



THE UNIVERSITY OF ARIZONA  
HEALTH PLANS

**SUBJECT: COMPLIANCE PROGRAM**  
**POLICY: CP 6001**

**Department of Origin: Compliance & Audit**

**Responsible Position: Director of Compliance**

**Date(s) of Review and Revision:** 07/06; 03/07; 09/08; 04/09; 06/10; 04/11; 12/13;  
05/14; 12/14; 01/16

**Policy Replaces:** CP 217, AD1217A, CP1217A, S, M

**Department Approval:**



Approval has  
completed on CP 600

**PURPOSE**

The University of Arizona Health Plans (Health Plan) is committed to the ethical and legal conduct of Health Plan business operations. A key component of this culture of compliance is the Health Plan's Compliance Program (CP). The Health Plan develops, implements, maintains and updates an effective CP that meets all government program requirements. All employees, the Health Plan's Board of Directors, and the Health Plan's First Tier, Downstream and Related Entities (FDRs) are required to make a commitment to adhere to the Health Plan's CP.

**APPLICABILITY**

This policy applies to all lines of business.

**POLICY**

It is the policy of the Health Plan to develop, implement, maintain and update a compliant and effective CP. To ensure the Health Plan conducts all business operations in an ethical manner, the Health Plan and its employees, the Board of Directors and FDRs must apply the principles outlined in the CP to all relevant decisions, situations, communications and developments.

**DEFINITIONS**

Please refer to the link below for full definitions for the following terms:

<http://sharepoint/sites/hppandp/new/Lists/Definitions/PP%20Definitions.aspx>

## **First Tier, Downstream and Related Entities**

### **PROCEDURE**

- 1.0 The Health Plan Compliance Program ensures the effective implementation and oversight of ethics and compliance activities for the Health Plan and is part of the Banner Health Corporate Ethics and Compliance Program.
  
- 2.0 The Health Plan complies with all applicable Federal and State laws and regulations including the following:
  - 2.1 Title VI of the Civil Rights Act of 1964;
  - 2.2 Title IX of the Education Amendments of 1972 (regarding education programs and activities);
  - 2.3 The Age Discrimination Act of 1975;
  - 2.4 The Rehabilitation Act of 1973 (regarding education programs and activities), and the Americans with Disabilities Act; EEO provisions;
  - 2.5 Copeland Anti-Kickback Act;
  - 2.6 Davis-Bacon Act;
  - 2.7 False Claims Act;
  - 2.8 HIPAA/HITECH;
  - 2.9 Contract Work Hours and Safety Standards;
  - 2.10 Rights to Inventions Made Under a Contract or Agreement;
  - 2.11 Clean Air Act and Federal Water Pollution Control Act;
  - 2.12 Byrd Anti-Lobbying Amendment.
  - 2.13 The Health Plan shall maintain all applicable licenses and permits.
  
- 3.0 The Compliance Program is supported by specific policies and procedures regarding standards of conduct as well as fraud and abuse. In addition, Health Plan departments maintain policies and procedures which address contract compliance and include internal controls for prevention of fraud, waste and abuse.
  
- 4.0 The Health Plan CEO designates a Health Plan Compliance Officer. The Health Plan Compliance Officer is responsible to:
  - 4.1 Report directly to the Health Plan CEO;
  - 4.2 Have express authority to meet with the UAH P Board of Directors (Board) at his/her discretion and ensure the Board is provided with regular updates regarding Health Plan compliance activities and is made aware of and engaged in Health Plan compliance activities.
  - 4.3 Have express authority to meet with the Banner Health Corporate Ethics and Compliance Officer at his/her discretion.
  - 4.4 Report potential fraud and abuse cases directly to government contractors.
    - 4.4.1 For AHCCCS, provide reports to the AHCCCS Office of the Inspector General (OIG).

- 4.4.2 For Medicare, provide provider and member reports to MEDICS. Provide self-reports of potential fraud, waste and abuse discovered at the Health Plan level to CMS.
- 4.5 Oversee and monitor the Health Plan's government contract compliance including contracts with CMS, and AHCCCS.
- 4.6 Chair the Health Plan Compliance Committee.
- 4.7 Assist with compliance training for all employees, members and providers.
- 4.8 Maintain all Health Plan Compliance Program policies.
- 4.9 Maintain a tracking system for compliance-related activities.
- 4.10 Maintain an internal reporting procedure that is well known to all employees.
- 4.11 Ensure a Compliance Plan is created on an annual basis, submitted to the Compliance Committee for approval, disseminated to all employees and all employees have read and attested they have read and understood the Compliance Plan.
- 4.12 Annual training on the Compliance Plan will be conducted for employees through the Banner Learning Center.
  - 4.12.1 Alerts are sent to employees from the Banner Learning Center, informing them the Banner Learning Center module has been assigned to them.
  - 4.12.2 Managers/Directors of employees that fail to complete the annual training by the due date are sent an automatic alert from The Banner Learning Center.
- 4.13 For AHCCCS: Attend the AHCCCS Compliance Officer Network Group Meetings.
- 4.14 For Medicare: Ensure timely self-reporting to CMS of significant incidents of Medicare program non-compliance.
  
