

## Medicare Parts C and D General Compliance Training

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- ▶ TABLE OF CONTENTS
- ▶ ACRONYMS
- ▶ INTRODUCTION
- ▶ LESSON: BND COMPLIANCE PROGRAM TRAINING
- ▶ POST-ASSESSMENT
- ▶ APPENDIX A: RESOURCES
- ▶ APPENDIX B: JOB AIDS
- ▶ ACRONYMS

### ACRONYMS

ACRONYM	DEFINITION
CFR	Code of Federal Regulations
CMS	Centers for Medicare & Medicaid Services
EPLS	Excluded Parties List System
FCA	False Claims Act
FDRs	First-tier, Downstream, and Related Entities
FWA	Fraud, Waste, and Abuse
HIPAA	Health Insurance Portability and Accountability Act
LEIE	List of Excluded Individuals and Entities
MA	Medicare Advantage
MAC	Medicare Administrative Contractor
MLN	Medicare Learning Network®
NPI	National Provider Identifier
OIG	Office of Inspector General
PBM	Pharmacy Benefits Manager
WBT	Web-Based Training

## INTRODUCTION

Welcome to the Brand New Day (BND) Medicare Parts C and D General Compliance Training. This training models the training developed by CMS and incorporates additional information specific to BND's compliance program.

The training developed by CMS can be found in the Medicare Learning Network® (MLN).

The Medicare Learning Network® (MLN) offers free educational materials for health care professionals on the Centers for Medicare & Medicaid Services (CMS) programs, policies, and initiatives. Get quick access to the information you need.

### Publications & Multimedia

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts>

Events & Training

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNGenInfo/Events-and-Training.html>

Newsletters & Social Media

<https://www.cms.gov/Outreach-and-Education/Outreach/FFSProvPartProg>

Continuing Education

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNGenInfo/Continuing-Education.html>

This training assists Brand New Day (BND) employees, governing body members, and their first-tier, downstream, and related entities (FDRs) to satisfy their annual general compliance training requirements in the regulations and sub-regulatory guidance at:

- ▶ [42 Code of Federal Regulations \(CFR\) Section 422.503\(b\)\(4\)\(vi\)\(C\)](#)
- ▶ [42 CFR Section 423.504\(b\)\(4\)\(vi\)\(C\)](#)
- ▶ Section 50.3 of the Compliance Program Guidelines ([Chapter 9 of the Medicare Prescription Drug Benefit Manual](#) and [Chapter 21 of the Medicare Managed Care Manual](#))
- ▶ The "Downloads" section of the [CMS Compliance Program Policy and Guidance webpage](#)

Completing this training in and of itself does not ensure that BND has an “effective Compliance Program.” BND and their FDRs are responsible for establishing and executing an effective compliance program according to the CMS regulations and program guidelines.

## Why Do I Need Training?

- ▶ Every year, billions of dollars are improperly spent because of fraud, waste, and abuse (FWA). It affects everyone—including you. This training helps you detect, correct, and prevent FWA. You are part of the solution.
- ▶ Compliance is everyone’s responsibility! As an individual who provides health or administrative services for Medicare enrollees, every action you take potentially affects Medicare enrollees, the Medicare Program, or the Medicare Trust Fund.

Training Requirements: BND Employees, Governing Body Members, and First-Tier, Downstream, or Related Entity (FDR) Employees

- ▶ Certain training requirements apply to people involved in Medicare Parts C and D. All employees of Medicare Advantage Organizations (MAOs) and Prescription Drug Plans (PDPs) (collectively referred to in this course as “Sponsors”) must receive training about compliance with CMS program rules.
- ▶ You may need to complete FWA training within 90 days of your initial hire. More information on other [Medicare Parts C and D compliance trainings and answers to common questions](#) is available on the CMS website. Please contact your management team for more information.

Navigating and Completing This Course

- ▶ Anyone who provides health or administrative services to Medicare enrollees must satisfy general compliance and FWA training requirements. You may use this course to satisfy the general compliance training requirements.
- ▶ This course consists of one lesson and a Post-Assessment. Successfully completing the course requires completing the lesson and scoring 70 percent or higher on the Post-Assessment. If you do not successfully

complete the course, you can review the course material and retake the Post-Assessment.

