Compliance and Ethics Education

Office of Healthcare and Regulatory Compliance
Welcome to UConn Health

Compliance and ethics education is required by federal, state, University of Connecticut and UConn Health mandates for all new employees as well as annually thereafter.

As you complete this training, click on the links to view additional information or to locate applicable University or UConn Health policies.

For questions contact:
Office of Healthcare and Regulatory Compliance
860.679.4180
compliance.officer@uchc.edu
new employee education
new employee education

What is Compliance?

Compliance is about “doing things right” according to:

- Laws and regulations
  - Federal, State and Local
- Standards
  - Accreditation and Research
- Policies
  - University, UConn Health and Department
What is ethics?

Ethics is about “doing the right thing” regardless of what the law says and reflects the University’s core values:

- Knowledge
- Honesty
- Integrity
- Respect
- Professionalism

A culture of sound ethics facilitates compliance with laws.
Healthcare compliance and ethics encompass laws, regulations, standards and doing the right thing in areas such as patient care, billing, reimbursement, student and resident education, contracting, research and information privacy and security.

As healthcare becomes increasingly complex, individuals and institutions must understand and adhere to applicable laws to avoid consequences such as negative publicity, fines, loss of funding, or exclusion from participation in federal health care programs.
How can we help you?

The UConn Health Office of Healthcare and Regulatory Compliance facilitates individual and institutional compliance, ethics and integrity through education, consultation, monitoring of risks and investigation of potential violations.

Contact the Office of Healthcare and Regulatory Compliance with questions or concerns related to healthcare laws and regulations or UConn Health policies and procedures.
Office of Healthcare and Regulatory Compliance

Reporting Compliance Concerns
Where do I go if I have a compliance question or concern?

UConn Health strongly encourages individuals to bring forward concerns and/or complaints related to violations of state or federal law, University policy, rules or regulations.

It is not only your right but your obligation to report known or suspected non-compliance or unethical practice.
You can report to:

• Your supervisor or other administrator

• The Office of Healthcare and Regulatory Compliance

• [Online REPORTLINE](https://www.uchc.edu)

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- Your supervisor or other administrator
- The Office of Healthcare and Regulatory Compliance
- [Online REPORTLINE](https://www.uchc.edu)
Retaliation against any individual who, in good faith, reports or who participates in the investigation of alleged violations is strictly forbidden.

Read policy: Non-Retaliation
UNIVERSITY OF CONNECTICUT

CODE OF CONDUCT

individual responsibility institutional success
**Why do we have a Code of Conduct?**

The University of Connecticut Code of Conduct publicly outlines standards of workplace behavior expected of all members of the University/UConn Health community. It affirms each employee’s responsibility to contribute to the University’s compliance with laws, regulations and policies. The Code also includes key questions to help ensure your behavior truly represents the Code’s principles.

Your conduct should always reflect the University’s core values which are knowledge, honesty, integrity, respect, and professionalism.

Individuals are expected to act in a professional, courteous, respectful manner and to carry out their responsibilities with the utmost integrity.

Certain UConn Health policies, such as the *Rules of Conduct*, support the Code’s values and principles.
Prevention of Workplace Violence

Employees, students, volunteers, vendors, visitors and others who work in locations under the UConn Health umbrella have an obligation to uphold the policy to prevent workplace violence.

Incidents of violence that create a risk to anyone must be reported to UConn Health Police immediately.

Read Policy: Workplace Violence Prevention Policy

Refer to Form: Workplace Violence Incident Report Form
equity in education and healthcare

equal opportunity and the prevention of discrimination, harassment and interpersonal violence
Introduction

Title IX of the Education Amendments of 1972 is a comprehensive federal law that prohibits discrimination on the basis of sex in any federally funded education program or activity. The law also provides individuals protection against such discriminatory practices.

The Department of Health and Human Services’ (DHHS) Nondiscrimination in Health Programs and Activities rule implements Section 1557 of the Affordable Care Act (ACA). This is the first federal civil rights law to broadly prohibit discrimination in federally funded health programs. The rule prohibits discrimination on the basis of race, color, national origin, sex, age or disability in certain health programs and activities.
title IX
University Policy

UConn is committed to creating and maintaining a campus environment free from all forms of sexual harassment, sexual violence, intimate partner violence and stalking.

