



RUTGERS POLICY

Section: 100.2.2

Section Title: Healthcare Compliance Policies

Policy Name: Excluded Individuals and Entities

Formerly Book: 00-01-15-65:00

Approval Authority: RBHS Chancellor

Responsible Executive: Chief Healthcare Compliance Officer

Responsible Office: RBHS Office of Ethics Compliance and Corporate Integrity

Originally Issued: 11/19/1999

Revisions: 7/1/2013

Errors or changes? Contact: RBHS Office of Ethics Compliance and Corporate Integrity, 973-972-8093

1. **Policy Statement**

This policy establishes that Rutgers Biomedical and Health Sciences and other Rutgers University schools, units and departments that bill federal or state programs for healthcare-related goods or services ("Related Healthcare Entity" or "Related Healthcare Entities") shall not employ or otherwise do business with individuals or entities that have been excluded by the HHS Office of the Inspector (OIG), the General Services Administration (GSA), the New Jersey Office of the Inspector General (NJ Department of Treasury exclusion list), the Pennsylvania Department of Public Welfare (Medicheck) or the New York State Office of the Medicaid Inspector General List of Restricted and Excluded Providers..

2. **Reason for Policy**

To establish a policy governing the Related Healthcare Entity's employment of and entering into contracts with, individuals or entities who are currently excluded by the Office of Inspector General (OIG) , the General Services Administration (GSA), the New Jersey Office of the Medicaid Inspector General (NJOMIG), the Pennsylvania Department of Public Welfare (PAOMIG) or the New York State Office of the Medicaid Inspector General List of Restricted and Excluded Providers (NYOMIG) from participation in state or federal health care programs.

3. **Who Should Read This Policy**

This policy should be read by employees and independent contractors of schools, units and departments that are a part of Rutgers Biomedical and Health Sciences and other University schools, units and departments that bill federal or state programs for healthcare-related goods or services ("Related Healthcare Entity" or "Related Healthcare Entities"). Other employees of University departments that support the on-boarding or provisioning of new Related Healthcare Entity vendors and/or new Related Healthcare Entity employees, including but not limited to University Human Resources, University Procurement and Facilities should read this policy.

4. **Related Documents**

5. **Contacts:**

RBHS Office of Ethics, Compliance and Corporate Integrity 973-972-8093
Office of the Senior Vice President and General Counsel 848-932-7697

6. **The Policy**

100.2.2 EXCLUDED INDIVIDUALS AND ENTITIES

In accordance with Federal and state law, Rutgers Biomedical and Health Sciences and other University schools, units and departments that bill federal or state programs for healthcare-related goods or services (“Related Healthcare Entity” or “Related Healthcare Entities”) will not employ or enter into contracts with any individual or entity who is currently excluded by the Office of Inspector General (OIG) and/or the General Services Administration (GSA), and/or from the New Jersey Medicaid Inspector General, (NJOMIG) and/or the Pennsylvania Department of Public Welfare (PAOMIG) and/or the New York State Office of the Medicaid Inspector General List of Restricted and Excluded Providers(NYOMIG) disqualified/debarred provider list from participation in Federal and/or state health care programs.

Procedure

- A. Prior to hiring an individual, entering into contracts with any individual or entity, or extending clinical privileges at the Related Healthcare Entity, University Human Resources department must verify that the individual or entity does not appear on the OIG or GSA listing of excluded parties, and that the individual or entity does not appear on the NJOMIG, PAOMIG, NYOMIG disqualified/debarred provider lists.
- B. Prior to entering into any contracts or purchasing agreements with any individual or entity that provides goods or services to a Related Healthcare Entity, University Procurement Services and other University departments that are authorized to retain consultants or enter into agreements with vendors must verify that the individual or entity certifies through an ownership disclosure statement that same does not appear on the OIG or GSA or NJOMIG or PAOMIG or NYOMIG listing of excluded or disqualified/debarred parties. The department handling the contracts or purchasing agreements for the Related Healthcare Entity may alternatively check the entity or individual against the OIG and GSA listing of excluded parties, and the NJOMIG, PAOMIG and NYOMIG disqualified/debarred provider lists.

The exclusion listings referred to in A and B above may be accessed on the Internet in a searchable format:

- i. (For OIG) <http://exclusions.oig.hhs.gov/>
- ii. (For GSA) <http://epls.arnet.gov/>
- iii. (For NJOMIG) <http://www.state.nj.us/treasury/debarred/>
- iv. (For PAOMIG)
<http://www.dpw.state.pa.us/publications/medichecksearch/index.htm>
- v. (For NYOMIG) <http://www.omig.ny.gov/data/content/view/72/52/>

- C. If the above searches indicate that the individual or entity is on the OIG, GSA or NJOMIG PAOMIG, or NYOMIG list of excluded or disqualified/debarred individuals and entities, this individual or entity cannot be employed or have any contractual relationship with the Related Healthcare Entity, including the granting of clinical privileges.

- D. To protect Rutgers and its Related Healthcare Entity against individuals or entities excluded or disqualified/debarred subsequent to their employment, during the duration of the contract, during the duration of the employment, or after the granting of clinical privileges such exclusion searches are performed by the RBHS Office of Ethics, Compliance and Corporate Integrity periodically, at least semi- annually.
- E. If it is determined that a current employee, entity with a current contract, or non-employee physician with current clinical privileges is an excluded or disqualified/debarred individual or entity, the RBHS Office of Ethics, Compliance and Corporate Integrity must be notified immediately. The RBHS Office of Ethics, Compliance and Corporate Integrity will perform an investigation to ascertain if in fact the current employee, entity with a current contract, or non-employee physician with current clinical privileges is on an exclusion or disqualified/debarred list. If it is determined that the individual and/or entity is indeed on an exclusion or disqualified/debarred list, the employment and/or contractual relationship shall be immediately terminated.
- F. If a person in a supervisory capacity learns that a member of his/her staff and/or an entity being utilized is on the excluded list, he/she must notify the RBHS Office of Ethics, Compliance and Corporate Integrity immediately. Failure to notify the RBHS Office of Ethics, Compliance and Corporate Integrity may result in sanctions being imposed, up to and including termination.
- G. If an individual learns that he/she is excluded or debarred, or if an entity he/she is doing business with is excluded or debarred, he/she must notify his or her supervisor and the RBHS Office of Ethics, Compliance and Corporate Integrity immediately. Failure to do so will result in sanctions being imposed, up to and including termination.