



**2019
COMPLIANCE
TRAINING**

Our Course Roadmap

This year's training has been divided into the following sections:



**University
Compliance**



**Code of
Conduct**



**Code of
Ethics**



**Public
Safety**



**Key
Reminders**



**Preventing Fraud
Waste & Abuse**

While it is impossible to cover every scenario under each topic, our goal is to provide you with a framework that will help you recognize situations where you should seek guidance in order to avoid inadvertently running afoul of the rules.

Please Note



The image shows a document titled "2019 COMPLIANCE TRAINING ACKNOWLEDGEMENT FORM" from UCONN HEALTH. The form includes a list of four statements that the participant must acknowledge. Below the list are four horizontal lines for the participant to provide their Printed Name, Employee's Signature, Department, and Date.

UCONN HEALTH

2019 COMPLIANCE TRAINING
ACKNOWLEDGEMENT FORM

By signing this, I acknowledge that:


- I have received annual compliance training, which included an overview of the University of Connecticut Code of Conduct and University Guide to the State Code of Ethics.
- I have been informed how to ask questions of or to report concerns to the Office of University Compliance.
- I understand that University policy prohibits retaliation against any individual asking questions or reporting concerns to the appropriate authority.
- I understand that violations of the Code of Conduct or the University Guide to the State Code of Ethics may result in disciplinary measures or sanctions by the University and/or Office of State Ethics as appropriate.

Printed Name

Employee's Signature

Department

Date



Be sure to review and submit the associated training attestation form. This step must be completed to receive credit for your participation in this training.

1. ABOUT UNIVERSITY COMPLIANCE

The first section of this training is intended to provide you with:

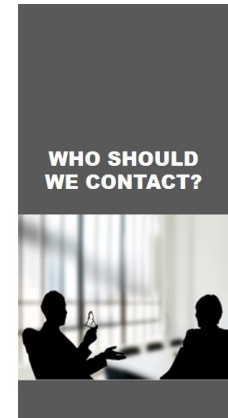
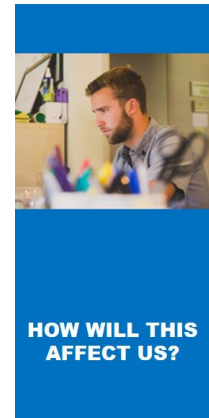
- An overview of the Office of University Compliance
- Your role in meeting compliance expectations
- Additional resources and information



As members of the UConn Health Community, there's the potential to come across a variety of situations that we may not be entirely sure how to handle.

For instance,

- After changes to a particular law, we may be unclear how such changes will affect us, whether current process need to be updated, or if there is a need for additional training.
- You may be wondering if a policy related to an emerging risk already exist or whether its even needed.
- Or you may be approached by someone who thinks they witnessed a potential compliance violation, but is not sure who to contact.



These and other similar types of scenarios can come up in any setting, especially when operating in a diverse and highly regulated environment, such as our UConn Health community.

Understanding this, UConn Health is committed to promoting and supporting a culture of compliance and ethical conduct.

At the direction of the Board of Trustees, the Office of University Compliance was established to assist in these important efforts and oversee the University's overarching compliance program.

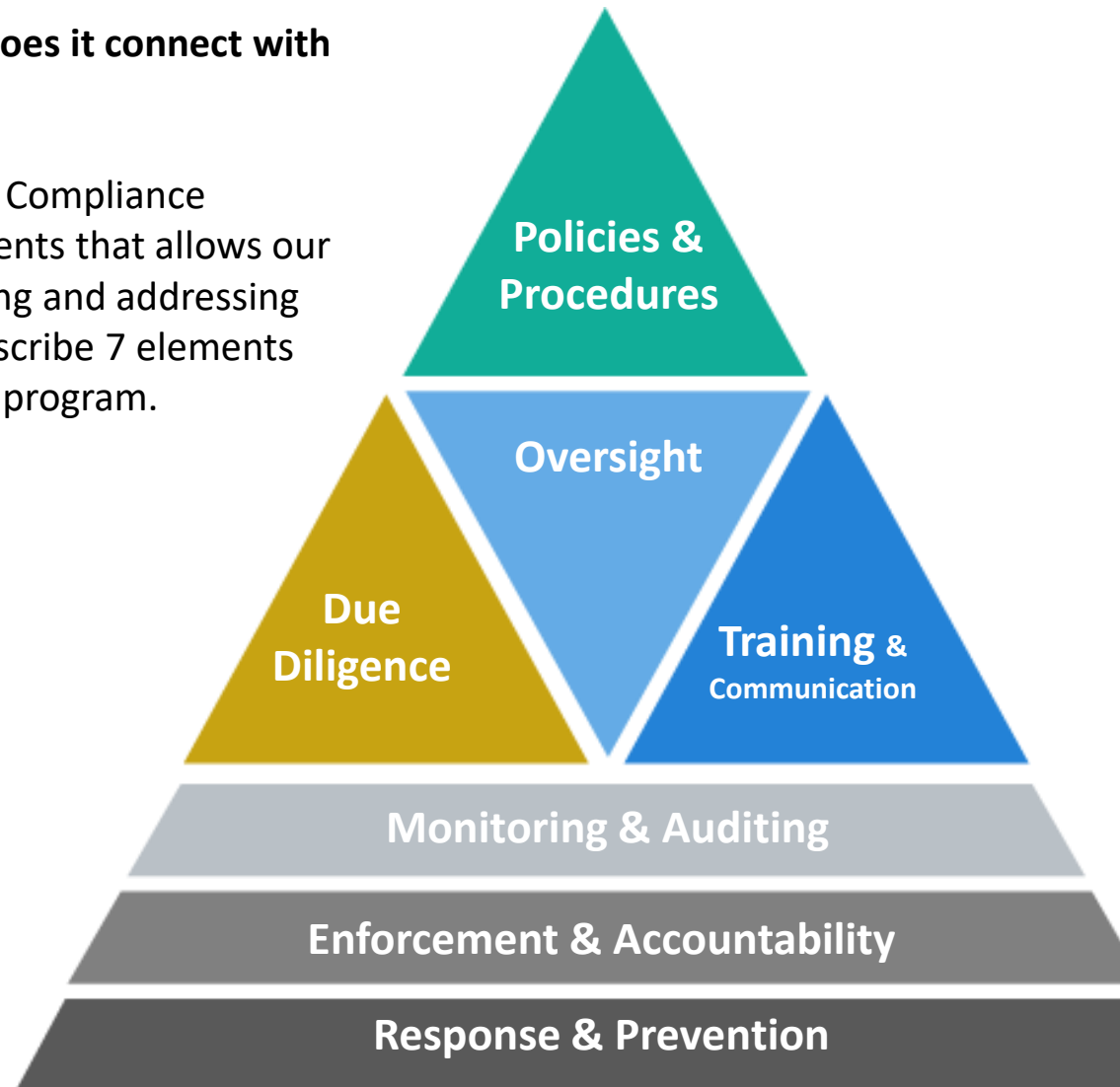
The Office of University Compliance promotes a culture of integrity and ethical behavior and compliance with laws and regulatory requirements.

