

Gila Multi-specialty Independent Practice Association Health Service Organization

Healthcare Compliance Program

Gila Multi-specialty Independent Practice Association (GMIPA) has developed a Healthcare Compliance Program. This Healthcare Compliance Program applies to all Gila Multi-specialty Independent Practice Association Provider Members in the Gila Multi-specialty Independent Practice Association (GMIPA) (Gila Multi-specialty Independent Practice Association, Provider Members, hereinafter collectively referred to as “Gila Multi-specialty Independent Practice Association “or “Provider Members and/or prospective Clinics/Facilities/employers”). The objective of a Healthcare Compliance Program Policy is to ensure compliance with all applicable laws and regulations including, but not limited to, Medicare, Medicaid, other federal and state reimbursement programs, and any private insurance and program requirements. The Healthcare Compliance Program Policy includes the following components:

1. *Implementation and distribution of written standards, policies, procedures and standards of conduct*
2. *Designating a contact person and contact information to report violations of compliance*
3. *Communicating education and training opportunities*
4. *Effective lines of communication*
5. *Disciplinary measures to enforce compliance with the standards, policies and procedures ; and*
6. *Responding promptly to detected offenses and supporting corrective action*

collectively these six components form a Compliance Program.

Gila Multi-specialty Independent Practice Association Provider Members are committed to consistently operating in accordance with Medicare, Medicaid and private health insurance requirements and the Compliance Program Policy shall enforce that commitment.

Gila Multi-specialty Independent Practice Association has developed and adopted this Compliance Program Policy in accordance with the United States Department of Health and Human Services, Office of Inspector General’s (“OIG”) guidance for compliance programs. This Compliance Program document is available to all Gila Multi-specialty Independent Practice Association Provider Members.

I. STANDARDS OF CONDUCT, IN GENERAL

Gila Multi-specialty Independent Practice Association Provider Members will maintain strict adherence to all laws and regulations governing federally funded health care programs, state funded health care programs and private health insurance coverage programs.

Every Gila Multi-specialty Independent Practice Association Provider Member is

responsible for reviewing and complying with any and all Compliance Policies and Procedures provided in accordance with the United States Department of Health and Human Services, Office of Inspector General's ("OIG") guidance for compliance programs. This may include a copy of this Compliance Program Policy, a Medicare supplier manual, Medicare/Medicaid advisories, licensure and accreditation policies, memorandums, and any government laws and regulation manuals and private health insurance coverage manuals.

There are numerous laws, state and federal, that protect the privacy and security of a patient's information including the Health Insurance Portability and Accountability Act of 1996 (HIPAA), and the Health Information Technology for Economic and Clinical Health Act (HITECH). Every Gila Multi-specialty Independent Practice Association Provider Member is required to treat all protected health information (PHI) of patients and its members confidentially and may not access, use or disclose any patient information except as permitted by law, and which is necessary to perform job duties. Provider Member's employees are at personal risk for violations of HIPAA, including potential fines and/or jail time.

Gila Multi-specialty Independent Practice Association Provider Members are responsible for recognizing potential compliance issues and reporting suspected violations to the proper authorities. This responsibility includes possessing the knowledge, or acquiring the proper knowledge through reference tools or other means, to identify issues.

Every Gila Multi-specialty Independent Practice Association Provider Member is encouraged to address questions or concerns and seek guidance about what constitutes compliance in the workplace with their prospective clinic/facilities Compliance Officer, manager or supervisor.

Gila Multi-specialty Independent Practice Association Provider Members shall report any incidence of suspected noncompliance to the proper authorities.

II. SPECIFIC RISK AREAS - CODE OF CONDUCT

A Code of Conduct, attached as **Exhibit A** and incorporated herein, sets out specific areas of concern to Gila Multi-specialty Independent Practice Association Provider Members. The Code of Conduct is representative and is not intended to be a complete list of all of the areas where Gila Multi-specialty Independent Practice Association Provider Members has an applicable standard, policy or procedure.

III. COMPLIANCE WITH APPLICABLE HHS OIG FRAUD ALERTS

All fraud alerts issued by the OIG and received by Gila Multi-specialty Independent Practice Association Provider Members, as well as other significant OIG publications, are reviewed and, if determined to be applicable, disseminated by the Executive Administrator of the GMIPA and/or other appropriate personnel with Provider Members. Provider Members may also refer to other publications and documents as provided by the Office of Inspector General (OIG), accessible via the internet or in print. All Gila Multi-specialty Independent Practice Association Provider Members are responsible for understanding and complying with such alerts.

