Applicability: UW Medicine ¹ and UW Medicine Affiliated Covered Entity ²	
Policy Title:	Compliance Education and Training
Policy Number:	COMP.002
Superseded Policies:	PP-04 Privacy, Confidentiality, and Information Security Training HMC, 135.5 Compliance Education and Training UWMC, 15-1 Employee Education and Training UWNC, Compl004 Compliance Education and Training
Date Established:	October 11, 2017
Date Effective:	June 11, 2025
Next Review Date:	June 11, 2028

PURPOSE

This policy establishes the healthcare compliance training requirements for UW Medicine workforce members including employees, trainees, temporary workers, volunteers, governing body members, individuals and first-tier, downstream and related entities.

For purposes of this policy, healthcare compliance includes content areas that are within the scope of the <u>UW Medicine Compliance Program</u>. This policy does not address other compliance training requirements outside the scope of the UW Medicine Compliance Program.

DEFINITIONS

See UW Medicine Compliance Glossary.

UW School of Medicine

² The University of Washington (UW) is a hybrid covered entity under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), comprised of healthcare and non-healthcare components. For the purposes of HIPAA, the UW has designated healthcare components, and further designates a group of healthcare components to be one affiliated covered entity known as UW Medicine Affiliated Covered Entity (UW Medicine ACE). Healthcare components of the UW Medicine ACE are represented in 101.G1 University of Washington (UW) HIPAA Designation – UW Medicine – Affiliated Covered Entity.

¹ UW Medicine is an integrated clinical, research and learning system with a single mission to improve the health of the public. This policy applies to the UW Medicine workforce and also those employees in shared services and the UW Medicine central leadership who support the clinical operation of UW Medicine. The clinically integrated parts of UW Medicine consist of the following:

Airlift Northwest

Fred Hutchinson Cancer Center (* Please note, the UW Medicine Compliance Program and this policy apply to UW faculty. Fred Hutch employees who are not also UW faculty are required to comply with Fred Hutch compliance policies only.)

Harborview Medical Center

UW Medical Center

UW Medicine Primary Care

UW Physicians

POLICY

UW Medicine develops and implements healthcare compliance education and training, as required by law, regulatory changes, industry needs and trends observed through risk assessments, auditing and investigations.

UW Medicine Compliance develops annual training plans, documents and monitors training completion, and reports regularly to senior leaders. Departments throughout the enterprise provide additional healthcare compliance training to operationalize healthcare compliance policies.

I. Healthcare Compliance Training Requirements³

Compliance education requirements and timelines:

- Initial orientation upon hire or time of engagement (within 30 days of hire or engagement.)
- General Compliance and Protecting Patient Information (HIPAA) onboarding education (within 60 days of hire or engagement.)
- Specialized-onboarding and ongoing education (within 60 days of hire or engagement.)
- Mandatory Compliance Refresher training (annual education that reinforces and expands upon content received at onboarding, as well as new or revised policy requirements.)
- Department-driven training (ongoing education and awareness about procedures and practices required to operationalize healthcare compliance policies.)
- Ad hoc training (as needed). See II.

Content includes, but is not limited to, general education and awareness about the following areas:

- Clinical billing and coding.
- Clinical research billing.
- General compliance training including fraud, waste and abuse awareness and prevention.
- Emergency Medical Treatment & Labor Act (EMTALA).
- Anti-Kickback Statute (AKS) and Stark law.
- Conflicts of interest.
- Ethics.
- Patient Privacy: HIPAA and Washington state patient information privacy and security.

II. Triggers for Additional Compliance Education, Training and Outreach.

A. **Job Changes.** A role, duty or position change may trigger additional role or departmentspecific healthcare compliance training; training completion may be mandated by a specific date or within a certain number of days after the change.

³ Business associates and other individuals and businesses who perform covered functions for or on behalf of UW Medicine and the UW Medicine ACE shall be responsible for healthcare compliance training sufficient to comply with healthcare compliance laws, regulations and UW Medicine policies. Obligations and responsibilities are outlined in their respective contracts, business associate agreements and/or other applicable agreements and UW Medicine policies including <u>COMP.106 Use & Disclosure of Protected Health Information by Business Associates</u>.

- B. **Regulatory and Policy Changes/Trends.** Ongoing or ad hoc education and outreach is provided in response to or in preparation for developments in the legal and regulatory environment, enterprise risk levels, and institutional policies/procedures, as well as general trends in healthcare compliance.
- C. Audit Results and Investigations. Additional education and training may be required or recommended in response to compliance audit results and/or trends, and the outcome of compliance investigations.

