

**AUBURN COMMUNITY HOSPITAL &  
THE FINGER LAKES CENTER FOR LIVING  
17 LANSING STREET  
AUBURN, NEW YORK 13021**

Subject: <b>Excluded Providers</b>	Policy No.: CC: 13
Department: Administration: Corporate Compliance	Page: 1 of 3
	Date Issued: 1/25/2012

**SCOPE:**

This Policy applies to all Board members, officers, managers, and other workforce members, including employees, trainees, volunteers, providers, consultants, independent contractors, students and temporary workers of Auburn Community Hospital and its affiliates (“Affected Individuals”), as appropriate. For example, this Policy would be applicable to physician and provider credentialing activities, contractual arrangements with third parties, and business arrangements related to leasing space, billing and management services, the purchase of supplies (including drugs), sales or purchases of assets, etc.

**PURPOSE:**

The purpose of this Policy is to ensure that the Hospital does not conduct business or have relationships with companies or individuals who are excluded from participation in federally-funded health care programs, and to ensure that the Hospital at all times remains in compliance with applicable federal and state laws with respect to individuals and companies with which it does business.

**POLICY:**

It is the policy of the Hospital to screen all Affected Individuals, including applicants and employees, candidates for, and current Members of the Medical Staff, independent contractors, and vendors for exclusion from federal and state government health care programs and to monitor the exclusion lists on an ongoing basis.

**PROCEDURE:**

- A. The Hospital does not hire or enter into any business arrangement with any entity or person convicted of a criminal offense related to health care, or listed by a federal agency as debarred, excluded, or otherwise ineligible for participation in federally-funded health care programs. The Hospital (through Human Resources, the Medical Staff Office,

Business Office or other department) shall screen all Affected Individuals with whom the Hospital has business relationships and/or employment relationships. Screenings shall be conducted prior to the start of the business/employment relationship and periodically thereafter as determined necessary by the Compliance Officer, or his/her designee.

Various Screening Data Bases. One or more of the following or other websites as applicable shall be queried:

- i. Office of Inspector General (OIG) website – verification of Medicare, Medicaid, Tricare participation by reviewing OIG’s “*List of Excluded Individuals/Entities*,” or “*LEIE*,” available at [http://oig.hhs.gov/fraud/exclusions/exclusions\\_list.asp](http://oig.hhs.gov/fraud/exclusions/exclusions_list.asp);
- ii. National Government Services (NGS) website – verification of Medicare participation;
- iii. Office of the Medicaid Inspector General (OMIG) website – verification of Medicaid participation by reviewing OMIG’s list of “*Restricted, Terminated or Excluded Individuals*,” available at <https://omig.ny.gov/index.php/fraud/medicaid-exclusions>;
- iv. Office of Professional Medical Conduct and Physician Discipline (OPMC) website – verification of practitioners who have been disciplined by OPMC, available at <http://www.health.state.ny.us/professionals/doctors/conduct/>;
- v. National Practitioner Data Bank and the Healthcare Integrity and Protection Data Bank; flagging systems intended to facilitate a comprehensive review of health care practitioners' professional credentials or past actions, available at <http://www.npdb-hipdb.hrsa.gov/>; and
- vi. OIG LEIE and System for Award Management (SAM) website –database search for entity registration and exclusion records, available at <https://www.sam.gov/portal/SAM/##11#1>.

B. Ongoing Obligation to Report. All Members of the Medical Staff are required to disclose if they become Excluded Providers subsequent to appointment/reappointment. All Affected Individuals have an obligation to notify the Compliance Officer immediately upon receipt of any information indicating that they have been charged with a crime relating to health care or is facing debarment, exclusion, or other ineligibility from participation in any federal health care program. Failure to notify the Compliance Officer may result in disciplinary action.

C. Notification to Compliance Officer. If it is determined that an Affected Individual is listed as excluded, the department conducting the query shall immediately notify the Compliance Officer. The Compliance Officer, or his/her designee, shall ensure that appropriate action is taken immediately to ensure the excluded individual/company no longer conducts business with the Hospital, including but not limited to the ordering, furnishing or prescribing of medical care or treatments for Hospital patients.

Additionally, pending resolution of any criminal charges or proposed debarment or exclusion, Affected Individuals with whom or which the Hospital currently contracts that are charged with criminal offenses related to health care, or are proposed for debarment or exclusion, will be removed from providing services to the Hospital, whether such services are directly or indirectly related to any federal or state health care program. If resolution results in conviction, debarment, or exclusion of the individual or company, the Hospital will immediately cease contracting with that individual or company.

D. Documentation. The Compliance Officer, or his/her designee, shall ensure that a record of each screening query made under this Policy will be maintained in accordance with the Hospital's record retention policies and procedures.

E. References.

- i. US Department of Health and Human Services, Office of Inspector General, LEIE Website
- ii. New York State Office of Medicaid Inspector General; Restricted, Terminated or Excluded Individuals or Entities Website
- iii. New York State Department of Health, Links to the OPMC and Physician Profile Websites
- iv. National Practitioner Data Bank and Healthcare Integrity and Protection Data Ba

Approved: John W. Baganaki, MT(ASCP) Corporate Compliance Officer 10/29/2024  
Name Title Date

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