- 5.0 The Compliance Program includes the designation of a Compliance Committee, which meets at least quarterly.
  - 5.1 The Compliance Committee includes the following members:
    - 5.1.1 Health Plan Compliance Officer/Chief Administrative Officer
    - 5.1.2 Health Plan Chief Executive Officer
    - 5.1.3 Health Plan Chief Financial Officer
    - 5.1.4 Health Plan Chief Operations Officer
    - 5.1.5 Health Plan Chief Medical Officer
    - 5.1.6 Health Plan Director of Pharmacy
    - 5.1.7 Health Plan Senior Director of Medicare and Commercial Programs
    - 5.1.8 Health Plan, Compliance Director
    - 5.1.9 Banner Health Corporate Ethics & Compliance Officer
    - 5.1.10 Additional Health Plan department directors as appropriate.
  - 5.2 The Health Plan Compliance Committee is responsible for:
    - 5.2.1 The development, documentation and periodic review of a risk assessment and auditing plan designed to identify, assess, mitigate and monitor operational processes most susceptible to non-compliance with laws, regulations, contractual obligations and Health Plan policies.
    - 5.2.2 The development, documentation and annual review of the Health Plan Compliance Plan to ensure it contains all government program required elements (including but not limited to CMS and AHCCCS) and to ensure the

timely dissemination to all Health Plan employees and FDRs. At a minimum, the Compliance Plan must address the following elements:

- 5.2.2.1 Written policies & procedures and standards of conduct
  - 5.2.2.2 Compliance Officer and Compliance Committee
  - 5.2.2.3 Effective training and education
  - 5.2.2.4 Effective lines of communication
  - 5.2.2.5 Enforcement of standards
  - 5.2.2.6 Effective internal monitoring and auditing
  - 5.2.2.7 Prompt responses to detected offenses
  - 5.2.3 The development, documentation and periodic review of a training and education plan to provide job specific education addressing identified risk and potential non-compliant areas.
  - 5.2.4 The development, documentation and periodic review of corrective action plans (CAPs) and department policies to address identified risk and potential non-compliance areas, including CAPs issued by the Compliance Department as the result of a compliance audit.
  - 5.2.5 Compliance related disciplinary action ensuring that it is documented and consistently applied.
- 6.0 For AHCCCS, The Health Plan must notify AHCCCS of any CMS compliance issues related to HIPAA transaction and code set complaints or sanctions.

## **PERFORMANCE AND OUTCOME MEASURES**

- 1.0 The Compliance Officer is able to perform all required components of the position.
- 2.0 100% of required Compliance Committee meetings are attended by a quorum of the Compliance Committee membership.
- 3.0 The Compliance Plan is updated annually to ensure it contains 100% of government program required elements.
- 4.0 The Compliance Plan is disseminated annually to 100% of Health Plan employees and FDRs.
- 5.0 100% of Health Plan employees and FDRs attest to having read and understood the annual compliance plan.

## **REFERENCES**

- 1.0 For AHCCCS: AHCCCS Acute Care Contract; Section D; Paragraph 62 – Corporate Compliance.
- 2.0 For Medicare:
  - 2.1 Medicare Managed Care Manual – Chapter 21
  - 2.2 Prescription Drug Benefit Manual, Chapter 9
- 3.0 42 CFR 422.503 (b)(3)(vi)
- 4.0 42 CFR 423.504(b)(4)(vi)(b)

## **ASSOCIATED POLICIES AND PROCEDURES**

- 1.0 Health Plan Policy – CP 6018; Fraud, Waste and Abuse

- 2.0 Health Plan Policy - CP 1101 A; Disclosure of Ownership Information and Control
- 3.0 Health Plan Policy - CP 6033; Sanction Screening
- 4.0 Health Plan Policy - CP 6108; Compliance Actions
- 5.0 Health Plan Policy - GP 6021; Policy Format and Review
- 6.0 Health Plan Policy - CP 6023; Code of Conduct
- 7.0 Health Plan Policy - CP 6221; Compliance Officer Responsibilities
- 8.0 Health Plan Policy - CP 6227 ; Monitoring and Auditing
- 9.0 Health Plan Policy - CP 6019; FWA FDR Awareness
- 10.0 Health Plan Policy - CP 6020; FWA Employee Awareness
- 11.0 Health Plan Policy - GP 6017; Training Material Preparation Documentation and Tracking
- 12.0 Health Plan Policy - CP 6801 ; Employee and Committee Member Confidentiality and Non-Disclosure
- 13.0 Health Plan Policy - CP 6024; Conflict of Interest
- 14.0 Health Plan Policy - CP 6228; CMS Annual Risk Assessment
- 15.0 Health Plan Policy - CP 6004 Reporting Compliance Issues
- 16.0 Health Plan Policy - CP 6006 Health Plan Privacy and Security Safeguards
- 17.0 Health Plan Policy - CP 6015 Compliance Investigation Process
- 18.0 Banner Health Corporate - Mandatory Compliance Education and Training #7280.4
- 19.0 Banner Health Corporate - Compliance: ComplyLine# 12648.3
- 20.0 Banner Health Corporate - Compliance: OIG/GSA/Exclusion Review #9495.5
- 21.0 Banner Health Corporate - Compliance: Prohibition Against Retaliation for Reporting Suspected Non-Compliance #2749.7

## **ATTACHMENTS**

N/A