

## **COMPLIANCE 13.0                      INELIGIBLE PERSONS**

**Scope:**            All subsidiaries of Universal Health Services, Inc., including facilities and UHS of Delaware Inc. and their personnel.

**Purpose:**            To establish the UHS policy and procedure for persons determined to be ineligible to perform any procedures and/or provide or order services that are paid in whole or in part by any federal or state health care programs.

To assure that no government health care program payment is sought for any items or services directed or prescribed by a physician, privileged practitioner or independent or dependent practitioner or contractor who provides and/or orders services and who is an ineligible person.

To assure that all UHS subsidiaries conduct appropriate checks as to exclusion and licensure status for applicable individuals and entities in accordance with applicable federal and state laws.

**Policy:**            It is the policy of UHS to assure that no person or entity engaged as an employee, vendor, independent contractor, and/or provider of services, shall perform any procedures and/or provide or order services, if such individual or entity is determined to be ineligible.

### **Procedure:**

It shall be the responsibility of all facility personnel and UHS personnel to inform the Chief Compliance Officer and the applicable Facility Compliance Officer and Human Resources Departments of any change in status that may cause an individual or entity to become an Ineligible Person.

An "Ineligible Person" shall include:

1. an individual or entity currently excluded, debarred, suspended, or otherwise ineligible to participate in the federal or state health care programs or in federal or state procurement or non-procurement programs;
2. an individual or entity that has been convicted of a criminal offense that falls within the scope of 42 U.S.C. § 1320a-7(a), or similar state statute, but has not yet been excluded, debarred, suspended, or otherwise declared ineligible; or
3. an individual or entity currently excluded on a state exclusion list.

It shall be the responsibility of each of the Human Resources Departments to conduct a full background check before hiring of all employees to verify that the employee is not on the HHS/OIG List of Excluded Individuals/Entities (“OIG Sanction Report”) and the General Services Administration's List of Parties Excluded from Federal Programs (“GSA List”) or any

state exclusion list. Any perspective employee or volunteer on the OIG Exclusion List is prohibited from working at any UHS subsidiary.

The Compliance Office conducts monthly checks of the OIG Excluded List for all its employees and vendors. If an employee or vendor is discovered to be on the list, Corporate Compliance will immediately notify the facility CEO, HRD, and the UHS Office of General Counsel.

State licensing agencies and/or select insurance plans may require an annual attestation verifying that a monthly search of the OIG LEIE has been performed. If an attestation is required, the FCO should contact the UHS Compliance Office for the annual certification.

**Related UHS Policies:**

UHS Corporate H.R. 18.0

Employment Background Screening

**Revision Dates:**

**10-12-2017; 10-01-2015; 10-26-2012**

**Implementation Date: 10-21-2010**

**Reviewed and Approved by:**

**UHS Compliance Committee**