- ▶ You do not have to complete this course in one session. You can complete the entire course in about 25 minutes.

### Course Objectives

After completing this course, you should correctly:

- ▶ Recognize how a compliance program operates
- ▶ Recognize how compliance program violations should be reported

## LESSON: BND COMPLIANCE PROGRAM TRAINING

### Introduction and Learning Objectives

- ▶ This lesson outlines effective compliance programs. It should take about 45 minutes to complete. After completing this lesson, you should correctly:
  - ▶ Recognize how a compliance program operates
  - ▶ Recognize how compliance program violations should be reported

## PRE-ASSESSMENT

### Question 1 of 5

Select the correct answer.

Compliance is the responsibility of the Compliance Officer, Compliance Committee, and Upper Management only.

- A. True
- B. False

### Question 2 of 5

Select the correct answer.

Ways to report a compliance issue include:

- A. Calling the Compliance Hotline
- B. Emailing the Compliance Officer
- C. Sending a letter to the Compliance Officer
- D. All of the above

## Question 3 of 5

Select the correct answer.

What is the policy of non-retaliation?

- A. Allows the Sponsor to discipline employees who violate the Code of Conduct
- B. Prohibits management and supervisor from harassing employees for misconduct
- C. Protects employees who, in good faith, report suspected non-compliance
- D. Prevents fights between employees

## Question 4 of 5

Select the correct answer.

Medicare Parts C and D Plan Sponsors are not required to have a compliance program.

- A. True
- B. False

## Question 5 of 5

Select the correct answer.

Examples of PHI include a person's:

- A. Name
- B. Address
- C. Social security number
- D. Treatment information such as information about doctor visits or hospitalization
- E. All of the above

## LESSON: BND COMPLIANCE PROGRAM TRAINING

### Compliance Program Requirement

- ▶ The Centers for Medicare & Medicaid Services (CMS) requires Sponsors to implement and maintain an effective compliance program for its Medicare Parts C and D plans. An effective compliance program must:
  - ▶ Articulate and demonstrate an organization's commitment to legal and ethical conduct
  - ▶ Provide guidance on how to handle compliance questions and concerns
  - ▶ Provide guidance on how to identify and report compliance violations

### What Is an Effective Compliance Program?

An effective compliance program fosters a culture of compliance within an organization and, at a minimum:

- ▶ Prevents, detects, and corrects non-compliance
- ▶ Is fully implemented and is tailored to an organization's unique operations and circumstances
- ▶ Has adequate resources
- ▶ Promotes the organization's Standards of Conduct
- ▶ Establishes clear lines of communication for reporting non-compliance
- ▶ An effective compliance program is essential to prevent, detect, and correct Medicare non-compliance as well as fraud, waste, and abuse (FWA). It must, at a minimum, include the seven core compliance program requirements.

### Seven Core Compliance Program Requirements

CMS requires an effective compliance program to include seven core requirements:

1. Written Policies, Procedures, and Standards of Conduct
  - ▶ These articulate the Sponsor's commitment to comply with all applicable Federal and State standards and describe compliance expectations according to the Standards of Conduct.
2. Compliance Officer, Compliance Committee, and High-Level Oversight
  - ▶ The Sponsor must designate a compliance officer and a compliance committee accountable and responsible for the

- activities and status of the compliance program, including issues identified, investigated, and resolved by the compliance program.
- ▶ The Sponsor's senior management and governing body must be engaged and exercise reasonable oversight of the Sponsor's compliance program.
3. Effective Training and Education
    - ▶ This covers the elements of the compliance plan as well as preventing, detecting, and reporting FWA. Tailor this training and education to the different employees and their responsibilities and job functions.
  4. Effective Lines of Communication
    - ▶ Make effective lines of communication accessible to all, ensure confidentiality, and provide methods for anonymous and good-faith compliance issues reporting at Sponsor and first-tier, downstream, or related entity (FDR) levels.
  5. Well-Publicized Disciplinary Standards
    - ▶ Sponsor must enforce standards through well-publicized disciplinary guidelines.
  6. Effective System for Routine Monitoring, Auditing, and Identifying Compliance Risks
    - ▶ Conduct routine monitoring and auditing of Sponsor's and FDR's operations to evaluate compliance with CMS requirements as well as the overall effectiveness of the compliance program.
  7. Procedures and System for Prompt Response to Compliance Issues
    - ▶ The Sponsor must use effective measures to respond promptly to non-compliance and undertake appropriate corrective action.
    - ▶ Note: Sponsors must ensure that FDRs performing delegated administrative or health care service functions concerning the Sponsor's Medicare Parts C and D program comply with Medicare Program requirements.