IV. SUPERVISOR PERFORMANCE EVALUATION TO INCLUDE COMPLIANCE

Every Gila Multi-specialty Independent Practice Association Provider Member's prospective clinic/facility or employer is responsible to communicate the requirements for compliance. The GMIPA Compliance Program Policy is based on the Medicare Fraud and Abuse Provider and Employee Training online Program, which can be found at www.cms.gov.

V. DESIGNATION OF A COMPLIANCE OFFICER AND COMPLIANCE COMMITTEE

Gila Multi-specialty Independent Practice Association Provider Members has a designated Compliance point person at the Provider Members prospective clinic/facilities who will provide Compliance Training. The Gila Multi-specialty Independent Practice Association does have an Executive Administrator and organized a Compliance Committee, who will oversee and monitor Gila Multi-specialty Independent Practice Association's Compliance Program Policy, to the extent that Provider Members are required to adhere to as a Provider Member in good standing. All policies and procedures of the Compliance Program must be adhered to in order remain Provider Members in good standing of the Gila Multi-specialty Independent Practice Association. The Executive Administrator has been delegated sufficient authority by Gila Multi-specialty Independent Practice Association to encourage and support proper Provider Member education, to adequately monitor the GMIPA Compliance Program Policy and to recommend changes to the Compliance Program Policy consistent with changes in applicable legislation and regulations. The Executive Administrator shall ensure the adequacy of communication thereof to appropriate individuals as it becomes available.

Gila Multi-specialty Independent Practice Association's Executive Administrator is Rebekka VanNess, who may be reached by phone at (575) 538-2355 or via email at rebekka.vanness@gmipa.com.

VI. EDUCATION AND TRAINING

Every new Gila Multi-specialty Independent Practice Association Provider Member involved in administering or delivering Medicare Advantage benefits shall receive a copy of this Compliance Program Policy receipt within the first 90 days of initial hire and shall sign a certification, as set forth on page 10. Every Gila Multi-specialty Independent Practice Association Provider Member shall certify compliance with the Compliance Program Policy on the form set forth on page 11 annually.

Every Gila Multi-specialty Independent Practice Association Provider Member shall receive at a minimum, annual Compliance training through their prospective clinic/facility or employer. The training shall reinforce the fact that strict compliance with the law and Gila Multi-specialty Independent Practice Association's Compliance Program Policy is a condition of valid GMIPA Membership. Gila Multi-specialty Independent Practice Association Provider Members shall be informed that failure to comply may result in disciplinary action, up to and including termination of membership.

Every Gila Multi-specialty Independent Practice Association Provider Member involved in the administration or delivery of Parts C and D benefits shall obtain at a minimum, Fraud Waiver and Abuse (FWA) training within 90 days of initial hire, and annually thereafter. Additional, specialized or refresher training may be provided on issues posing FWA risks.

All training shall be documented by Provider Members and provided as requested to the Gila Multi-specialty Independent Practice Association.

Gila Multi-specialty Independent Practice Association's Provider Members must commit to compliance as a priority. Messages to re-emphasize this may occasionally be posted in Gila Multi-specialty Independent Practice Association Newsletters or in common areas such as the association website as a clear reminder of our commitment to have Provider Members, their prospective clinic/facilities and their employees, comply with all laws and regulations.

VIII. COMMUNICATION

A. Lines of communications

Gila Multi-specialty Independent Practice Association Provider Members and their prospective clinic/facilities and their employees have various avenues to report any and all compliance issues or questions. These avenues include:

1. Reporting issue to the Medicare fraud tip line at 1-800-HHS-TIPS (1-800-447-8477),
2. Reporting issue to the GMIPA by completing the compliance issue collection sheet attached to this Compliance Program description and sending it to Gila Multi-specialty Independent Practice Association Executive Administrator at: rebekka.baker.vanness@gmipa.com

When a Provider Members prospective clinic/facility Managers or Supervisors receive reports of potential non-compliance, or detect a possible non-compliance issue, they shall contact the Office Of the Inspector General 1800-HHS-TIPS or file a report online at <https://forms.oig.hhs.gov/hotlineoperations/report-fraud-form.aspx> as soon as possible, irrespective of whether the matter has been considered resolved at another level. The Provider Members clinic/facility or employer Manager or Supervisor will also notify the Executive Administrator of the Gila Multi-specialty Independent Practice Association by the most expeditious means available.