Approved by the Board of Trustees, the University-wide policy against discrimination, harassment and interpersonal violence applies to all University campuses, including UConn Health.

This policy addresses sexual and gender-based harassment, sexual assault, sexual exploitation, intimate partner violence, stalking, complicity, and retaliation.

The policy also prohibits certain *amorous relationships* where power disparities are present.
Reporting Obligations

Virtually all University employees and contract staff members must report incidents of sexual assault, intimate partner violence and stalking to the Office of Institutional Equity (OIE).

Deans, Directors, Department Heads and Supervisors must also report any discrimination, harassment or inappropriate amorous relationships to OIE.

Failure to report any known incidents as required by the University’s Policy Against Discrimination, Harassment and Related Interpersonal Violence is a violation.

Retaliation against any individual who, in good faith, reports or who participates in the investigation of alleged violations is strictly prohibited.
Amorous Relationships

Relationships between Faculty/Staff and Undergraduate Students
• Faculty and staff are prohibited from pursuing or engaging in an amorous relationship with any undergraduate student.

Relationships between Faculty/Staff and Medical/Dental/Graduate Students
• Faculty and staff are prohibited from pursuing or engaging in an amorous relationship with a graduate student actually under that individual’s authority.
  • “Authority” includes teaching, formal mentoring or advising, supervision of research, employment, grading, or disciplinary action.

Relationships between Supervisors and Subordinates
• Faculty and staff are prohibited from pursuing or engaging in an amorous relationship with employees whom they currently supervise.
Sexual or Intimate Partner Violence and Stalking

Essentially, all employees are considered “responsible employees.”

This means when a student discloses or you receive a report of:

Sexual Assault  Stalking  Intimate Partner Violence  Report to OIE

If you witness a sexual assault and/or an incident of intimate partner violence or stalking, call 911 immediately. You should then contact OIE.

For information, assistance and resources:
Sexual Assault, Intimate Partner Violence and Stalking Awareness Website
Safety is the highest priority. You are strongly encouraged to call 911 and/or UConn Health Police with any health or safety concerns.

Your report to OIE should include:

- Date, time and location of the assault.
- Details known to you about the assault.
- Date the incident was reported to you.
- Identity of the victim and perpetrator (if disclosed or known).
- Your identity and contact information.

Office of Institutional Equity
16 Munson Road, 4th floor
860.679.3563
equity@uconn.edu
Sexual or Intimate Partner Violence and Stalking

Remember, in addition to the obligation that all employees must report disclosures of sexual assault, intimate partner violence and stalking involving students, Deans, Directors, Department Heads, and Supervisors are required to report to OIE any possible violations of the Policy Against Discrimination, Harassment and Related Interpersonal Violence that involve any UConn employee such as:

- discrimination.
- harassment.
- inappropriate amorous relationships.

For more information:
UConn Health Sexual Assault, Intimate Partner Violence and Stalking Reporting and Resources Brochure
Service and Emotional Support Animals on Campus

Under the Americans with Disabilities Act (ADA), service animals are allowed on the UConn Health campus or in areas owned or controlled by UConn Health to assist individuals with disabilities.

Members of the University community may not interfere with a service animal or its duties.

Employees must contact the Human Resources in advance of reporting for work with an animal.
Service and Emotional Support Animals on Campus

Patients and visitors may bring service animals to any non-restricted campus area without advanced approval.

In certain restricted clinical settings, prior authorization by appropriate clinical administrators may be needed for service animals.

Emotional support animals may accompany patients to any area only with advanced manager permission.

Refer to:
- UConn: Animals on Campus
- UConn Health Clinical Practice Procedures Regarding Animals
Non-discrimination under the Affordable Care Act

ACA non-discrimination

Civil Rights Act

Race, color, national origin

Rehabilitation Act

Disability

Age Discrimination Act

HIV/AIDS status

Title IX

Sex

Gender identity and sex stereotyping
Definition of sex discrimination

Under the *Nondiscrimination in Health Programs and Activities* rule, sex discrimination includes, but is not limited to, discrimination based upon:

- an individual’s sex.
- pregnancy, childbirth, related medical conditions, pregnancy termination.
- gender identity.
- sex stereotypes.