## **Compliance Training: Sponsors and Their FDRs**

- ▶ CMS expects all Sponsors will apply their training requirements and "effective lines of communication" to their FDRs. Having "effective lines of communication" means employees of the Sponsor and the Sponsor's FDRs have several avenues to report compliance concerns.

### **Ethics: Do the Right Thing!**

- ▶ As part of the Medicare Program, you must conduct yourself in an ethical and legal manner. It's about doing the right thing!
- ▶ Act fairly and honestly
- ▶ Adhere to high ethical standards in all you do
- ▶ Comply with all applicable laws, regulations, and CMS requirements
- ▶ Report suspected violations

### **How Do You Know What Is Expected of You?**

Now that you've read the general ethical guidelines on the previous page, how do you know what is expected of you in a specific situation?

- ▶ Standards of Conduct (or Code of Conduct) state the organization's compliance expectations and their operational principles and values. Organizational Standards of Conduct vary. The organization should tailor the Standards of Conduct content to their individual organization's culture and business operations. Ask management where to locate your organization's Standards of Conduct. This training includes information specific to BND's Code of Conduct later in the slides.
  - ▶ Reporting Standards of Conduct violations and suspected non-compliance is everyone's responsibility.
  - ▶ An organization's Standards of Conduct and Policies and Procedures should identify this obligation and tell you how to report suspected non-compliance.

### **What Is Non-Compliance?**

- ▶ Agent/broker misrepresentation
- ▶ Appeals and grievance review (for example, coverage and organization determinations)
- ▶ Beneficiary notices
- ▶ Conflicts of interest
- ▶ Claims processing
- ▶ Credentialing and provider networks
- ▶ Documentation and Timeliness requirements
- ▶ Ethics
- ▶ FDR oversight and monitoring
- ▶ Health Insurance Portability and Accountability Act (HIPAA)
- ▶ Marketing and enrollment



- ▶ Pharmacy, formulary, and benefit administration
- ▶ Quality of care

## Know the Consequences of Non-Compliance

- ▶ Failure to follow Medicare Program requirements and CMS guidance can lead to serious consequences, including:
  - ▶ Contract termination
  - ▶ Criminal penalties
  - ▶ Exclusion from participating in all Federal health care programs
  - ▶ Civil monetary penalties
    - ▶ Additionally, your organization must have disciplinary standards for non-compliant behavior. Those who engage in non-compliant behavior may be subject to any of the following:
      - ▶ Mandatory training or re-training
      - ▶ Disciplinary action
      - ▶ Termination

## Medicare Prescription Drug Benefit Manual

<https://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovContra/Downloads/Chapter9.pdf>

## Medicare Managed Care Manual

<https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/mc86c21.pdf>

## Brand New Day (BND) Code of Conduct

- ▶ BND has implemented a Code of Conduct that articulates its commitment to complying with applicable laws and regulations and expectations of each employee, Board member, and FDR.
- ▶ The Code of Conduct provides general guidance about compliance issues and how to report them, but is not an all inclusive list of all potential compliance issues. That's why it is important for employees to exercise sound judgement and ask questions when needed.
- ▶ A copy of BND's Code of Conduct can be found on the intranet.

## **Brand New Day (BND) Code of Conduct**

Here are the general rules of conduct listed in the BND Code of Conduct:

- ▶ Be Fair and Responsive in Serving Our Customers.
- ▶ Adherence to all applicable federal, state and local laws and regulations.
- ▶ Always Earn and Be Worthy of Our Customers' Trust.
- ▶ Responsible action that avoids conflicts of interest and other situations potentially harmful to the Company.
- ▶ Respect Fellow Associates and Reinforce the Power of Teamwork.
- ▶ Demonstrate a Commitment to Ethical and Legal Conduct.
- ▶ Maintain Our Business and Compliance Standards.
- ▶ Continuously Strive to Improve What We Do and How We Do It.
- ▶ We stress an atmosphere of respect for each other's right and privacy.
- ▶ BND considers work rules, guidelines and work performance important responsibilities. They are essential to the proper management of our business and ensure that employees work together effectively.

