



# **ANTHC ETHICS & COMPLIANCE SERVICES**

## **NEW HIRE ORIENTATION**

### **PRIVACY, INTEGRITY, AND TEAMWORK**



# Mission, Vision, Values



ALASKA NATIVE  
TRIBAL HEALTH  
CONSORTIUM

## Vision

Alaska Native people are the healthiest people in the world.

## Mission

Optimizing health and well-being through collaborative partnerships and services.

## Values

**Self-determination:** We support and promote Tribal Self-determination.

**Quality:** Our work demonstrates a commitment to excellence, continuous improvement, accuracy, and professionalism.

**Integrity:** We lead by example, communicate honestly, and act with respect.

**Teamwork:** Our collective efforts, talents, and knowledge advance ANTHC's vision.



# OBJECTIVES

- Describe the importance of ethical & compliant conduct
- Understand our responsibilities for the privacy & security of information
- Review Safeguards
- Recognize accreditation & survey criterion
- Understand the False Claims Act and Whistleblower protections
- Examine our responsibilities for auditing & monitoring
- Know how & when to contact the Ethics & Compliance Services team!

# 7 ELEMENTS OF AN EFFECTIVE COMPLIANCE PROGRAM



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1

Designation of a  
Compliance Officer and  
Compliance Committee

2

Development of policies  
and procedures

3

Developing and  
maintaining open lines of  
communication

4

Development and  
implementation of training  
and education

5

Internal monitoring and  
auditing

6

Response to deficiencies,  
issues, and concerns

7

Enforcement of standards  
through disciplinary  
guidelines

Privacy  
Consults

Field  
Complaints and  
Conduct  
Investigations

Monitor Health  
Records Access  
and Use

Manage  
Policies and  
Procedures

Breach and  
Risk  
Assessments

Audit billing and  
documentation

Evaluate  
Software and IT  
System Security

Training and  
Interpretive  
Materials

**COMPLIANCE IS A RESOURCE**



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Certain administrative, financial, legal, and quality improvement activities, of a covered entity, are necessary to run its business and to support the core functions.

