



Honesty & Confidentiality

An Overview of the Deficit Reduction and False Claims Acts

Guidelines for Office Staff

“Doing the Right Thing” has always been important to Bayada Nurses; it’s part of The Bayada Way. For our clients, doing the right thing means providing the highest quality of care that we can. For our employees, it means complying with the law and performing our jobs with excellence and integrity. Part of your commitment as a Bayada Nurses employee is to be honest and to report concerns when things are not being done in accordance with the law.

Bayada Nurses’ culture of honesty in its documentation, billing practices, and business dealings supports a recently enacted federal law called the **Deficit Reduction Act (DRA)**. The DRA requires that **all** employees and others working at or on behalf of Bayada Nurses be reminded of our practices and requirements as they relate to billing and documentation practices.

The federal **False Claims Act (FCA)** makes it unlawful for any person or organization to **knowingly** make a false record or file a false claim with the government for payment. A **claim** includes any request for money and **knowingly** means the person or organization knows, or should know, the information on the bill or documentation of care is false or allows the claim to be submitted without ensuring the information provided is accurate and complete.

What Does This Mean To You?

As an employee of Bayada Nurses, you are placed in a position of trust and are asked to uphold the highest standards, not only in providing client care, but in embracing honesty and integrity in all that we do. This includes being accurate and truthful in all client care documentation and billing practices.

In order to ensure that Bayada Nurses only requests payment for services that are actually rendered, our practice is to require a client or primary caregiver to sign a Time Slip, Nurses Note, or Time and Activity Record after care is completed for the day or the week.

Office Staff:

- ◆ **DO double check all Time Slips, Nurses Notes or Time and Activity Records** to ensure the times and dates of service match what is being processed in the client’s schedule. Correct any changes before processing bills or payroll.
- ◆ **DO NOT process payroll without ensuring that Time Slips, Nurses Notes, or Time and Activity Records are signed** by the client or primary caregiver. For unsigned records, make an attempt to verify time worked with the client or primary caregiver.
- ◆ **DO ensure that all services are authorized by the payer**, if applicable, before scheduling an employee to provide care.
- ◆ **DO NOT bill for skilled services that were not ordered** by a physician or services that are not specified on the client’s care plan.
- ◆ **DO ensure that all services rendered are medically necessary** for the client as determined by the payer, if applicable, before submitting a bill for payment.
- ◆ **DO NOT request that a payer provide authorization for services** that are not medically necessary.
- ◆ **DO keep your commitments.** Clients place a great deal of trust in us and rely on each of us to honor our commitments to them.
- ◆ **DO NOT break your commitment** to get the job done for our clients.

Remember when payroll is processed you are certifying that the schedule in BEARS is accurate and that services have been confirmed via a Time Slip, Nurses Note, or Time and Activity Record.

Federal and State False Claims Laws:

The primary purpose of federal and state false claims laws is reducing fraud and abuse in government health care programs. The Federal False Claims Act (**FCA**) forbids anyone from making false statements or representations in connection with a claim submitted for reimbursement to any federal or state funded health care program including Medicare, Medicaid, Veterans Affairs, TriCare or similar state programs.

The Centers for Medicare and Medicaid Services (CMS) define “fraud” as the intentional deception or misrepresentation of information that an individual knows to be false, or knowing it could result in an unauthorized benefit. CMS defines “abuse” as incidents or practices of providers that are inconsistent with sound medical practice. These incidents may result in unnecessary costs, improper payment, or the payment for services that either fail to meet professionally recognized standards of care or those not medically necessary.

Penalties for Violating the False Claims Act:

If fraudulent billing is proven, sanctions against Bayada Nurses and/or the individual employee or contractors who caused a false claim to be submitted may include monetary penalties, exclusion from participation in Medicare and Medicaid, and possibly imprisonment. Penalties may range from \$5,500 to \$11,000 per false claim or can be up to three times the value of the billed amount.

Bayada Nurses’ goal is to submit only accurate claims for services that are actually provided, documented in the medical record, and medically necessary. If an error is discovered, it is our practice to take prompt corrective action and refund any improperly billed monies.

Whistleblower Protections Under the Federal False Claim Act (FCA)

The **FCA** encourages reporting any false claim and prohibits employers from retaliating against anyone who reports a false claim or participates in the prosecution of a provider. The **FCA** includes protection for “whistleblowers” which allows someone with actual knowledge of alleged violations to even file a lawsuit on behalf of the federal government. A whistleblower whose case is accepted and prosecuted, could qualify for a percentage of any recovery to the federal government.

Communication – The Key to a Good Relationship:

If you have concerns about your own actions or those of another employee, don’t hesitate to ask! Bayada Nurses expects and requires any person who knows or suspects that a false claim for payment was or could be submitted to make a report.

There are several ways to report suspected problems. Bring the concern directly to your Supervisor, Director, or Division Director. Or contact our Compliance Officer, Nori Fey. You can communicate confidentially with Nori via our toll-free hotline by calling **1-866-665-4295**. You can also access compliance information (including a report form) on our website at **www.bayada.com/Compliance**.

Bayada Nurses does not punish our employees for reporting concerns. In fact, it is part of your job to uphold our values and report instances when you suspect the law is being broken or our policies and procedures are not being followed.

**Be honest. Maintain confidentiality. Communicate your concerns.
This is part of *The Bayada Way* of doing business.**