What is a compliance program? How does it connect with the work that we do?

At the most basic level, the University's Compliance Program refers to a framework of elements that allows our institution to meet its goals of preventing and addressing non-compliance. Federal guidelines describe 7 elements that constitute an effective compliance program.

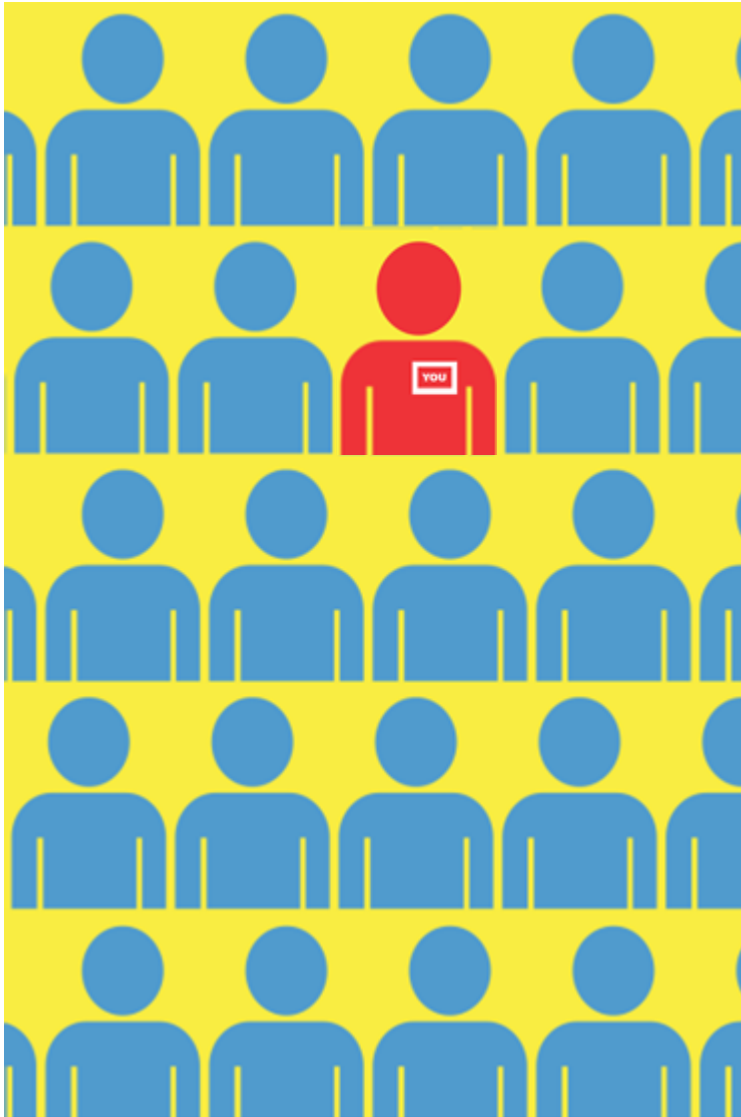
Each of these are foundational elements of our compliance program.

Collectively, they assist us with fostering an environment that supports adherence to laws and policies, and encouraging the highest ethical standards in all that we do.



The Office of University Compliance has a responsibility to support and engage the UConn Health and UConn community to ensure that the institution's commitment to integrity is practically applied and enacted. We do that in a variety of ways, including:

- Serving as a resource regarding various ethics and compliance matters,
- Offering ongoing training and educational initiatives,
- Coordinating compliance monitoring activities,
- Developing and reviewing policies,
- Identifying and investigating compliance concerns



While the Office of University Compliance oversees the University's compliance program, **we each have an individual responsibility to understand and adhere to established policies and procedures, and to comply with applicable laws and regulations.**

In essence, we each have a responsibility to know what the right thing to do is, and to **do the right thing.**



So, how can we work together?