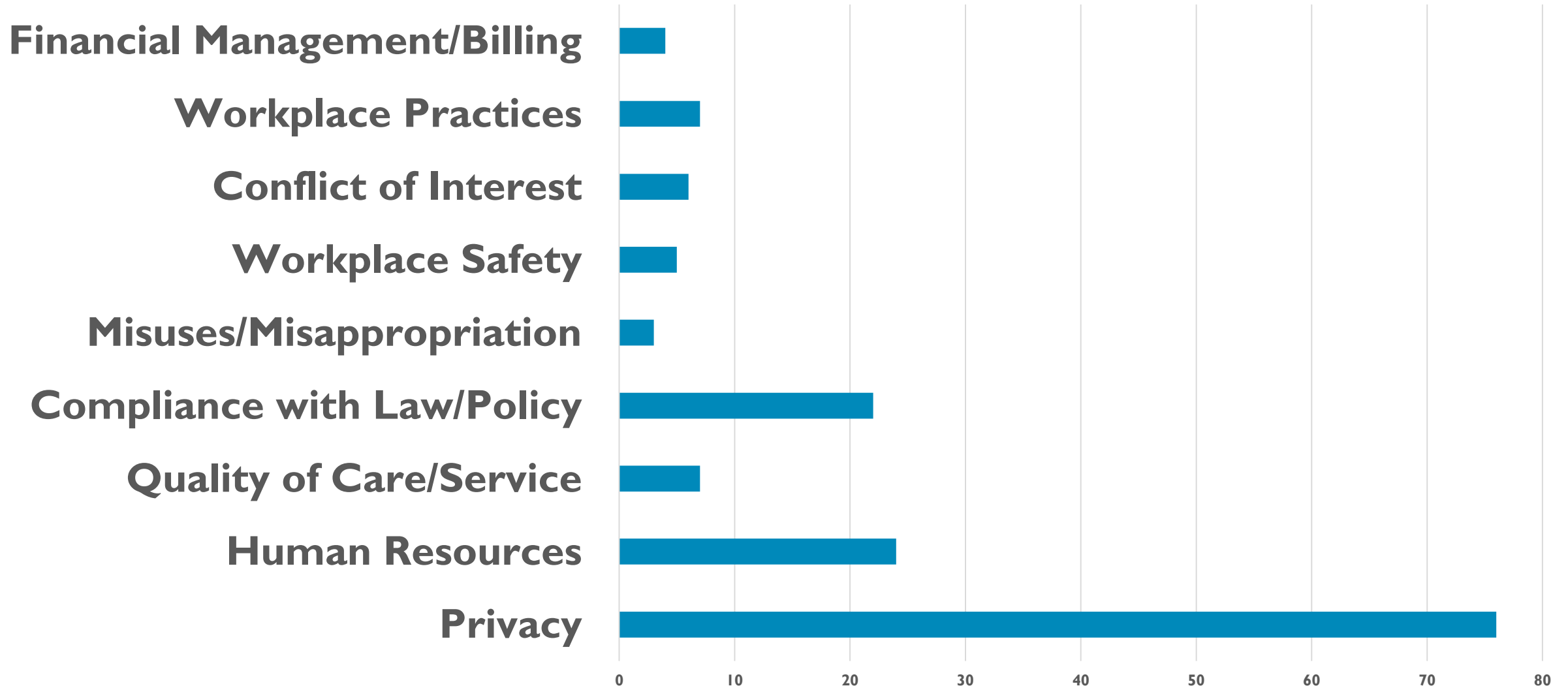


**HEALTH CARE OPERATIONS**



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# 2022 Complaint Activity



**PRIVACY, SECURITY, & CONFIDENTIALITY**



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The Health Insurance Portability and Accountability Act of 1996 (HIPAA) is the main Federal law that protects health information.

- The HIPAA Privacy and Security Rules protect the privacy and security of individually identifiable health information.
- HIPAA Rules have detailed requirements regarding both privacy and security.

**PATIENT PRIVACY & FEDERAL LAW**



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Name  
DOB  
Addresses  
Phone & Fax  
Numbers  
Age

Dates of Services  
Test results  
Lab results  
Prescriptions



AK PIPA

Health Plan Benefits  
Numbers  
Diagnosis  
Geographical areas  
Addresses  
Email URLs  
Location of services

Certificate &  
License  
Numbers  
Serial Numbers

Social Security  
Numbers  
Driver License  
Consumer  
Information  
Banking  
Credit Cards

Medical  
Record  
Numbers  
(MRN)

Biometric  
identifiers,  
finger & voice  
prints

Full face photo  
images or any  
comparable  
image

# PROTECTED HEALTH INFORMATION (PHI)



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# **The Minimum Necessary Standard determines the authorized work-related level of access or disclosure of information. The need to know.**

- ANTHC may not use or disclose PHI, except as permitted or required by the Privacy Regulations.
- ANTHC must determine the workforce member's need to access PHI to carry out their job duties.
- Not all employees need full access to patient information.
- Employees should only access the information they need to do their jobs.
- All access to information is monitored.

**MINIMUM NECESSARY STANDARD**



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# **Inappropriate Access or Use of PHI is grounds for immediate termination**

- Do not access PHI for personal reasons or for personal gain.
- Do not look up information about friends, family members, co-workers, or other people who you know for any personal reason.
- Do not share information about a patient for any reason that is not permitted.

**INAPPROPRIATE ACCESS**



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# DOES THIS IDENTIFY THE PATIENT?



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## Births

- Baby's name: Sara Jones
- Born on Tuesday at ANMC after mom was transferred from Manillaq Health Center
- House Fire Victims
  - Family of four
  - From Hooper Bay
- Assault Victim
  - Victim is a woman
  - Her birthdate is 2/2/1988
  - Tribal Tattoo on her neck
- Knife injury
  - Victim's name: Tom
  - Injured his left arm at the Red Dog Mine



What is wrong with this picture?

# How much PHI can be shared in an appropriate disclosure?

## SCENARIO:

You call a patient to remind him of his appointment. While on the phone with him, he asks you to review his wife's medical record to see if she has any appointments coming up.

***What information can you share with the patient?***



**SCENARIO**



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You have a young patient that is very scared of her first dental appointment. You help her feel comfortable and she let's you work on her teeth. You want your family to know how great of a job you are doing at work, so you snap a picture of yourself with the child and post it to Social media. Is this okay?