## **Brand New Day Prohibited Activities**

BND prohibits the following activities per its Code of Conduct:

- ▶ Any act of violence, threats or intimidation, fighting, using abusive or profane language, illegal, immoral or indecent conduct on Company premises.
- ▶ Retaliation against an individual who reports a suspected compliance issue in good faith or cooperates with a compliance investigation.
- ▶ Discrimination and/or harassment, regardless of whether it is Sexual, Racial, Religious, or related to another's Gender, Age, Sexual Orientation, National Origin, Genetics or Disability.
- ▶ Making a false statement or omitting pertinent information on Company Application, records of employment, forms or reports, or in the course of participation in company investigations or in responding to management inquires.
- ▶ Recording the work time of another employee or allowing any other employee to record your work time or falsifying any time records, either your own or another employee's.
- ▶ Theft, unauthorized removal or willful damage of property belonging to the Company, company employees or customers. Theft of company resources, and embezzlement, financial incentives (bribery).

- ▶ Reporting to work under the influence of alcohol and/or drugs. Using, selling, or possessing illegal drugs on company premises or while on company business. While working, employees should only possess and take drugs that are medically authorized, approved, and determined by the employee, the employee's physician, and the organization not to impair job performance or cause a safety hazard. Employees are responsible for notifying their supervisors that they are taking prescription medication if it would affect their performance on the job.
- ▶ Possession of weapons on the premises.
- ▶ Posting notices or literature, handbills, petitions, posters, or other materials on the premises without the prior approval of Human Resources.
- ▶ Conducting personal business on company time or with company equipment or resources.
- ▶ Disregard of safety rules and practice and security regulation including "horseplay", wrestling, and dangerous practical jokes, or throwing objects.
- ▶ Unauthorized entry or exit from Company property at any location at any time. Leaving the workplace without properly notifying your supervisor.
- ▶ Gambling, in any form, on company premises.
- ▶ Any other conduct that is prohibited by law. There is no substitute for good judgment and common sense.

**Reminder:** This is not meant to be a total list of work rules, but rather is illustrative of the type of conduct that will not be tolerated by BND.

## Conflicts of Interest

A conflict of interest exists when an employee's loyalties or actions are divided between BND's interests and those of another, such as a competitor, supplier, or customer. Both a conflict of interest and the appearance of a conflict of interest should be avoided.

- ▶ An employee who is unsure as to whether a certain transaction, activity, or relationship constitutes a conflict of interest or the appearance of a conflict of interest is required to discuss the situation with his or her immediate supervisor for clarification.
- ▶ If an employee or someone with whom the employee has a close personal relationship (a family member or companion) has a

personal, financial or employment relationship with a competitor, supplier or customer, the employee must disclose this fact in writing. If an actual conflict of interest is determined to exist, BND may respond to this perceived conflict as it deems appropriate based upon the circumstances.

**Examples of conflicts of interest include:**

- ▶ Accepting personal gifts or entertainment from competitors, customers, suppliers or potential suppliers.
- ▶ Working for a competitor, supplier or customer while employed by the Company.
- ▶ Engaging in self-employment in competition with the Company.
- ▶ Disclosing Universal Care / Brand New Day trade secrets or confidential proprietary information for personal gain to the Company's detriment.
- ▶ Having a direct or indirect financial interest in or relationship with a competitor, customer or supplier.
- ▶ Using Universal Care / Brand New Day assets, including computers, or labor for personal use. When an employee's interest is adverse to the Company's, the employee will not be authorized to use Company computers or other Company assets that can be used for the employee's personal gain.
- ▶ Acquiring any interest in property or assets of any kind for the purpose of selling or leasing it to the Company.
- ▶ Committing Universal Care / Brand New Day to give its financial or other support to any outside activity or organization except within the ordinary course and scope of employment.
- ▶ Developing a personal relationship with a subordinate employee of the Company that might interfere with the exercise of impartial judgment in decisions affecting the Company or any employees of the Company.
  