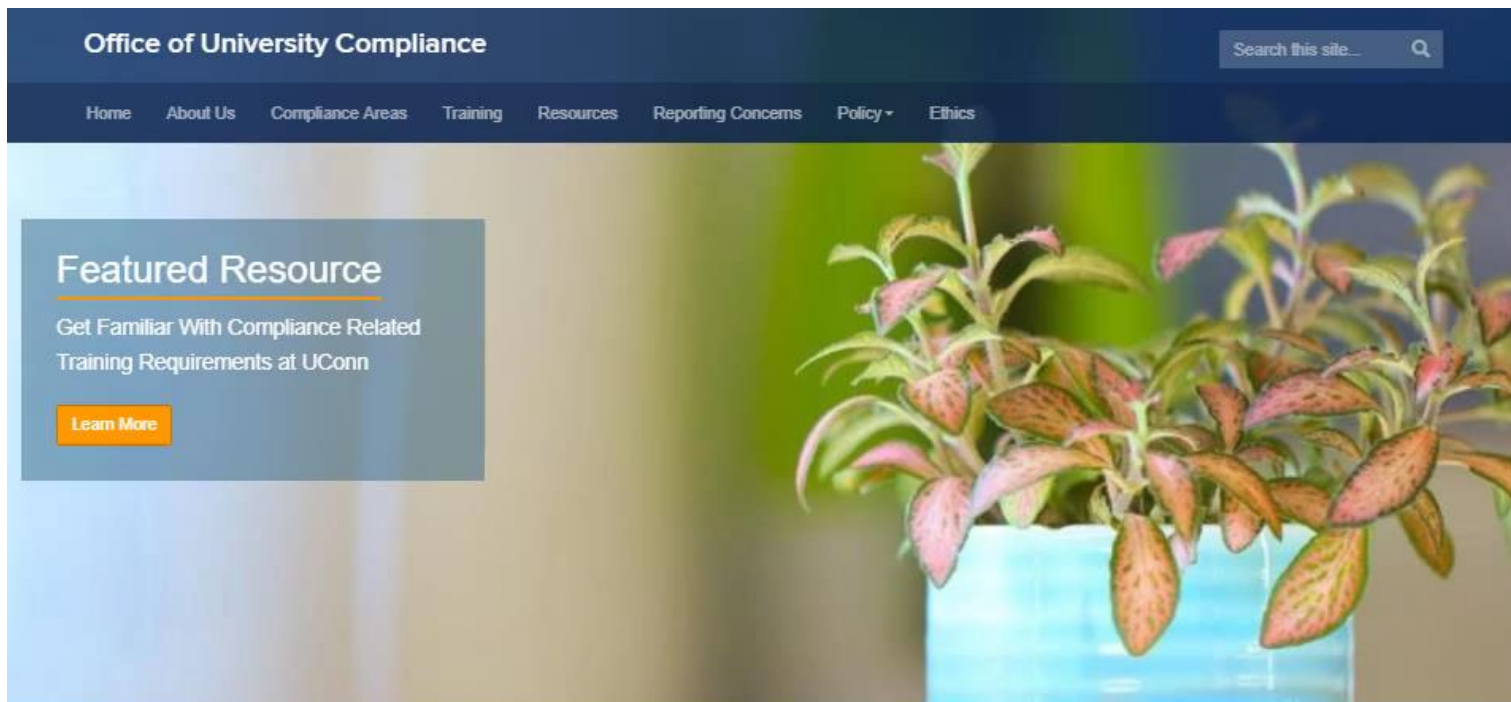
Similar to our early discussion, when presented with situations where you are unsure how to proceed, it is important to know what types of questions to ask and where to seek further guidance.

Examples of when to contact us:

- When you are having difficulty with or have questions about the process for complying with a requirement or policy.
- When you suspect non-compliance, such as a violation of a particular law or policy.
- When you believe you have been retaliated against for reporting known or suspected violations or compliance concerns.

As you continue to engage in the great work that you do at UConn Health, we invite you to become acquainted with our library of compliance related resources available on our website at: compliance.uconn.edu. There you will find helpful resources, such as: a Compliance Contact Matrix, Animated Videos, Podcast Interviews with key subject matter experts, and much, much more.

Check out compliance related tools and resources at: compliance.uconn.edu



2. CODE OF CONDUCT

AND THE IMPORTANCE OF INDIVIDUAL BEHAVIORS

In this next section, you will learn about the purpose of the University's Code of Conduct, how the values and standards outlined in the Code of Conduct apply to your work life, how to report potential compliance violations, and the University's Non-Retaliation Policy.





Standards
of workplace behavior



Commitment
to the highest standards
of integrity



Responsibility
for keeping the
University in full
compliance

The University's Code of Conduct lays the foundation for which we operate and sets the basic standards of workplace behavior expected of all members of the UConn Health and UConn community.

You will notice that the code emphasizes the University's long-term commitment to the highest standards of integrity in education, research, health care, public engagement and service.

Additionally, the Code informs all of us of our shared responsibility for keeping the University in full compliance with all applicable laws, regulations and policies.

As you review the Code of Conduct, you will be reminded that regardless of your role at UConn, the work that we all do is rooted in a shared set of core values, which include:



Because the Code is designed to help us understand both our rights and our obligations, we should read the Code of Conduct carefully and familiarize ourselves with its content.

We are all expected to conduct ourselves in a manner that is consistent with the University's standards and core values.

It's important that we recognize that the choices that we make matter and our individual behaviors can impact the overall success of our institution. Therefore, we must take steps to apply the Code of Conduct to our daily work situations, including:



**Consult the
Code of
Conduct**



**Review
Policies and
Procedures**



**Speak with your
supervisor or
appropriate
colleagues**



**Contact the
Office of
University
Compliance**



ALL University employees are expected to understand and adhere to **ALL** University policies and procedures and comply with Local, State and Federal laws.

Ignorance of University policies or applicable regulatory obligations will **not excuse** any violation.

A key element in assuring institution-wide compliance is a system for reporting potential violations.

If you feel uncomfortable raising a known or suspected compliance concern with your supervisor, you have the option to report your concern to the Office of University Compliance or you may report it anonymously using the REPORTLINE, which is available 24 hours/day, 7 days/week.

Those who report in good faith, will be accorded confidentiality and/or anonymity to the extent possible under the law.

Be sure to provide specific details, such as names and dates. This information will allow the University to conduct a complete and thorough review of the matter.

Please note: The REPORTLINE is intended to report activities or conduct that you believe may violate a law or policy, it is **NOT** meant to report emergencies.

If you require emergency assistance or believe a crime is in progress, please contact UConn Health Police.



