



Provider Manual

▪ Compliance



Compliance

This Manual was created to help guide you and your staff in understanding Kaiser Permanente's compliance policies and procedures.

If, at any time, you have a question or concern about the information outlined in this Manual, you can reach our Provider Relations Department by calling 510-268-5448.

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Section 9: Compliance

Kaiser Permanente strives to demonstrate high ethical standards in its business practices. Because contracting Providers are an integral part of Kaiser Permanente's business, it is important that we communicate and obtain your support for these standards. The Agreement details specific laws and contractual provisions with which you are expected to comply. This Section 9 of the Provider Manual highlights some provisions in the Agreement and provides some additional information about compliance.

9.1 Compliance with Law

Kaiser Permanente is a recipient of federal funds. As such, all Contracted Providers and hospitals must agree to comply with all rules and regulations that applicable to federal contracts. These include, without limitation, and in addition to what may be stated in the Agreement, all laws and regulations applicable to federal contracts, including Title VI of the Civil Rights Act of 1964, the Age Discrimination Act of 1975, Americans with Disabilities Act, and all other laws applicable to recipients of federal funds. This also includes the general rules that might apply, and the policies, procedures and manual provisions as well as other program requirements issued by CMS. These also include Kaiser Permanente's policies and procedures.

Kaiser Permanente is required to collect encounter data from all Providers and hospitals. The data must characterize content and purpose of each Member visit or inpatient hospitalization. This may be demonstrated by submitting complete and accurate claim forms, medical records and reports (surgical progress, etc.).

Kaiser Permanente must disclose to the Center for Medicare and Medicaid Services (CMS) all information necessary for CMS to 1) administer and evaluate the program and 2) establish and facilitate a process for current and prospective Members to exercise choice in obtaining Medicare services.

In addition to regulation by CMS for Medicare, Kaiser Permanente's health plans fall under the regulatory requirements of the state in which they operate, the US Department of Labor, and Federal Employees Health Benefit Plan or other agency. Accreditation requirements of The Joint Commission on Accreditation of Healthcare Organizations (JCAHO) and National Committee on Quality Assurance (NCQA) may also apply.

9.1.1 Access to Service

As a Contracted Provider, you have agreed not to discriminate against any Member on the basis of race, color, creed, religion, sex, sexual orientation, national origin, health status, marital status, age, ancestry, physical or mental handicap, veteran's status, income, or status as a Kaiser Permanente Member or due to filing a complaint as a Kaiser Permanente Member.

Your facility can not modify treatment or otherwise discriminate on the basis of whether or not a Member has executed an Advance Directive. Providers are obligated to comply with Title VI of the Civil Rights Act of 1975. Kaiser Permanente expects that the Provider will provide reasonable access and accommodation to persons with disabilities to the extent required of a health services provider under the Americans with Disabilities Act or any applicable state law.

As a government contractor, Kaiser Permanente is subject to various federal laws, executive orders and regulations regarding equal opportunity and affirmative action which may also be applicable to your facility and those providers you utilize.

Kaiser Permanente's expectation is that you will provide Covered Services to Members seven (7) days per week, twenty-four (24) hours per day and will not discriminate against any Member, regardless of type of benefit plan.

All information about treatment options, including the option of no treatment, must be provided to all Members in a culturally competent manner. Members with disabilities shall be able to communicate effectively with all health care professionals in making decisions regarding treatment options.

As a Health Plan, we are obligated to notify our Membership if, for any reason, our relationship with you terminates or is significantly altered

9.1.2 HIPAA and Privacy Rules

As a contracted Provider, you may have signed a document that creates a Business Associate relationship with Kaiser Permanente. Such relationships are defined by federal regulations commonly known as the Health Insurance Portability and Accountability Act (HIPAA). If you are providing standard patient care services that do not require a Business Associate Agreement, you still must preserve the confidentiality and privacy of Kaiser Permanente Members' medical information.

If you did not sign a Business Associate Agreement, you are a "covered entity" as that term is defined under HIPAA, and the Privacy Rule issued by the Department of Health and Human Services. As a covered entity, you have specific responsibilities to limit the uses and disclosures of PHI, as that term is defined by the Privacy Rule (45 CFR Section 164.501)

Certain data which may be exchanged as a consequence of your relationship with Kaiser Permanente is subject to the HIPAA and its regulations. To the full extent applicable by the provisions of HIPAA, you must comply with HIPAA, including but not limited to the HIPAA standards for:

- Privacy
- Code set

- Data transmission standards
- Security of transmission of and access to individual health information
- Security of physical storage of health information

9.1.3 Confidentiality of Patient Information

Healthcare Providers, including Kaiser Permanente and your facility, are legally and ethically obligated to protect the privacy of Health Plan Members. Kaiser Permanente requires contracted Providers to keep its Members' medical information confidential. This requirement is based on state and federal confidentiality laws, as well as, policies and procedures created by Kaiser Permanente.

As a contracted Provider for Kaiser Permanente, you may not use or disclose the Protected Health Information (PHI) of a Health Plan Member, except as needed to provide medical care to Kaiser Permanente Members, to bill for services, or as necessary to regularly conduct business. PHI refers to medical information, as well as information that can identify a Health Plan Member, including a Health Plan Member's name, date of birth, social security number, address and telephone number.

PHI may not be disclosed without the authorization of the Kaiser Permanente Member, except when the release of information is either permitted or required by law.