The Gila Multi-specialty Independent Practice Association's Executive Administrator's e-mail address is publicized throughout Gila Multi-specialty Independent Practice Association literature and online at the association website which can be found at www.gmipa.com.

Matters reported through any of these avenues that suggest material violations of

compliance policies or legal requirements may be investigated immediately to determine an appropriate response. Where appropriate, changes to the GMIPA Compliance Program Policy arising from any investigation shall be communicated to all Gila Multi-specialty Independent Practice Association Provider Members and the Compliance Program Policy may be revised to meet all state and federal laws.

B. Open-Door Policy: Non-Harassment

Every Gila Multi-specialty Independent Practice Association Provider Member shall be assured of a harassment-free environment in reporting possible compliance issues or violations. All Clinic/Facility Managers and Supervisors shall ensure a harassment-free environment in their respective areas to encourage an open-door policy for reporting suspected violations.

No reprisal, reprimand, termination or disciplinary action shall occur against any Provider Member for making a good faith disclosure of a suspected compliance issue through the proper reporting procedures. While it may be considered as a mitigating factor, the reporting of a direct violation of the Compliance Program or illegal act does not protect individuals from legal discipline or responsibility.

C. Support for Reporting

Gila Multi-specialty Independent Practice Association Provider Members or their prospective clinic/facility Managers or Supervisors will not engage in or tolerate retaliation against Gila Multi-specialty Independent Practice Association Provider Members or prospective clinic/facility employees who report suspected wrongdoing. Any retaliation committed by a fellow Gila Multi-specialty Independent Practice Association Provider Member, their prospective clinic/facilities employee, supervisor, or manager will result in disciplinary action up to and including termination of membership depending upon the circumstances.

IX. AUDITING AND MONITORING

Gila Multi-specialty Independent Practice Association shall monitor their Compliance Program Policy through periodic audits of the GMIPA Compliance Program Policy. Such audits shall be designed to ensure adherence to all applicable Federal and State laws. These audits may include:

- A. On-site visits;
- B. Reviews of written materials and documentation used by Gila Multi-specialty Independent Practice Association to insure adherence to federal and state law.

Gila Multi-specialty Independent Practice Provider members, provider's employees and

contractors are expected to cooperate with any audit.

Written audit reports shall be prepared and submitted to the GMIPA Executive Administrator to ensure that Gila Multi-specialty Independent Practice Association is aware of any reports or subsequent investigations and can take whatever steps are necessary to strengthen the GMIPA Compliance Program Policy and attempt to ensure future problems do not recur. These reports should identify any areas where corrective action may be needed.

X. DISCIPLINARY ACTIONS

Every Gila Multi-specialty Independent Practice Association Provider Member who violates Gila Multi-specialty Independent Practice Association's Compliance Program Policy, commits an illegal act, or violates any federal or state law including but not limited to Medicare and Medicaid rules, State health insurance rules, private health insurance rules, privacy laws, and similar regulations, will be subject to appropriate disciplinary action, up to and including termination of membership, depending upon the circumstances. Every Provider Member acknowledges and understands that deliberate or material non-compliance with this Compliance Program Policy constitutes cause for termination of GMIPA membership.

Every Gila Multi-specialty Independent Practice Association Provider Member has the responsibility to report any compliance issue of which they have direct knowledge. Failure to report such a compliance issue is grounds for disciplinary action including immediate membership termination in accordance with Gila Multi-specialty Independent Practice Association policy; agents are subject to adjustment or termination of their status as such.

Appropriate discipline for violations of the Compliance Program may also include referral for criminal prosecution or civil action.

XI. INVESTIGATION; CORRECTIVE ACTION

A. Investigation

If the GMIPA Executive Administrator learns of a suspected compliance issue, the issue shall reported to the appropriate government agency as is necessary.

