

See something? Say something.

Everyone is hurt by fraud, waste, and abuse in the health care system. Every dollar that is spent on fraudulent, abusive or wasteful activities is money that can't be spent where it is needed most.

What is Fraud?

Fraud is an intentional deception or misrepresentation, whether by act or omission, made by a person with the knowledge that the deception could result in some unauthorized benefit to himself/herself or some other person.

What is Waste?

Waste is health care spending that can be eliminated without reducing quality of care. It includes inefficient use or management of resources, unnecessary expenses, or procedures that cannot reasonably be expected to yield better outcomes.

What is Abuse?

Abuse is when someone accidentally gives false information to the Government or a government contractor to get money or a benefit. For example, accidentally billing a follow-up visit as a higher paying new patient visit.

Examples of Fraud, Waste and Abuse:

Examples of Fraud, Waste and Abuse include, but not limited to any or all of the following:

- 1. Providers or Subcontractors that intentionally or recklessly report encounters or services that did not occur, or where products were not provided.
- 2. Providers or Subcontractors that intentionally or recklessly report overstated or upcoded levels of service.
- 3. Providers or Subcontractors intentionally or recklessly billed more than the Usual Charge to other insurance programs.
- 4. Providers, or Subcontractors altered, falsified, or destroyed Clinical Records for any purpose such as collecting payments otherwise not due.
- 5. Providers or Subcontractors that intentionally or recklessly make false statements about the credentials of persons rendering care to Beneficiaries.
- 6. Providers or Subcontractors that intentionally or recklessly misrepresent medical information to justify "referrals" to other networks or out-of-network Providers when such parties are obligated to provide the care themselves.
- 7. Providers or Subcontractors that intentionally fail to render Medically Appropriate Covered Services that they are obligated to provide to Beneficiaries under this Contract, any Subcontract with the Contractor, or Applicable Law.
- 8. Providers or Subcontractors that knowingly charge Beneficiaries for services that are Covered Services or intentionally or recklessly balancebill a Beneficiary the difference between the total Fee-for-Service charge and Contractor's payment to the Provider, in violation of Applicable Law.
- 9. Providers or Subcontractors that intentionally or recklessly submitted a claim for payment when such party knew the claim had already been paid by another source.
- 10. Any case of theft, embezzlement or misappropriation of Title XIX or Title XXI programmoney.

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11. Any practice that is inconsistent with sound fiscal, business or medical practices and which:

(i) results in unnecessary costs

(ii) results in reimbursement forservices that are not medically necessary, or

(iii) fails to meet professionally recognized standards for health care.

12. Evidence of corruption in the Enrollment and Disenrollment process, including efforts of Tuality Health Plan Services employees, State employees or Subcontractors to skew the risk of unhealthy Beneficiaries or potential Beneficiaries toward or away from Tuality Health Plan Services. 13. Attempts by any individual, including Tuality Health Plan Services and employees, Providers or Subcontractors, to solicit kickbacks or bribes. For example, the offer of a bribe or kickback in connection with placing a Beneficiary into a carved-out program, or for performing a service that Providers are required to provide under the terms of employment, the Contract or ApplicableLaw.

Tuality Health Plan Services encourages reporting incidents of suspected fraud, waste or abuse. Everyone has the right to report fraud, waste, and abuse anonymously and are protected under the applicable Whistleblower laws.

Tuality Health Plan Services reports all verified cases of fraud to the appropriate health plan, State and Federal agency as required by law.

Here's how you can report:

- Call the anonymous OHSU Anonymous Compliance Hotline at 1-877-733-8313.
- Complete and submit an online form at <u>www.ohsu.edu/hotline</u>