



HELEN NEWBERRY JOY HOSPITAL & HEALTHCARE CENTER

growing a healthier community

Compliance Plan

A. Introduction

Helen Newberry Joy Hospital is committed to conducting its operations in accordance with applicable laws. To this end, the Hospital strives to assure that all claims for reimbursement are submitted not only in compliance with applicable law, but also the applicable requirements of third party payment programs. While compliance in this area can be difficult due to the complex nature of the applicable requirements and the fact that such requirements are often subject to differing interpretations, the Hospital nevertheless strives to assure that all claims for payment are appropriate. To further the Hospital's goal of ensuring that claims for payment are submitted appropriately, the Hospital has adopted this plan for complying with applicable legal, regulatory, and third payment requirements.

The compliance program set forth herein is not an exhaustive recitation of all compliance programs and activities of the Hospital that are currently in effect. The Hospital will continue to maintain various compliance practices in addition to those set forth in the Plan as part of its overall legal compliance efforts.

B. Compliance Officer

The Hospital's Human Resources Director shall serve as the Compliance Officer for this Plan. As such, the Compliance Officer (in conjunction with the Compliance Committee) will oversee the implementation and operation of the Plan, and will implement modifications to the Plan as appropriate. The Compliance Officer is authorized to engage legal counsel, where appropriate, to assist in the implementation, operation, and modification of this Plan, including to serve as a resource for responding to issues arising through the compliance activities of the Hospital under the Plan.

In furtherance of the responsibilities of the Compliance Officer, the Compliance Officer will, in conjunction with the Compliance Committee and with the assistance of counsel as appropriate, oversee the following matters:

1. The formulation, review, and revision, as appropriate, of policies concerning the submission of claims by the Hospital and its employees.
2. The formulation, review, and revision, as appropriate, of training and educational materials and programs designed to enable Hospital personnel to perform billing responsibilities appropriately.
3. Establishment of internal and external billing reviews.
4. Establishment of a mechanism whereby inquiries concerning billing questions or issues are answered in a definitive manner. In this regard, because of the need to assure uniformity of appropriate practices by the Hospital and its personnel, the Compliance Officer shall serve as the final Hospital authority on specific billing practices, such as the use of particular codes for designated services, the procedures and processes for billing, and determining whether a compliance issue exists.

C. Policies

Under the oversight of the Compliance Officer, the Hospital shall establish policies and guidelines, as necessary, designed to achieve the policy of the Hospital that all claims for reimbursement shall be billed under the proper code for the services provided, that the supporting documentation required with respect to each claim is in place and that the claim is submitted to the appropriate payor or payors. To this end, the Compliance Officer shall review existing policy

statements, make or cause to be made such revisions to those statements as necessary, develop any additional statements that seem advisable and assure that such statements are disseminated among all Hospital personnel whose job function includes matters covered within such statements.

D. Education and Training

The Compliance Officer shall (in conjunction with the Compliance Committee) assure that all billing personnel receive systematic and ongoing training, both upon hire and on a continuing basis that enables such personnel to properly perform their job functions. As one facet of continuing training, the Compliance Officer shall assure that appropriate personnel attend outside seminars, as necessary, to update information. Not all personnel are required to attend outside seminars, but the Compliance Officer shall undertake measures to assure information obtained at such seminars is disseminated among appropriate Hospital personnel. The Compliance Officer shall ensure that records demonstrating that such training has occurred be in personnel files.

In addition to training for billing personnel, the Compliance Officer shall also assure that physicians and other health professionals employed by the Hospital and its affiliates who provide documentation which is relied upon for billing purposes receive training concerning billing and documentation issues related to their services. Such training shall be made available to members of the medical staff not employed by the Hospital or its affiliates, as the Compliance Officer deems appropriate. The Compliance Officer shall retain records indicating that such training has occurred.

The Compliance Officer will establish a method whereby responsibility for monitoring reimbursement rule changes is delegated to one or more individuals who shall be responsible for disseminating that information among appropriate personnel pursuant to policies and protocols established under the direction of the Compliance Officer.

E. Internal and External Audits

Under the direction of legal counsel, who shall oversee and coordinate such activities with the Compliance Officer, a representative sample of medical records and corresponding claims submissions for medical education billing issues shall be reviewed each quarter by internal reviewers qualified to assess the appropriateness of the documentation and claims submitted. In addition, on an annual basis, or more frequently as the Compliance Officer shall determine necessary, the Hospital shall engage a qualified external consultant to evaluate a representative sample of medical records and corresponding claims submissions to evaluate the appropriateness of the documentation and claims submitted. Such external review can, but need not be, accomplished in connection with the annual audit of the Hospital.

With respect to both internal and external audits, written reports summarizing the results of such audits shall be provided to legal counsel for the Hospital, the Compliance Officer and the Chief Executive Officer. The Compliance Officer shall, in consultation with legal counsel and the Chief Executive Officer, review the results of the audit to determine whether any action is warranted based on the audit findings.

F. Reporting and Investigation of Compliance Issues

The policies established to implement this Compliance Plan would make clear to whom employees and physicians should report activity they believe to be inconsistent with Hospital policy or legal requirements regarding billing. Such policies will provide that the Compliance Officer will normally be the person to be contacted. Any employee who reports such matters shall not be subjected to retaliation or harassment in any manner and any employee of the Hospital engaging in such conduct will be subject to discipline up to and including termination. The Compliance Officer can be reached by calling 293-9246 or through the *confidential* Corporate Compliance number: ext. 144 (outside: dial 293-9144).

G. Compliance Correction Action Plan

Whenever the Compliance Officer identifies an issue as to which corrective action is indicated, the Compliance Officer shall develop a formal plan to address the issue. Such a plan can include, without limitation, additional education and/or training, seeking clarification from appropriate payor personnel and/or obtaining the advice of legal counsel and/or other outside consultants.

The purpose of all corrective action plans will be to address the issue appropriately in order to bring the Hospital into legal compliance and to consider actions which may facilitate future compliance. The Compliance Officer shall be responsible for determining whether certain individuals or groups of individuals are responsible for particular compliance problems and to consider actions, such as monitoring of such personnel, in order to implement the policies set forth in the Compliance Plan.