

UUHP COMPLIANCE PROGRAM

University of Utah Health Plans (UUHP) values compliance and ethics and continually strives to do the right thing in the right way to ensure the best experience for our members, our contracted partners, and the community we serve. The U of U Health Plans compliance program is designed to prevent, detect, and correct healthcare non-compliance and fraud, waste, and abuse.

CODE OF CONDUCT:

The [University of Utah Health Plans Code of Conduct](#) outlines expectations for employees and contracted partners to demonstrate high standards of professional conduct and personal integrity.

COMPLIANCE:

U of U Health Plans is committed to complying with all applicable laws and regulations. Please contact us if you have a concern that a federal or state law is not being followed:

Compliance & Ethics Hotline: **888-206-6025** or online at **secure.ethicspoint.com**. Available 24 hours a day, 7 days a week. Reports may be made anonymously.

Email: **healthplanscompliance@utah.edu**

Mail: University of Utah Health Plans

Attention: Compliance Department
6056 Fashion Square Drive, Suite 3104
Murray, Utah 84107

UNIVERSITY OF UTAH HEALTH PLANS
6056 FASHION SQUARE DRIVE, SUITE 3104
MURRAY, UTAH 84107



FRAUD, WASTE, AND ABUSE (FWA):

U of U Health Plans recognizes the personal and financial impact that healthcare fraud, waste, and abuse (FWA) can have on the health plan, its providers, and members. We are committed to help combat healthcare FWA and have established a dedicated and experienced Special Investigations Unit (SIU) to focus on this effort. Suspected FWA can be reported through the following methods:

Compliance & Ethics Hotline: **888-206-6025** or online a **secure.ethicspoint.com**. Available 24 hours a day, 7 days a week. Reports may be made anonymously.

Email: **HealthPlansReportFraud@utah.edu**

Fax: **801-585-2654**

Mail: University of Utah Health Plans

Attention: Special Investigations Unit
6056 Fashion Square Drive, Suite 3104
Murray, Utah 84107

CONTRACTED PARTNERS: SUBCONTRACTORS, DELEGATED AND DOWNSTREAM ENTITIES:

U of U Health Plans partners with external individuals and entities to help meet the needs of our members and deliver benefit. CMS refers to these individuals and entities as Subcontractors and Delegated and Downstream Entities (DDEs).

DEFINITIONS:

Abuse	Practices that are inconsistent with sound fiscal, business, or medical practices, and results in unnecessary cost to the Medicare/Medicaid program, or in reimbursement services that are not medically necessary or that fail to meet professionally recognized standards for health care. It also includes recipient practices that result in unnecessary costs to the Medicaid/Medicare program.
Delegated Entity	Any party including an agent or broker, that enters into an agreement with a QHP issuer to provide administrative services or healthcare services to qualified individuals, qualified employers, and their dependents.

Downstream Entity	<p>Any part, including an agent, or broker that enters into an agreement with a delegated entity or with another downstream entity for the purposes of providing administrative or healthcare services related to the agreement between the delegated entity and the QHP issuer. The term “downstream entity” is intended to reach the entity that directly provides administrative services or healthcare services to qualified individuals, qualified employers, or qualified employees and their dependents.</p> <p>Examples of functions performed by DDEs (include but are not limited to): plan design, marketing, enrollment, customer service, claims administrative, network development, benefit management, and quality improvement).</p>
Fraud	<p>An intentional deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefits to himself or some other person including any act that constitutes fraud under applicable Federal or State law.</p>
Subcontractor	<p>An individual or entity that has a contract with Contractor that relates directly or indirectly to the performance of the Contractors obligations under its Medicaid contract. A Network Provider is not a Subcontractor by virtue of the Network Provider’s agreement with the Contractor or its Health Plan.</p>

University of Utah Health Plans maintains a process to monitor delegated functions and responsibilities so that we are able to validate compliance with Federal and state laws, as well as contractual requirements. DDEs and Subcontractors who partner with us should follow the same compliance guidelines as U of U Health Insurance Plans (UUHIP) while working on UUHIP business.

About Subcontractors and downstream and delegated entities

- Vendors that support Medicaid and Marketplace/Exchange lines of business
- The function of the vendor is a requirement of UUHIPs Medicaid and Marketplace/Exchange contract with CMS or applicable state or federal laws or regulations.
- Provides administrative or healthcare services to qualified individuals, qualified employers, or qualified employees and their dependents.