**SOCIAL MEDIA POSTS**



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## How much information is required to identify a patient?

- Very little information is needed to identify a person.
- If you repeat any PHI, it may be assumed that you learned that information at work.
- You may not use PHI for personal reasons.



# What can I do? Think before you talk.

- When discussing PHI in an area where others may overhear, lower your voice or talk apart from others.
- Prior to discussing sensitive issues with patients, ask visitors to step out of the room.
- Avoid gossip or idle conversation.





# Physical, Technical & Administrative Safeguard Rules

- Password protect and encrypt all protected information.
- Do not share logins or passwords.
- Double check email addresses & fax numbers before sending.
- Don't download unauthorized software, it could contain malware.
- Make sure doors to secure areas are kept closed.
- If an unknown person enters an employee/patient area, you should know who they are.
- Do not take photos in areas where patients or PHI may be.

**SAFEGUARDS**



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**DO NOT put personally identifiable information in the trash or recycle bin.**

**Use an authorized, locked shred bin.**

**Do not create your own shred bin.**



**SHRED BINS**



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Do not record conversations, whether business or patient, without proper authorization.

Clean desk: Do not leave sensitive information out in the open.

Do not communicate diagnoses or test results in a voicemail, message, text message, unsecured e-mail, or other unauthorized forms of communication.

Don't bring paper copies of PHI home or leave in a vehicle.

Do not review the census, or other reports, for people you may know.

Disclosure of PHI or patient photos on social media will result in immediate termination.

Please handle PHI with the same care and attention that you would the patient.

**EVERYTHING YOU DO MATTERS!**



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# Employee Code of Ethics and Conduct

A guide for leadership and members of the workforce to assist in carrying out daily activities consistent with ANTHC's mission, vision, and values and within appropriate ethical and legal standards.



**EMPLOYEE CODE OF ETHICS & CONDUCT**



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# Conflicts of Interest Policy

- You must avoid conflicts of interest.
- You must promptly disclose actual and apparent conflicts of interest to their supervisor or ECS.
- Includes all situations where you could influence a decision or take action that may result in personal gain or gain for a relative, business associate, household member, or friend.

## Specific Types of Conflicts:

- **Outside Employment and Activities:** Certain activities, such as outside employment, must be approved by ANTHC.
- **Nepotism:** ANTHC prohibits bias in favor of immediate family members.
- **Personal Relationships in the Workplace:** Professional conduct is required in the workplace and during work hours.
- **Purchasing and Procurement Policy:** You cannot participate in selection or award of a contract if you have a conflict.
- **Vendor Visits and Solicitation:** There are rules!

**CONFLICTS OF INTEREST**



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# Permitted disclosures must be entered into the Accounting of Disclosure Log

- An account of the disclosure made.
- To satisfy a mandatory reporting obligation, such as mandatory reports to or from the Office of Children's Service (OCS) or Adult Protective Services (APS).
- To petition the court for a protective order.
- To law enforcement or other officials to report certain crimes.

Log a Disclosure of PHI

ANTHC is required to document disclosures of PHI. Accordingly, members of the workforce are required to document all disclosures of PHI to an individual or entity outside of ANTHC/ANMC, except for those disclosures which are excluded or which are accounted for under the special rules for research-related disclosures. If you have made a disclosure that you are required to document, enter the required information in the "Accounting of Disclosure" application which is available through this link: [Accounting of Disclosure](#)

**Common disclosure that MUST be logged**

Common types of disclosures that must be documented include, but are not limited to, those disclosures made:

- To satisfy a mandatory reporting obligation, such as reports from social workers or providers to the Office of Children's Service (OCS) or Adult Protective Services (APS)
- To petition for a protective order under Title 47;
- To law enforcement or other officials in order to avert a serious threat to health or safety

**Disclosures that do NOT need to be logged**

Certain types of disclosures may be tracked for operational purposes, but are **excluded** from the accounting of disclosure requirements. Excluded disclosures include those made:

- For treatment, payment, and healthcare operation purposes
- To the individual
- For directory purposes
- To persons involved in the individual's care
- For national security or intelligence purposes
- To correctional institutions or law enforcement officials
- Pursuant to an individual's authorization
- As part of a limited data set

