

# SCHOOL DISTRICT OF SPRINGFIELD TOWNSHIP

SECTION: OPERATIONS

TITLE: SCREENING OF EMPLOYEES/  
CONTRACTORS

ADOPTED: January 22, 2013

REVISED:

## 828. SCREENING OF EMPLOYEES AND CONTRACTORS FOR EXCLUSION FROM PARTICIPATING IN FEDERAL HEALTH CARE PROGRAMS

Purpose	<p>As a health care provider that participates in the Medical Assistance (MA) Program, the District is required to screen its employees and contractors, both individuals and entities, to determine if they have been excluded from participating in Medicare, Medicaid, or any other federal health care program.</p> <p>This regulation is designed to create the procedures for screening all employees and contractors (both individuals and entities) at the time of hiring or contracting and, thereafter, ongoing on a monthly basis, whose job assignments could involve Medical Assistance billable activities or whose materials, supplies or equipment could be billed to a Medical Assistance program, to determine if they have been excluded from participation in federal healthcare programs, as required by federal and state law.<sup>1</sup></p>
Procedures for Screening Employees/Contractors	<p>A. All employees, vendors, contractors, service providers, and referral sources that are associated directly or indirectly with a Medicaid/federally funded health care service should be screened at the time of hire/contracting and monthly thereafter. Screening may include the need to obtain information from the employee or</p>

<sup>1</sup> See Medical Assistance Bulletin 99-11-05. When the Department of Health and Human Services' Office of Inspector General (HHS-OIG) excludes a provider, Federal health care programs (including Medicaid and SCHIP programs) are generally prohibited from paying for any items or services furnished, ordered, or prescribed by the excluded individuals or entities. See Section 1903(i)(2)(A),(B) of the Act (42 U.S.C.A. § 1396b(i)(2)(A),(B)); and 42 Code of Federal Regulation (CFR) Section 1001.1901(b). This payment ban applies to any items or services payable under a Medicaid program that are furnished by an excluded individual entity, and extends to: (1) all methods of reimbursement, whether payment results from itemized claims, cost reports, fee schedules, or a prospective payment system; (2) payment for administrative and management services not directly related to patient care, but that are necessary component of providing items and services to Medicaid recipients, when those payments are reported on a cost report or are otherwise payable by Medicaid program; and (3) payment to cover an excluded individual's salary, expenses or fringe benefits, regardless of whether they provide direct patient care, when those payments are reported on a cost report or are otherwise payable by the Medicaid program.

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	<p>contractor including home address, date of birth and possibly the individuals social security number</p> <p>a. Examples of individuals or entities that the District should screen for exclusion include, but are not limited to:</p> <ul style="list-style-type: none"> <li>i. Professional and paraprofessional staff, whether employed or contracted, who provide services for which a charge can be made against the ACCESS program, Medical Assistance home and community service program or any other Medical Assistance program, such as speech and language therapists, occupational and physical therapists, LEA representatives, PCAs, BSCs, psychologists and counselors.</li> <li>ii. Professional, paraprofessional and clerical staff, whether employed or contracted, who supervise the staff providing such direct services (as described in § A(a)(i) of this Policy) and staff who manage records, provide support and handle billing for such services (as described in § A(a)(i) of this Policy).</li> <li>iii. Venders who provide specialized transportation services or who furnish materials, supplies and equipment for which the District may bill a Medical Assistance program such as ACCESS. Examples of such materials, supplies, or equipment that the District may bill a Medical Assistance program would include an assistive communication device, a wheelchair or a lift.</li> </ul> <p>B. Screening Procedures:</p> <p>The District or a third party designee of the District will check all three of the following databases to determine exclusion status:</p> <p>a. <b>Pennsylvania Medichcek List:</b> a database maintained by the</p>
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	<p>Department of Public Welfare that identifies providers, individuals, and other entities that are precluded from participation in Pennsylvania’s MA program:</p> <p><a href="http://www.dpw.state.pa.us/publications/medichecksearch/index.htm">http://www.dpw.state.pa.us/publications/medichecksearch/index.htm</a></p> <p>If an individual’s resume indicates that he/she has worked in another state, the District should also check the state’s individual list (if available).</p> <p><b>b. List of Excluded Individuals/Entities (LEIE):</b> a database maintained by Department of Health and Human Services’ Office of Inspector General that identifies individuals or entities that have been excluded nationwide from participating in any federal health care program. An individual or entity included on the list is ineligible to participate, either directly or indirectly, in the MA Program. Although the Department makes best efforts to include on the Medichcek List all federally excluded individuals/entities that practice in Pennsylvania, providers must also use the LEIE to ensure that the individual/entity is eligible to participate in the MA Program:</p> <p><a href="http://oig.hhs.gov/fraud/report-fraud/index.asp">http://oig.hhs.gov/fraud/report-fraud/index.asp</a></p> <p><b>c. Excluded Parties List System (EPLS):</b> World wide database maintained by the General Services Administration that provides information about parties that are excluded from receiving Federal contracts, certain subcontracts, and certain Federal financial and nonfinancial assistance and benefits:</p> <p><a href="https://www.epls.gov/">https://www.epls.gov/</a></p> <p>C. The District will immediately self-report any discovered exclusion of an employee or contractor (either an individual or entity) to the Bureau of Program Integrity using one of the following methods:</p> <p>a. By e-mail through the MA Provider Compliance form at the</p>
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	<p>following link:</p> <p><a href="http://www.dpw.state.pa.us/learnaboutdpw/fraudandabuse/maprovidercompliancethotlinerresponseform/index.htm">http://www.dpw.state.pa.us/learnaboutdpw/fraudandabuse/maprovidercompliancethotlinerresponseform/index.htm</a></p> <p>b. By U.S. mail at the following address:</p> <p>Bureau of Program Integrity Commonwealth of Pennsylvania PO Box 2675 Harrisburg, PA 17105-2675</p> <p>c. By fax at: (717)772-4655 or (717)772-4638</p> <p>D. The District, in conjunction with a third party designee, will develop and maintain in a file, for ten (10) years, auditable documentation of screening efforts, including dates the screenings were performed and the source data checked and the dates of most recent update.</p> <p>E. The District will periodically conduct self-audits to determine compliance with this screening requirement.</p>
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