The rule provides explicit protections for:

- lesbian, gay and bisexual (LGB) individuals on the basis of sex stereotypes.
- transgender individuals and gender minorities on the basis of gender identity.
Meaningful access to health programs

Entities must provide effective language assistance services to individuals with limited English proficiency (LEP), in a timely manner and free of charge.

Qualified interpreters must be offered when oral interpretation is a reasonable step to provide meaningful access to health programs.

Taglines (short statements in non-English languages) to notify individuals of the availability of language assistance services must be included in an entity’s significant publications and posted in prominent locations, including its website.

Consistent with principles of civil rights law, the rule prohibits segregation, delay or denial of services or benefits based on an individual’s race, color or national origin.
Meaningful Access to Health Programs

Buildings in which health programs or activities are conducted are subject to the *Accessibility Standards for Buildings and Facilities* under the ACA.

Standards include, among other requirements, signage to be posted at inaccessible entrances directing individuals to an accessible entrance location.

Entities must use the International Symbol of Accessibility.
Auxiliary aids and services must be provided, including:

- Qualified sign language interpreters.
- Captioning.
- Large print materials.
- Screen reader software.
- Text telephones (TTYs).
- Video remote interpreting services.

Entities must ensure that communications with individuals with disabilities are as effective as communications with others.
Effective communication

UConn Health must ensure effective communication with patients and their companions who are deaf or hard of hearing related to all aspects of the patient’s care.

Responsible staff members must:

• assess each individual’s specific needs to determine the type of aid or service that may be necessary, considering the expressed preference of the patient and/or companion.

• document the determination in the medical record and patient registration system.

• reassess and document the effectiveness of the auxiliary aid or service.

Individuals who may have contact with patients or others that are deaf or hard of hearing should review the UConn Health policy.

Read Policy:
Effective Communication with Individuals Who Are Deaf or Hard of Hearing
Publications describing or inviting participation in UConn programs or activities must contain a non-discrimination statement as part of our commitment to equal opportunity and access to the University’s health and other programs/activities.

Departments producing applicable publications must incorporate the required non-discrimination statement into existing, revised and new material.

Event-specific publications must include an accessibility statement to ensure the opportunity for participants with disabilities to request accommodations and fully participate in events or activities.

For questions related to University non-discrimination, Affirmative Action and Equal Employment Opportunities policies and reasonable accommodations contact:

Office of Institutional Equity
860.679.3563
equity@uconn.edu

Refer to:
Non-Discrimination Policy Statements for Publications
state code of ethics
No responsibility of Government is more fundamental than the responsibility for maintaining the highest standards of ethical behavior by those who conduct public business.

There can be no dissent from the principle that all officials must act with unwavering integrity, absolute impartiality and complete devotion to the public interest.

This principle must be followed not only in reality but in appearance. For the basis of government is public confidence, and that confidence is endangered when ethical standards falter or appear to falter.

President John F. Kennedy
code of ethics

**Individual Responsibility**

Although compliance with the State Code of Ethics applies *only* to UConn Health employees, it is important for all members of the UConn Health workforce to be familiar with the principles of the Code.

This section summarizes specific provisions of the State Code of Ethics.

- As employees, our primary obligation is to act in the best interest of UConn Health and the State of Connecticut.
- You may not use your position or authority for your own or your family members’ financial gain.
What are the rules regarding accepting gifts?

In some situations it is perfectly fine to accept items from vendors. But, it’s important to know the limits allowed under the State Code of Ethics.

For more information click below:

- **Personal Gifts**
- **Supervisor/subordinate gifts**
- **Food and Beverage**
- **Gifts to the State**
Personal Gifts

A “gift” is defined as anything that you or, in some circumstances, your family member directly and personally receives unless you pay for the item.