**Disclosures logged by HIM**

Release of Information requests that are processed by Health Information Management (HIM) will be logged by HIM staff, rather than the member of the workforce who receives the request. Disclosures documented by HIM include those:

- For purposes of public health activities (e.g., for preventing or controlling disease, injury, or disability, for reporting of disease, injury, birth, or death, and for conducting public surveillance, public health investigations, and public interventions)
- To coroners, medical examiners, and funeral directors
- For cadaveric organ, eye, or tissue donation purposes
- For specialized government functions including military and veterans activities, national security and intelligence activities, protective services for the President of the United States and other public officials, correctional institutions and other law enforcement custodial situations
- Disclosures for judicial and administrative proceedings, including those made in response to a subpoena, court order, or other similar authority
- For workers' compensation
- For health oversight activities, including audits, inspections, and oversight reviews
- To a business associate, except for purposes of the business associate providing treatment, payment, or healthcare operations activities on behalf of ANMC
- Unauthorized or accidental disclosures, such as a misdirected fax or email or release which was done based on invalid authorization

**Research Disclosures**

Principal Investigators are responsible for logging certain research disclosures into the "Accounting of Disclosures" application. The research disclosures logged under this section include only those related to human-subject research that does not obtain a subject's authorization (i.e., research that receives a waiver of authorization by the Institutional Review Board). This does not include disclosures which are made as part of a limited data set or for which the patient authorized the disclosure.

ACCOUNTING OF DISCLOSURE LOG



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Outside agencies, such as the Joint Commission, Centers for Medicare & Medicaid (CMS), Occupational Safety & Health Administration (OSHA), Office of Civil Rights (OCR), and others, conduct surveys and receive complaints.

- Every employee is required to report possible violations of law or ethical standards, including concerns about potential fraud, waste, and abuse through their management team, Human Resources, or the Ethics & Compliance program.
- Concerns about patient safety and quality of care should be promptly reported to your supervisor, the Risk Manager, your Service Chief, the Chief Ethics and Compliance Officer, or through other established reporting channels.
- If you have a complaint that is not addressed, you have the right to report concerns to the appropriate agency.

## Fraud, Waste, & Abuse

### Presenting a claim for an item or service that you knew or should have known:

- Was not provided as claimed or that is erroneous
- Is not covered/reimbursable service

It is illegal to submit claims for payment to Medicare or Medicaid that you know or should know are false or fraudulent.

- **Anti-Kickback Statute:** It is a crime to pay for patient referrals or for generating business involving any item or service payable by the Federal health care programs (e.g., drugs, supplies, or health care services for Medicare or Medicaid patients).
- **Physician Self-Referral Law (aka Stark law):** Physicians may not refer patients to entities the physician or an immediate family member has a financial relationship, unless an exception applies.
- **Exclusion Statute:** ANTHC must ensure that it does not employ or contract with individuals or entities on the Office of Inspector General's (OIG) List of Excluded Individuals and Entities.



# Examples of False Claims

- Billing for services or supplies not provided, including billing for appointments that patients did not keep.
- Billing at a level of complexity higher than the service actually provided or was documented in the chart.
- Billing for services that were not medically necessary.
- Charging excessive prices for services or supplies.
- Miscoding the services on a claim for payment, including up-coding or unbundling codes.



# DOCUMENTATION STANDARDS

- Complete all documentation in a timely and accurate manner.
- Only use true, **complete** and accurate information when creating and filing claims for payment for services.
- Follow established processes for submitting claims or external reports.
- Use best efforts to prevent, detect, and correct fraud, waste, and abuse.

The screenshot shows a web browser displaying search results for the document 'Compliance Awareness and Reporting Policy'. The breadcrumb trail is: Alaska Native Tribal Health Consortium > ANTHC Policies and Procedures > Ethics and Compliance. The document title is 'Compliance Awareness and Reporting Policy'. The page content includes the following sections:

ANTHC Policy No. 01-3007  
Page 1 of 2

**ANTHC BOARD POLICY  
COMPLIANCE AWARENESS AND REPORTING**

**Purpose**  
To encourage the Consortium's workforce and others to be aware of applicable legal and ethical standards and to be attentive to, and promptly report, potential concerns about compliance.

**Scope**  
This policy applies to all Consortium organizational units, directors, officers, members of the workforce, contractors, and others performing work on behalf the Consortium.

