

**Passport Advantage
Provider Manual
Section 16.0
Program Integrity**

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16.0 Program Integrity

Passport Advantage has developed a Program Integrity plan of internal controls and policies and procedures for preventing, identifying and investigating enrollee and provider fraud, waste and abuse. Our plan includes:

- Annual Fraud, Waste and Abuse Training;
- Enforcement of standards through disciplinary guidelines;
- Provisions for internal monitoring and auditing of the members and providers;
- Provisions for internal monitoring and auditing of First Tier Downstream and Related Entities (FDR). Should issues be identified, the FDR shall be placed on a corrective action plan (CAP).
- Processes to collect outstanding debt from providers;
- Procedures for appeals;
- Programs that run algorithms and edits on claims data to identify outliers and patterns and trends.

Passport Advantage's Program Integrity Unit (PIU) monitors and analyzes various types of data to detect patterns of fraud, waste and abuse, to identify for further investigation providers and beneficiaries possibly engaged in such activities. The PIU is comprised of staff from a broad range of Passport Advantage departments. All Passport Advantage fraud and abuse investigation activity is reported to the NBI MEDIC. Providers are required to cooperate with the investigation of suspected Fraud and Abuse. If you suspect fraud, waste or abuse by a Passport Advantage member or provider, it is your responsibility to report this information immediately. Please contact: Passport Advantage Compliance Hotline: (855) 512-8500 or PassportListens@getintouch.com to remain anonymous; or (844) 859-6152 TTY/TDD 711 to speak with an associate.

The Federal False Claims Act (31 U.S.C. §§ 3729 – 3733) and the Federal Administrative Remedies for False Claims and Statements Act (31 U.S.C. § 3802) are specifically incorporated into § 6032 of the Deficit Reduction Act. These Acts outline the civil penalties and damages against anyone who knowingly submits, causes the submission, or presents a false claim to any U.S. employee or agency for payment or approval. The U. S. agency in this regard means any reimbursement made under Medicare or Medicaid and includes Passport Advantage. The False Claims Acts also prohibit anyone from knowingly making or using a false record or statement to obtain approval of a claim.

Knowingly is defined in the statute as meaning not only actual awareness that the claim is false or fraudulent, but situations in which the person acts in deliberate ignorance of, or in reckless disregard of, the truth or falsity of the claim.

The following are some examples of billing and coding issues that can constitute false claims and high-risk areas under this Act:

- Billing for services not rendered;
- Billing for services that are not medically necessary;
- Billing for services that are not documented;
- Upcoding; and,
- Participation in kickbacks

Penalties (in addition to amount of damages) can range from \$5,000 to \$10,000 per false claim, plus three times the amount of money the government is defrauded. In addition to monetary penalties, the provider may be excluded from participation in the Medicaid and/or Medicare programs

16.1 Provider Oversight and Training

Passport Advantage's agreement with CMS requires Passport Advantage to oversee its "first tier entities." Providers in Passport Advantage's network are considered first tier entities. All first tier, downstream and related (FDR) entities must comply with all applicable Medicare laws, regulations, and CMS instructions (42 C.F.R. 422.504(I)(4)(v)). Passport Advantage is required to disclose to CMS all information necessary to administer and evaluate the program and to establish and facilitate a process for current and prospective beneficiaries to exercise choice in obtaining Medicare services. Providers in Passport Advantage's network must cooperate and provide the information necessary to fulfill these requirements.

Additionally, Passport Advantage is required to ensure that all its FDRs receive general compliance and fraud, waste, and abuse (FWA) training. Passport Advantage must also ensure that its providers receive training on our Model of Care and products. You and all of your employees, including temporary workers and volunteers, must complete the training annually. Any new employees must complete the training within 90 days of initial hire and annually thereafter. Passport Advantage will contact you each year to confirm you and all of your employees have received the required training. It is important that you respond in a timely manner. In the event CMS revises or provide additional training requirements, Passport Advantage will notify you.

You can access CMS's FWA and General Compliance training module on the Medicare Learning Network website at:

- <https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/index.html> .
- Under "download" select Medicare Parts C and D Fraud, Waste, and Abuse Training and Medicare Parts C and D General Compliance Training [ZIP, 2MB]