Completion of this training fulfills the employee requirement of the UWMC organization-wide annual education. Employees hired in 2011 or before, must complete this training. Employees who attended the New Employee Orientation in 2012 **do not** need to take this training.

The training covers six competency modules and quizzes listed below.

- Compliance and Ethics
- Cultural Diversity
- Infection Prevention and Control
- Organization Specific Topics
- Patient Safety
- Workplace Safety
2012 Frequently Asked Questions

These Frequently Asked Questions will help you when completing this training module.

1Q: If I need technical assistance while taking the quiz, who do I contact?
1A: Please send an email to the UWMC LMS Domain Administrator, uwmclms@uw.edu for technical assistance.

2Q: How can I save my work if I am not done taking the quiz?
2A: You may EXIT this training at any time. Once you click EXIT, the system will automatically "bookmark" your location (in the quiz), and when you resume the training, you will be returned to the same place. To EXIT click on the "X" in the upper right corner of this window.

3Q: How do I exit the quiz?
3A: To exit, click on the X in the upper right corner of this window.

4Q: I did not receive credit for completed training. Why?
4A: You will not receive credit for the training until you click on the Finish button on the final slide of the quiz. Call the Help Desk if, after passing the quiz and clicking the Finish button, you still do not receive credit for the course.

5Q: I was hired during 2012. Do I need to complete this quiz?
5A: No, you fulfilled the UWMC annual education training requirements by attending the New Employee Orientation during 2012.

6Q: What if I score less than 80% on my quiz?
6A: If you score less than 80%, you will be required to take the quiz again, until you score at least 80%. The graded quiz is meant to test your knowledge. Once completed, the results page will include the quiz name and your score.
TABLE OF CONTENTS

• Learning Objectives

• What is Compliance?

• Overview of State Ethics Law

• Health Care Fraud and Abuse

• HIPAA - Privacy and Security

• UW Medicine Compliance Program
COURSE OBJECTIVES

Participants will be able to:

• Describe the key concepts of the Ethics in Public Service Act

• Describe the key components of UW Medicine’s compliance program

• Recognize possible violations of health care fraud & abuse laws and understand the penalties

• Know the importance of privacy and information security, and understand their role in protecting patients’ information

• Know what to do to report a suspected problem or concern
WHAT IS COMPLIANCE?

Performing our UW Medicine work while following all applicable laws and regulations, including:

• State of Washington “Ethics in Public Service” Act

• Federal and state health care “fraud and abuse” laws & regulations (with special emphasis on Medicare/Medicaid rules)

• Health care privacy and information security laws

Compliance means behaving ethically...doing the right thing
• The UW Medicine Compliance Officer is Lisa Westlund.

• The Compliance Officer is responsible for overseeing the UW Medicine compliance program. This includes, among other things, establishing policies, conducting training, investigating complaints and concerns, and answering questions regarding clinical billing, ethics and conflicts of interest, and patient privacy.
STANDARDS OF CONDUCT

• The Integrity at Work brochure, provided to you upon hire, contains compliance guidelines that establish the standards of conduct for UW Medicine employees.

• To view the Integrity at Work brochure online, go to: http://depts.washington.edu/comply/links.shtml
POLICIES AND PROCEDURES

• Compliance policies and operational procedures establish requirements and expectations for employees.

• You are responsible for understanding and adhering to relevant policies and procedures.

• Compliance Program policies are found on the UW Medicine Compliance web site http://depts.washington.edu/comply/.

• Operational policies/procedures are found on each medical center’s intranet.
UW Medicine Compliance staff performs ongoing auditing and monitoring to assess the effectiveness of our policies and procedures for mitigating risk.
UW Medicine Compliance provides ongoing training to educate all employees about compliance risks and related policies.
ORGANIZATION RESPONSE

• UW Medicine Compliance responds to all reports or concerns of possible non-compliant activity by thoroughly investigating the matter.

• If a problem is confirmed, UW Medicine takes the actions necessary to resolve the issue.
ENFORCEMENT AND PREVENTION

• Individuals violating the UW Medicine standards and policies may be subject to progressive disciplinary action.
EMPLOYEE PARTICIPATION

• Every employee has the responsibility to follow applicable laws, regulations, and policies, and to support UW Medicine’s compliance efforts.

• Employees are required to ask questions and seek out support any time they aren’t sure what is right or have a concern.

• Managers, supervisors, and all other employees are strictly prohibited from retaliating against anyone who reports such a concern in good faith.
STATE OF WASHINGTON ETHICS LAW

• Applies to all Washington state employees (including UWMC and HMC employees)

• Each employee is individually responsible for their actions related to this law
ETHICS LAW: LIMITED USE OF PUBLIC RESOURCES

The law prohibits the use of public resources for personal matters

- Everything that UW Medicine owns or rents is a public resource (cash and investments, buildings, equipment, supplies, etc.).

- There is an exception for brief, infrequent, and limited personal use of resources like email, telephone, internet.

- The exception is allowed only if there is little or no cost to the state, and no interference with your job or with your co-workers’ jobs.