- ▶ BND's Code of Conduct does not attempt to describe all possible conflicts of interest that could develop. Rather, it lists some of the more common conflicts from which employees should refrain.
- ▶ Employees may pursue and participate in employment or other business activities outside of normal working hours provided such arrangement neither creates a conflict of interest nor detracts from performance and/or

effectiveness while working for BND, and provided the employee does not offer or provide such services to BND.

- ▶ Any employee who has other employment must disclose such employment to his or her supervisor so that an evaluation can be made as to whether a conflict of interest exists. The failure to adhere to this guideline, including the failure to disclose any potential conflicts or to seek an exception, will result in disciplinary action up to and including termination.

## NON-COMPLIANCE AFFECTS EVERYBODY

Without programs to prevent, detect, and correct non-compliance, we all risk:

- ▶ Harm to beneficiaries, such as:
  - ▶ Delayed services
  - ▶ Denial of benefits
  - ▶ Difficulty in using providers of choice
- ▶ Other hurdles to care Less money for everyone, due to:
  - ▶ High insurance copayments
  - ▶ Higher premiums
  - ▶ Lower benefits for individuals and employers
  - ▶ Lower Star ratings
  - ▶ Lower profits

## HOW TO REPORT POSSIBLE FWA

Employees of BND must report suspicious activities to:

**Compliance Hotline:** 562-310-6868 or 866 255-4795 Ext 4071

24 hours a day/7 days a week

You may report anonymously

**By mail:**

Compliance Officer:

5455 Garden Grove Blvd., 5th floor

Westminster, CA 92683

**Fax:** 657-400-1212

**Email:** [Hotline@universalcare.com](mailto:Hotline@universalcare.com)

### **First-Tier, Downstream, or Related Entity (FDR) Employees**

- Talk to a Manager or Supervisor
- Call your Ethics/Compliance Help Line
- Report to BND

### **Beneficiaries**

- Call BND's Compliance Hotline or Customer Service
- Call 1-800-Medicare

### **What Happens After Non-Compliance Is Detected?**

Non-compliance must be investigated immediately and corrected promptly.

Internal monitoring should ensure:

- ▶ No recurrence of the same non-compliance
- ▶ Ongoing CMS requirements compliance
- ▶ Efficient and effective internal controls
- ▶ Protected enrollees

### **What Are Internal Monitoring and Audits?**

- ▶ Internal monitoring activities include regular reviews confirming ongoing compliance and taking effective corrective actions.
- ▶ Internal auditing is a formal review of compliance with a particular set of standards (for example, policies, procedures, laws, and regulations) used as base measures.

### **HIPAA Privacy and Security Guidelines**

- ▶ HIPAA legislation was passed in 1996 by Congress and includes a privacy rule creating national standards to protect personal health information ("PHI") and electronic personal health information (ePHI).
- ▶ The term "Health Information" is defined as "any information, whether oral or recorded in any form or medium" that is created or received by a health care provider, health plan, public health authority, employer, life insurer, school or university, or health care clearinghouse"; and "Relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual."

## Examples of PHI include a person's:

- ▶ Name
- ▶ Address
- ▶ phone number
- ▶ Social security number
- ▶ Medicare or Medi-Cal number
- ▶ Diagnoses
- ▶ Treatment information such as information about doctor visits or hospitalization
- ▶ Medical records

Basically, almost any kind of information about a person must be protected and held in strict confidentiality.

## Communicating PHI

- ▶ PHI may be communicated by U.S. Mail (inside the envelope), by FAX (with a confidentiality statement on the FAX), or by phone when in a private location where you can't be overheard.
- ▶ PHI may not be sent by unprotected e-mail or text message. (Email within BND is okay if protected by a firewall, but you cannot send unprotected email outside of BND to another health plan, provider, etc.)
- ▶ When communicating, the best practice is to use the member's unique health plan ID number instead of name. All BND member ID numbers are randomly generated and do not contain, for example, part of the member's birthday or social security number.

## Required Email Disclaimer

All emails should have the following statement (or a similar statement) at the bottom of the message:

"THIS ELECTRONIC TRANSMISSION MAY CONTAIN PROTECTED HEALTH INFORMATION OR OTHER PRIVILEGED INFORMATION. The information contained in this electronic transmission, including any attachments, contains information from Universal Care, Inc. that may include protected health information, or other confidential, proprietary or privileged information as defined by state and Federal law. The information contained herein and in any attachment is only for the use of the intended recipient. If you received this information in error, and/or you are not the intended recipient, you are advised

that any disclosure, distribution, reproduction or any other use of this electronic information is prohibited. Please notify the sender of this electronic message immediately if you have received this information in error and destroy all electronic and hard copies of the communication, including attachments. Thank you for your assistance.”

