SAN MATEO COUNTY HEALTH SYSTEM BEHAVIORAL HEALTH AND RECOVERY SERVICES

DATE: January 15, 2004

BHRS POLICY: 04-02

SUBJECT: Employee and On-site Contractor Screening and Orientation

AUTHORITY: 42 CFR 438.608; 42 CFR.1320a-7; San Mateo County Employee and Public

Services (EPS); MH Services Compliance Plan and Program; MH Policy 03-20,

Organized Health Care Arrangement (OHCA)

SUPERSEDES: MH 04-03 (Combined with this policy.)

AMENDED: May 26, 2016, November 30, 2016, January 10, 2017; Attachment A:

Acknowledgment of Receipt: San Mateo/Health System Policies, Obsolete

January 10, 2017

ATTACHMENT:

A: Acknowledgment of Receipt of BHRS HIPAA Policies (Was Attachment B)

PURPOSE:

To describe standard requirements and processes for obtaining and evaluating background information prior to and during employment.

To ensure that every new employee and independent contractor who works on-site at Behavioral Health and Recovery Services (BHRS) is eligible to provide services that are charged to or associated with a federal health care program.

To ensure that every new employee and independent contractor working on-site at BHRS receives appropriate training and orientation to carry out his/her duties, in compliance with federal, state and county rules and regulations.

To ensure that all required ongoing monthly checks are conducted.

DEFINITIONS:

- <u>Federal Health Care Program</u> means Medicare, Medicaid (Medi-Cal in CA), and all other federal health care programs defined in Federal law (See citations above).
- <u>Ineligible Person</u> is an individual or entity who (1) is currently excluded, suspended, debarred or otherwise ineligible to participate in federal health care programs or (2) has been convicted of a criminal offense related to the provision of health care services and has not been reinstated by the federal health care program to provide services after a period of exclusion, suspension, debarment or ineligibility. No manager/supervisor will make an offer of employment to an applicant whom

they know is listed as an ineligible person. Managers/supervisors must immediately advise the Compliance Officer and Quality Manager of any current employee who is listed as an ineligible person.

- New Employees includes staff transferring into BHRS from other San Mateo County jobs.
- <u>OIG</u> is the Office of the Inspector General
- <u>Conditional Job Offer</u> is one that is extended to a potential employee with the understanding that it is contingent upon the successful completion of all county screening requirements.
- <u>CURES</u> is the Controlled substance Utilization Review and Evaluation System (CURES) stores Schedule II, III, and IV controlled substance prescription information reported as dispensed in California.

POLICY:

Offers of employment for personnel within San Mateo BHRS are contingent upon completing an application <u>and</u> a background investigation through the County of San Mateo's Human Resources Department. Conditional job offers may be made but are not finalized until screening and background checks are successfully completed.

San Mateo County BHRS will not employ or contract with any individual, entity or independent contractor that is deemed an Ineligible Person.

All new employees and new on-site independent contractors will receive written materials and will be trained in policies related to compliance during their initial orientation to BHRS. All staff shall acknowledge in writing that they have received and read the policies listed in Attachment A and any others deemed necessary. Evidence of compliance training will be maintained in the employee's personnel file. Additional training, appropriate to the individual's work assignment, will be completed in a timely manner. Failure to attend or complete mandatory training will result in progressive discipline, up to and including termination of employment. All staff and on-site independent contractors will complete the online BHRS compliance and confidentiality trainings at hire and yearly.

Nothing in this policy is intended to supersede or amend existing related policies including, but not limited to: 92-03 (Affirmative Action), 98-15 (Fingerprinting), 98-16 (Credentialing for County Licensed Staff), and 96-01 (Volunteers).

PROCEDURE:

1. Screening New Staff/New Independent Contractors:

Prior to hiring an employee or on-site contractor, BHRS Quality Management (QM) ensures that the individual being considered for employment or contracting has been screened and has valid, current license(s), is in good standing with the appropriate board(s), and has a current NPI on the NPPES website, as needed. Upon acceptance of the offer for employment/contract the individual will be required to undergo fingerprinting, as needed and provide their Social Security number to the BHRS Personnel Department. On the same day the BHRS Personnel Department staff will verbally provide BHRS QM the Social Security number for pre-hire exclusion checks. Immediately after screening, BHRS Personnel and QM departments will destroy/shred any copy of the Social Security number.