Phone: 1-888-685-2637



Web reporting address:

<https://uconncares.alertline.com/gcs/welcome>

UConn's NON-RETALIATION POLICY

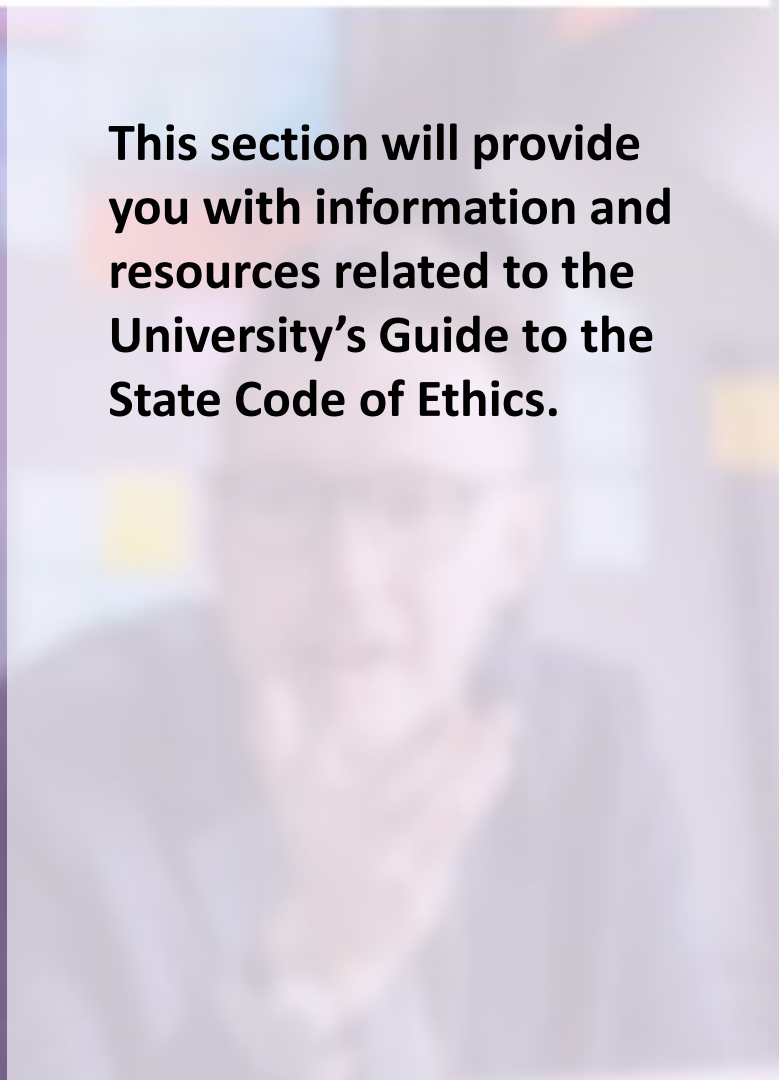
Be aware that UConn strictly prohibits retaliation against any individual who, in good faith, reports a concern or who participates in the investigation of alleged violations of law or policy.

University policy prohibits retaliation if you report in good faith a compliance concern to any supervisor, faculty member, administrator, the Office of University Compliance, the **REPORTLINE** or any appropriate agency outside of the University

3. STATE CODE OF ETHICS



This section will provide you with information and resources related to the University's Guide to the State Code of Ethics.



Key Reminders

Law	Policy	Ethics Liaison	Purpose
Part of the Connecticut General Statutes	University's policy is based upon the State Code	Kimberly Fearney is the Ethics Liaison at all UConn Health and UConn Campuses	Intended to prevent individuals from using their public position or authority for personal financial benefit or the financial benefit of certain others

We have an individual responsibility for compliance with the State Code of Ethics.

Note: Violations can result in fines of up to \$10,000 per violation.

View the policy here:

<https://policy.uconn.edu/2011/05/24/guide-to-the-state-code-of-ethics/>

A conflict of interest (COI) occurs when an individual's personal interests diverge from his/her obligations as a state employee.

COI may take many forms including:



Gifts



Financial
Benefit



Outside
Employment



Appearance
Fees



Contracts with
the State

Because the gift rules can be a bit complicated (depending on the situation), our goal is to cover “the basics” to help you navigate through scenarios involving giving or receiving gifts.

Generally, employees generally may not accept gifts, discounts or gratuities from “prohibited donors”, which include:

Anyone doing or seeking to do business with the University

A lobbyist
(current list can be found on the Office of State Ethics website)

A contractor pre-qualified by Department of Administrative Services (DAS)

Gifts by Non-Restricted Donors

If you are offered a gift by a non-restricted donor because of your public position, the total value of benefits received must not exceed \$100 annually from a single source

Gifts among supervisors and their employees are limited to up to \$100 per-gift



There are several gift exceptions where it may be appropriate to accept or give gifts, including:

- Items offered to the public at large
- Items valued at less than \$10 with annual total equaling less than \$50
- Food and beverage less than \$50 total in a calendar year from each donor and only if the person paying is in attendance
- Gifts valued at less than \$100 from a supervisor or employee
- Major life events
- Gifts to the state

Please contact the Ethics Liaison or refer to the University Guide to the State Code of Ethics for further guidance.

Ethics Liaison:

Kimberly Fearney
AVP & Chief Compliance Officer
860.486.2530

fearney@uchc.edu
compliance.uconn.edu/

Am I allowed to work in a job or have a business outside of my job at UConn Health or after I leave UConn Health?

Outside jobs or businesses are permitted within certain parameters of the State Code of Ethics.

Individuals considering outside employment or business should review the Code of Ethics and other applicable rules. Prohibitions include the:

- Use of state position to obtain another job
- Compromise of independent judgment
- Use of state resources for outside employment
- Disclosure of confidential information from state service
- Benefit private employer in any way through your official actions

“No employee may accept outside employment that will impair his or her independence of judgment with regard to their state duties or would encourage the disclosure of confidential information gained in state service”.

**- University Guide to the
State Code of Ethics**

WHAT IS IT?

Consulting is an activity in which the faculty member receives compensation for services rendered while not acting in one's official state capacity.

REQUIREMENTS

There are many rules related to what activities are acceptable and these may be found on the Faculty Consulting Website.

The most important rule is that permission must be obtained at least one day prior to the start of the activity.

Consulting request forms are submitted on-line using the link on the Faculty Consulting website.

For questions or assistance:

Dr. Scott Wetstone, Director
Health Center Administration
860.679.4440
wetstone@uchc.edu

Faculty Consulting Policy & Resources:

<https://policy.uconn.edu/2011/05/17/policy-on-consulting-for-faculty-and-members-of-the-faculty-bargaining-unit/>

Please be aware, the Code of Ethics prohibits the acceptance of appearance fees, which is any payment or honorarium given for an appearance, speech or article, if:

You were asked to participate because of your state employment.

Were representing the University.

On time owed to the University.

It is always best to seek guidance about specific situations.



