SUNY DOWNSTATE MEDICAL CENTER
POLICY AND PROCEDURE

Subject: **COMPLIANCE TRAINING**	**Original Issue Date** 2/08
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I.   PURPOSE

The purpose of this document is to outline the Compliance training requirements and follow up processes for State University of New York (SUNY) Downstate Medical Center (DMC) workforce members.

II.   POLICY

It is DMC's policy to provide Compliance related training, as appropriate for each workforce member's role within the organization, within a reasonable timeframe after the individual joins the workforce. DMC will also provide training to workforce members whose functions have been affected by a material change in the applicable regulations, policies, procedures or requirements within a reasonable time after the material change becomes effective.

III.   DEFINITIONS

Compliance Brochures – Code of Ethics, Compliance Line, DRA, HIPAA Pocket Guide, Identity Theft and Internal Control Program brochures distributed to promote general compliance awareness.

Corporate Compliance Training Program- Provides training on the coding, documentation and billing requirements for the Hospital, as well as general training on DMC's Compliance program and risk areas.

Identity Theft Risk Areas / Accounts That Contain Personally Identifying Information - These are accounts that permit multiple transactions or pose a reasonably foreseeable risk of being used to promote identity theft. They exist in Academic, Administrative, Hospital and Scientific Affairs areas of DMC operations.

Deficit Reduction Act (DRA) False Claims & Whistleblower Protections Training Program- Provides an awareness of claims for Federal/ State healthcare programs that can be rendered as false, as well as the mechanisms and protections for reporting a suspected false claim.

Health Insurance Portability & Accountability Act of 1996 (HIPAA) Training Program- Provides training on the appropriate safeguarding of protected health information (PHI), as well as the permitted uses and disclosures of such information.

Identity Theft Training Program – Provides training on the prevention of fraudulent practices in relation to DMC identity theft risk areas, identification of 'red flags' and delineation of the process to be followed when identity theft occurs.

Professional Compliance Training Program- Provides training on the coding, documentation and billing requirements for the Professional component of billing to prevent fraud and abuse.

Documentation Integrity Program – Provides training on the Federal & State requirements for documentation in a medical record, as well as Joint Commission accreditation standards and DMC specific policies & procedures on the topic.

IV.   RESPONSIBILITIES

The Office of Compliance & Audit Services (OCAS) is responsible for administering the Compliance training programs. It is the responsibility of DMC workforce members to comply with DMC's training requirements. Workforce members include employees of New York State, University Physicians of Brooklyn (UPB) & the Research Foundation (RF), as well as physicians, allied health professionals, residents, interns, fellows, students, trainees, volunteers, consultants, contractors and subcontractors.

Specifically, the following is an outline of the Compliance training courses offered and corresponding workforce members required to complete them:

A.   <u>HIPAA:</u> All members of DMC's workforce are required to complete HIPAA training; however,   employees who do not have access to patient information do not have to complete the comprehensive online HIPAA program. These individuals are simply required to attend the HIPAA Awareness Video session provided at Hospital Orientation. Alternatively, in the event that such individuals cannot attend the Hospital Orientation, they may complete the HIPAA Awareness training module online. The following departments do not have access to patient information:
   i.   Academic Affairs;
   ii. Academic Computing Department;
   iii. Administrative Support Services;

iv. Anatomy;
v. Biochemistry;
vi. Biomedical Communications;
vii. Continuing Medical Education;
viii. Downstate Depot;
ix. Employee Assistance Program;
x. Environmental Services;
xi. Facilities Maintenance & Development;
xii. Food & Nutrition;
xiii. Human Resources/ Labor Relations;
xiv. Humanities in Medicine;
xv. Institutional Advancement & Development;
xvi. Lab Animal Resources;
xvii. Linen;
xviii. Management Systems;
xix. Materials Management;
xx. Medical Library;
xxi. Microbiology;
xxii. Planning;
xxiii. State Purchasing Office;
xxiv. Student Affairs;
xxv. Union Representatives;
xxvi. Unit Management;
xxvii. University Affairs;
xxviii. University Police;
xxix. Volunteer Services.

B. **Professional Compliance Training:** Physicians, Residents, Physician Billing Administrators and Non Physician Practitioners/Midlevel Providers are required to complete this course.

C. **Corporate Compliance Training:** All Revenue cycle personnel including all employees in the Admitting, Outpatient Registration, Health Information Management, Quality Management, Case Management/ Utilization Review, Risk Management, Regulatory Affairs, Hospital Finance & Managed Care Departments are required to complete Corporate Compliance Training.

