

# SYSTEMWIDE POLICY

## Regulatory Screenings: Excluded Individuals, Entities, Debarment, OFAC

**This Policy is Applicable to the following Corewell Health sites:**

**SYSTEMWIDE**

Continuing Care, Corewell Health Beaumont Grosse Pointe Hospital, Corewell Health Beaumont Troy Hospital, Corewell Health Big Rapids Hospital, Corewell Health Dearborn Hospital, Corewell Health Farmington Hills Hospital, Corewell Health Gerber Hospital, Corewell Health Grand Rapids Hospitals (Blodgett Hospital, Butterworth Hospital, Helen DeVos Children's Hospital), Corewell Health Greenville Hospital, Corewell Health Ludington Hospital, Corewell Health Medical Group East, Corewell Health Medical Group West, Corewell Health Niles Hospital, Corewell Health Pennock Hospital, Corewell Health Reed City Hospital, Corewell Health Specialty Pharmacy, Corewell Health St. Joseph Hospital, Corewell Health Taylor Hospital, Corewell Health Trenton Hospital, Corewell Health Watervliet Hospital, Corewell Health Wayne Hospital, Corewell Health William Beaumont University Hospital (Royal Oak), Corewell Health Zeeland Hospital, Corporate, Hospital Outpatient Departments West, Priority Health

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### 1. Purpose

To ensure that all team members, and others are properly screened for exclusions and are authorized to participate in federal and state healthcare programs. In addition, all Priority Health subscribers are monitored monthly against the Office of Foreign Assets Control (OFAC) Specially Designated Nationals (SDN) list to ensure Compliance with OFAC regulations.

### 2. Definitions

- 2.1. Individuals and Entities: employees, non-employees, contracting third parties, students/trainees, residents, fellows, employed and rendering, ordering, and referring providers (inclusive of physicians and non-physician practitioners), Board and Committee members, volunteers, vendors, suppliers, and other necessary individuals and entities under the direct control of Corewell Health.
- 2.2. Databases: Office of Inspector General's (OIG's) List of Excluded Individuals / Entities (LEIE), General Services Administration's (GSA's) System for Award Management (SAM), Deathmaster, state excluded and sanctioned provider lists (see References), Office of Foreign Assets Control, and Specially Designated Nationals list.
- 2.3. Exclusion: a sanction, suspension, debarment or other disciplinary action that results in an individual being ineligible to participate in the federal or state-funded health care programs,

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such as, but not limited to, Medicare, Medicaid, TRICARE, etc.

- 2.4. Federal Employee Health Benefits (FEHB) Debarment and Suspension Orders – Debarment and suspension prohibit a health care provider from receiving payment of Federal Employee Health Benefits Program (FEHBP) funds for items or services furnished to an (FEHBP) enrollee on or after the effective date of their sanction, subject to the limitations and exceptions identified in the Guidelines. FEHBP debarment and suspension actions are separate from the Department of Health and Human Services' (DHHS) Medicare/Medicaid exclusions that appear on DHHS' OIG List of Excluded Individuals and Entities (LEIE).
- 2.5. Ineligible Individual/Entity: an individual or entity (a) currently excluded, suspended, debarred, or otherwise ineligible to participate in Federally funded health care programs or in federal procurement or non-procurement programs or (b) that has been convicted of a criminal offense that falls within 42 USC Section 13207(a) but has not yet been excluded, debarred, suspended or otherwise declared ineligible.
- 2.6. OFAC Specially Designated Nationals (SDN) List - A list of individuals and companies owned or controlled by, or acting for or on behalf of, targeted countries. Also listed are individuals, groups, and entities, such as terrorists and narcotics traffickers designated under programs that are not country-specific (collectively known as "Specially Designated Nationals" or "SDNs.")
- 2.7. Preclusion List: A list of providers and prescribers who are precluded from receiving payment for Medicare Advantage (MA) items and services or Part D drugs furnished or prescribed to Medicare beneficiaries. The Preclusion list is separate and distinct from the OIG Exclusion List and made available only to Part D sponsors and the MA plans.

