyone.

Release of Information (ROI)



National MedTrans Network & IPA
"Transporting members to better health"

When Authorization is Required

- Use or disclosure of psychotherapy notes
- Except in limited circumstances, use and disclosure of PHI for marketing purposes
- When Selling PHI

When Authorization is Not Required

- Disclosures to the individual
- Uses and disclosures for treatment by your physician
- Uses and disclosures for quality assurance activities

How We Apply the Security Rule



National MedTrans Network & IPA
"Transporting members to better health"

Administrative Safeguards

Policies and procedures are Required and must be followed by employees to maintain security (i.e. disaster, internet and e-mails use)

Technical Safeguards

Assignment of different levels of access

Screen savers

Devices to scan ID badges

Audit Trails

Physical Safeguards

Lock doors

Monitor Visitors

Secure unattended computers

HIPAA Violations



National MedTrans Network & IPA
"Transporting members to better health"

Three types of violations:

- Incidental
- Accidental
- Intentional

Insert organization's policy regarding types of violations and levels disciplinary action provided.

HIPAA Violations



National MedTrans Network & IPA
"Transporting members to better health"

If HIPAA is ignored, the rules are carelessly or deliberately used or disclosed protected health or confidential information, you can expect the following

- Disciplinary action, up to and including termination
- Civil and/or criminal charges

Examples of intentional Violations of privacy include:

- Accessing PHI for purposes other than assigned job responsibilities
- Attempting to learn or use another person's access information

Reporting HIPAA Violations



National MedTrans Network & IPA
"Transporting members to better health"

If you are aware of suspicious of an accidental or intentional HIPAA violation, it is your responsibility to report it!

- Organizations may not intimidate, threaten, coerce, discriminate against, or take other retaliatory action against anyone who in good faith reports a violation (whistleblowing).
- You can report HIPAA violations by:
 - <http://www.hhs.gov/hipaa/filing-a-complaint/>



Thank you



National MedTrans Network & IPA
"Transporting members to better health"