**Policy**

1. **Culture of Ethics and Compliance** - The Consortium promotes a culture of ethics and compliance. All individuals and entities that perform work on behalf of the Consortium are expected to comply with applicable legal requirements and to conduct themselves ethically, and consistent with the Consortium's values.
2. **Compliance Awareness and Education** - The Consortium, through Ethics and Compliance Services, Human Resources, Contracting and Procurement and other appropriate organizational units, will develop and implement policies, procedures, programs, training and other measures to ensure members of the workforce, contractors, vendors and other agents working on behalf of the Consortium are aware of and comply with applicable legal and ethical standards.

**FRAUD, WASTE, & ABUSE PREVENTION**



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# What does fraud prevention look like?

- Ensure that business practices are compliant before certifying compliance.
- If we aren't sure, we ask for guidance.
- Report any situations where it appears that information has been altered or falsified.
- Promptly report fraud, waste, and abuse concerns to ANTHC, even if we choose to act as a whistleblower.



ANTHC receives time sensitive audit requests and requests for records from federal, state, and other outside agencies that should be forwarded to Compliance immediately.



**AUDITING & MONITORING**



**ALASKA NATIVE TRIBAL HEALTH CONSORTIUM**

« May 2022 »

S	M	T	W	T	F	S
01	02	03	04	05	06	07
08	09	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31	01	02	03	04

[Go to Calendar](#)

There are no events currently in the system.

**Vision**  
Alaska Native people are the healthiest people in the world

**Mission**  
Providing the highest quality health services in partnership with our people and the Alaska Tribal Health System

**Values**  
Achieving excellence

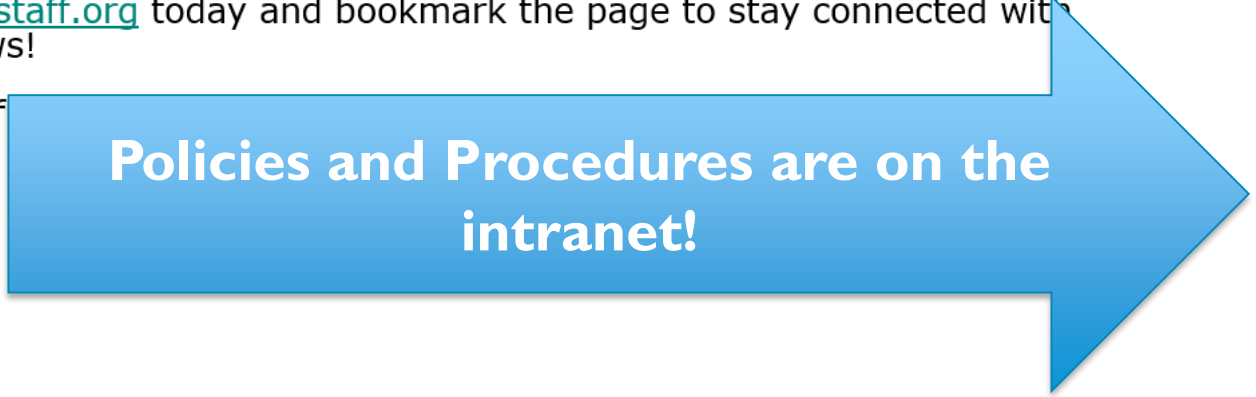
## COVID Updates and Staff News HERE

### Introducing the Hub: the new intranet home for current ANTHC employees

ANTHC Today News has moved! Please visit the [ANTHC Hub](#) to get news and information. The Hub will be a central place to connect with the networks that you need to do your job.

Visit [www.anthcstaff.org](http://www.anthcstaff.org) today and bookmark the page to stay connected with ANTHC staff news!