There are limits on the value of gifts that may be accepted:
• from companies doing or seeking to do business with UConn Health (under $10 is generally OK).
• from patients or students (under $100 is generally OK).
Gifts between Supervisors and Subordinates

Gifts to or from supervisors or subordinates anywhere within one’s chain of command must be valued at no more than $99.99 per gift.

Pooling money for group gifts that would exceed the $99.99 limit is not permitted.

Exceptions to this limit are those gifts given for a major life event including:
• Birth or adoption of a child
• Wedding or civil union
• Funeral
• Ceremony for induction into religious adulthood (such as bar mitzvah or confirmation)
• Retirement from public service or state employment

There are no limits on the value of gifts between co-workers outside of each other’s chain of command.
Food & Beverage

Employees may accept food and beverage from vendors at educational presentations or other meetings.

There are limits on the total value of food and beverage that each employee may accept (generally up to $50 per vendor per calendar year).

Remember, in order to accept the food and beverages, the vendor representatives must be present when they are consumed. Employees may not accept items such as restaurant gift certificates in any amount if the vendor will not be present when the food is consumed.
Gifts to the State

Gifts to the State are goods or services given to a state agency like UConn Health that facilitate state functions and:
• will be used on state property (e.g. a computer or other equipment) *or*
• support a state/UConn Health event (e.g. an educational seminar) *or*
• support an employee’s participation in an event that is relevant to his or her UConn Health/state duties. Supervisor approval is required.

Payment for participation in an event may *not* include costs for family members, guests or entertainment.
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.

For more information click below:

- **Outside or post-state employment**
- **Employee contracts with the state**
- **Hiring a supervisor/subordinate for a private business**
Outside or Post-State Employment

“Employment” is defined as any work or endeavor undertaken to obtain financial gain such as an employee of a business, sole practitioner, independent contractor, or investor.

Work conducted outside of UConn Health must not interfere with your independent judgment regarding your state duties or encourage disclosure of any type of UConn Health confidential information (e.g. patient, employee, student, or financial).

State time, resources or personnel may not be used for any type of personal endeavor.

Certain limitations also apply after leaving state service.
Employee Contracts With a State Agency

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.

Refer to Procurement Operations and Contracts for more information.
Hiring a Supervisor or Subordinate for Private Work

State employees may not employ their supervisors or subordinates who are anywhere in their chain of command to work in an outside business or to perform other personal work.

Both situations could improperly influence a supervisor’s or subordinate’s independent judgment needed to carry out his or her state responsibilities.
Are other forms of financial gain also prohibited?

The State Code of Ethics does not permit employees to use their official positions in any way for personal financial benefit.

For more information click below:

- Use of position or confidential information
- Use of state resources
State employees may not use their positions or confidential information gained in state service for their own financial benefit or the financial benefit of family members or a business with which they or their family member(s) are associated.
Use of State Resources

State employees may not use state time, personnel, materials or any other resources for personal, non-state related purposes.

*This includes telephones, computers, email systems, fax and copy machines, state vehicles or any other supplies.*

*Incidental use* of state property is permissible as long as an employee reimburses the state for any identifiable charges. *However, these situations should be infrequent and not routine.*
Are there any limitations on accepting appearance fees for an activity or payment of associated expenses?

The State Code of Ethics includes specific provisions that address payment for services and associated expenses.

For more information click below:

- Appearance fees
- Necessary expenses
Overview

Appearance Fees

An employee may not \textit{personally} accept fees or honoraria for activities such as giving a presentation or running a workshop that is carried out in his or her UConn Health capacity.

In these instances, the money may be directed to a University account for future University-related business.

\textbf{Key Points:} Consider whether the employee’s UConn Health position was a significant factor in extending the invitation to participate. If so, this rule applies.

If an employee has been invited to participate based upon his or her knowledge or expertise, the employee can likely personally accept an honorarium.

It is always best to seek guidance about specific situations.
Overview

Necessary Expenses

If a personal fee or honorarium is not permitted for an activity carried out in the employee’s state capacity, *payment or reimbursement* of expenses associated with the activity may still be accepted. Such expenses include out-of-state travel, standard lodging for the days immediately surrounding the activity, meals (non-lavish), and conference related fees.

Costs for family members/guests or entertainment are not considered necessary expenses.