D. **DRA:** All DMC employees receive information on DRA compliance. DRA training has been incorporated into the Corporate and Professional Compliance online programs. Employees working in departments with no access to patient information, as listed in Section IV.A., will be provided DRA Compliance Brochures at Hospital Orientation. For all other staff, the DRA online compliance program is required.

E. **Identity Theft:** All departments that handle accounts that contain personally identifying information, including Hospital Revenue Cycle areas (Admitting, Outpatient Registration, Health Information Management, Quality Management, Case Management/ Utilization Review, Risk Management, Regulatory Affairs, Hospital Finance & Managed Care) as well as Academic Development, Contracts & Procurement, Finance, Human Resources, Information Services, Payroll, Scientific Affairs, Student Affairs, Student/Employee Health and University Police are required to complete this course.

F. **Documentation Integrity:** All employees who document in DMC's medical records are required to take this course. This includes physicians, residents, allied health professionals, nursing services, dietary staff, clinical researchers, pharmacy staff, medical students, social workers and other staff involved in the review and processing of medical records.

V.   PROCEDURE/GUIDELINES

OCAS utilizes the Health Care Compliance Strategies (HCCS) online training programs for HIPAA, Professional, Corporate, Documentation Integrity, DRA and Identity Theft Compliance. These programs incorporate multiple tracks designed to provide appropriate training according to each workforce member's specific role and function at DMC. The programs are available via any computer with Internet access. With the exception of Nursing personnel and students of the Colleges of Medicine, Nursing, Health Related Professions and School of Graduate Studies, workforce members are required to complete training within two (2) weeks of receipt of Compliance training information.

The following procedure for Compliance training will be followed:

A. New Employee Training

1. **University Hospital of Brooklyn (UHB) Employees-** Compliance training will be provided at Hospital Orientation conducted on a bimonthly basis.

   a. The day before Hospital Orientation, the Benefits Department will fax OCAS a list of the new employees scheduled for Hospital Orientation.

   b. OCAS will add these names to its Compliance training database. Based upon the individual's role/ function, as documented on the Orientation List, OCAS will determine the required Compliance training programs and will generate a log- on ID and training packet for each individual. The training packet will include:

      i.   An individualized face sheet containing the employee's log- on information, required Compliance training programs and deadline for completion;
      ii.   Compliance Training Instructions Sheet(s);
      iii. Compliance Brochures, including:
         - DMC's Code of Conduct brochure outlining the ethical conduct expected of workforce members;
         - Compliance Line brochure containing information on the methods available for reporting a suspected legal or ethical violation;
         - DRA brochure providing a summary of false claims information and whistleblower protections;
         - Internal Control Program brochure describing DMC's Internal Control & Audit programs;
         - HIPAA Pocket Guide containing a summary of DMC's specific HIPAA Privacy policies & procedures; and
         - Identity Theft Prevention brochure outlining DMC's policy on detecting identity theft red flags and preventing the misuse of stolen information.

   c. OCAS will create a list of those new employees that are not required to complete any of the online training programs. These individuals are simply required to attend the Hospital Orientation program where they will receive Compliance Awareness training via the HIPAA Awareness Video session, OCAS' Compliance Overview PowerPoint Presentation and DMC's Compliance Brochures. The

following departments are required complete Compliance Awareness training only:

      i.   Administrative Support Services;
      ii.   Anatomy;
     iii.   Biochemistry;
     iv.   Biomedical Communications;
      v.   Continuing Medical Education;
     vi.   Downstate Depot;
    vii.   Employee Assistance Program;
   viii.   Environmental Services;
     ix.   Facilities, Maintenance & Development;
      x.   Food & Nutrition;
     xi.   Humanities in Medicine;
    xii.   Institutional Advancement & Development;
   xiii.   Lab Animal Resources;
   xiv.   Linen;
    xv.   Medical Library;
   xvi.   Microbiology;
   xvii.   Planning;
  xviii.   Union Representatives;
   xix.   Unit Management;
    xx.   University Affairs;
   xxi.   Volunteer Services.

d. On the day of Hospital Orientation, OCAS will provide the Compliance Online Training List, the Compliance Awareness Training List and the individualized Compliance training packets to the Institute of Continuous Learning (ICL), the department responsible for conducting the orientation. ICL will distribute the packets to each individual required to complete the online training programs and will obtain signature of receipt on the Compliance Online Training List. These individuals will be instructed to report to the Learning Resource Center to access the computers and complete the training. ICL will also obtain proof of attendance at the Compliance Awareness training session via the Hospital Orientation sign in sheet.

