



# Compliance & FWA Training & Education

<b>Department:</b>	<b>Compliance, Corporate</b>	<b>Policy No:</b>	<b>168</b>
Prepared By/Date:	Emily Coriale /June 1, 2018	Date Originated:	<b>6/1/2018</b>
Approved By/Date:	Compliance Committee – June 26, 2018	Last Revision Date:	N/A
<b>Areas of Impact:</b>	<b>All P3 Employees and Departments</b>	<b>Supersedes P&amp;P No.</b>	<b>N/A</b>

## 1. PURPOSE:

To document the process for P3 Health Group Holdings, LLC (“**P3**”)<sup>1</sup> adherence to general Compliance and Fraud, Waste and Abuse (“**FWA**”) training and education delivery to required parties.

## 2. SCOPE:

- a. This policy applies to all of P3’s employees, management, contractors, student interns, and volunteers.
- b. This policy describes P3’s objectives and policies regarding compliance training, education and related requirements.

## 3. DEFINITIONS:

Unless defined in the body of this policy (which would be indicated by a term in parenthetical, underlined and with quotations around the defined term), the following terms, have the following meanings for this policy:

**Abuse:** Includes actions that may directly or indirectly, result in unnecessary costs to the Medicare Program, improper payment, payment for services that fail to meet professionally recognized standards of care, or services that are medically unnecessary. Abuse involves payment for items or services when there is no legal entitlement to that payment and the provider has not knowingly and/or intentionally misrepresented facts to obtain payment. Abuse cannot be differentiated categorically from fraud, because the distinction between “fraud” and “abuse” depends on facts and circumstances, intent and prior knowledge, and available evidence, among other factors.

**CMS:** Centers for Medicare and Medicaid Services.

**Downstream Entity:** Any party that enters into a written arrangement, acceptable to the CMS, with persons or entities involved with the Medicare Advantage (“**MA**”) benefit (“**MAO**”) or Part D benefit, below the level of the arrangement between a Medicare Advantage Organization or applicant or a Part D plan sponsor or applicant and a first-tier entity. These written arrangements continue down to the level of the ultimate provider of both health and administrative services.

**FDR:** First Tier, Downstream or Related Entity.

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<sup>1</sup>When the term “**P3**” is used herein, it also includes the following entities, in addition to P3 Health Group Holdings, LLC (“**Holdings**”) – P3 Health Partners, LLC; P3 Health Group Management LLC; P3 Consulting, LLC; P3 Health Partners-Nevada, LLC; Kahan Wakefield Abdou, PLLC; Bacchus Wakefield Kahan, PC; as well as any direct or indirect subsidiaries of Holdings, whether now existing or hereafter formed.

**First Tier Entity:** Any party that enters into a written arrangement, acceptable to CMS, with a MAO or Part D plan sponsor or applicant to provide administrative services or health care services to a Medicare eligible individual under the Medicare Advantage program or Part D program.

**Fraud:** Knowingly and willfully executing, or attempting to execute, a scheme or artifice to defraud any health care benefit program or to obtain (by means of false or fraudulent pretenses, representations, or promises) any of the money or property owned by, or under the custody or control of, any health care benefit program.

**FWA:** Fraud, waste and abuse.

**Related Entity:** Any entity related to a MAO or Part D sponsor by common ownership or control and:

1. Performs some of the MAO or Part D plan sponsor's management functions under contract or delegation;
2. Furnishes services to Medicare enrollees under an oral or written agreement; or
3. Leases real property or sells materials to the MAO or Part D plan sponsor at a cost of more than \$2,500 during a contract period.

**Waste:** The overutilization of services or other practices that directly or indirectly, result in unnecessary costs to the Medicare program. Waste is generally not considered to be caused by criminally negligent actions but rather the misuse of resources.

#### **4. POLICY:**

P3 ensures that its employees (including temporary workers and volunteers), including the Chief Executive Officer ("**CEO**"), senior administrators, and managers; governing body members; and FDRs receive general compliance and FWA training within 90 days of initial hire, appointment, or contracting, and annually thereafter. P3 tracks and maintains documentation of training completion.