*Payment or reimbursement for lodging and/or out of state travel must be reported to the Office of State Ethics within 30 days of receipt.*

Refer to the [ETH-NE form](#) and [guide](#) for specific information.
Where can I go for help?

Help with specific questions, situations or concerns is available through the Compliance Office or the Office of State Ethics.

Concerns or suspected violations of the State Code of Ethics, may also be reported anonymously to:

REPORTLINE at 888-685-2637

Contact:
- Kim Fearney, University Ethics Liaison
  - 860.486.2530
  - fearney@uchc.edu
- Office of State Ethics
  - 860.263.2400
  - ethics.code@ct.gov

Refer to:
- University Guide to the State Code of Ethics
preventing fraud, waste and abuse
Introduction

Fraud, waste and abuse cost institutions as well as state and federal governments millions of dollars each year.

As members of the UConn Health workforce, 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.
Waste is defined as a misuse of resources or practices that result in needless expenditures of UConn Health, state and/or federal funds. It often stems from individuals being uninformed, careless, or from poor decisions.

Examples of waste include:

- Purchasing unneeded equipment or supplies.
- Purchasing goods at inflated prices.
- Replacing equipment unnecessarily or failing to recycle equipment appropriately.
What is Abuse?

Abuse is defined as the improper use of funds, resources or authority that results in higher costs to UConn Health or to the state and federal governments.

Examples of abuse include:

• Misusing paid time or manipulating expense reimbursements.
• Using your state position or authority for personal financial gain.
• Accepting gifts or favors for awarding contracts to vendors.
Waste can be prevented by avoiding purchases or other practices that unnecessarily consume time, money or resources. Purchasing and contract decisions should be made only by individuals with adequate information and appropriate authority.

Abuse can be prevented by using UConn Health/state time, personnel and resources appropriately and only for *business* purposes.

*Key Points*

If it’s not related to your UConn Health job responsibilities, it is not an appropriate use of state resources.
fraud, waste and abuse

Protecting UConn Health Assets

All UConn Health employees must safeguard the State’s property and assets with which they are entrusted.

Asset control is a partnership between employees, managers and the Office of Logistics Management (OLM).

Lack of accountability results in damaging publicity, negative audit findings, reputational harm, and potential loss of funding.
Department Heads are accountable for all assets listed as belonging to their respective departments.

- Managers must ensure that appropriate *Inventory Control Forms* are submitted to OLM when assets are moved, transferred, disposed of, lost, or damaged and collaborate with OLM to reconcile asset lists as soon as they are received.

Staff should assist OLM to locate their departments’ assets during each physical inventory. A list of all assets that are not located will be returned to the department for investigation.

- Remember to submit the applicable *Inventory Control Form* to OLM before disposing of any asset.

Even if you no longer have the asset, it will remain assigned to your department on the official asset list. You will continue to be responsible for the asset until OLM receives the completed form.
OLM is responsible for:

- Tagging capital and controllable assets when they are received by UConn Health.

  Note: In situations where items do not pass through the receiving dock, departments must notify OLM.

- Scanning asset tags on equipment located in each department during the physical inventory.

- Maintaining and updating UConn Health’s official asset list based on physical inventory results and Inventory Control forms submitted by departments throughout the year.

Refer to:

- Asset Control
- Asset Control Procedures
Using electronic equipment appropriately

Employees and contract staff members are provided with electronic resources to enable them to accomplish work that is part of UConn Health’s mission.

Electronic, computing and networking equipment and software including UConn Health email must be used for *UConn Health business purposes* only.

*Read Policy: Information Technology Computer/Electronic Resource Use Policy*

*Refer to: Acceptable Use of State Systems*
What is Fraud?

Fraud is an intentional misrepresentation of information for unauthorized financial gain or to derive some other benefit.

Examples of fraud include:

• Falsifying a time report or credentials;
• Offering, soliciting or receiving a bribe or kickback;
• Diverting cash, equipment or supplies;
• Altering an accounting record or supporting documents;
• Deliberate misstatements or omissions on financial statements;
• Identity theft.
The Who, What, When, and Why of Fraud

**Who** commits fraud?
- Anyone is capable as long as there is a means, a motive and an opportunity.

**What** circumstances contribute to fraud?
- Situations motivated by internal and external pressures such as financial stress, performance expectations, or even well-meaning institutional goals.