Investigations may be conducted when a report is filed. An investigation may be conducted to conclude the following:

1. Whether the compliance issue is a valid concern;
2. If so, the scope of compliance issue (*i.e.*, isolated instance or Provider Member, Clinic/Facility wide problem);
3. The depth of compliance issue (*i.e.*, isolated to one Provider Member office or location wide problem)

While an investigation may be conducted with as much confidentiality as circumstances reasonably allow, there can be no guarantee that the identity of the reporting individual or the results of the investigation will remain confidential. Gila Multi-specialty Independent Practice Association membership prohibits harassment and retaliation in response to any good faith report of a compliance issue by anyone.

B. Reporting and Corrective Action Upon completion of an investigation, a detailed report will be provided the senior management of Gila Multi-specialty Independent Practice Association.

If the investigation concludes that non-compliance did occur, depending on the nature of the problem identified, Gila Multi-specialty Independent Practice Association Provider Member or the provider's employee, manager or agent, with recommendation from legal counsel, will take appropriate corrective action. The Gila Multi-specialty Independent Practice Association may reformulate new or revised components of their Compliance Program, re-educate Provider Members or discipline Provider Members by termination of their membership, as appropriate.

XII. BACKGROUND CHECKS; NON-EMPLOYMENT OR RETENTION OF SANCTIONED INDIVIDUALS

Recognizing the importance of compliance and integrity, Gila Multi-specialty Independent Practice Association will use reasonable care in approving the membership of Providers.

- A. Upon confirmation of approved new Gila Multi-specialty Independent Practice Association membership, Provider Members are required to comply with federal and state healthcare regulations. Provider Members may also be subject to background checks including but not limited to criminal, driving, past employment, and the Office of Inspector General (OIG) or GSA exclusion list.
- B. If Gila Multi-specialty Independent Practice Association determines through a criminal records check that an applicant was previously convicted of, pleaded guilty to, or pleaded no contest to a felony or other serious criminal offense, the applicant may not be eligible for membership. Similarly, should Gila Multi-specialty Independent Practice Association learn that the applicant has otherwise failed to follow ethical or compliance standards of a prior employer, Gila Multi-specialty Independent Practice Association may refuse to accept that Provider's application.
- C. Gila Multi-specialty Independent Practice Association Provider Members may employ someone conditionally prior to obtaining the results of a criminal records check. Such conditional appointment automatically terminate in the event Provider Member receives results of a criminal records check which indicates that the employee was previously convicted of, pleaded guilty to, or pleaded no contest to a felony or other

serious offense.

- D. Notwithstanding the above, Gila Multi-specialty Independent Practice Association Provider Members may, at its sole discretion, employ someone who has been convicted of, pleaded guilty to or pleaded no contest to a felony or other serious offense upon consideration of the nature of the crime, the time elapsed, the nature of the job, and other non-discriminator factors.
- E. Gila Multi-specialty Independent Practice Association Provider Members shall not hire or retain individuals who are on the Office of Inspector General of the U.S. Department of Health and Human Services cumulative sanctions list <http://exclusions.oig.hhs.gov/search.html> or on the GSA List of Excluded Parties <https://www.sam.gov/portal/public/SAM/>. These individuals have been excluded from participation in federal health care programs.
- F. As a condition of engagement of any contractor, Gila Multi-specialty Independent Practice Association Provider Members will retain the right to terminate the services of any individual or agency who does not comply with the Compliance Program.
- G. If a Gila Multi-specialty Independent Practice Association Provider Member is charged with a criminal offense related to health care, depending on the circumstances, the Provider Member may be subject to immediate discipline, including membership termination. If resolution results in conviction, debarment or exclusion of the individual, Gila Multi-specialty Independent Practice Association will terminate the Members' membership.

XIV. GOVERNMENT INVESTIGATIONS

Gila Multi-specialty Independent Practice Association will reasonably cooperate with investigators and government agencies, including responding in a timely manner to lawful requests for documentation. This policy is not meant to deter Gila Multi-specialty Independent Practice Association Provider Members from cooperating or assisting with any governmental investigations.

- A. In the event a Gila Multi-specialty Independent Practice Association Provider Member is contacted by an investigator, the Provider Member is advised he or she may decline an immediate interview and seek legal counsel before answering any questions. Gila Multi-specialty Independent Practice Association requests that the Provider Member receiving any such contact notify the Executive Administrator of the Gila Multi-specialty Independent Practice Association as soon as possible.
- B. Government investigators have the right to speak with individual Provider Members or their employees. The Provider Member has the right to speak or to not speak with the investigator. The government investigator does not have the right to insist upon an interview. Submission to an interview is completely voluntary. Provider Members

with questions are encouraged to seek guidance about their options.