#### **5. PROCEDURE / ACTION:**

- A. **Frequency.** P3 requires its employees, including the CEO, senior administrators, and managers; governing body members; and FDRs to complete general compliance and FWA training within 90 days of initial hire, appointment, or contracting, and annually thereafter.
- B. **Content.** P3 utilizes Gorman University's web-based compliance and FWA training to meet CMS's training requirements.
  - i. Compliance and FWA topics include:
    - a. Relevant laws and regulations related to Medicare Parts C and D FWA (e.g., False Claims Act, Anti-Kickback Statute, HIPAA/HITECH).
    - b. An overview of compliance expectations, how to ask compliance questions, request compliance clarification, and hotline reporting.
    - c. Types of non-compliance and FWA that can occur in the settings in which P3 employees and its FDR's employees work.
    - d. Processes for P3 employees and its FDR's employees to report suspected Medicare program non-compliance and FWA to P3.
    - e. Case examples and resources.
  - ii. P3 does not modify Gorman University's training content, although it may provide additional training with topics specific to its organization, such as:
    - a. A description of P3's Compliance Program, including a review of its compliance policies, Code of Conduct, commitment to business ethics, and compliance with all CMS requirements.
    - b. A review of the disciplinary guidelines for non-compliant behavior. The guidelines communicate that non-compliant behavior can result in mandatory re-training and may result in disciplinary action, up to and including termination of employment or contract.
    - c. A review of policies related to contracting with the government, such as the laws addressing gifts and gratuities.
    - d. A review of potential conflicts of interest and P3 disclosure system.

- e. Obligations of its subcontractors to have appropriate policies and procedures to address non-compliance.
  - f. Protections for P3 personnel and subcontractor employees who report suspected non-compliance and/or FWA.
- iii. Additionally, P3 may provide specialized or refresher training on issues posing FWA risks based on an individual's job function (e.g., pharmacist, statistician, customer service, etc.). Training may be provided:
- a. Upon appointment to a new job function.
  - b. When regulatory requirements change.
  - c. When employees or its FDRs are found to be noncompliant.
  - d. As a corrective action measure to address noncompliance.
  - e. When an individual works in an area or for an FDR implicated in past noncompliance or FWA.
- iv. P3 also regularly issues reminders regarding various compliance requirements and updates (e.g., HIPAA privacy and security, examples of possible non-compliance, how to report non-compliance issues, etc.) via email to its employees and FDRs.

C. Documentation. P3 tracks and maintains documentation of training completion.

- i. P3 requires its employees to complete the general compliance and FWA training located on the Gorman University's website and to retain the Gorman University certificate of completion.
- ii. P3 requires its FDRs to provide an attestation confirming the organization's applicable employees have completed the appropriate general compliance and FWA training. The attestation must include language specifying the entity complies with CMS compliance and FWA training requirements and the training provided includes CMS content.
- iii. P3 does not require FWA training for subcontractors deemed to have met the FWA certification requirement through enrollment into Parts A and B of the Medicare Program or through accreditation as a supplier of durable medical equipment, prosthetics, orthotics and supplies. No additional documentation beyond credentialing is required for deemed providers. These FDRs are NOT exempt from the general compliance-training requirement.
- iv. P3 tracks training due dates and maintains documentation of required and specialized training for a period of 10 years. P3 also requires its FDRs maintain training documentation for a period of 10 years.

P3 reviews and updates, if necessary, its training materials whenever there are material changes in regulations, policy or guidance, and at least annually.

**6. DOCUMENTATION / REFERENCES:**

SUPPORTING DOCUMENTS

Not applicable.

CROSS-REFERENCED P&PS

N/A

MANUAL

Medicare Managed Care Manual (MMCM), Chapter 21, Sections 20, 50.3

Prescription Drug Benefit Manual (PDBM), Chapter 9, Compliance Program Guidelines, Sections 20, 50.3

RELEVANT REGULATORY CITATIONS

42 C.F.R. § 422.503(b)(4)(vi)(C)

42 C.F.R. § 423.501

42 C.F.R. § 423.504(b)(4)(vi)(C)

**7. HISTORY:**

<b>DATE</b>	<b>REVISED BY</b>	<b>REASON FOR REVISION/CONTENT CHANGED</b>