- Use of state resources is never allowed for political purposes, for personal gain, or for a personal or commercial business.
ETHICS LAW: RESTRICTIONS ON ACCEPTING GIFTS

The law sets limitations on the acceptance of gifts

• Total value of all gifts an individual receives from a single source (company) may not exceed $50 a year.

• A single gift, regardless of the source, may not exceed $50.

• A gift may not be accepted if there is a reasonable expectation that your judgment or actions may be influenced by the gift. For example, if your department is considering renewing a contract for a certain product and you will provide your opinion about the product, then you may not accept any gift from that (or any other) supplier.

• A gift may not be accepted if it could be a reward for the performance or non-performance of your job (for example, tips or gifts from patients).
STRATEGIES FOR SITUATIONS INVOLVING GIFTS FROM PATIENTS OR FAMILIES

• Try to politely refuse, explaining that your job prohibits acceptance of personal gifts

• Give the gift to the department or clinic (non-cash items)

• Redirect cash gifts to the UW Medicine Advancement Office as a donation: 206.543.5686
ETHICS LAW: CONFLICTS OF INTEREST

The law prohibits conflicts of interest-

• A conflict of interest exists whenever the loyalty of an employee is divided between his or her responsibilities to UW Medicine, and an outside interest. For example, if you are considering a second job with a company that sells medical supplies to your employer, and you are in a position to decide whether or not your employer buys from this company, there is a potential conflict of interest.

• You should avoid actual conflicts of interest, as well as those actions that appear to create a conflict of interest.

• If you believe a conflict of interest may exist, you must disclose it to your supervisor.
POTENTIAL CONFLICT OF INTERESTS: OUTSIDE WORK

• All UWMC and HMC staff are required to obtain annual approval from their manager and division head for any outside work.

• The outside work form [http://www.washington.edu/admin/hr/forms](http://www.washington.edu/admin/hr/forms) is completed by the employee and employee’s manager.
WASHINGTON STATE WHISTLEBLOWER PROGRAM

State program for identifying and reporting “improper governmental action,” including:

- Waste of public funds/resources
- Violations of law
- Public danger
- Mismanagement of funds
- Preventing scientific dissemination or altering technical findings
- Issues such as these may be reported to your hospital’s Executive Director, to the UW Medicine Chief Compliance Officer/Associate VP for Medical Affairs (CCO/AVPMA) at 206.543.3098, or to the State Auditor’s office online at:

  https://www.sao.wa.gov/EN/Audits/Whistleblower/Pages/default.aspx
The Washington State Auditor maintains a hotline
Call 1-866-902-3900 to:

• Recommend efficiency improvements in state and local government
• Report waste, inefficiency, or abuse
• Report positive examples of efficiency or outstanding achievement
FALSE CLAIMS ACT

• Federal law prohibits knowingly submitting a false claim for reimbursement

• This includes:
  • Deliberate ignorance or
  • Reckless disregard of the truth or falsity of the information

• The Federal Program Fraud Civil Remedies Act of 1986 establishes administrative remedies (monetary fines) against anyone who knowingly presents false claims or written statements to the government

• The False Claims Act allows an individual to bring a lawsuit on behalf of the government, and allows the individual to share in the recovered dollars in some cases

• The False Claims Act (and Washington State law) prohibit retaliation against an employee who reports concerns to the government
FALSE CLAIMS ACT

Examples of potential fraud and abuse violations include:

- Billing for services not performed, or for a service that is different than what was performed
- Performing and billing services without a documented order from a physician or another provider
- Accepting a gift or donation in exchange for purchasing a company’s product(s) or for referring patients to the company/provider
PATIENT PRIVACY

- A patient’s health information is personal and sensitive in nature
- Our patients entrust their information to us for safekeeping
- It is the responsibility of each workforce member to safeguard and handle patient information appropriately
WHAT INFORMATION IS CONSIDERED PATIENT INFORMATION?

• Any information that UW Medicine maintains that can be associated to a patient (e.g. name, address, diagnosis, social security number, medical record number, etc...) is considered patient information and must be protected to meet state and federal privacy laws.

• Patient information is maintained in many forms; e.g. on paper, electronic, or spoken.
• UW Medicine Compliance administers a set of policies and associated documents to assist workforce members in meeting compliance with state and federal patient privacy laws. The UW Medicine Privacy Policies are found at http://depts.washington.edu/comply/privacy.shtml
SAFEGUARDING PATIENT INFORMATION

• Patient information taken off-site must be kept on the person at all times, unless the information is secured (i.e. stored in a suitable locked container). Locked vehicles are the most common theft sites and therefore do not meet this requirement.

• Be aware of who is around you and what information could be overheard.

• Discuss patient information in the appropriate settings and only with those who have a need-to-know.

• Limit the patient information discussed to the minimum necessary.

• Keep patient information out of view of patients, visitors, and workforce members who are not involved in the patient’s care.
PATIENT RIGHTS

The Privacy laws give patients certain rights with respect to their health information. Workforce members should refer patients to UW Medicine Compliance for the following issues:

• Requests for restricted use of their health information.

