



COMPLIANCE



SpecialtyCare maintains a comprehensive compliance program to help protect our business partners and to support our belief that providers should be good stewards of the business side of healthcare

Governmental agencies continue to increase their efforts to reduce fraud, waste, and abuse in healthcare. Examples include:

- The Department of Justice recovered over \$3.5 billion from fraud and false claims in fiscal year 2015.¹
- The Health Care Fraud and Abuse Control Program recovered \$6.10 for each dollar invested in fiscal year 2015.²
- The U.S. Department of Health & Human Services' Office of Inspector General's investigations in fiscal year 2015 resulted in 800 criminal actions, 667 civil actions, and the exclusion of 4,112 individuals and entities from participating in Medicare, Medicaid, and other federal health care programs.³

To prevent incurring damages, penalties, criminal sanctions, and/or administrative remedies, your physicians and hospital must comply with all applicable federal and state laws, including:

- The Anti-Kickback Statute
- The False Claims Act
- The Health Insurance Portability and Accountability Act (HIPAA)
- The Stark Law

You must also ensure your allied partners are compliant with applicable laws governing the services they provide. If not, the actions (or possibly inactions) of your allied partners could create compliance issues for your organization.

COMPLIANCE IS ONE OF OUR SPECIALTIES

At SpecialtyCare, adhering to applicable laws and helping protect you from the risk of compliance violations is simply part of our standard process. It's integral to who we are and how we operate. Being a good steward of the business side of healthcare is a key component of our overall service model and reinforces our ability to provide you and your patients with the best possible clinical and financial outcomes. We maintain a comprehensive compliance program that helps limit exposure for you by:

- Training employees on healthcare statutes, regulations, and other compliance directives upon hire and periodically thereafter
- Conducting exclusion list checks to ensure we do not hire or retain employees who have been excluded by federal or state organizations
- Offering a secure, anonymous process for receiving complaints or compliance concerns to encourage issue reporting
- Monitoring certain operations for compliance (e.g., billing to help ensure submitted claims comply with government and private payer requirements, which can help reduce the chance of false claims allegations)
- Maintaining a compliance committee, comprised of leaders from key functional areas, to assist with:
 - Monitoring employee adherence to compliance program requirements
 - Identifying and addressing education or training needs unique to certain functional areas
 - Investigating compliance allegations
 - Implementing corrective actions

REDUCE THE RISK OF IMPROPER RELATIONSHIPS

In addition to our compliance program, SpecialtyCare and persons in our ownership structure are not in a position to make or directly influence referrals or generate business for us or our customer facilities. We understand the complexities associated with specific healthcare laws, including the Anti-Kickback Statute and Stark Law, and the restrictions those laws place on the relationships and transactions between an allied partner and customer facilities.

We also adhere to practices that restrict providing certain items of value to customer facilities or related surgeons due to the risk of implicating all parties under applicable laws (e.g., inappropriate gifts or provision of free services or equipment in exchange for the referral of services that are reimbursed by third parties).

Our focus on compliance helps us and you comply with applicable federal and state statutes and regulations, which reduces the risk of fraud, waste, and abuse allegations. Ultimately, our compliance program results in better outcomes through the conscientious delivery of healthcare, and it helps minimize the financial risks and reputational damage that can be caused by non-compliant service providers.

For additional information, please contact our Chief Compliance Officer, Brett Burrell, JD, MBA, at brett.burrell@specialtycare.net.

*Accredited and certified
by The Joint Commission*



¹ "Justice Department Recovers Over \$3.5 Billion From False Claims Act Cases in Fiscal Year 2015." (2015, December 3). Retrieved April 04, 2016, from <https://www.justice.gov/opa/pr/justice-department-recovers-over-35-billion-false-claims-act-cases-fiscal-year-2015>.

² "Fact Sheet: The Health Care Fraud and Abuse Control Program Protects Consumers and Taxpayers by Combating Health Care Fraud." (2016, February 26). Retrieved April 12, 2016, from <https://www.justice.gov/opa/pr/fact-sheet-health-care-fraud-and-abuse-control-program-protects-consumers-and-taxpayers>.

³ "Health Care Fraud and Abuse Control Program Annual Report for Fiscal Year 2015." (2016, February). Retrieved June 6, 2016, from <http://oig.hhs.gov/publications/docs/hcfac/FY2015-hcfac.pdf>.