Follow this link if



### STAFF COVID TESTING



#### Policies

- [ANTHC & ANMC Policies](#)

### EMPLOYEE GIVING

#### Popular Links

- [ANTHC Employee News and Events](#)
- [ANTHC Employee Code of Ethics and Conduct](#)
- [Incident/Accident Reporting](#)

# POLICIES & PROCEDURES



# 2022 Inquiry Activity

**Financial Management/Billing**

**Workplace Practices**

**Conflict of Interest**

**Workplace Safety**

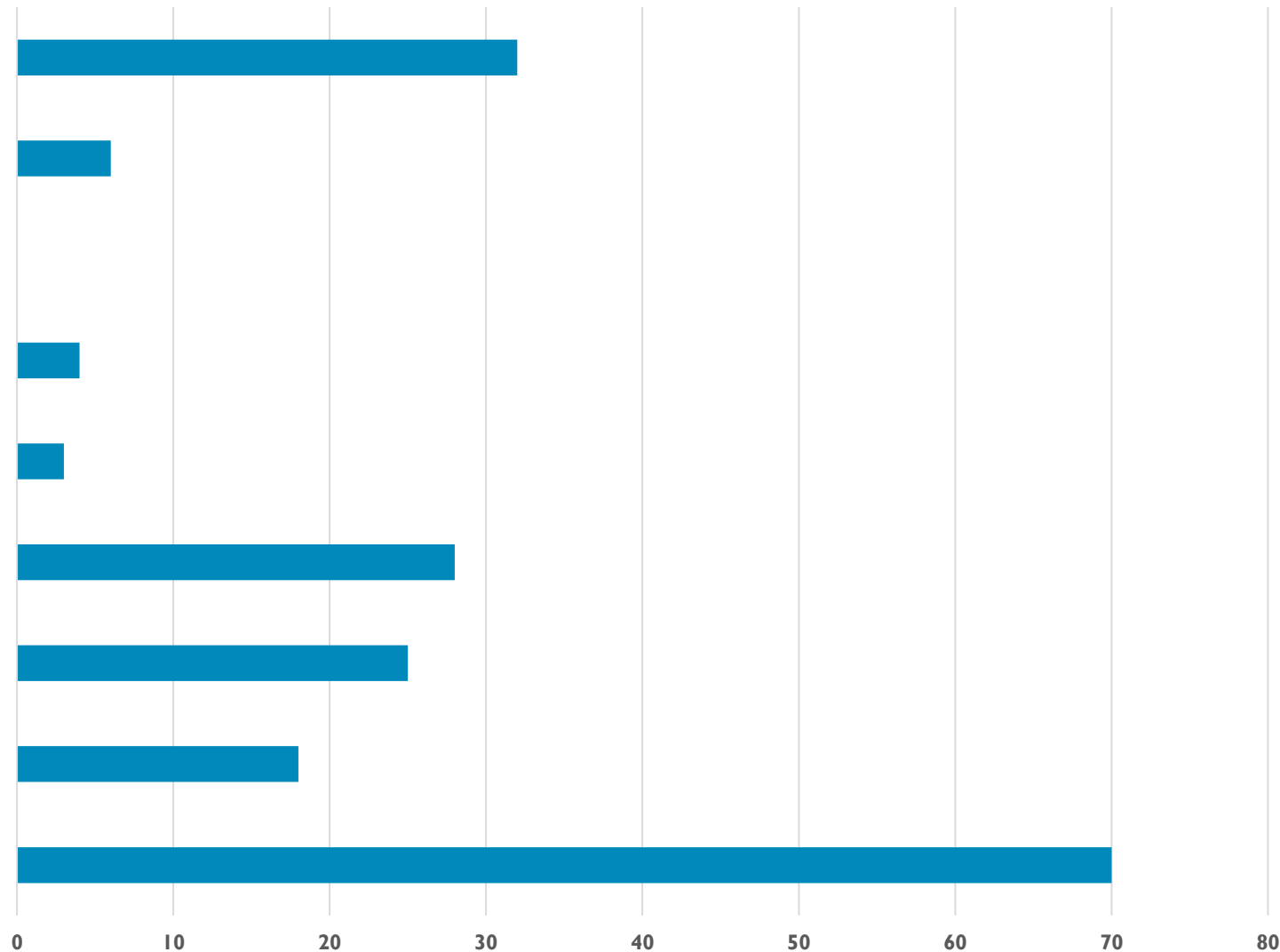
**Misuses/Misappropriation**

**Compliance with Law/Policy**

**Quality of Care/Service**

**Human Resources**

**Privacy**



# What is retaliation?

What might retaliation look like?

ANTHC and ANMC have a zero retaliation policy if you report in good faith.

**NON-RETALIATION**



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# No employee shall be retaliated against for reporting in good faith.