• Requests that we not disclose to their health plan those items or services that they self-pay in full.

• Requests that we contact them in an alternate way.

• Requests for an amendment (change or addition) to their record.

• Requests for a list of disclosures of their health information.

• Complaints related to the privacy of their health information.
PATIENT ACCESS TO MEDICAL RECORDS

Workforce members should refer patients to Health Information Management when patients want access to or copies of their medical records.

Accidental Disclosures and Inappropriate Uses

- Accidental disclosures occur when patient information is mistakenly provided to the wrong patient or when patient information is provided to the wrong recipient outside UW Medicine.
- Inappropriate use occurs when patient information is accessed by or provided to a UW Medicine workforce member who does not have a need to know.
- When providing information directly to a patient, it is important that you confirm it is their information; e.g. referral slips, prescriptions, copies of records.
- If an accidental disclosure or an inappropriate use occurs, workforce members must report the event to Compliance.
ACCOUNTING OF DISCLOSURES

• UW Medicine workforce members must account for sanctioned disclosures of patient information that are not for treatment, payment, health care operations, or authorized by the patient by documenting each disclosure of this type online at http://depts.washington.edu/comply/hipaa_disc.shtml.

• Examples of disclosures that meet this requirement include:
  - Accesses to patient information under a waiver of authorization for research
  - Registry reporting
  - Public Health reporting
EMAILING PATIENT INFORMATION

UW Medicine workforce members are required to use one of the following email accounts when communicating UW Medicine patient information:

- University of Washington (uw.edu)
- UW Medicine (uwpn.org, uwp.washington.edu)
- Northwest Hospital (nwhsea.org)
- Children’s University Medical Group (cumg.washington.edu)
- Seattle Cancer Care Alliance (seattlecca.org)
- Valley Medical Center (valleymed.org)
- Fred Hutchinson Cancer Research Center (fhcrc.org)
- Puget Sound Blood Center (psbc.org)
- VA Medical Center (med.va.gov)
- Seattle Children’s Hospital (seattlechildrens.org)
VERIFYING PATIENT IDENTITY

• When patients check into clinical areas to receive services or when patient information is provided to an individual, government-issued photo identification should be requested and verified.
USING PATIENT INFORMATION

• Workforce members must only access the patient information needed to perform their authorized job responsibilities.

• Workforce members should not access the records of friends or family members, including children who are minors.
SOCIAL NETWORKING

• Posting patient information on social networking sites such as Facebook or blogs is prohibited.
ELECTRONIC MEDICAL RECORD ACCESS

• UW Medicine logs each access to electronic patient information, and Compliance monitors that access.
BEST PRACTICES

• Only store patient information on portable devices (e.g. laptops, smartphones, flash drives, etc...) when encryption software is used.

• Secure application sessions on your computer when left unattended.

• Keep printed materials and computer screens containing patient information from public view.

• Dispose of patient information in a secure manner, e.g. place paper patient information in a locked recycling bin or shredder.

• Additional Information Security best practices can be found at http://security.uwmedicine.org/default.asp.
IT IS IMPORTANT TO ASK QUESTIONS AND REPORT YOUR CONCERNS

• UW policies require raising the issue to a supervisor, organization leader or Compliance if there is a compliance-related question/concern

• In addition, all suspected patient information privacy and/or security incidents must be reported to Compliance

• UW Medicine policies prohibit retaliation against those reporting a problem or raising a concern/question in good faith

• UW Medicine will investigate concerns and take appropriate corrective actions
IT IS IMPORTANT TO ASK QUESTIONS AND REPORT YOUR CONCERNS

- Please use the following options for contacting UW Medicine Compliance to report incidents or concerns, to ask a question or to request assistance:

  - **UW Medicine Compliance Hotline: 206.616.5248**
    - Phone line you can use to report compliance problem or concern
    - You do not have to speak directly to anyone, you simply leave a message
    - You do not have to identify yourself

  - **Compliance Office direct line: 206.543.3098**

  - **Email comply@uw.edu**
UW MEDICINE COMPLIANCE PROGRAM
RESOURCES

Website:

Compliance Resource Links:
http://depts.washington.edu/comply/links.shtml

Email:
comply@uw.edu

Phone:
UW Medicine Compliance Hotline 206.616.5248
Compliance Officer Main Line: 206.543.3098
QUIZ INSTRUCTIONS

- Thank you for reading these materials.
- Your next step is to complete the quiz and check your answers.
- Please provide the completed quiz to your manager/supervisor, as evidence of completion.
- Your paper quiz will be manually entered in the LMS and show up in the completion reports after the quiz results have been submitted by your manager/supervisor to uwmclms@uw.edu.
- To satisfy the 2012 UWMC Annual Education requirements you must score 80% or better on all of the following quizzes:
  - Compliance & Ethics and Ethics
  - Cultural Diversity
  - Infection Prevention and Control
  - Organization Specific Topics
  - Patient Safety
  - Workplace Safety