While employees may not personally accept appearance fees for participating as a state employee, they may accept payment or reimbursement of “necessary expenses”, including travel, lodging, meals, and related conference expenses. Necessary expenses may be accepted for expenses the University would normally pay or reimburse for.

If you receive payment or reimbursement of necessary expenses, you **MUST** report this to the Office of State Ethics through their online system within **30 days** of payment or reimbursement. This is a state requirement. Failure to report in a timely manner may result in fines.

Necessary Expense Form ETH-NE

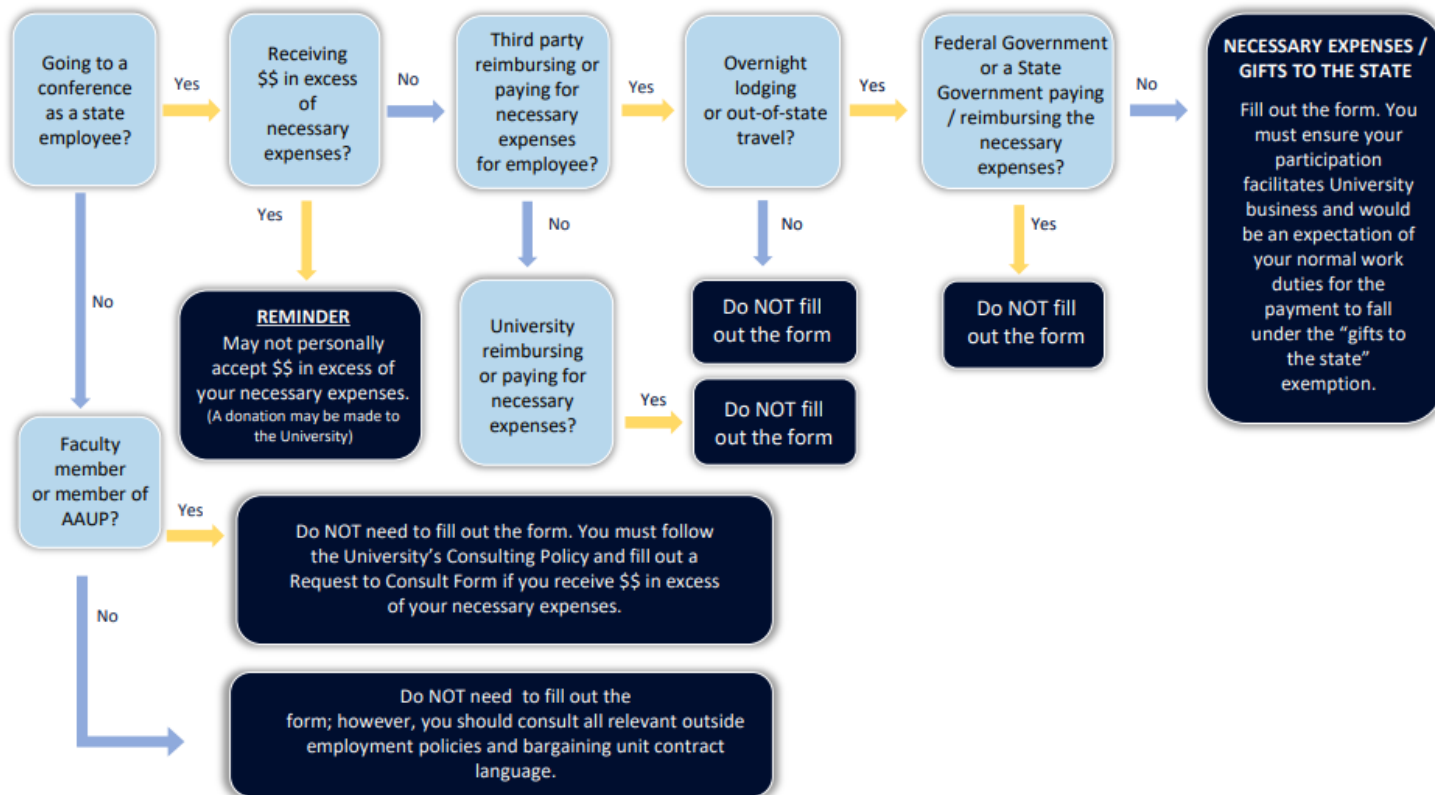
<https://www.oseapps.ct.gov/NewLobbyist/NecessaryExpenses/NEHome.aspx>

Effective October 1, 2018

What is required?	When does this apply?	How could this impact you?
<p>State employees must file an online report with the Office of State Ethics within 30 days after receiving certain goods or services under the Code of Ethics' "gift to the state" exception.</p> <p>This requirement is <u>in addition</u> to the existing reporting of "necessary expenses" obligation.</p>	<p>This requirement applies to goods or services that support your participation at an event (e.g., a conference) that facilitates a UConn Health action or function (i.e. the event is relevant to their state job) and:</p> <ul style="list-style-type: none">• include lodging or out-of-state travel and• are provided by donors other than the federal or another state government.	<p>Employees who fail to report within the 30-day period intentionally or due to gross negligence must return to the donor the value of the goods or services received and may be subject to additional penalties.</p> <p>For more information on how to file an online report to the Office of State Ethics visit:</p> <p>Office of State Ethics https://www.ct.gov/ethics</p>



To assist us with determining if necessary expenses or gifts to the state are permissible and must be reported, the Office of University Compliance created the following [flowchart](#). This and other helpful resources can be found at compliance.uconn.edu.



As an employee, you may be faced with a conflict of interest if you are required to take action in your UConn Health role that could result in a direct monetary gain or loss for yourself, certain family members or a business with which you are associated.

UConn Health Employees:

- May not take official action on matters that present a substantial or potential conflict
- Must abstain from action that would affect the financial interest of themselves, their immediate family, or an associated business
- Must prepare a written statement to an immediate supervisor for reassignment

Policy on Employment and Contracting for Service of Relatives

<https://policy.uconn.edu/2011/05/24/employment-and-contracting-for-service-of-relatives-policy-on/>

Disclosure of Conflict of Interest Form

https://www.ct.gov/ethics/lib/ethics/forms/eth-coi_11-25-08.pdf

UConn Health Employees may not:

Use their official position or confidential information gained in their service for personal financial benefit (including benefit of a family member or associated business)

Note: “Confidential Information” is any information not generally available to the public

Both situations could improperly influence the independent judgment needed to carry out state responsibilities.