e. On the Monday following Hospital Orientation, ICL will fax OCAS the Compliance Online Training List (containing the signatures of receipt), the Compliance Awareness Training List and the signed Hospital Orientation attendance sheet. OCAS will review the Hospital Orientation sign- in sheets to ensure that attendees were captured and either received a Compliance training packet or attended the Compliance Awareness session. For those names for which a signature of receipt was not documented, OCAS will follow up with the respective department administrator and will provide the individual's Compliance training log- on information and completion deadline via an email communication.

2. **University Physicians of Brooklyn (UPB) Employees-** For those UPB employees who do not attend Hospital Orientation, the following procedure will be followed:

a. On a monthly basis, the UPB Office will provide OCAS with a list of new employees hired during that time-frame. This list will include the employee name, department and job title.

b. OCAS will review the list against its Compliance training database to ensure that the individuals have been captured.

c. For those names not listed in the Compliance training database, OCAS will generate log- on ID's and communicate the individual's training information with the respective department administrator via an email communication.

3. **Research Foundation (RF) Employees-** For those RF employees who do not attend Hospital Orientation, the following procedure will be followed:

   a. On a monthly basis, the RF Personnel Office will provide OCAS with a list of new employees hired during that time-frame. This list will include the employee name, department, job title and whether there is access to patient information.

   b. OCAS will review the list against its Compliance training database to ensure that the individuals have been captured.

   c. For those names not listed in the Compliance training database, OCAS will generate the following and communicate, via email, with the respective department administrator:

      i. Employees with access to patient information or accounts that contain personally identifying information will receive a Compliance online training program log- on ID and Instructions Sheets for the required training programs;

      ii. Employees with no access to patient information or accounts that contain personally identifying information will be provided with the opportunity to attend the Compliance Awareness presentation at Hospital Orientation or complete the HIPAA (Awareness track only) and DRA online training programs.

4. **Guidance Agency Personnel-** Guidance Agency personnel are required to complete the HIPAA, Corporate Compliance and Identity Theft programs before the start of their assignment at DMC. Personnel who may document in DMC's medical records are also required to complete the Documentation Integrity program.

   a. Upon appointment of the temporary personnel, the Guidance Agency will contact OCAS for training log-on information. Log-on ID number and Instructions Sheets will then be distributed to the individual by the agency and immediate completion of HIPAA, Corporate Compliance & Identity Theft courses will be required of all appointees.
      i. Guidance Agency personnel will submit - with their request for log-on information - the details of any professional licensure or certifications held by the individual to be appointed. OCAS will require Documentation Integrity training be completed along with HIPAA, Corporate compliance and Identity Theft by the applicable appointees.

   b. The Department of Human Resources (HR) will collect certificates/ print outs of completion for all programs before the temporary individual is sent to the assignment location. HR will maintain the completion documentation in the HR partial temporary personnel file.

5. **Locum Tenens & Voluntary Physicians-** Locum tenens and voluntary physicians who receive full DMC Medical Board privileges are required to complete DMC's HIPAA, Professional Compliance and Documentation Integrity training programs. Such physicians will be captured via a monthly report provided by the Medical Board to OCAS that delineates all physicians who have received full clinical privileges. Locum tenens and voluntary physicians who do not receive Medical Board privileges will not be required to complete DMC's training. Rather, such individuals will be required to comply with HIPAA under their individual covered entity status or via a business associate agreement, as applicable.

6. **Voluntary Clinical Researchers-** Individuals who are not DMC employees (via the State, UPB or RF) and do not have DMC clinical privileges, but are performing clinical research related activities, will be required to complete DMC's HIPAA, Documentation Integrity, DRA and Identity Theft training programs before the initiation of said activities. The IRB Office will identify such individuals at the time the study is submitted for IRB approval. The IRB Office will refer the individuals who have not completed DMC's training to OCAS for follow up. OCAS will, subsequently, inform the IRB Office when the training has been completed so that the IRB can continue with its review and approval process.

B. Resident Training- Residents are required to complete DMC's HIPAA, Professional Compliance and Documentation Integrity training programs or provide acceptable documentation of training completed at another institution (see below for acceptable documentation – applicable to HIPAA and Professional Compliance Training ONLY).

