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Owner: Leisa Powell: HCS Assoc Dir
 HOSP Compliance
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Applicability: UNC Health Care System
 (all owned and managed entities)

Employee Compliance Education

APPLICABILITY:

This policy applies to the following Network Entities (collectively referred to as "UNC Health Care" or "UNC HC" in this policy):

✓ UNC Health Care System/UNC Medical Center*	✓ Johnston Health
✓ UNC Physicians Network	✓ Lenoir Memorial Hospital
✓ UNC Physicians Network Group Practices	✓ Margaret R. Pardee Memorial Hospital
✓ Rex Healthcare / Rex Hospital	✓ Nash Healthcare System / Nash Hospitals
✓ Chatham Hospital	✓ Wayne Memorial Hospital
✓ Caldwell Memorial Hospital	
✓ UNC Rockingham Health Care / UNC Rockingham Hospital	

*UNC Medical Center includes all UNC Hospitals' facilities and the clinical patient care programs of the School of Medicine of UNC-Chapel Hill (including UNC Faculty Physicians).

I. Description

Requirements for completion of compliance education and related attestations by employees.

Compliance education requirements for non-employees (including but not limited to: medical students, volunteers, non-employed physicians, and vendors) may be addressed in medical staff bylaws or applicable policies, procedures, or agreements.

II. Definitions

Compliance Officer – the individual at the Network Entity responsible for implementing and overseeing the entity's Compliance Program. ([Hospital Compliance Program policy](#) and [Professional Compliance Program policy](#))

III. Rationale

It is UNC Health Care policy to provide an ongoing compliance education program.

The Office of Inspector General (OIG) includes education among the seven fundamental elements of an effective compliance program.

The OIG expects compliance offices to develop and implement regular, effective compliance education and training programs for all employees that focus on: elements of the compliance program, the entity's compliance policies and Code of Conduct, and relevant healthcare laws and regulations.

In addition to general compliance training, the OIG and Centers for Medicare & Medicaid Services (CMS) expect employees in certain job functions (such as those involved with billing, cost reporting, referral source arrangements, and Medicare Parts C and D) to receive specialized compliance training.

IV. Policy

A. Onboarding and New Employee Orientation

New employees must complete a Code of Conduct attestation (Appendix to [Code of Conduct](#) policy) and compliance training before beginning work.

As part of the onboarding process, each new employee receives a copy of the UNC Health Care Code of Conduct and must attest to compliance with the Code of Conduct.

Generally, employees attend compliance training at new employee orientation prior to beginning their designated duties. At new employee orientation, the entity's Compliance Officer (or designee) provides training on the Compliance Program, Code of Conduct, compliance policies, and pertinent healthcare laws, regulations, and guidance (such as those relating to false claims, exclusion, and fraud, waste, and abuse). Orientation staff verify new employee attendance at orientation and notify the applicable hiring manager or Human Resources (HR) representative of any absences.

For employees hired "off-cycle," one of the following must occur before the employee assumes work duties: (1) the supervisor reviews new employee Compliance and Privacy handouts (Appendices A and B) with the employee or (2) the employee completes annual compliance training modules. "Off-cycle" employees must attend the next available new employee orientation session.

Records of attendance at new employee orientation, as well as Code of Conduct attestations, are maintained by the applicable Employee Records Office.

B. General Compliance Training (Annual)

New employees must complete general compliance training within thirty (30) calendar days of initial employment. All other employees must complete general compliance training by the annual deadline assigned by their network entity, subject to adjustments for FMLA and disability leave. The annual deadline will occur prior to the end of the period for which the employee is being evaluated (e.g., performance evaluation).

General compliance training is assigned and provided through Learning Made Simple (LMS) or an

equivalent learning system. This training focuses on the Compliance Program, Code of Conduct, compliance policies (such as those relating to conflicts of interest and vendor relations), and pertinent healthcare laws, regulations and guidelines (such as those relating to false claims, exclusion and fraud, waste and abuse. As part of this training, employees must attest to compliance with the Code of Conduct and make appropriate conflict of interest disclosures.

The applicable Learning and Organizational Development (LOD) or Human Resources (HR) Office is responsible for assigning the general compliance training, provided by the Compliance Office, to employees for completion by the applicable deadline. LOD or HR will keep, available for audit, a list of employees who were assigned general compliance training, deadlines for completion of the training, and a list of employees who failed to complete training by the applicable deadline.

C. **Specialized Compliance Training (Annual)**

Employees in certain job functions may also be assigned specialized compliance training. Specialized compliance training may include in-depth training on fraud, waste, and abuse or compliance as it relates to Medicare Parts C and D as well as other topics selected by the Compliance Officer.

All employees entering or transferring to a job function that requires specialized compliance training must complete the required training within thirty (30) calendar days of beginning the job. Thereafter, employees complete specialized training by the annual deadline assigned by their Network Entity, subject to adjustments for FMLA and disability leave. This deadline will occur prior to the end of the period for which the employee is being evaluated (e.g., performance evaluation).