- C. If a Provider Member does not agree to an interview, the government may issue a subpoena. Even if a Provider Member agrees to an interview, the Provider Member could still be subpoenaed at a later time to testify to the matters covered in the interview.
- D. If an investigator contacts a Gila Multi-specialty Independent Practice Association Provider Member at home and the Provider Member wishes to submit to an interview, the Member may do so. However, the Gila Multi-specialty Independent Practice Association Provider Member has the right to politely decline to be interviewed. If the Gila Multi-specialty Independent Practice Association makes an attorney available, that attorney will be representing Gila Multi-specialty Independent Practice Association and not the Gila Multi-specialty Independent Practice Association Provider Member as an individual.
- E. In order to assure a thorough and timely response to requests for Gila Multi-specialty Independent Practice Association Provider Members information by government agencies while maintaining appropriate confidentiality of corporate, patient and other records gathered in the course of business operations, records will only be surrendered or copies of records provided to investigators in response to lawfully issued subpoenas. Gila Multi-specialty Independent Practice Association Provider Members who are served with a subpoena requiring the surrender of documents or other types of corporate records including electronically stored records, will promptly notify the Executive Administrator of the GMIPA. Gila Multi-specialty Independent Practice Association may send the subpoena to Gila Multi-specialty Independent Practice Association legal counsel for review to determine the appropriate response. The Gila Multi-specialty Independent Practice Association Provider Members shall respond lawfully to any subpoena. Copies of all records produced during an investigation or in response to a search warrant or subpoena, shall be retained.

XV. ATTESTATIONS

The following forms shall be used by Gila Multi-specialty Independent Practice Association Provider Members for verification and documentation of Compliance Training Certification by all Gila Multi-specialty Independent Practice Association Provider Members. A Form is included for Annual Certification documentation as required by all Provider Members.

In addition, a reporting and logging Form for identified Compliance issues or problems is included.

NEW HIRE COMPLIANCE PROGRAM POLICY RECEIPT

As a Provider Member Provider of Gila Multi-specialty Independent Practice Association, I have received the Compliance Program description and been informed about how to contact the Office of the Inspector General by calling 1-800-HHS-TIPS or by filing a report online at <https://forms.oig.hhs.gov/hotlineoperations/report-fraud-form.aspx>). I have thoroughly read the Compliance Program description and fully understand that adherence to the Compliance Program Policy is an essential part of my responsibilities and requirements as a Member in good standing of the GMIPA.

I have also been informed where I may review and how to use Gila Multi-specialty Independent Practice Association's various written policies and procedures including but not limited to Gila Multi-specialty Independent Practice Association's Compliance Program Policy posted on their website under "provider resources" (downloadable documents), CMS Internet and Paper Based Manuals, and Medicare and other payer advisories.

Printed Name

Signature

Date

COMPLIANCE PROGRAM TRAINING CERTIFICATION

As a Provider Member of Gila Multi-specialty Independent Practice Association, I have received the GMIPA Compliance Program description and been informed about to contact the Office of the Inspector General by calling 1-800-HHS-TIPS or file a report online at <https://forms.oig.hhs.gov/hotlineoperations/report-fraud-form.aspx>. I have read the GMIPA Compliance Program Policy description and fully understand the GMIPA Compliance Program Policy and my responsibilities and requirements as a GMIPA Provider Member.

I have also been informed where I may review and how to use Gila Multi-specialty Independent Practice Association's Compliance Program Policy on their website under "provider resources" (downloadable documents), CMS Internet and Paper Based Manuals about compliance, and Medicare and other payer advisories about compliance.

Any questions concerning Gila Multi-specialty Independent Practice Association's Compliance Program Policy have been answered.

Instructor's Printed Name*

Provider Members Printed Name

Instructor's Signature*

Provider Members Signature

Date

Date

* To be completed by Provider Members designated Compliance Trainer

Received by:

Executive Administrator's Signature

Date

ANNUAL COMPLIANCE PROGRAM CERTIFICATION

As a Provider Member of the Gila Multi-specialty Independent Practice Association,

- 1.) I have read and I understand the Compliance Program Policy description and agree to abide by it.
- 2.) I certify that I have complied with Gila Multi-specialty Independent Practice Association's Compliance Program.
- 3.) I certify that I am not aware of any situations involving violations of the Compliance Program.
- 4.) I agree that I will promptly report any actual or suspected instances of noncompliance with the appropriate authorities.

