

Compliance: Training and Education			Policy Identifier/Number: AD-01C	
Annual Review Comp	eted Date: February 2	2018		
Policy Category: Government - Pierce Regional Support Network	Applicable Lines of Business: Medicaid	Entity/Plan: Optum Pierce Behavioral Health Organization		State: Pierce County, Washington
Approved by: Bea Dixon, Executive Director			Signature:	

Policy Statement and Purpose

Optum Pierce Behavioral Health Organization (BHO) is committed to complying with all federal and state laws, regulations, and contractual obligations as well Company policies. Optum Pierce BHO employees are required to complete the computer-based compliance training courses required of all UnitedHealth Group (UHG) employees.

Policy Audience and Applicability

This policy is applicable to the Optum Pierce BHO and benefits administered through the Washington State Department of Social and Health Services (DSHS) current Prepaid Inpatient Health Plan (PIHP) and Behavioral Health State Contract (BHSC).

Policy Definitions

<u>Abuse</u> refers to provider or entity actions that are inconsistent with sound fiscal, business, or medical practices and results in an unnecessary cost to the Medicaid program, or in reimbursement for services that are not medically necessary or that fail to meet professionally recognized standards for health care.

<u>Compliance</u> – adherence to federal, state, and local laws and regulations, licensing requirements, accreditation standards and UHG and Optum policies and procedures.

<u>Fraud</u> refers to an intentional deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to them or some other person and includes any act that constitutes fraud under applicable federal or State law.

Waste refers to unintentional overutilization, underutilization, or misuse of resources.

Optum is responsible for adhering to all applicable state and/or federal laws governing activities within the scope of this policy, including the Mental Health Parity and Addiction Equity Act (MHPAEA) and the Health Insurance Portability and Accountability Act (HIPAA) privacy requirements, as well as the applicable requirements, standards and regulations as set forth by the Employee Retirement Income Security Act (ERISA), the Center for Medicare and Medicaid Services (CMS), the Department of Labor (DoL), and any applicable accrediting organizations.

Policy Provisions

- Optum Pierce BHO requires training for all BHO staff including; education on the False Claims Act, Whistleblower Protections, identification and reporting of fraud/waste/abuse, code of conduct, conflicts of interest, ethics and integrity.
 - 1.1.1. Optum's required web-based training program emphasizes: awareness, detection, and procedural issues (i.e., case identification and referral); early detection and prevention of payment for ineligible expenses; provider, claimant and eligibility fraud; impact of fraud and abuse; health fraud trends, schemes and those committing fraud and abuse; questionable cases to be sent to Compliance Officers for investigation; staff rights as whistle blowers; roles of compliance officers; and case studies.
 - 1.1.2. Training exams are completed with scores of 80% or higher in order for staff to obtain credit for the training.
- All community behavioral health agencies provide training to their staff on the False Claims
 Act, and on employee rights for Whistleblower Protections per Optum Pierce BHO's Provider
 Training policy (AD-13).
 - 2.1. Optum Pierce BHO provides training support to all community behavioral health agencies through an online learning database. Optum encourages community behavioral health agency to have staff complete at a minimum the one-hour training entitled "Deficit Reduction Act Compliance" or provide an equivalent course as required in Section 3.
- All community behavioral health agencies on behalf of Optum Pierce BHO will have the opportunity to access an online learning and training database.
- 4. Optum Pierce BHO compliance trainings for internal staff and network providers detail possible disciplinary actions taken when compliance/integrity standards are not met and/or when fraud, abuse or waste is detected. Such information is also included on the Optum Pierce BHO website and in communications such as newsletters. Disciplinary action may include but is not limited to:
 - 4.1. Corrective actions such as more intensive supervision or additional training
 - 4.2. Reporting to professional society disciplinary boards
 - 4.3. Criminal prosecution
 - 4.4. Termination of employment

Related Policies, Procedures & Materials

- Optum Pierce Behavioral Health Organization policy:
 - o AD-01A Compliance: General Compliance Policy
 - AD-01B Compliance: Governance and Oversight
 - AD-01D Compliance: Training and Education
 - AD-01E Compliance: Routine Auditing and Monitoring
 - AD-01F Compliance: Enforcement of Disciplinary Guidelines
 - AD-01G Compliance: System for Prompt Response to Compliance Issues

Attachments

N/A

Approval History

• Policy created and effective: February 2018