Topic: Anti-kickback and Inducement of people we	Department: All departments			
support; contractual and financial arrangements				
with physicians and referral sources				
Original effective date: 3/11/02	Last revision date: 9/25/24			
Owner: VP for Quality and Compliance	Frequency of reviews: Annual			
Internal/Regulatory Reference(s) (all that apply): 42 USC 1320a-7b; Social Security Act section 1128a;				
42 USC 1320a-7a; 42 CFR 1003.1000(a) & (b); 42 USC 1395nn				
Related documents/Links: NA				

Policy: It is the policy of The Arc of Monroe ("The Arc") that business, administrative and support functions promote personal and organizational outcomes, and sound fiscal practices.

Additional Information: This policy applies to all persons who are affected by the agency's risk areas (to the degree that they are so affected) including our employees, the CEO and other senior management, managers, contractors, agents, subcontractors, independent contractors, students, interns, volunteers, and (if applicable) the Board of Directors or members of Board committees; hereafter referred to as "affected parties."

The Federal "Anti-Kickback" Statute makes it a crime, punishable by monetary fines and/or imprisonment, to knowingly and willfully offer, pay, solicit or receive a payment of <u>any</u> kind (i.e., cash, services, gifts, entertainment, favors, etc.) to <u>anyone</u> to induce referrals or in return for referrals of Medicare or Medicaid individuals. These laws have been construed very broadly, and cover many "ordinary" business activities that are common practice in the non-health care arena. Examples of practices that could be covered by the "Anti-Kickback" Statute include: (i) routinely waiving deductibles or co-payments; (ii) offering or furnishing referral sources with free items or services; (iii) offering goods or services at below market value for the purpose of inducing referrals; and (iv) offering individuals free items or services. Arrangements that satisfy all of the requirements of the regulatory "safe harbors" or are exceptions to the rules are immune from sanctions.

The Federal "Anti-Self-Referral" or Stark Law prohibits self-referral with respect to certain physician services. This statute prohibits, with certain statutory exceptions, physicians or certain other licensed professionals from ordering "designated" services from entities in which the physician or a member of the physician's immediate family has a direct or indirect financial relationship.

Any proposed contract with a practitioner, facility, provider or vendor must be reviewed to assure compliance with these laws.

Procedure				
Task:	Responsible party:			
Anti-ki	ckback/Stark – General Guidelines:			
1.	Affected parties cannot ask for or receive any type of benefit, gift or compensation because they: *Refer someone to one of our programs; *Try to get someone to come to one of our programs; *Arrange for someone to join our programs; and/or *Buy, lease, or order something that Medicaid pays for (either things or services) – or arranging for this to happen	Affected parties		

2.	It is also illegal for staff to pay someone else for these same purposes,	Affected parties
	whether through money, a favor or some item or gift.	
	Examples would include:	
	*An affected party receives free concert tickets if they get people to	
	come to one of our programs	
	*An affected party pays another agency's referral agent to refer people	
	with relatively few support needs to us	
3.	If affected parties believe this is happening, they need to report it to a	Affected parties;
	manager immediately. Management needs to take immediate steps to	Manager
	prevent it from continuing to happen, and ensure that Executive	
	Management and the VP for Quality and Compliance are informed.	
4.	A review will occur to determine whether or not it's truly happening. If	VP for Quality
	so, we will call our lawyers for direction and counsel. If appropriate, law	and Compliance
	enforcement will be notified.	or designee
5.	We will open a formal compliance case to ensure adequate	VP for Quality
	documentation and oversight of the issue.	and Compliance
6.	In response, managers may need to revise or update their systems to	Management
	prevent this from happening again.	-
7.	Discipline will be decided by the manager in consultation with HR, the	HR
	compliance officer, executive management (EMT – CEO, COO, CFO,	
	CHRO), and legal counsel.	
8.	Any contract or employment arrangement with a physician or other	EMT
	licensed practitioner must be reviewed by a member EMT before	
	execution. Counsel will be consulted as appropriate.	
9.	Nothing in the contract or arrangement can be related to or contingent	EMT
	on the number of referrals we receive from thephysician or other	
	licensed practitioner.	
10.	Payments must be consistent with local fair market value.	EMT
Induce	ment:	
1.	If people we support get Medicaid or Medicare, staff are not permitted to	Affected parties
	give them money, gifts or any other material incentives to get them to	
	join a Medicare- or Medicaid-funded program or service.	
2.	Similarly, affected parties cannot offer to waive a payment or reduce	Affected parties
	costs for people we support without express permission from agency	
	administration and/orthe VP for Quality and Compliance. This could also	
	be considered an inducement to get them to attend our	
	programs/services which is against federal law.	
3.	The Arc will only waive or reduce costs if it's determined, after thorough	VP for Quality
	review, that the person truly cannot pay. This would be an exception and	and Compliance;
	should only occur after review and approval from the VP for Quality and	Executive
	Compliance or designee.	Management
	,	Team
4.	The Arc will never offer gifts or money, or waive or reduce fees for the	Affected parties
	sole purpose of trying to get someone to choose The Arc as a service	
	provider.	
5.	Affected parties are prohibited from giving anything to people we support	Affected parties;
	with a value more than \$100. Any gifts given by affected parties to people	Director; Sr.
	supported require the approval of an agency director or senior director.	Director
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Document revision record:

Revision	Release	Reason for change	Approver
Date	Date		
10/27/05	10/27/05	Reasons for changes not documented	P Dancer
10/11/06	10/11/06	Reasons for changes not documented	P Dancer
5/19/08	5/19/08	Reasons for changes not documented	P Dancer
5/25/12	5/25/12	Reasons for changes not documented	P Dancer
10/24/14	10/24/14	Reasons for changes not documented	P Dancer
4/26/17	4/26/17	Reasons for changes not documented	P Dancer
10/21/19	10/21/19	Transitioned to new procedural format	P Dancer
4/1/21	6/8/21	Incorporated inducement and waiver of co-payments;	ICC
		included physician arrangements; added discrete sections for	
		manager and VPQC	
3/15/23	3/15/23	Specified whom this policy applies to	ICC
6/29/23	6/29/23	Typos corrected	ICC
5/17/24	6/26/24	Added clarifying language	ICC
9/25/24	9/25/24	Added Board committees as potentially being impacted by	ICC
		this policy	