### 3. Responsibilities

The Compliance Department is responsible for the oversight of the regulatory screening process. Individuals and entities are required to immediately notify the Compliance Department or the Priority Health Special Investigations Unit (SIU) if they have been convicted of a criminal offense or have been, voluntarily or involuntarily, excluded or debarred from a federally and/or state funded healthcare program.

### 4. Compliance

If an individual or entity appears on a state or federal exclusion list, they are an Ineligible Individual/Entity, and Corewell Health will take the appropriate action, up to and including termination of employment or contract. The individual or entity may become eligible again once the exclusion, debarment or suspension is removed and the individual or entity is no longer sanctioned, excluded, suspended, or debarred.

### 5. Policy

In compliance with federal and state exclusion laws and regulations (see references) and Priority Health plan documents, Corewell Health will not employ, contract with, bill or pay for items or services furnished or prescribed by or conduct business with an individual or entity known to be excluded, suspended, or debarred from any state or federally funded health care program as it applies to each business entity. Exceptions: state or federal government exceptions/waivers or emergency items or services under 42 CFR §1001.1901(c)(5)(i), 5 CFR Part 890. In addition, under OFAC regulations, Priority Health will not insure or pay the claim of any person on the SDN list and will notify OFAC of any claimant on the list.

- 5.1. Prior to engagement and monthly monitoring thereafter, Corewell Health will make reasonable inquiry into whether prospective and existing individuals and entities are excluded from participation as described above.
- 5.2. Corewell Health will include compliance language in its contracts that states the contractor represents and warrants that neither it nor any of its team members is, or has been, excluded

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from participation in any federally and/or state funded health care programs including but not limited to Medicare, Medicaid, FEHB and TRICARE. Contractor agrees to notify Corewell Health of any threatened, proposed, or actual exclusion, of it or any of its team members or sub-contractors, from any federally and/or state funded health care program.

#### **6. Process**

Corewell Health utilizes a third-party vendor to conduct ongoing exclusion monitoring. The vendor will notify Compliance of potential matches. Compliance will exercise due diligence to verify that any individual or entity found as a potential match is resolved.

See [Priority Health Regulatory Screenings: Excluded Individuals, Entities, Debarment](#)

#### **7. Notifications**

Spectrum Health utilizes a third-party vendor to conduct ongoing exclusion monitoring. The vendor will notify Compliance of potential matches. Compliance will exercise due diligence to verify that any individual or entity found as a potential match is resolved. Compliance must be immediately notified if a team member, contracting third party, board member, provider, vendor/supplier, volunteer, and others with whom Spectrum Health conducts business becomes excluded from participation.

#### **8. Exceptions**

Any exceptions to this policy must be approved by a Compliance and Privacy Officer.

#### **9. Revisions**

Corewell Health reserves the right to alter, amend, modify or eliminate this document at any time without prior written notice.

#### **10. References**

- [Professional Expectations](#)
- Office of Inspector General; DHHS OIG List of Excluded Individuals and Entities (LEIE list)
- Office of Foreign Asset Control (OFAC) and Specially Designate Nationals (SDN)
- Office of Professional Management's (OPM) Guidelines for Implementation of FEHBP Debarment and Suspension Orders
- Reference Notice to Third Party Policy
- Social Security Act §§ 1128, 1128A, 1156, 1902, 1903, 1862(e)(1)(B), 42 C.F.R. §§ 422.503(b)(4)(vi)(F), 422.752(a)(8), 423.504(b)(4)(vi)(F), 423.752(a)(6), 1001.1901
- State Medicaid Exclusion lists
- System for Award Management (SAM)
- 5 U.S.C. 8902, 5 CFR Part 890
- USA Patriot Act §326
- US Department of Commerce, National Technical Information Service – Death Master File
- Health plan member documents

#### **11. Policy Development and Approval**

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**12. Keywords**

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