### **Required Fax Disclaimer**

All fax should have the following statement (or a similar statement) at the bottom of the fax:

“The preceding message may be confidential or protected by law. It is not intended for transmission to, or receipt by, any unauthorized persons. If you have received this message in error, please (a) Do not read it. (b) Do reply to the sender that you received the message in error. (c) Erase or destroy the message.”

### **HIPAA Reporting**

Federal regulation requires the reporting of any “breach of confidentiality.” The law requires that each individual whose PHI was breached must be notified within 60 days of the breach (or awareness of the breach).

If you are aware of a potential breach of PHI, you must report it immediately:

- ▶ by email [Hotline@universalcare.com](mailto:Hotline@universalcare.com);
- ▶ by fax to 657-400-1212; or
- ▶ by phone to 562-310-6868 or 657-400-1900 ext. 4071

Mandatory reporting by Compliance Officer must be within 5 days (\$100 per day penalty) to the Office of Health Information Integrity.

### **Prevention**

- ▶ Every plan and its FDR’s must “prevent” the unlawful or unauthorized access, use, or disclosure of patients’ medical information (“strict liability”) by implementing appropriate administrative, technical, and physical safeguards to protect patient medical information.
- ▶ We all must reasonably safeguard confidential medical information from any unauthorized access or unlawful access, use or disclosure. It is against the law to sell member information (address, phone, email, or any other member information). Identity Theft must also be prevented.



## Penalties for Non-Compliance

Penalties vary depending on the amount of information released, and the knowledge of the violator.

- ▶ If the violator did not know and should not have been expected to know of violation: the penalty is a minimum of \$100 to \$25,000 per violation and a maximum of \$50,000 to \$1,500,000 per violation.
- ▶ If the violator did know of the violation: the penalty is \$50,000 to \$1,500,000 per violation.

## Lesson Summary

- ▶ Organizations must create and maintain compliance programs that, at a minimum, meet the seven core requirements. An effective compliance program fosters a culture of compliance.
- ▶ To help ensure compliance, behave ethically and follow your organization's Standards of Conduct. Watch for common instances of non-compliance, and report suspected non-compliance.
- ▶ Know the consequences of non-compliance, and help correct any non-compliance with a corrective action plan that includes ongoing monitoring and auditing.

## Compliance Is Everyone's Responsibility!

**Prevent:** Operate within your organization's ethical expectations to prevent non-compliance!

**Detect & Report:** Report detected potential non-compliance!

**Correct:** Correct non-compliance to protect beneficiaries and save money!

## Lesson Review

Now that you completed the lesson, let's do a quick knowledge check. The Post-Assessment course score is unaffected by answering the following questions.

## Knowledge Check

Select the correct answer.

You discover an unattended email address or fax machine in your office receiving beneficiary appeals requests. You suspect no one is processing the appeals. What should you do?

- A. Contact law enforcement
- B. Nothing
- C. Contact your compliance department (via compliance hotline or other mechanism)
- D. Wait to confirm someone is processing the appeals before taking further action
- E. Contact your supervisor

Select the correct answer.

A sales agent, employed by the Sponsor's first-tier, downstream, or related entity (FDR), submitted an application for processing and requested two things: 1) to back-date the enrollment date by one month, and 2) to waive all monthly premiums for the beneficiary. What should you do?

- A. Refuse to change the date or waive the premiums but decide not to mention the request to a supervisor or the compliance department
- B. Make the requested changes because the sales agent determines the beneficiary's start date and monthly premiums
- C. Tell the sales agent you will take care of it but then process the application properly (without the requested revisions)—you will not file a report because you don't want the sales agent to retaliate against you
- D. Process the application properly (without the requested revisions)—inform your supervisor and the compliance officer about the sales agent's request
- E. Contact law enforcement and the Centers for Medicare & Medicaid Services (CMS) to report the sales agent's behavior

**Select the correct answer.**

You work for BND. Last month, while reviewing a Centers for Medicare & Medicaid Services (CMS) monthly report, you identified multiple individuals not enrolled in the plan but for whom the Sponsor is paid. You spoke to your supervisor who said don't worry about it. This month, you identify the same enrollees on the report again. What should you do?