1. On an annual basis, incoming residents will receive a Compliance training packet at the Graduate Medical Education (GME) Orientation. The Compliance training packet will include the following:

   a. Individualized label containing the resident's log- on information and required Compliance training programs (HIPAA, Professional and Documentation Integrity);

      i. Residents who completed one or more Compliance training program(s) as a student in the College of Medicine will not be required to complete the program again.

   b. Compliance Training Instructions Sheet containing a two (2) week training compliance deadline;
   c. DMC's Code of Conduct brochure outlining the ethical conduct expected of workforce members;
   d. Compliance Line brochure containing information on the methods available for reporting a suspected legal or ethical violation;
   e. DRA brochure providing a summary of false claims information and whistleblower protections;
   f. Internal Control Program brochure describing DMC's Internal Control & Audit programs;
   g. HIPAA Pocket Guide containing a summary of DMC's specific HIPAA Privacy policies & procedures; and
   h. Identity Theft Prevention brochure outlining DMC's policy on detecting identity theft red flags and preventing the misuse of stolen information.

2. Program Directors may opt to train their residents via a lecture- style presentation for HIPAA training only, in lieu of the online training program. It is the responsibility of the Program Directors to contact OCAS to schedule such a presentation and to ensure its residents are in attendance at the training session. Residents that do not attend the session will be required to complete the online HIPAA training program.

3. DMC accepts HIPAA and/or Professional Compliance training completed at another institution if the training was completed via the exact same Health Care Compliance Strategies (HCCS) online training program. Residents who have completed such training may fax their Certificate of Completion to OCAS. OCAS will verify with HCCS to ensure that training has been completed and will notate the individual as compliant in its database. Because of the highly specific content of the Documentation Integrity course, completion of this training at another institution will NOT be accepted by DMC.

C. Compliance Training Follow Up

1. OCAS will track each new individual added to its training database and will determine whether or not training has been completed within the two (2) week time-frame.

2. For those individuals who have not completed the training after two (2) weeks, an initial reminder email will be sent to the Department Administrator/ Director providing notification of the delinquency and requiring training to be completed within another two (2) week time- frame.

3. Thereafter, a second reminder email will be sent to the Department Administrator/ Director.

4. Subsequently, a third reminder email will be sent to the Department Administrator/ Director.

5. If training has not been completed after three email communications, a formal Important Reminder Notice will be hand- delivered to the Department Administrator/ Director (with a cc to the Department Chair/ Administrator) requesting that an attached Employee/ Resident **Reminder Notice** be provided to the delinquent employee/ resident and signature of receipt maintained in the department's file.

6. If training is still not completed after the Reminder Notice, a formal Important Final Notice will be hand- delivered to the Department Chair/ Administrator (with a cc to the Department Administrator/ Director) requesting that an attached Employee/ Resident **Final Notice** be provided to the delinquent employee/ resident and signature of receipt maintained in the department's file.

7. Individuals who fail to complete the Compliance training program(s) after the above communications will be referred for appropriate disciplinary action to the responsible area; to the Office of Labor Relations, GME Office, UPB Office or RF Office.

D. Department Specific Training- OCAS will conduct department specific training, as necessary, to ensure compliance with the regulatory requirements and to provide updated training on revised requirements or processes. These training programs will be in the form of:

1. In- service or refresher training sessions, as identified via audit deficiencies or other reported concerns;

2. Department specific training manuals containing a focused summary of relevant policies and procedures.

E. Training Completion Certificates

1. Individuals who complete DMC's online Compliance training programs may print out a Certificate of Completion upon exiting the courseware for inclusion in the individual's or departmental file.

2. Any individual or department may also contact OCAS for a formal Certificate of Completion for any of the online Compliance training programs.

3. The Medical Board will look up faculty members' Compliance training completion information via OCAS' Compliance training database, as necessary, for the individual's reappointment package.

4. Individuals who completed a training or refresher program via a lecture style presentation will receive a customized Certificate of Completion from OCAS.

VI. ATTACHMENTS

Compliance Course Requirement Matrix

VII. REFERENCES

Standards for Privacy of Individually Identifiable Health Information, 45 CFR §164.530(b); Deficit Reduction Act of 2006 §6032; Fair and Accurate Credit Transaction Act of 2003, 16 CFR 681.2.