Use state time, personnel or materials, for personal, non-state related purposes

Note: Incidental use of state property for personal use is permissible as long as you reimburse the state for any identifiable charges

Example:
Employees may NOT be the direct supervisor of or take any action which would affect the financial interests of one’s relative.



Any employee that wishes to enter into a contract with UConn Health or any state agency (either personally or on behalf of your own or a family member's business) that is valued at \$100 or more may do so ***only through an open and public bidding process.***

For more information refer to Procurement Operations and Contracts.

<https://health.uconn.edu/procurement-operations-contracts/>

Under the State Code of Ethics, current or potential state contractors are considered restricted donors.

Contractors must comply with restrictions regarding certain facets of the contract relationship such as gifts, fees or other payments, and outside employment during the bidding process as well as after a contract is awarded.

Be cautious to avoid or appropriately manage actual or potential conflicts of interest.

Do not provide any solicited or unsolicited information to a contractor that is not available to other bidders and could result in a competitive advantage.

It is prohibited to give anything of value to an individual hired by the state as a consultant or an independent contractor in order to influence that individual.

Employees are not prohibited from seeking political office as long as it is not done on state time or with state equipment

No employee will use state materials or equipment for the purpose of influencing a political election

No employee of the University will engage in partisan political activities while on state time

Please Note:

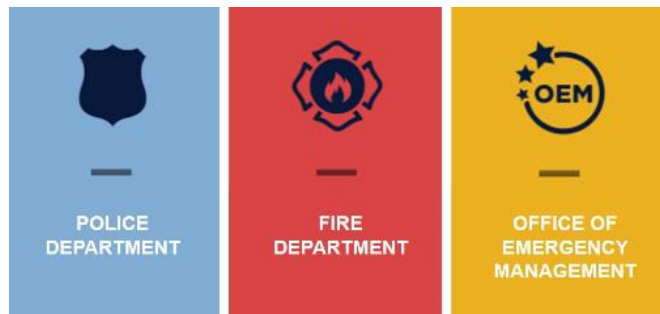
- Employees may never use confidential information for financial gain
- Employees may not represent anyone concerning any matter in which you personally and substantially participated while in state service
- Employees may not, for one year, represent anyone before your former agency for compensation
- If an employee participated substantially in the negotiation or award of a state contract valued at \$50,000 or more, they may not accept employment with a party to the contract for one year after leaving state service, if they resign within one year after the contract was signed

4. Public Safety at UConn Health

This next section will provide you with helpful resources and information related to public safety at UConn Health.



The University of Connecticut takes pride in protecting its community and has a comprehensive set of programs in its Division of Public Safety, consisting of the Police Department, Fire Department, Office of Emergency Management, as well as Public Safety Dispatch Center.



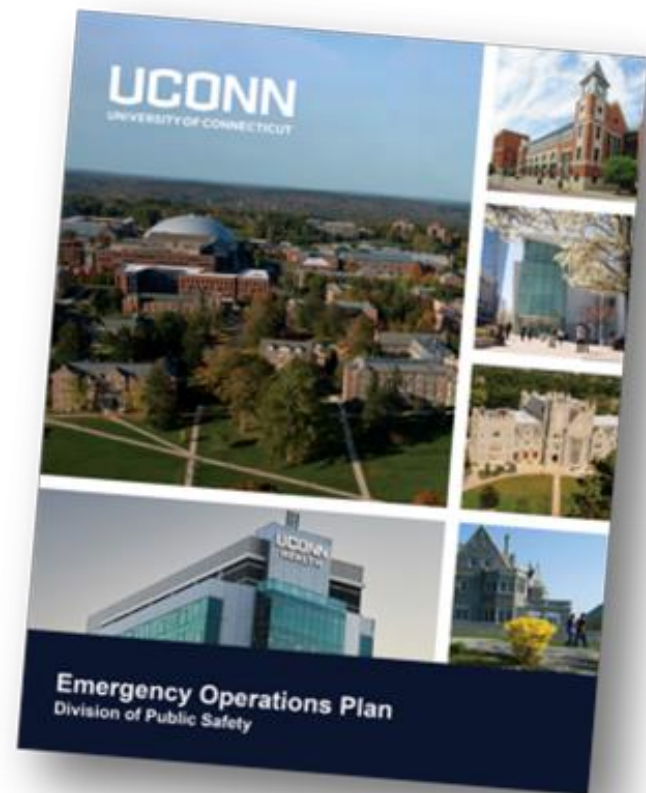
UConn campuses, assisting you with emergency preparedness plans or responding to emergencies, each of these departments work together to actively promote the safety of the entire UConn Health and UConn community.

Let's take a closer look at a few helpful resources available to you.



An all-hazards plan that provides key information to guide incident management efforts across the University. The EOP contains:

- Concepts and activities of planning, response, & recovery
- Common concept of coordination (internal and external)
- Expectations & processes
- Roles & responsibilities
- Resource management, finance, & administrative guidelines for incident management



publicsafety.uconn.edu/emergency

When it comes to your safety and the safety of the UConn Health and UConn community, it is important to be in the know. To stay current on the latest news and updates about emergency training and resources available to you, visit publicsafety.uconn.edu/emergency/.



MENU

DIVISION OF PUBLIC SAFETY

🏠 Office of Emergency Management



TRANSLATE

**YOUR EMERGENCY PLAN
STARTS HERE**

Office of
Emergency



*The definitive source for information
during emergencies*

www.alert.uconn.edu







Another great resource to keep in mind is UConn ALERT, which is the University's official emergency alerting system regarding

- emergencies
- campus operating status
- major changes to University schedules, including weather closings

In the event of an emergency that poses an immediate threat to one of our campus communities, the UConn Alert system will be activated.

Some threats, such as severe weather, come with warning and allow for appropriate cautions and preparation. Others, such as a gas leak or an active threat situation, require real-time response and action to ensure your safety. Read the Emergency Hazard Guide to learn how to prepare for and respond to different types of emergencies.