The Compliance Officer will work with the applicable Learning and Organizational Development (LOD) or Human Resources (HR) Office to determine which job functions require specialized training. LOD or HR will then assign specialized compliance training, provided by the Compliance Office, to employees in those job functions for completion by the applicable deadline.

The applicable LOD or HR Office will keep, available for audit, a list of employees who were assigned specialized compliance training, deadlines for completion of the training, and a list of employees who failed to complete training by the applicable deadline.

D. **Responsibilities**

1. ***Employee Responsibilities***

Employees are responsible for timely completion of compliance education and related attestations, adherence to this policy, and for bringing any concerns they have to the attention of their supervisor.

2. ***Supervisor Responsibilities***

Supervisors will permit employees to complete assigned compliance training during work hours.

Each supervisor must review completion by their assigned employees of all mandatory compliance education prior to completing each employee's performance review.

Where employees are non-compliant with compliance education requirements, the supervisor will participate in the notification and corrective action processes described below.

E. Notification of Compliance Education Deadlines

1. *Prior to Deadline*

New hire paperwork will discuss the requirement to complete compliance training modules within thirty (30) days of initial employment, and annually thereafter. Additionally, new employee orientation will discuss compliance education deadlines.

Deadlines for completing assigned compliance training will be clearly stated in LMS or the equivalent learning system.

Thirty (30) days prior to the annual deadline for completion of general or specialized compliance training, the applicable LOD or HR Office will remind employees who have not yet completed annual compliance training (and their applicable supervisors) of compliance education deadlines.

LOD or HR may send subsequent reminders, such as ten days or five days prior to the annual deadline or deadline for new employees, as appropriate.

After receiving notification from LOD/HR of an employee's outstanding compliance education requirements, the applicable supervisor (or designee) will review this policy with the employee.

2. *After the Deadline*

Within seven (7) days following a compliance education deadline, the applicable LOD or HR Office will provide a list of employees who failed to timely complete compliance education requirements to the applicable Compliance Officer and the applicable Employee Relations or HR Office responsible for overseeing corrective action.

LOD/HR will also notify individual employees (and their relevant supervisors) of their failure to meet compliance training deadlines.

F. Corrective Action

Employees who are non-compliant with general or specialized compliance training requirements by applicable deadlines will be subject to the following corrective action process relative to the completion deadline for any outstanding compliance training, with deadline adjustments for FMLA and disability leave described below.

For failure to complete compliance education by the applicable deadline, employees will receive the next level of corrective action in accordance with the applicable entity-or system-level policies. The applicable supervisor or designee will review this policy with the employee as part of the corrective action process.

During the fourteen (14) calendar days following the compliance education deadline, employees will be permitted to complete any outstanding compliance education during work hours in order to avoid termination.

Key Point: Employees who do not complete outstanding compliance education within 14 calendar days following the applicable compliance education deadline are subject to termination on the 15th calendar day after the deadline.

The Compliance Officer will be informed of corrective action issued and will receive updates when employees who were non-compliant with compliance training requirements complete their training.

Failure to complete compliance training by the assigned deadline, as well as any corrective action issued, will be noted in the employee's record.

G. Adjustment for FMLA and Disability Leave

If a compliance training deadline occurs when an employee (with outstanding compliance training) is on an approved FMLA or disability leave of absence, the employee's deadline for that outstanding compliance training will be adjusted to thirty (30) calendar days from the day the employee returns to work. If the employee has outstanding compliance training after the FMLA or disability leave-adjusted deadline has passed, the employee is subject to the corrective action scheme described above, relative to the adjusted compliance training deadlines.

V. References

Compliance Program Policy and Guidance, CMS, <https://www.cms.gov/Medicare/Compliance-and-Audits/Part-C-and-Part-D-Compliance-and-Audits/ComplianceProgramPolicyandGuidance.html>.

OIG, Compliance Program Guidance for Hospitals, 63 Fed. Reg. 8987 (Feb. 23, 1998).

OIG, Supplemental Compliance Program Guidance for Hospitals, 70 Fed. Reg. 4858 (Jan. 31, 2005).

VI. Related Policies

[Code of Conduct](#)

[Hospital Compliance Program](#)

[Professional Compliance Program](#)

[False Claims Education](#)

[HIPAA Training for UNCHCS Workforce](#)

Attachments:

[Appendix A - Compliance Handout for New Employees.docx](#)

[Appendix B - Privacy Handout for New Employees.docx](#)

Approval Signatures

Step Description	Approver	Date
	Jerylyn Williams: VP Chief Audit & Comp Officer	08/2018
SYSTEM Site Administrator	Emilie Hendee: HCS-Sr Attorney	07/2018
	Leisa Powell: HCS-Assoc Dir HOSP Compliance	07/2018

Applicability

Caldwell Memorial Hospital, Chatham Hospital, Johnston Health, Nash Health Care, Pardee Hospital, UNC Health Care System, UNC Lenoir Health Care, UNC Medical Center, UNC Physicians Network, UNC Rex Healthcare, UNC Rockingham Health Care, Wayne Memorial Hospital

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