

## Integrity Standards – Addendum

### The False Claims Act - A Federal Law That Protects Whistleblowers

#### The law.

The federal False Claims Act (31 USC 3729-33) makes it a crime for any person or organization to knowingly make a false record or file a false claim with the government for payment. “Knowing” means that the person or organization:

- knows the record or claim is false, or
- seeks payment while ignoring whether or not the record or claim is false, or
- seeks payment recklessly without caring whether or not the record or claim is false.

Under certain circumstances, an inaccurate Medicare, Medicaid, VA, Federal Employee Health Plan or Workers’ Compensation claim could become a False Claim. Examples of possible False Claims include someone knowingly billing Medicare for services that:

- were not provided, OR
- were not ordered by a physician, OR
- were provided at sub-standard quality where the government would not pay.

A person who knows a False Claim was filed for payment can file a lawsuit in Federal Court on behalf of the government and, in some cases, receive a reward for bringing original information about a violation to the government’s attention. Some states have a False Claims Act that allows a similar lawsuit in state court if a False Claim is filed with the state for payment, such as under Medicaid or Workers’ Compensation. Penalties are severe for violating the federal False Claims Act. The penalty can be up to three times the value of the False Claim, plus anywhere from \$5,500 to \$11,500 in fines, per claim.

**Whistleblower protections.** The federal False Claims Act protects anyone who files a False Claim lawsuit from being fired, demoted, threatened or harassed by his/her employer for filing the suit. An employee who was harmed by his/her employer for filing a False Claims lawsuit must file a lawsuit against his/her employer in Federal Court. If the employer retaliated, the court can order the employer to re-hire the employee, and to pay the employee twice the amount of back pay that is owed, plus interest and attorney’s fees.

**Our Policy.** Centura’s Compliance Program includes monitoring and auditing for compliance that helps prevent or detect errors in coding or billing.

- Centura expects that our associates who are involved with creating and filing claims for payment for services that we provide will only use true, complete and accurate information to make the claim. See Centura’s Integrity Standards, page 13.
- Centura expects that anyone with a concern about a possible False Claim at a Centura facility will use the Integrity Reporting Process *immediately* so that Centura and its health care facility(ies) can investigate and correct any errors. See Centura’s Integrity Standards, pages 26-28.
- Centura’s policy on non-retaliation protects our associates from adverse action when they do the right thing and report any genuine concern via the Integrity Reporting Process. See Centura’s Integrity Standards, page 9 and Integrity Reporting Process, pages 26-27.
- Centura will investigate any allegation of retaliation against an associate for speaking up.

**Our Commitment.** Our associates work hard to ensure that every claim for payment for the care we provide is correct and accurate, so that we do not violate any regulation, law or Centura policy or break the trust we maintain with our patients and communities.