You must use and disclose PHI only as permitted by HIPAA and the Privacy Rule, subject to any additional limitations, if any, on the use and disclosure of that information as imposed by your Agreement or any Business Associate Agreement you may have signed with Kaiser Permanente. You must maintain and distribute a Notice of Privacy Practices to Kaiser Permanente Members using your services. You must distribute your Notice of Privacy Practices to and obtain acknowledgements from Kaiser Permanente Members receiving services from you, in a manner consistent with your practices for other patients. You must give Kaiser Permanente a copy of your Notice of Privacy Practices. You must also provide Kaiser Permanente with subsequent versions whenever a material change has been made to the original notice.

Providers are required by HIPAA to provide a patient with access to his or her PHI, to allow that patient to amend his or her PHI, and to provide an accounting of those disclosures identified under the Privacy Rule as reportable disclosures. You must extend these same rights to Kaiser Permanente Members who are patients. If you amend, allow a Kaiser Permanente Member to amend, or include in your medical records any statement of a Kaiser Permanente pursuant to HIPAA requirements, you must give a copy of such item to Kaiser Permanente.

9.2 Kaiser Permanente Principles of Responsibility and Compliance Hotline

The Kaiser Permanente *Principles of Responsibility* (“**POR**”) is the code of conduct for Kaiser Permanente physicians, employees and contractors working in KP facilities (“**KP Personnel**”) in their daily work environment. You should report to Kaiser Permanente any suspected wrongdoing or compliance violations by KP Personnel under the POR. The Kaiser Permanente Compliance Hotline is a convenient and anonymous way to report a suspected wrongdoing without fear of retaliation. It is available 24 hours per day, 365 days per year. The toll free Compliance Hotline number is 1-888-774-9100.

Attached is the copy of Kaiser Permanente *Principles of Responsibility* (“**POR**”) for your reference.



Kaiser Permanente
Principles of Responsi

9.3 Gifts and Business Courtesies

You are expected to comply with all applicable state and federal laws governing remuneration for health care services, including anti-kickback and physician self-referral laws. Even if certain types of remuneration are permitted by law, Kaiser Permanente discourages Providers from providing gifts, meals, entertainment or other business courtesies to KP Personnel, in particular

- Gifts or entertainment that exceed \$25.00 in value
- Gifts or entertainment that are given on a regular basis
- Cash or cash-equivalents, such as checks, gift certificates/cards, stocks, or coupons
- Gifts from government representatives
- Gifts or entertainment that reasonably could be perceived as a bribe, payoff, deal or any other attempt to gain advantage
- Gifts or entertainment given to KP Personnel involved in Kaiser Permanente purchasing and contracting decisions.

9.4 Conflicts of Interest

Conflicts of interest between a Provider and KP Personnel, or the appearance of it, should be avoided. There may be some circumstances in which Members of the same family or household may work for Kaiser Permanente and for a Provider. However, if this creates an actual or potential conflict of interest, you must disclose the conflict at the earliest opportunity, in writing, to a person in authority at Kaiser Permanente (other than the person who has the relationship with the Provider). You may call the toll free Compliance Hotline number at 1-888-774-9100 for further guidance on potential conflicts of interest.

9.5 Fraud, Waste and Abuse

Kaiser Permanente will investigate allegations of Provider fraud, waste or abuse, related to services provided to Members, and where appropriate, will take corrective action, including but not limited to civil or criminal action. The Federal False Claims Act and similar state laws are designed to reduce fraud, waste and abuse by allowing citizens to bring suit on behalf of the government to recover fraudulently obtained funds (i.e., “whistleblower” or “qui tam” actions). KP Personnel may not be threatened, harassed or in any manner discriminated against in retaliation for exercising their rights under the False Claims Act or similar state laws.

9.6 Providers Ineligible for Participation in Government Health Care Programs

Under Kaiser Permanente policy, we will not do business with a Provider if it or any of its officers, directors or employees involved in Kaiser Permanente business is, or becomes excluded by, debarred from, or ineligible to participate in any federal health care program or is convicted of a criminal offense related to the provision of health care. Kaiser Permanente expects you to (a) disclose whether any of its officers, directors or employees becomes sanctioned by, excluded from, debarred from, or ineligible to participate in any federal program or is convicted of a criminal offense related to the provision of healthcare and (b) assume responsibility for taking all necessary steps to assure that your employees and agents directly or indirectly involved in Kaiser Permanente business have not or are not currently excluded from participation in any federal program.

9.7 Visitation Policy

When visiting Kaiser Permanente facilities (if applicable), you are expected to comply with the applicable visitation policy, which is available at Kaiser Permanente facilities upon request. “Visitor” badges provided by the visited Kaiser Permanente facility must be worn at all times during the visit.

9.8 Compliance Training

Kaiser Permanente requires certain Providers, including those who provide services in a Kaiser Permanente facility, to complete Kaiser Permanente’s Compliance Training, as required by your Agreement, applicable law or regulatory action. Where applicable, you must ensure that your employees and agents involved in Kaiser Permanente business complete the relevant Kaiser Permanente Compliance Training. Please refer to your Kaiser Permanente contract manager for more guidance regarding these requirements.

9.9 Provider Resources

- KP Participating Provider Compliance Website:
<http://xnet.kp.org/compliance/external/index.html>
- Kaiser Permanente's National Compliance Office (510) 271-4699
- Kaiser Permanente's Compliance Hotline (888) 774-9100
- Provider Contracting Department: (510) 268-5448