**When** does fraud occur?
- Whenever an opportunity exists where there are weakened internal controls, breakdowns in processes, confusing practices or lack of definitive process “owners.”

**Why** does fraud happen?
- Improper actions that occur as a one-time event may escalate and, over time, become justified in the eyes of the individual or entity.
The more serious the offense, the greater the heat...

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

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

Fraud
Involves the intent to deceive for personal or financial gain.
To minimize the opportunity for fraud 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.**

Managers have a responsibility to prevent fraud by delegating responsibilities appropriately, answering questions, providing appropriate guidance and oversight of department processes, ensuring proper checks and balances with established processes and correcting procedural weaknesses.
Prevention of fraud begins with recognizing signs of possible deception such as:

- missing or altered documentation of transactions or financial statements.
- unreconciled inventory discrepancies or shortages.
- unusual or improper bidding or contract negotiation processes.
- situations in which required business processes are bypassed.
What are the laws related to fraud and abuse?

Click on each item for more information:

• **Anti-kickback Statute**

• **Physician Self-Referral Law (Stark)**

• **Criminal Health Care Fraud Statute**

• **Exclusion Statute**

• **Federal and Connecticut False Claims Acts**
 Fraud and abuse laws

Anti-Kickback Statute

Federal statute that prohibits knowingly and willfully offering, paying, soliciting or receiving anything of value to induce or reward referrals for items or services reimbursed by a Federal health care program.

Certain “safe harbors” exist but their use must be carefully reviewed.
Physician Self-referral Law (Stark)

Federal statute that 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.
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.
Fraud and abuse laws

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.

Exclusion presents both individual and institutional liability. Claims submitted for services by a provider whom UConn Health knows or should have known is excluded may result in significant institutional penalties.

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

Refer to the UConn Health Background and Sanctions Checks policy.
Federal and State False Claims Acts

Federal law:
Imposes civil and criminal liability on any person who knowingly submits or causes to be submitted a fraudulent claim to the government. “Knowingly” includes ignoring facts that may reveal false information or disregarding the need to verify information related to a claim.

Connecticut law:
Imposes liability on individuals and corporations who knowingly submit false claims to any state-administered health or human services program.
To avoid violations of Stark and Anti-kickback laws, when considering working with or investing in any business, providers should ask questions such as:

- 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?
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.

Penalties for violations of the False Claims Act rose again in 2017 and now range from $10,957 to $21,916 per claim.

Rising penalties make compliance with applicable laws and UConn Health policies more important than ever!
In order to reduce the risk of fraud, waste and abuse, accurate documentation is crucial including:

- 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).
fraud, waste and abuse

Professional Services Documentation and Coding Assistance

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Coding Trainer
860-679-5471
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Reporting Fraud

If you notice questionable activity or signs of potential fraud, report your concerns immediately to:

• Your supervisor
• The Compliance Office
  860.679.4180
  compliance.officer@uchc.edu
• Anonymously to: REPORTLINE at 888.685.2637

Employees also have the option to report concerns of potential fraud to:

• State Auditors of Public Accounts
  860.240.5300 or 800.797.1702
  ctauditors@cgac.t.gov

Key Points

• UConn Health strictly prohibits retaliation against individuals who, in good faith, report a compliance issue.
• For more information: Non-Retaliation policy.
For more information

- Department of Health and Human Services/Department of Justice: Stop Medicare Fraud
- Department of Health and Human Services/Centers for Medicare and Medicaid: Avoiding Medicare Fraud & Abuse: A Roadmap For Physicians
- University-wide policy: Prevention and Reporting of Fraud and Fiscal Irregularities
Our thanks to the following for their assistance and contributions:

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Elizabeth Conklin
Thank you for your participation in this education and for your commitment to compliance and ethics.

Please complete the training acknowledgment.

Training Questions?

Contact the Office of Healthcare and Regulatory Compliance
860.679.4180
compliance.officer@uchc.edu