1. For clinical and medical staff credentials are verified:

- a. National Plan and Provider Enumeration System (NPPES) is verified at https://npiregistry.cms.hhs.gov/
- b. Licenses are verified at www.breeze.ca.gov
- c. Drug Enforcement Administration (DEA) https://www.dea.gov/
- 2. For all staff an exclusion review is conducted using Streamline Verify https://app.streamlineverify.com/ The exclusion lists included in Streamline Verify:
 - a. Office of Inspector General (OIG/LEIE)
 - b. Medi-Cal Suspended and Ineligible list
 - c. Social Security Administration's Death Master File
 - d. System Award Management (SAM) Database
- 3. MDs/DOs/NPs/Psychologists/MFTs/LCSWs are checked for Medicare exclusions at: https://med.noridianmedicare.com/web/jeb/enrollment/opt-out/opt-out-listing
- 4. MDs/DOs/NPs will provide evidence that they have registered at the State of California Department of Justice Controlled substance Utilization Review and Evaluation System (CURES) located at https://cures.doj.ca.gov
- 5. For all potential employees a background check is conducted by the San Mateo County to ensure that the individual is cleared for employment by U.S. Department of Justice (DOJ).

2. Ongoing Monthly checks:

- All BHRS staff and on-site contractors are screened monthly utilizing a data extract generated from Workday via ISD. This data extract is uploaded on the 2nd of each month. Below are the exclusion lists included in the monthly Streamline Verify review:
 - a. Office of Inspector General (OIG/LEIE)
 - b. Medi-Cal Suspended and Ineligible list
 - c. Social Security Administration's Death Master File
 - d. System Award Management (SAM) Database
- The San Mateo Medical Center Compliance Officer will notify the BHRS Compliance Officer of any excluded or debarred staff. Immediate HR action will be taken to terminate the excluded or debarred staff or remove the individual from providing services and claiming federal and state funds by checking the preceding databases monthly.

3. Screening Findings:

- Office of Inspector General (OIG), Medi-Cal Suspended and Ineligible list, Medicare Exclusion are checked in the exclusion review. If an individual or entity is found to be excluded, San Mateo County may not hire/contract with the individual.
- BHRS may not employ an excluded individual until any discrepancies are resolved and it is clear that the individual is not and will not be excluded or debarred. If an individual provides satisfactory evidence that he/she is not the individual on the Office of Inspector General (OIG)

- and the Medi-Cal Suspended and Ineligible lists, that individual may be considered eligible for employment.
- If an individual is found to be excluded on a monthly review they will immediately be stopped from providing services, and claiming to federal and state funds will be blocked by BHRS program administration.
- Clinical/medical staff positions/contracts: If credentials are unable to be verified, the individual cannot be hired for clinical, medical, or on-site contracted positions requiring credentials. If the individual's National Provider Identifier (NPI) is not up-to-date or the individual does not have an NPI, the individual must update or obtain an NPI before employment or contracting with BHRS. Providers' licenses according to their due dates will be verified to be current and that the individual is in good standing. If a required license expires or the individual is not in good standing with any board that individual's scope and duties will be modified as necessary.

4. Orientation/Training

- Immediately upon hiring, the Payroll/Personnel Specialist will give the employee a series of County, Health System and BHRS policies to read and acknowledge. See attached lists of policies requiring signatures to show they have been received and read. The signed verification will be maintained in the employee's personnel file.
- New staff, trainees and psychiatric residents shall be directed to take the mandatory selfadministered web-based confidentiality and privacy courses. HIPAA Confidentiality Training and Compliance Training must be completed before access is granted to the EMR or any client PHI. Documentation of training will be maintained on training servers.
- Alternatively, the new staff member may be assigned to attend a focused training presented by BHRS QM staff covering this same material, by itself or in combination with content concerning general compliance, the code of conduct, or other related topics.
- As appropriate, the new staff will be scheduled by supervisors to attend documentation training and other training specific to his or her job assignment.
- QM staff will maintain evidence of attendance at all trainings presented by that program.
- All training and materials presented during staff orientation will emphasize the elements of the compliance plan and the related Code of Conduct.

| | Approv | ed: | (Signature on file) | |
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| | •• | | Scott Gruendl, MPA | |
| | BHRS | | Assistant Director & Compliance Officer | |
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| | Approv | ed: | (Signature on | |
| File) | | | Stephen Kaplan, LCSW BHRS Director | |
| Next Review D | ue: September 2017 | | | |
| Reviewed by: _ | | | | |
| | Scott Gruendl, MPA Compliance Officer | (Date) | | |