Provider Member's Printed Name

Provider Member's Signature

Date

Received by:

GMIPA Executive Administrator's Signature

Date

Gila Multi-specialty Independent Practice Association COMPLIANCE ISSUE COLLECTION SHEET

Name: _____ **Remain Anonymous**

Location/Area: _____ **Wish Not to Disclose**

Description of Compliance Issue:

Have you seen this activity at other facilities or offices? YES NO UNKNOWN

What is your understanding of how this issue should be handled from Gila Multi-specialty Independent Practice Association Policies or Procedures and/or governmental laws or regulations?

Have you discussed this issue with your Supervisor? YES NO

Do you feel your Supervisor is approachable in talking about this type of issue? YES NO

Compliance Evaluation Date: ____/____/____

APPENDIX “A” CODE OF CONDUCT

The following appendix sets out specific areas of concern to Gila Multi-specialty Independent Practice Association Provider Members. The following Code of Conduct is not intended to be a comprehensive list of all of the areas where Gila Multi-specialty Independent Practice Association Provider Members shall have an applicable standard, policy or procedure. Provider Members shall refer to the specific Procedures for their clinic/facility/organization.

A. Fraud, Waste and Abuse, False Claims

Every Gila Multi-specialty Independent Practice Association Provider Member shall display the highest integrity in all dealings with any governmental agency or representative and any private health insurance agency or representative. Gila Multi-specialty Independent Practice Association Provider Members will not make any misrepresentations, submit a false claim, or submit a false document. Any overpayments detected shall be reported and refunded in accordance state and federal law.

1. Gila Multi-specialty Independent Practice Association Provider Members expect that staff who file claims for payment to Medicare, Medicaid and other payers will file claims that are accurate, that represent the services actually provided and that indicate the conditions under which the patient/resident/client received services.
2. Other areas of billing activities include the following:
 - a. Charges will be submitted only for services or supplies that are provided to the patient/resident/client and are accurately and completely documented in the medical record or other supporting documentation.
 - b. Charges that accurately represent the level of service provided to the patient/resident/client will be billed.
 - c. Only medically necessary services shall be submitted for payment to Medicare, Medicaid and other payers.
 - d. Charges or codes will not be misstated to increase the level of payment received.
 - e. Overpayments will be reported by the provider/facility/clinic to the appropriate entity and refunds applied as required by law and regulation.
3. The International Statistical Classification of Diseases and Related Health Problems (ICD-9 & ICD-10 Codes), Current Procedural Terminology (CPT-4

Codes) and Health Care Common Procedure Coding System (“HCPCS”) are codes used to bill payers, including Medicare and Medicaid and must accurately describe the service and/or item(s) that was ordered and provided. Every Gila Multi-specialty Independent Practice Association Provider Member and/or their prospective clinics/facilities shall submit claims with latest diagnostic information indicated by the physician, including but not limited to ICD-10 codes. It shall be included on all paperwork and claims submitted to Medicare, Medicaid and other payers or as required by any private health insurance agency.

4. The Gila Multi-specialty Independent Practice Association Provider Member is responsible for identifying and reviewing internal controls to detect improper billing. Periodic audits should be requested to evaluate compliance with state and federal policies regarding proper billing. Audit systems are designed to discover any billing practices which may create errors and/or omissions. Errors and Violations of state and federal laws and may result in termination of Gila Multi-specialty Independent Practice Association Membership. The following should be monitored on a continuous basis to prevent and detect errors and/or omissions and potential violations of state and federal laws concerning billing:
 - a. Pricing and discounting practices
 - b. Completion of certificates of medical necessity (CMNs), where required, in compliance with Medicare policy
 - c. Completion of assignments of benefits
 - d. Medical necessity
 - e. Coding of services and items
 - f. Services provided as billed
 - g. Billing to appropriate payer source
 - h. Sufficiency of documentation
5. Procedure for Adjustment of Patient’s Financial Responsibility

Generally, a patient (or the patient’s payer) must be billed for all services provided, and normal efforts must be made to collect the amounts due. Patients without supplemental insurance coverage are billed for co-payments, and efforts are always made to collect the amounts due. The patient’s financial responsibility (e.g., full payment if self-insured, or copayment, coinsurance, and/or unmet deductible if insured) should only be reduced or waived in

individual cases of financial hardship. Whether such a discount or waiver is granted by the provider/facility/clinic shall be based on an individual assessment of the patient's financial circumstances, and an assessment of the legal and contractual obligations to the payer.

