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Owner Ehab Sahawneh:  
VP Supply Chain  
Business  
Intelligence

Policy Area REHG-Resource,  
Engineering and  
Hospitality Group

Applicability Providence  
Systemwide +  
PGC

## PSJH-REH-1005 Excluded Individuals and Entities Checks - Vendors

<b>Executive Sponsor:</b>	David Walker, SVP - Chief Resource Officer
<b>Policy Owner:</b>	Ehab Sahawneh, VP Supply Chain Business Intelligence
<b>Contact Person:</b>	Jeffrey Toevs, Manager REH Info Systems
<p><b>Scope:</b></p> <p>This policy applies to the not-for-profit, non-profit entities of Providence and its Affiliates<sup>i</sup> (collectively known as "Providence") and their workforce members (caregivers, volunteers, trainees, interns, apprentices, students), independent contractors, vendors and all other individuals working at the ministry, whether they are paid by or under the direct control of the facility; employees of affiliated organizations (collectively, "workforce members"). Where an organization is not wholly or majority owned, exceptions may apply.</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is this policy applicable to Providence Global Center (PGC) caregivers?</p> <p>This is a management level policy reviewed and recommended by the Policy Advisory Committee (PAC) to consider for approval by senior leadership which includes vetting by Executive Council with final approval by the President, Chief Executive Officer or appropriate delegate.</p>	
<p><b>Purpose:</b></p> <p>To establish expectations that Providence vendors and potential vendors will be compared with the Office of Inspector General (OIG), General Service Administration - System for Award Management (GSA/SAM) and U.S. Treasury Department Office of Foreign Assets Control (OFAC) Specially Designated Nationals and Blocked Persons List (SDN) and all State Medicaid databases of excluded individuals and entities to assure that Providence does not use/pay for services or products for anyone on the government's excluded list.</p>	

**Definitions:**

1. OIG – The Department of Health and Human Services' "Office of Inspector General"
2. GSA – US "General Services Administration"
3. LEIE – The Department of Health and Human Services' OIG "List of Excluded Individuals/Entities" database which provides information to the healthcare industry, patients and the public regarding individuals and entities currently excluded from participation in Medicare, Medicaid (Medi-Cal) and federal healthcare programs.
4. OFAC - Office of Foreign Assets Control
5. SAM – The GSA "System for Award Management" which provides information on entities debarred, suspended, excluded or disqualified from receiving federal contracts, subcontracts and certain federal assistance and benefits.
6. SDN - Specially Designated Nationals lists
7. State Excluded Provider Lists: State Medicaid exclusion lists
8. "Vendors" include, but are not limited to: product and service providers, consultants, business associates, contractors and other businesses, organizations or individuals with whom we do business or those seeking to do business with Providence.

**Policy:**

Providence prohibits contracting with or using the services or supplies of individuals or entities listed by a Federal agency as debarred, excluded or otherwise ineligible for participation in federally or state funded health care programs. All contracts with suppliers or vendors will include language affirming that the supplier or vendor is not excluded or expecting to be excluded, from participation in Medicare and/or State health care programs. Contracts will further require that suppliers and vendors have an affirmative obligation to notify Providence if they receive notice that the OIG-LEIE, GSA-SAM or OFAC-SDN and/or all State Medicaid is excluding, intends to exclude, or proposes to exclude them from participation in Medicare and/or State health care programs. Non-contracted suppliers or vendors are to be checked against the OIG-LEIE, GSA-SAM, OFAC-SDN and/or all State Medicaid databases as outlined in this policy.

**Requirements:**

All new vendors are to be screened by the Master Data Team against the OIG-LEIE, GSA-SAM, OFAC-SDN and all available State Medicaid lists, using the most up to date published lists publicly available at the time, prior to placing an order and adding the vendor to the vendor master file (Refer to PSJH-REH-1006 policy) unless all of the following criteria are met:

- a. One-time purchase;
- b. Costs for the vendor are not expected to exceed \$2,000; and
- c. Vendor is not providing services or supplies for direct health care services.

All existing vendors will be screened against the OIG-LEIE, GSA-SAM, OFAC-SDN and all available State Medicaid lists on a monthly basis. If a vendor is found to be on any of the OIG-LEIE, GSA-SAM, OFAC-SDN and all available State Medicaid lists, within 30 days of updated list being published, Risk and Integrity Services (RIS)-Compliance will expeditiously initiate an investigation to include the Resource, Engineering and Hospitality Group (REHG), Accounts Payable (AP) and

the Department of Legal Affairs (DLA) with recommendation to refrain from using the excluded individual or entity until the matter can be resolved. REHG and AP are responsible to investigate the status of the vendor in question and resolve the matter as soon as practicable. DLA and RIS-Compliance staff will be kept informed of information investigated by REHG and AP for the confirmed match.

Providence will notify the appropriate government agency and impacted health plan partners within 5 business days of discovery of a SAM or OIG sanction or exclusion. Providence will maintain evidence of notifying health plan partners within 5 days of discovering a SAM or OIG sanction or exclusion. Providence will also notify impacted health plan partners if SAM or OIG sanctions or exclusions are lifted for individuals that are rehired.

**Documentation** – System RIS-Compliance shall maintain complete records of vendor screenings performed under this policy. On a monthly basis the Master Data Team will submit the data to Streamline Verify for use in exclusion screening. The Master Data Team will also be required to collaborate with System RIS-Compliance with information necessary to either rule-out or confirm any outstanding potential matches. The records related to the status and results of the monthly excluded vendor screenings will be maintained by the System RIS-Compliance in accordance with the Providence Records Retention and Disposal policy and shall be made available for inspection as requested to appropriate parties.

**References:**

**Providence Code of Conduct**

**Providence Compliance Program Description**

**PSJH-RIS-733 Non-Retaliation**

**PSJH-RIS-715 Records Retention and Destruction**

**Standards of Conduct (see the HRPortal)**

**Counseling and Corrective Actions Policy (see the HRPortal)**

**Applicability:**

<sup>i</sup>For purposes of this policy, “Affiliates” is defined as any not-for-profit or non-profit entity that is wholly owned or controlled by Providence St. Joseph Health (PSJH), Providence Health & Services, St. Joseph Health System, Western HealthConnect, Kadlec, Covenant Health Network, Grace Health System, Providence Global Center\*, NorCal HealthConnect, or is a not-for-profit or non-profit entity majority owned or controlled by PSJH or its Affiliates and bears the Providence, Swedish Health Services, St. Joseph Health, Covenant Health, Grace Health System, Kadlec, or Pacific Medical Centers names (includes Medical Groups, Home and Community Care, etc.).

\*Policies and/or processes may vary for our international affiliates due to regulatory differences.

## Approval Signatures

Step Description

Approver

Date

PSJH President/CEO	Joel Kim: Assoc Compliance Spec PSJH	02/2020
PSJH President/CEO	Cynthia Johnston: Compliance Spec PSJH	02/2020
PSJH Executive Council	Cynthia Johnston: Compliance Spec PSJH	02/2020
PSJH Executive Council	Joel Kim: Assoc Compliance Spec PSJH	01/2020
PSJH Policy Advisory Committee	Joel Kim: Assoc Compliance Spec PSJH	01/2020
PSJH Policy Advisory Committee	Cynthia Johnston: Compliance Spec PSJH	01/2020

## Standards

No standards are associated with this document

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