 ACTIVE SHOOTER / ACTIVE THREAT	 ALL CLEAR	 BOMB THREAT
 EVACUATE	 EXTREME TEMPERATURE	 BUILDING FIRE
 INFECTIOUS DISEASE	 LOCKDOWN	 POWER OUTAGE
 SEVERE WEATHER	 SHELTER-IN-PLACE	 SUSPICIOUS PACKAGE
 TORNADO		

The Emergency Hazard Guide :

Helps you prepare
for & respond to
different types of
emergencies

Defines
emergency
terminology

Can be accessed
directly on your
computer's
desktop

The Emergency Hazard Guide

<https://publicsafety.uconn.edu/emergency/hazard-guide/>



For more information on Public Safety call 860-486-4800

For routine calls of service, call 860-679-2121

publicsafety@uconn.edu

<https://publicsafety.uconn.edu/>

5. Key Reminders

This next section serves to provide you with important reminders and updates related to key policies and resources.

Note: At the end of this section you will be asked to review and submit a training attestation form. Remember, this step must be completed to receive credit for your participation in this training.



At UConn and UConn Health, people share a fundamental right to work, learn and live in a safe and non-discriminatory environment.

The University of Connecticut is committed to maintaining this type of environment and has longstanding policies and statements against discriminatory and sexual harassment, including related interpersonal and sexual violence.

Additionally, the Office of Institutional Equity or OIE supports the University's efforts to foster a culture of equity and inclusiveness across all University campuses.

Office of Institutional Equity

860-679-3563

equity@uconn.edu

<https://equity.uconn.edu>



Supervisors have a heightened duty to report to OIE reports or concerns about discrimination and harassment.

Deans, directors, department heads, and supervisors are obligated to report any discrimination, harassment, or inappropriate amorous relationship where the complainant or respondent is an employee as soon as it is known to them.

Failure to report this information is a policy violation in and of itself.

Policy Against Discrimination, Harassment, and Related Interpersonal Violence

<https://policy.uconn.edu/2015/12/29/policy-against-discrimination-harassment-and-related-interpersonal-violence/>

Virtually all employees, regardless of supervisory responsibility, must report incidents, of sexual assault, intimate partner violence, stalking, to OIE when reported to them by a student.

This reporting informs the University of the general extent and nature of such types of prohibited conduct on and off campus, so the University can formulate appropriate campus-wide responses and resources for those involved, track patterns, and evaluate the scope of the problem.

So, what should you do if you receive a disclosure from a student of sexual assault, intimate partner violence or stalking?

Report such information as soon as possible to the Office of Institutional Equity at **860-679-3563**.

Also for more information, visit OIE's website at equity.uconn.edu or email equity@uconn.edu.

When reporting to OIE, be prepared to share relevant details with OIE. As a reminder, this was explained in detail in the SABA module you were assigned "Sexual Harassment and Related Interpersonal Violence: Policies and Response"

Remember, safety is of the highest priority. If there is an imminent or ongoing threat to an individual or the community, you should immediately alert the police.

UConn is committed to providing equal access and full participation for individuals with disabilities within all University programs and activities. At UConn Health, student and workplace accommodations are processed and facilitated by the Department of Human Resources.

If you have any questions regarding accommodations for students, employees, or residents with disabilities, please contact the ADA Accommodations Case Manager, Kristin Donofrio at 860-679-2831 or via email at donofrio@uchc.edu.

For additional information visit:
accessibility.uconn.edu/uconn-health.



**UConn
Health is
committed to
providing
equal access**

As part of your job responsibilities, you may come in contact or work with personal information of patients, students, employees, research subjects or other constituents. Keep in mind that various privacy laws, regulations and policies require that this type of information be maintained as confidential and stored securely.

The term confidential data refers to any personally-identifiable information that if improperly disclosed could be used to steal an individual's identity, violate the individual's right to privacy or otherwise harm the individual and/or the institution. The data types considered confidential are defined in UConn Health's Confidentiality policy.

The Privacy Office serves as a central resource for privacy related issues and assists in the development of programs and practices to meet relevant privacy requirements and standards.

If you have a privacy related questions or concerns contact the Privacy Office at privacyoffice@uchc.edu or at 860.679-7226.

For additional tools and resources, visit privacy.uconn.edu.

6. Preventing Fraud, Waste, and Abuse



Every year, millions of federal and state dollars are improperly spent because of fraud, waste and abuse.

We have a collective responsibility to minimize waste, avoid abuse of valuable UConn Health and state resources and, particularly, to prevent actions that would constitute fraud.

What is Fraud, Waste and Abuse

High

Ex: Billing for services or supplies that were not provided

Fraud

Involves the intent to deceive for personal or financial gain

Moderate

Ex: Improper billing, such as upcoding

Abuse

Results from “bending the rules”, ignoring established policies and procedures, and misusing resources

Low

Ex: Medically unnecessary service

Waste

Results from errors, inefficiencies, knowledge deficit, policy or procedural weaknesses

The four W's of Fraud and Abuse

WHO

Anyone as long as there is a means, a motive and an opportunity

WHAT

Situations motivated by internal and external pressures such as financial stress, performance expectations, or even well-meaning institutional goals

WHEN

Whenever an opportunity exists where there are weakened internal controls, breakdowns in processes, confusing practices or lack of definitive process

WHY

Improper actions that occur as a one-time event may escalate and over time, become justified in the eyes of the individual or entity

Fraud and Abuse Laws

The federal and state governments have a long history of regulating health care practices to prevent fraud, waste and abuse. These include but are not limited to:

- False Claims Act
- Anti-Kickback Statute
- Physician Self- Referral Statute
- Exclusion Statute
- Criminal Health Care Fraud Statute



False Claims Act

This law prohibits the submission of false or fraudulent claims to the Government.

You do not have to intend to defraud the government to violate this law. You can be liable for violating this law if you act with deliberate ignorance or reckless disregard of the law.

The False Claims Act generally applies to any type of government claim for payment, but the federal government aggressively pursues False Claims Act enforcement within the health care industry.