- A. Decide not to worry about it as your supervisor instructed—you notified your supervisor last month and now it's his responsibility
- B. Although you know about the Sponsor's non-retaliation policy, you are still nervous about reporting—to be safe, you submit a report through your compliance department's anonymous tip line to avoid identification
- C. Wait until the next month to see if the same enrollees appear on the report again, figuring it may take a few months for CMS to reconcile its records—if they are, then you will say something to your supervisor again
- D. Contact law enforcement and CMS to report the discrepancy
- E. Ask your supervisor about the discrepancy again

**Select the correct answer.**

You are performing a regular inventory of the controlled substances in the pharmacy. You discover a minor inventory discrepancy. What should you do?

- A. Call local law enforcement
- B. Perform another review
- C. Contact your compliance department (via compliance hotline or other mechanism)
- D. Discuss your concerns with your supervisor
- E. Follow your pharmacy's procedures

**Select the correct answer.**

Which of the following are considered a conflict of interest? Select all that apply.

- A. Accepting tickets to a Dodgers game from a vendor
- B. Accepting part-time employment after hours with a competitor
- C. Using the company's computers and telephones on your own time to campaign for a political figure
- D. Recommending that BND contract with your spouse's advertising company
- E. None of the above

**Select the correct answer.**

You can report a potential compliance issue in the following ways. Select all that apply.

- A. Call the Compliance Hotline
- B. Tell your co-worker and ask him/her to call the Compliance Hotline
- C. Email the Compliance Officer
- D. None of the above

**Select the correct answer.**

BND does not tolerate retaliation for reporting a compliance issue.

- A. True
- B. False

**You've completed the lesson!**

Now that you have learned about compliance programs, it's time to assess your knowledge.

**Post-Assessment**

This brief Post-Assessment asks 15 questions and should take about 15 minutes.

- ▶ Choose the correct answer for each question. Successfully completing the course includes finishing all lessons, and scoring 70 percent or higher on the Post-Assessment.

**Question 1 of 15**

Select the correct answer.

Compliance is the responsibility of the Compliance Officer, Compliance Committee, and Upper Management only.

- A. True
- B. False

**Question 2 of 15**

Select the correct answer.

Ways to report a compliance issue include:

- A. Calling the Compliance Hotline
- B. Emailing the Compliance Officer
- C. Sending a letter to the Compliance Officer
- D. All of the above

## Question 3 of 15

Select the correct answer.

What is the policy of non-retaliation?

- A. Allows the Sponsor to discipline employees who violate the Code of Conduct
- B. Prohibits management and supervisor from harassing employees for misconduct
- C. Protects employees who, in good faith, report suspected non-compliance
- D. Prevents fights between employees

## Question 4 of 15

Select the correct answer.

These are examples of issues that can be reported to a Compliance Department: suspected fraud, waste, and abuse (FWA); potential health privacy violation, and unethical behavior/employee misconduct.

- A. True
- B. False

## Question 5 of 15

Select the correct answer.

Once a corrective action plan begins addressing non-compliance or fraud, waste, and abuse (FWA) committed by a Sponsor's employee or first-tier, downstream, or related entity's (FDR's) employee, ongoing monitoring of the corrective actions is not necessary.

- A. True
- B. False

## Question 6 of 15

Select the correct answer.

Medicare Parts C and D plan Sponsors are not required to have a compliance program.

- A. True
- B. False

**Question 7 of 15**

Select the correct answer.

At a minimum, an effective compliance program includes four core requirements.

- A. True
- B. False

**Question 8 of 15**

Select the correct answer.

Standards of Conduct are the same for every Medicare Parts C and D Sponsor.

- A. True
- B. False

**Question 9 of 15**

Select the correct answer.

Correcting non-compliance \_\_\_\_\_.

- A. Protects enrollees, avoids recurrence of the same non-compliance, and promotes efficiency
- B. Ensures bonuses for all employees
- C. Both A. and B.

**Question 10 of 15**

Select the correct answer.

What are some of the consequences for non-compliance, fraudulent, or unethical behavior?