- Report honestly, to the best of your knowledge.
- Follow established processes
- If you don't understand, ask questions
- If you disagree, speak up



**REPORTING IN GOOD FAITH**



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# Potential violations must be reported:

- Located in the COB on the 4<sup>th</sup> Floor
- Call or email the Privacy Officer or Ethics and Compliance team
- Ethics and Compliance Hotline: (877) 772-6743

## Non-Retaliation:

- No disciplinary action will be taken against anyone who, in good faith, reports a concern.
- Good faith does not mean that you have definitive proof, but that you have objective reason(s) for a concern

*If a breach was the result of an unintentional error, we still need to know about it.  
We understand that accidents happen.*

**REPORT VIOLATIONS IMMEDIATELY**



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- **You have your Chain of Command and ...**
  - **The Employee Code of Ethics and Conduct** is a guide with ethical and legal standards for leadership and members of the workforce to assist in carrying out daily activities consistent with ANTHC's mission, vision, and values.
  - **ANTHC and ANMC Policies and Procedures** guide all members of the workforce in carrying out their duties and responsibilities in an ethical and compliant manner.
  - **Policies and Procedures** are designed to complement and support this plan. The Employee Code of Ethics and Conduct provides accountability and guidance.
- **...Ethics and Compliance: Check out our intranet page for contact information and guidance.**

**YOU DO NOT NEED TO FIGURE IT OUT ALONE**



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## Ethics & Compliance Contacts

Allison Reed	(907) 729-1992	Chief Ethics & Compliance Officer	<a href="mailto:ahreed@ANTHC.org">ahreed@ANTHC.org</a>
Ying Vang	(907) 729-1966	Special Assistant to the Chief	<a href="mailto:yvang@ANTHC.org">yvang@ANTHC.org</a>
Christine Redick	(907) 729-1976	Senior Compliance Specialist	<a href="mailto:credick@ANTHC.org">credick@ANTHC.org</a>
Heather Tinoco	(907) 729-1966	Compliance Specialist	<a href="mailto:hmtinoco@ANTHC.org">hmtinoco@ANTHC.org</a>

## Policy and Procedures

Ginnie Occhipinti	(907) 729-1971	Policy & Procedure Manager	<a href="mailto:gmocchipinti@ANTHC.org">gmocchipinti@ANTHC.org</a>
Josh LeMasters	(907) 729-1993	Regulatory Compliance and Policy Manager	<a href="mailto:jslemasters@ANTHC.org">jslemasters@ANTHC.org</a>

## The Audit Team

Miranda Morrison	(907) 764-6055	Senior Compliance Specialist	<a href="mailto:mjmorrison@ANTHC.org">mjmorrison@ANTHC.org</a>
Carrie Strickland	(907) 729- 1930	Internal Compliance Auditor	<a href="mailto:cmstrickland@ANTHC.org">cmstrickland@ANTHC.org</a>
Stephanie Harki	(907) 362-1474	Health Care Compliance Analyst	<a href="mailto:smharki@ANTHC.org">smharki@ANTHC.org</a>

**ETHICS & COMPLIANCE SERVICES TEAM**



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# SEE SOMETHING DO SOMETHING



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## It's Everyone's Responsibility

ANTHC works with staff and the public to protect the integrity, effectiveness and efficiency of ANTHC programs.

### Help fight against:

- Code of Conduct Violations
- Discrimination
- Fraud
- Harassment
- Policy Violations

## Easy Ways to Report

ANTHC has a centralized location for employee complaints or concerns.

- 1** Discuss concerns with your immediate supervisor
- 2** Call the Ethics and Compliance Anonymous Hotline at 1-877-772-6743
- 3 NEW** | Submit a comment via the online portal at [anthc.ethicspoint.com](http://anthc.ethicspoint.com) or scan this QR Code:



*No disciplinary action or other types of retaliation will be taken against any employee who, in good faith, reports a concern, issue, problem or violation of law, regulation or the Code of Conduct to management, Human Resources, the Ethics and Compliance Program or the Ethics and Compliance Hotline.*

01/2021

# ANONYMOUS REPORTING HOTLINE



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**Thank you!**

Share the  
Vision

**We are on the same team,  
working toward the same vision.**

Contact Ethics & Compliance with any questions.



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