

MAIMONIDES MEDICAL CENTER

CODE: COMP-001 (Revised)

DATE: May 25, 2017

ORIGINALLY ISSUED: June 17, 2002

SUBJECT: PROHIBITION AGAINST CONTRACTING WITH OR HIRING PERSONS EXCLUDED FROM GOVERNMENT PAYOR PROGRAMS AND PERSONS PROHIBITED UNDER EXECUTIVE ORDER 13224

1. **PURPOSE:**

Maimonides Medical Center, as well as its Departments, Groups and Divisions, may not contract with or hire any Ineligible Person. If the Medical Center is currently in contract with any individual or company who/which is subsequently convicted, debarred or excluded, the Medical Center must immediately cease contracting with that Ineligible Person.

The following exclusion lists will be routinely monitored: Office of the Inspector General (LEIE), System for Award Management (SAM), US Treasury Non-SDN OFAC Consolidated Sanctions, US Treasury SDN & Blocked Persons(OFAC) and New York Medicaid Exclusions List.

DEFINITION

For purposes of this policy, an “Ineligible Person shall be any individual or entity who: (i) is currently excluded, suspended, debarred or otherwise ineligible to participate in the Federal health care programs; or (ii) has been convicted of a criminal offense related to the provision of health care items or services and has not been reinstated in the Federal health care programs after a period of exclusion, suspension, debarment, or ineligibility, or (iii) is listed on the SDN list.

II. **RESPONSIBILITY**

- A. The Purchasing Department will check the required lists using the SanctionCheck program before issuing a vendor number.
- B. The Accounts Payable Department will forward any new vendors that they want to add to the Purchasing Department who in turn will check the required lists. In addition, Accounts Payable will mark the file as requiring or not requiring Sanction Check verification. The only vendors who do not need to be checked are patients receiving refunds and employees of MMC receiving expense reimbursement.

- C. Prior to execution of a contract the Legal Department will forward the names of any new vendor or consultant to the Compliance Officer so that the appropriate lists can be checked or check the required lists themselves.
- D. In accordance with HR-4 Employee Selection and Recruitment, the Human Resources Department will check all new hires against the required lists.
- E. The Credentials Department is responsible for checking each new applicant against the required lists before approving Medical Staff privileges.
- F. The Laboratory and Radiology Departments are responsible for checking all new referring physicians against the required lists if the referring physician is not on our Medical Staff. They must provide the information to the MIS department to make sure the physician is properly registered in our MIS systems.
- G. The Legal Department is responsible for assisting the Compliance Officer in reviewing potential matches and assisting in the termination of contracts when it is determined that contractors/vendors have been debarred or excluded from Federal health care programs or are listed in the SDN list.
- H. The Volunteer Department will check each new volunteer against the required lists prior to finalizing their volunteer status.
- J. Academic Affairs will check all medical students monthly during MMC rotation.
- K. After the initial check as described in A-J above, the Compliance Department is responsible for conducting monthly checks for all employees, medical staff member, vendors, volunteers, agency nurses, Board Members and referring physicians.

III. **PROCEDURE:**

- A. Before entering into a contract or purchase order or consulting agreement, the Purchasing Department will ensure the proposed contractor is not an Ineligible Person. The Purchasing Department must compare the name of each potential contractor to the required exclusions lists.
- B. The Human Resources Department will check all new hires against the required lists before employment.
- C. The Credentials Department will check each applicant to the Medical Staff against the required lists.

- D. To facilitate searching the government databases for excluded parties, the Medical Center has contracted with Sanctioncheck.com. All new vendors must be checked via the internet through Sanctioncheck.com
- E. Should an individual or company appear on any of the sanction lists, the Medical Center and its affiliated facilities may not contract with that individual or company or hire that individual or appoint them to its Medical Staff until the charges are resolved and it is clear the individual or company is not excluded or debarred.
- F. Should an individual or company provide satisfactory evidence they are not the individual or company that appears on the sanction list, that individual or company may be considered eligible to do business with the Medical Center.
- G. All questions concerning the initial clearance should be brought to the Compliance Officer for resolution.
- H. On a monthly basis, MIS, Credentialing, Volunteers, HR and Purchasing shall provide the Compliance Department with a current list of Vendors, Employee, Medical Staff, Volunteers and referring Physicians.
- I. On a monthly basis the Compliance office will check the most recent lists with Sanction check to verify that previously cleared individuals have not become sanctioned individuals
- J. Documentation: Whenever a search of a potential contractor is conducted on the GSA List and the OIG Sanction Report, the SDN list and NYS OMIG Exclusion List, the Search Results screens must be printed and copies must be maintained, whether or not the results indicate a match. Such copies may be maintained in the Purchasing Department or in the Legal Department's contract file or by the Compliance Officer.
- K. All documents pertaining to an incident in which a listed contractor is confirmed to be an Ineligible Person must be maintained for a minimum of five (5) years.
- L. The following language is to be included in all Requests for Information (RFIs) submitted to potential contractors:

“Maimonides Medical Center complies with all Federal and state laws and regulations including the requirement not to contract with sanctioned individuals or companies. Has your company or any individual employed by your company been listed by a Federal Agency as debarred, excluded or

otherwise ineligible for participation in federally funded health care programs?”

An appropriate response to this question is mandatory before a vendor may be qualified to contract with the Medical Center.

M. The following language is to be included in all agreements with contractors:

“The undersigned agrees to immediately disclose to the Medical Center any debarment, exclusion or other event that makes the undersigned or any individual employed by the undersigned ineligible to participate in government funded health care programs”

IV. **CONTROLS**

The Vice President Financial Administration, Corporate Compliance Officer and the Executive Vice President for Legal Affairs will ensure adherence to this policy.

Kenneth D. Gibbs
President & CEO

REFERENCE: OIG Model Compliance Program Guidance for Hospitals 63FR8987, Special Advisory Bulletin “The Effect of Exclusion from Participation in Federal Health Care Programs” September 1999, 42USC1320a-7a(a)(6), 42CFR1001.1901; Executive Order 13224 – Blocking Property and Prohibiting Transactions With Persons Who Commit, Threaten to Commit, or Support Terrorism, Title 31, Part 596 of CFR

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ORIGINATING DEPARTMENT: Legal Department