Compliance Training Instructions Sheets (HIPAA, Corporate, Deficit Reduction Act, Documentation Integrity, Identity Theft and Professional) are available online at:
http://www.downstate.edu/compliance/cp_training.html

	Revision	Required	Responsible Staff Name and Title
March 2009	Yes	No	Shoshana Milstein, AVP Compliance & Audit
May 2010	Yes	No	Alexandra Bliss, Compliance Coordinator Shoshana Milstein, AVP Compliance & Audit
May 2011	Yes	No	Alexandra Bliss, Compliance Coordinator Shoshana Milstein, AVP Compliance & Audit
	Yes	No	

Compliance Course Requirement Matrix

The Office of Compliance & Audit Services (OCAS) is responsible for administering the Compliance training programs. It is the responsibility of DMC workforce members to comply with DMC's training requirements. Workforce members include employees of New York State, University Physicians of Brooklyn (UPB) & the Research Foundation (RF), as well as physicians, allied health professionals, residents, interns, fellows, students, trainees, volunteers, consultants, contractors and subcontractors.

The following is an outline of the web- based Compliance training courses offered and corresponding workforce members required to complete them.

A. HIPAA: This course describes information regarding the Health Insurance Portability and Accountability Act of 1996. HIPAA establishes how we access, share and securely maintain private information. Topics include HIPAA Awareness, the HIPAA Privacy Rule, Electronic Security, Electronic Transactions, the HIPAA Enforcement Rule and the Stimulus Act.

Who must complete HIPAA Training: All of DMC's workforce is required to complete HIPAA training. Individuals who work in areas with no access or contact to patient information may fulfill their HIPAA training requirement at the Hospital Orientation HIPAA training session or by completing the Awareness only module of the web- based training program.

B. Professional Compliance Training: The program's main focus is on coding and documentation requirements, rules for Physicians at Teaching Hospitals (PATH) and referral guidelines. The course also outlines topics in Fraud Awareness. Specifically, it discusses common types of healthcare fraud, reviews the annual work plan from the Office of the Inspector General, as well as delineates issues related to managed care.

Who must complete Professional Compliance Training: Physicians, Residents, Physician Billing Administrators and Non- Physician Practitioners/Midlevel Providers are required to complete this course.

C. Corporate Compliance Training: This course focuses on the coding and billing rules required for reimbursement in a hospital setting. It also delineates the required elements of an effective compliance program, as well as provides an overview of other hospital risk areas as identified by the Office of the Inspector General.

Who must complete Corporate Compliance Training: All Hospital revenue cycle personnel including all employees in the Admitting, Outpatient Registration, Health Information Management, Quality Management, Case Management/ Utilization Review, Risk Management, Regulatory Affairs, Hospital Finance and Managed Care Departments are required to complete Corporate Compliance training.

D. DRA: This course describes Federal and State laws regarding the submission of false/fraudulent claims; specifically focusing on the Federal False Claims Act. The program explains penalties for false claims as well as whistleblower protections and the process for reporting fraud.

Who must complete DRA Training: All DMC workforce members receive information on DRA compliance. For those individuals who are required to complete either the Professional or Corporate Compliance courses, the DRA training has been incorporated into those programs and does not need to be separately completed.

E. Identity Theft: This course provides guidelines on verifying the identity of an individual, what identification is necessary, and what to do if/when you suspect that identity theft is occurring or has occurred.

Who must complete Identity Theft Training: All departments that handle accounts that contain personally identifying information, including Hospital Revenue Cycle areas (Admitting, Outpatient Registration, Health Information Management, Quality Management, Case Management/ Utilization Review, Risk Management, Regulatory Affairs, Hospital Finance & Managed Care) as well as Academic Development, Contracts & Procurement, Finance, Human Resources, Information Services, Payroll, Scientific Affairs, Student Affairs, Student/Employee Health and University Police are required to complete this course.

F. Documentation Integrity: This course describes the Federal & State requirements for documentation in a medical record, as well as Joint Commission accreditation standards and DMC specific policies & procedures on the topic. The course discusses practices related to all individuals that document in a patient's record, as well as additional, specific requirements applicable to physicians, residents and allied health professionals. The course covers standard medical record practices, such as creating accurate, complete and timely entries, requirements related to dating, timing and signing entries, procedures for late entries, amendments and corrections, as well as discusses documentation in an electronic health record.

Who must complete Documentation Integrity: All employees who document in DMC's medical records are required to take this course. This includes physicians, residents, allied health professionals, nursing services, dietary staff, clinical researchers, pharmacy staff, medical students, social workers and other staff involved in the review and processing of medical record.