Examples of violations of the false claims act would be:

- Knowingly submitting a claim -
- Indicating a higher level of service than was actually provided

OR

- Knowingly submitting a claim -
- For a service or supply that was never provided

Anti-Kickback Statute

Prohibits asking for or receiving anything of value in exchange for referrals of Federal health care program business.

Examples of violations the anti-kickback statute:

- Waiving copays or deductibles for patients without determining if the patient has a financial hardship
- A referral for services in return for financial remuneration. Providing professional courtesy care to coworkers, friends, and family members may be done with the best intentions, but if a government medical program is attached to the care, it is a violation not to collect co-pays. Referring patients to friends and family members for services or treatment in return for a fee is also a violation of the law.

SAFE HARBOR REGULAITONS

[View them here](#)

Physician Self-Referral Statute

The Self-Referral Prohibition Statute is also commonly known as the Stark Law. This law prohibits a physician from making a referral for certain “designated health services” (DHS) to an entity in which the physician or an immediate family member has an ownership/investment interest or a compensation arrangement.

There are certain Stark exceptions that may be considered only after careful review.

For more information regarding Stark and Anti-kickback, refer to UConn Health [Stark and Anti-kickback Compliance](#) policy.

Examples of violations of the Physician Self referral include:

- Referring patients to a business in which the provider has an investment interest
- paying or receiving bribes in connection with claims to the Medicare program

STARK AND ANIT-KICKBACK COMPLIANCE POLICY

[View it here](#)

Exclusion Statute

Exclusion from participation in federal healthcare programs is mandatory for any provider or supplier convicted of Medicare fraud or other Medicare-related offenses as well as patient abuse/neglect, theft/financial misconduct or unlawful conduct associated with controlled substances.

Criminal background and Federal sanctions checks prior to employment or the initiation of a contract and regularly thereafter are essential.

For more information, refer to the UConn Health [Background and Sanctions Checks](#) policy.



**BACKGROUND AND
SANCTIONS CHECK
POLICY**

[View it here](#)

Criminal Health Care Fraud Statute

Federal statute that prohibits knowingly and willfully executing or attempting to execute a scheme to defraud any health care benefit program or obtain, under false pretenses, money or property of any health care benefit program. Proof of actual knowledge or specific intent to violate the law is ***not*** required.

An example of violations of the Health Care Fraud Statute include:

- Submitting false claims to the government

Penalties for Violation

Violations of any federal or state statutes may result in civil monetary penalties, fines, imprisonment, or the exclusion of an individual/entity from participation in Federal healthcare programs.

You may also be subject to internal disciplinary action up to and including dismissal.

**FRAUD, WASTE AND
ABUSE PREVENTION AND
EDUCATION IN
HEALTHCARE POLICY**

[View it here](#)

Avoiding Violations

- Am I being offered an investment interest for a nominal capital contribution?
- Is the venture promising high rates of return for little or no financial risk?
- Am I being asked to guarantee referrals or orders of supplies as part of the contract?
- Will I be more likely to either refer patients or refer more patients to the venture as a result of this relationship?

Minimizing Fraud and Abuse

In order to minimize the opportunity for fraud and abuse at UConn Health, employees and managers must follow established policies and appropriate departmental procedures:

- Avoid short cuts or other practices that compromise processes.
- Assume responsibility only for activities for which you are authorized.
- Ask questions or seek guidance if you are unclear or uncomfortable with a task or responsibility.

Minimizing Fraud and Abuse

Accurate documentation is also crucial for minimizing the opportunity for fraud and abuse. This includes -

- Determining medical necessity in a given encounter.
- Avoiding upcoding or undercoding services.
- Choosing the correct level of Evaluation and Management (E & M) service.
- Appropriately documenting split/shared E & M services.
- Documenting intern/resident/fellow supervision correctly by the teaching physician.
- Assigning DRGs appropriately.
- Using modifiers appropriately (e.g. Modifiers 25 and 59).
- Documenting accurately in the electronic health record (EHR) (e.g. when using copy and paste to bring documentation forward).

Report It

Office of Healthcare Compliance

860.679.1802

compliance.officer@uchc.edu

University Reportline

888.685.2637

[uconncares.alertline.com/gcs/
welcome](http://uconncares.alertline.com/gcs/welcome)

Office of the Inspector General (OIG)

800.424.5197

www.oig.doc.gov

Reporting is Encouraged – UConn Health encourages the reporting of known or suspected compliance concerns.

Retaliation is Prohibited – Retaliation against good faith reports is strictly forbidden.

You are Protected – UConn Health's Non-Retaliation policy defines how the University provides for the protection of those who, in good faith, participate in investigations or reports of compliance concerns.

It is important that we understand and adhere to the various healthcare rules, regulations and laws.

Healthcare Compliance Website

View it here.

The Office of Healthcare Compliance

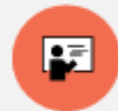
860-679-4180

compliance.officer@uchc.edu

The Office of Healthcare Compliance (formerly part of the Office of Healthcare and Regulatory Compliance) serves to:



Develop, implement, and monitor UConn Health's healthcare compliance program.



Provide effective education and development regarding healthcare compliance matters.



Receive and respond to reports of alleged non-compliance with healthcare policies and/or laws.



Conduct healthcare monitoring activities.



Develop internal compliance plans to address issues identified within the Office of the Inspector General (OIG) work plan.

Thank You.

To ensure you receive credit for completing this training, please review and agree to the attestation statement.





2019 COMPLIANCE TRAINING

ACKNOWLEDGEMENT FORM

By signing this, I acknowledge that:

- I have received annual compliance training, which included an overview of the University of Connecticut Code of Conduct, University Guide to the State Code of Ethics, as well as information related to the Division of Public Safety, preventing Fraud, Waste and Abuse, and other key policies and resources.
- I have been informed how to ask questions of or to report concerns to the Office of University Compliance, Healthcare Compliance Office, the Division of Public Safety, and other University units.
- I understand that University policy prohibits retaliation against any individual asking questions or reporting concerns to the appropriate authority.
- I understand that violations of the Code of Conduct or the University Guide to the State Code of Ethics may result in disciplinary measures or sanctions by the University and/or Office of State Ethics as appropriate.

Printed Name

Employee's Signature

Department

Date