

Vendors / Contractors / Business Associates

A MESSAGE TO VENDORS & CONTRACTORS FEDERAL AND STATE FALSE CLAIMS LAWS

It is the policy of West Calcasieu Cameron Hospital to obey federal and state laws, to implement and enforce procedures to detect and prevent fraud, waste, and abuse regarding payments to the Hospital from federal or state healthcare programs, and to provide protections for those who report actual or suspected wrongdoing.

What are some of the things that the Hospital is required to do to comply with the federal Deficit Reduction Act of 2005 & Louisiana’s Medical Assistance Programs Integrity Law? These laws require us to establish written policies and procedures about federal and state false claims laws and whistleblower protections and how we will take steps to detect and prevent healthcare fraud, waste, and abuse.

We have the required policies and procedures in place, and our policies are applicable to employees and to our business partners and independent contractors who furnish healthcare items and healthcare services to our patients or on our behalf. The Hospital’s corporate compliance plan establishes standards for conducting hospital business with excellence, integrity, and responsibility. It also provides guidelines which employees may use to prevent and detect any violation of the law. Because you do business with the Hospital, you are required to comply with the plan and related policies.

What is the False Claims Act? This federal law (31 U.S.C. §§ 3729-3733) establishes liability when any person or entity improperly receives from or avoids payment to the United States government. The Act authorizes federal prosecutors to file a civil action against any person or entity that “knowingly files” a false claim with a federal health care program, including Medicare or Medicaid, and applies to any person or entity that:

- Knowingly submits a false/fraudulent claim for payment to the United States government;
- Knowingly makes/uses a false record or statement in order to get a false or fraudulent claim paid by the United States government;
- Conspires with others to get a false or fraudulent claim paid; or
- Knowingly makes any false record/statement in order to avoid or decrease an obligation to pay the government.

Anyone who knowingly submits a false or fraudulent claim to a Medicare, Medicaid or other federal healthcare program is liable to the federal government for three times the amount of the federal government’s damages plus penalties of \$5,000 to \$10,000 per false or fraudulent claim. The government may exclude “violators” from participating in

Medicare, Medicaid, and other government programs, and any person or entity that makes an intentional submission of a false claim is subject to federal criminal enforcement.

Louisiana also has a false claims law which is called the “Medical Assistance Programs Integrity Law” (LSA-R.S. 46:437.1, et seq.), and it is very similar to the federal False Claims Act.

What are some examples of false claims? In healthcare, false claims may include things like: billing twice for the same service or billing for services not rendered; billing for medically unnecessary services; unbundling or billing separately for services that should be billed as one; creating false medical records to increase payments; failing to report and refund overpayments or credit balances; and giving and/or receiving unlawful inducements to healthcare providers for referrals for services.

What are whistleblower protections? Individuals who observe activities that may violate the law in some manner and who report their observations either to management or to governmental agencies are provided protections under certain laws, and these protections are “whistleblower” protections. Generally, whistleblowers are protected by the law from retaliation in any form.

What & how do I report? If you suspect instances of healthcare fraud, submission of false claims or other noncompliance with laws or the Hospital’s policies and procedures, you must report it. There are several options available to you:

- You may contact the Hospital’s Compliance Department at (337) 528-7891 and speak with the Compliance Officer or any member of the Executive Leadership team. [*Confidentiality will be maintained, to the extent possible.*]
- You may call the Hospital’s internal Corporate Compliance Hotline at (337) 527-4168. You may remain anonymous, but you must provide as much information as possible to enable us to investigate your claims and take appropriate corrective action.
- You may contact the Office of Inspector General (US Department of Health and Human Services) at 1-800-HHS-TIPS (1-800-447-8477) or the Louisiana Medicaid Fraud Control Unit at 1-888-799-6885.