III. Documentation Requirements

- A. **Compliance training documentation** includes all records of attendance and completion for new hire training, role-based education and department-based implementation training.
 - 1. Records may be maintained in learning management systems (LMS) or where maintained in hard copy, by department of hire or engagement.
- B. **Privacy, Confidentiality and Information Security Agreement (PCISA).** Signed copies of the PCISA.
 - 1. Signed copies, including those with digital signatures, are retained by department of hire or engagement or Human Resources.
- C. Compliance Code of Conduct attestations.
 - 1. Attestations are included in both onboarding and annual compliance training modules. Signed hard copies (when used) are retained by the department of hire or engagement.
- D. **Records related to compliance training programs** including but not limited to curricula, worksheets, presentations, planning materials, attendance and/or transcripts, must be retained for 10 years after superseded, then transferred to Washington State Archives for appraisal and selective retention.

ROLES AND RESPONSIBILITIES

UW Medicine Compliance:

- Develop and distribute healthcare compliance education, training and outreach modules and materials for certain onboarding and role-based healthcare compliance training;
- Update and maintain healthcare compliance education, training and outreach materials in accordance with legal and regulatory updates, industry trends and observations of auditing, investigations and risk assessment.

Managers and Supervisors:

- Responsible to ensure assignment and completion of direct reports' onboarding and role-based compliance training;
- Responsible to identify gaps in compliance training for direct reports undergoing role, duty or position changes;
- Develop and maintain department and unit-specific procedures in support of introductory and rolebased healthcare compliance training;
- Ensure workforce members sign the UW Medicine PCISA upon hire or engagement and at each evaluation or provider recredentialing, and maintain these as required;
- Convey healthcare compliance training goals and expectations; and

• Facilitate understanding of compliance issues and direct questions, as needed, to compliance departments.

UW Medicine leadership:

• Champion education, training and outreach activities, and convey implementation expectations to operational areas.

Workforce members:

- Complete all applicable onboarding, role-specific, unit-specific and annual refresher compliance trainings. Non-completion of compliance training is considered in annual performance evaluations.
- Acknowledge and attest or sign for the receipt, review and understanding of the Compliance Code of Conduct at initial hire or engagement and annually thereafter.
- Acknowledge and sign for the receipt, review and understanding of the UW Medicine PCISA and its stated privacy and information security responsibilities at initial hire or engagement and at each evaluation or provider recredentialing.
- Discuss training obligations with supervisor or manager.

REGULATORY/LEGISLATION/REFERENCES

- United States Sentencing Commission, Guidelines Manual, §8B2.1 (Nov. 2016).
- Compliance Program Guidance for Hospitals, 63 Fed. Reg. 8987 (February 23, 1998).
- Supplemental Compliance Program Guidance for Hospitals, 70 Fed. Reg. 4858 (January 31, 2005).
- HIPAA, Pub. L. No. 104-191, 45 C.F.R. §§ 160 and 164 (1996).
- General Provisions, 42 C.F.R. §422.503.
- Contract Provisions, 42 C.F.R. §423.504.
- Deficit Reduction Act of 2005, Pub. L. No. 109-171, §6032 (2006) codified at 42 U.S.C. §1396a(a)(68).
- Centers for Medicare and Medicaid Services (CMS), Medicare Managed Care Manual, CMS Pub. 100-16, Chap. 21, Sec. 50.3 (Rev. 110, Jan. 11, 2013); available at https://www.cms.gov/regulations-andguidance/guidance/manuals/downloads/mc86c21.pdf.
- CMS, Medicare Prescription Benefit Manual, CMS Pub. 100-18, Chap. 9, Sec. 50.3 (Rev. 16, Jan. 11, 2013); available at https://www.cms.gov/regulations-and-guidance/guidance/manuals/downloads/mc86c21.pdf.

PROCEDURE ADDENDUM(s) REFERENCES/LINKS

- <u>UW Medicine Compliance Glossary</u>.
- 002.F1 UW Medicine Privacy, Confidentiality and Information Security Agreement (PCISA).
- <u>002.F2 UW Medicine Protecting Patient Information Self Study</u>.
- COMP.201 Fraud, Waste and Abuse Prevention.
- UW Medicine <u>Required Compliance Training</u>.
- UW Medicine Records Retention Schedule.

APPROVALS

/s/ Beth DeLair

Beth DeLair Chief Compliance Officer, UW Medicine Associate Vice President for Medical Affairs, UW 6/18/2025

Date