- a. Gila Multi-specialty Independent Practice Association Provider Members may not offer to waive a patient's financial responsibility without requesting a copy of hardship information.
- b. Gila Multi-specialty Independent Practice Association Provider Members shall refer all patient or physician inquiries regarding adjustment of financial responsibility to their prospective facility/clinics manager or supervisor. The Gila Multi-specialty Independent Practice Association Provider Members prospective manager or supervisor shall determine the patient's circumstances and if a hardship exists.
- c. If it is determined by the provider/facility/clinic that the patient is unable to pay their all or a part of their patient portion due to financial hardship, the Gila Multi-specialty Independent Practice Association Provider Members manager or supervisor will conduct a hardship assessment and adjust the patient's financial responsibility as determined.

B. Retention of Records

Gila Multi-specialty Independent Practice Association Provider Members shall strictly adhere to legal records retention policies. Gila Multi-specialty Independent Practice Association Provider Members shall not falsify any medical records.

C. Marketing

Every Gila Multi-specialty Independent Practice Association Provider Member shall use honest, straightforward, fully informative and non- deceptive information in marketing clients, and referral sources. All marketing information will be clear non-deceptive, informative and correct. No marketing information or material will encourage any referral source to order medically unnecessary items or services.

1. Misuse of Names, Symbols, and Emblems:

Gila Multi-specialty Independent Practice Association Provider Members shall not make use of the words 'Department of Health and Human Services', 'Health and Human Services', 'Health Care Financing Administration', 'Centers for Medicare and Medicaid Services,' 'Medicare', or 'Medicaid', the letters 'DHHS', 'HHS', or 'HCFA', 'CMS' or a symbol or emblem of the Department of Health and Human Services or the Centers for Medicare and Medicaid Services, or any combination or variation of such words, letters, or symbols, in

a manner that could reasonably be construed as conveying the false impression that an advertisement, solicitation or other item was made by, authorized, approved, or endorsed by the Department of Health and Human Services and/or CMS.

Soliciting, offering or receiving a kickback, bribe or rebate

Gila Multi-specialty Independent Practice Association Provider Members will not knowingly and willfully solicit, receive, offer or pay remuneration (including any kickback, bribe, or rebate) for referrals for services that are paid in whole or in part under a federal healthcare program or private healthcare program. Gila Multi-specialty Independent Practice Association Provider Members will not bill for any service if it is aware that the services were furnished pursuant to a prohibited referral under the Stark physician self-referral law.

2. Gifts and Entertainment

Accepting gifts and offers of entertainment may create a risk for Gila Multi-specialty Independent Practice Association Provider Members. The acceptance of gifts and entertainment has the potential to create violations of state and/or federal laws. Gila Multi-specialty Independent Practice Association values its reputation and commitment to integrity in the delivery of quality services to our members, clients and referral sources. For this reason, Gila Multi-specialty Independent Practice Association Provider Members and agents are expected to keep relationships with members, non-members, vendors, physicians and their offices and third parties impartial and avoid accepting gifts or other items of value. These items may include meals, tickets to events, special favors or loans, discounts or free services, tips and gratuities and paid travel.

3. Cash or cash equivalents, such as gift certificates or gift cards may not be accepted by a Gila Multi-specialty Independent Practice Association employee from any Provider Member, client or referral source.
4. Gila Multi-specialty Independent Practice Association Provider Members may not accept any gift if the circumstances surrounding the giving and receipt of the gift indicate the intent to influence employee behavior or decision making.
5. Infrequent meals of modest value may be accepted by a Gila Multi-specialty Independent Practice Association Provider Member in association with education or business presentations or discussions. Generally, offers of entertainment should not be accepted. On the rare occasion where entertainment is offered in conjunction with a business discussion, both parties must be present and the offer should be infrequent, of modest value and in a setting that is conducive to business discussions.

6. Gila Multi-specialty Independent Practice Association Provider Members are required to report any entertainment and gifts greater than nominal value. Nominal value is defined as an item or service that has no real value to anyone.