- A. Disciplinary action
- B. Termination of employment
- C. Exclusion from participating in all Federal health care programs
- D. All of the above

## Question 11 of 15

Select the correct answer.

Examples of PHI include a person's:

- A. Name
- B. Address
- C. Social security number
- D. Treatment information such as information about doctor visits or hospitalization
- E. All of the above

## Question 12 of 15

Select the correct answer.

PHI can be communicated by protected or unprotected email.

- A. True
- B. False

## Question 13 of 15

Select the correct answer.

The Code of Conduct provides general guidance about compliance issues and how to report them, but is not an all inclusive list of all potential compliance issues.

- A. True
- B. False

## Question 14 of 15

Select the correct answer.

Employees may pursue and participate in employment or other business activities outside of normal working hours provided such arrangement neither creates a conflict of interest nor detracts from performance and/or effectiveness while working for BND, and provided the employee does not offer or provide such services to BND.

- A. True
- B. False

## Question 15 of 15

Select the correct answer.

Examples of prohibited activities outlined in the Code of Conduct include:

- A. Discrimination
- B. Retaliation
- C. Making false statements
- D. Workplace violence
- E. All of the above

## APPENDIX A: RESOURCES

### Glossary

For glossary terms, visit the [Centers for Medicare & Medicaid Services Glossary](https://www.cms.gov/apps/glossary).  
<https://www.cms.gov/apps/glossary>

## APPENDIX B: JOB AIDS

### Job Aid A: Seven Core Compliance Program Requirements

The Centers for Medicare & Medicaid Services (CMS) requires that an effective compliance program must include seven core requirements:

1. Written Policies, Procedures, and Standards of Conduct
  - ▶ These articulate the Sponsor's commitment to comply with all applicable Federal and State standards and describe compliance expectations according to the Standards of Conduct.
2. Compliance Officer, Compliance Committee, and High-Level Oversight
  - ▶ The Sponsor must designate a compliance officer and a compliance committee accountable and responsible for the activities and status of the compliance program, including issues identified, investigated, and resolved by the compliance program.
  - ▶ The Sponsor's senior management and governing body must be engaged and exercise reasonable oversight of the Sponsor's compliance program.
3. Effective Training and Education
  - ▶ This covers the elements of the compliance plan as well as preventing, detecting, and reporting FWA. Tailor this training and education to the different employees and their responsibilities and job functions.
4. Effective Lines of Communication



- ▶ Make effective lines of communication accessible to all, ensure confidentiality, and provide methods for anonymous and good-faith compliance issues reporting at Sponsor and first-tier, downstream, or related entity (FDR) levels.
- 5. Well-Publicized Disciplinary Standards
  - ▶ Sponsor must enforce standards through well-publicized disciplinary guidelines.
- 6. Effective System for Routine Monitoring, Auditing, and Identifying Compliance Risks
  - ▶ Conduct routine monitoring and auditing of Sponsor's and FDR's operations to evaluate compliance with CMS requirements as well as the overall effectiveness of the compliance program.
- 7. Procedures and System for Prompt Response to Compliance Issues
  - ▶ The Sponsor must use effective measures to respond promptly to non-compliance and undertake appropriate corrective action.
  - ▶ Note: Sponsors must ensure that FDRs performing delegated administrative or health care service functions concerning the Sponsor's Medicare Parts C and D program comply with Medicare Program requirements.

## **JOB AID B: RESOURCES**

Compliance Education Materials: Compliance 101

<https://oig.hhs.gov/compliance/101>

Health Care Fraud Prevention and Enforcement Action Team Provider Compliance Training

<https://oig.hhs.gov/compliance/provider-compliance-training>

Office of Inspector General's (OIG's) Provider Self-Disclosure Protocol

<https://oig.hhs.gov/compliance/self-disclosure-info/protocol.asp>

Part C and Part D Compliance and Audits – Overview

<https://www.cms.gov/medicare/compliance-and-audits/part-c-and-part-d-compliance-and-audits>

Physician Self-Referral

<https://www.cms.gov/Medicare/Fraud-and-Abuse/PhysicianSelfReferral>

Avoiding Medicare Fraud & Abuse: A Roadmap for Physicians

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/MLN-Publications-Items/CMS1254524.html>

Safe Harbor Regulations

<https://oig.hhs.gov/compliance/safe-harbor-regulations>