

INDEPENDENT CARE HEALTH PLAN

Department: Compliance	Policy Name: Compliance Training
Policy Number: CO-002	Page: 1 of 3
Cross Reference: PHI-005	

Policy: Independent Care Health Plan (*iCare*) has an established Compliance Program. As part of the Compliance Program, all employees, internal service contractors, temporary staff, interns and members of the governing body (staff) are trained on their duties and responsibilities to ensure compliance with all required regulations and corporate policies. Staff includes current and newly hired or on-boarded individuals.

Attendance and participation in the Compliance Program training is a condition of continued employment, and failure to comply with training requirements will result in disciplinary action, including possible termination. Adherence to the provisions of the compliance program including training requirements will be a factor in the annual evaluation of each employee.

If at any point an individual believes that he or she has not been provided with sufficient education, that person has a duty to inform his or her supervisor of this issue.

This policy also extends to *iCare*'s First Tier, Downstream, and Related Entities (FDRs) performing delegated health care or administrative services related to *iCare*'s Medicare contract. Independent Care is required to ensure its FDRs meet CMS compliance program requirements including general compliance orientation and Fraud, Waste, and Abuse training.

Process:

General Compliance Training

- 1) The *iCare* Compliance Department and Compliance Committee are responsible for developing, implementing, providing, evaluating, tracking and maintaining a compliance training program. This is done through the *iCare* Learning Portal via Relias.
- 2) All new staff receive the Code of Conduct and general compliance training within sixty (60) days of hire. Current staff receive refresher compliance training, as well as the Code of Conduct, on an annual basis. To ensure all new hires are enrolled in compliance training timely, at the end of each quarter the Compliance Specialist requests a list of all new hires from Human Resources. If the number of new hires exceeds five, the Compliance Specialist picks a random sample of five new hires to check against Relias to ensure they have been enrolled in New Hire Compliance training. If the number is five or less all are checked. In addition, when the weekly 'Welcome' email is sent from the Corporate Impact Coach listing all new hires, the Compliance Specialist checks that those staff members have been entered into Relias and enrolled in New Hire Compliance Training.
- 3) Compliance training consists of, at a minimum, the following elements:
 - a) An overview of the following topics:
 - i) Independent Care's Compliance Program

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- ii) Independent Care’s Code of Conduct
 - iii) Independent Care’s available reporting mechanisms and lines of communication
 - iv) Independent Care’s commitment to non-retribution and non-retaliation
 - v) Independent Care’s commitment to confidentiality and anonymity
 - vi) A review of potential conflicts of interest and *iCare*’s disclosure system
 - vii) Fraud, Waste, and Abuse
 - viii) Privacy and Security
 - ix) Specific federal regulations including HIPAA, False Claims Act, Anti-Kickback Statute and Ineligible Persons
- 4) Common compliance issues relevant to *iCare*
 Compliance Training materials are kept and maintained in Relias. The Compliance Department, via Relias, is responsible for maintaining the following training records:
- a) Topic
 - b) Content/Materials
 - c) Attendance
 - d) Results of effectiveness assessments
 - e) Remedial training documentation, if necessary
- 5) The Code of Conduct is available to staff upon hire and to all Staff during annual compliance training through Relias. The Code, along with other related compliance materials, is also available via the intranet on the Compliance Department homepage and the HR homepage.
- a) Staff are instructed to read all of the information carefully and then complete the Final Exam. This exam is an Acknowledgment Form which states that the employee has received, read and understands the Code, but in question format. The exam is to be completed upon hire and annually thereafter.
- 6) Members of *iCare*’s governing body receive the same general compliance or comparable training upon appointment and annually thereafter. If the governing body member’s employer provides compliance training, a document showing this training has occurred is sufficient and they will not need to take *iCare*’s compliance training. Records are maintained by the Compliance Department and via Relias.
- 7) The *iCare* Compliance Officer is required to attend at least one external compliance/audit based conference or training seminar a year to ensure continued education above and beyond staff compliance training.
- 8) FDRs must receive general compliance orientation and FWA training within 90 days of contracting and annually thereafter. Alternatively, *iCare* may ensure the FDR has a comparable compliance program in place, including FWA training, meeting CMS requirements.
- 9) HMO staff working with the BadgerCare Plus, Medicaid SSI, and Family Care Partnership members complete two cultural competence trainings per calendar year.

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10) Staff that do not complete compliance training timely will be reported to the VP of the specific operational area.

Specific Compliance Training

- 1) Employees receive additional specialized training to be determined based on role. Each department is responsible for developing specific compliance training content.
- 2) Each department develops and maintains documentation of specific training provided, including materials, effectiveness assessments, attendance logs and attestations.

Responsible Department: Compliance

Responsible Party: Director of Compliance

Reviewing Department(s): Compliance

References: MMCM Chapter 21; 42 CFR §422.503(b)(4)(vi)(C); 42 CFR §423.504(b)(4)(vi)(C); 42 CFR §438.608(a)(1)(iv)

Recommended Distribution: All staff via Independent Care’s SharePoint Site

Approvals:

Approved By: Jill Fisher	DIRECTOR OF COMPLIANCE	Date: 7/22/2020 2:34 PM
Comments:		
Approved By: Tom Lutzow	President & CEO	Date: 7/22/2020 2:45 PM
Comments:		

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