

Applicability:	UW Medicine ¹
Policy Title:	Exclusion Screening
Policy Number:	COMP.007
Superseded Policies:	HMC, 135.4 Staff and Vendor Screening NWH, Independent Contractor & Vendor Exclusion Screening UWMC, 15-6 Employee Screening UWMC, 15-14 Vendor Screening UWP, C-015 Employee and Vendor Screening
Date Established:	October 11, 2017
Date Effective:	June 2, 2025
Next Review Date:	June 2, 2028

PURPOSE

This policy establishes the standards by which UW Medicine screens all new employees, temporary employees, volunteers, consultants, governing body members, First Tier, Downstream or Related Entities (FDRs) and vendors for restrictions on their ability to participate in federal and state healthcare programs and contracts.

This policy applies to all UW Medicine departments and operational units that perform exclusion screening.

POLICY

UW Medicine does not hire, grant privileges to, contract with or bill for services rendered by individuals, entities and vendors who:

- Are excluded, debarred, suspended or otherwise declared ineligible to participate in federal healthcare programs or contracts; *or*

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
- UW School of Medicine

- Have been convicted of a criminal offense as defined by 42 U.S.C. § 1320a-7(a)² but have not been excluded, debarred, suspended or otherwise declared ineligible to participate in federal healthcare programs.

I. Initial Hiring, Credentialing, and Contracting

- A. Prior to hiring or privileging/credentialing an individual or contracting with an entity or vendor, UW Medicine screens the individual or organization against the applicable federal exclusion list(s), including:
- Department of Health and Human Services Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE); *and*
 - U.S. General Service Administration (GSA) System for Award Management (SAM).

II. Ongoing Screening

- A. Subsequent to initial hiring, privileging/credentialing or contracting, exclusion screening is completed against the OIG and GSA exclusion lists: at the following intervals:
- Individuals are screened monthly.
 - Vendors are screened on a regular basis, and no less than semi-annually as established by the department or operational unit that performs the screening.
 - Vendors determined to be a First Tier, Downstream or Related Entity (FDR) are screened monthly.

III. Notification Responsibilities

- A. UW Medicine includes language in its contracts that require vendors to comply with the law to disclose information regarding exclusions from federal healthcare programs.
- B. It is the responsibility of each individual, entity or vendor to provide immediate notice to UW Medicine upon being (A) excluded, debarred, suspended or otherwise declared ineligible to participate in federal or state healthcare programs or contracts; (B) convicted of a criminal offense as defined by 42 U.S.C. § 1320a-7(a).
- C. UW Medicine will notify health plan partners when sanctions or exclusions are discovered, within timelines indicated in the delegated service agreement.

IV. Exclusions

- A. If an individual, entity or vendor has been excluded, debarred, suspended or otherwise declared ineligible to participate in federal healthcare programs or contracts or found to be convicted of a criminal offense as defined by 42 U.S.C. § 1320a-7(a), the appropriate UW Medicine departments are notified for further review and action, as needed. Actions may include the following:
- Immediate removal of the individual, entity or vendor from direct or indirect responsibility for, or involvement in, any federal or state-funded healthcare program until (a) the issue is

² 42 U.S.C. § 1320a-7(a) - Exclusion of certain individuals and entities from participation in Medicare and State healthcare programs

- resolved and (b) it is determined the individual, entity or vendor is not excluded, debarred, suspended or otherwise ineligible to participate in federal or state healthcare programs;
- Repayment of claims for services in which the excluded individual, entity or vendor, participated³;
 - Suspension of privileges or termination of the individual consistent with the terms and conditions of employment and/or the privileging relationship; *and/or*
 - Termination of the contract with the individual, entity or vendor.

V. Document Retention

Appropriate documentation is maintained for the screening process and findings by the UW Medicine departments and operational units that perform exclusion screening for a period of 10 years per the UW Medicine Records Retention Schedule.

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).
- Exclusion of certain individuals and entities from participation in Medicare and State health care programs, 42 U.S.C. §1320a–7.
- Office of Inspector General. (May 8, 2013). *Special Advisory Bulletin on the Effect of Exclusion from Participation in Federal Health Care Programs*. Department of Health & Human Services.
- Centers for Medicare and Medicaid Services (CMS), Medicare Managed Care Manual, CMS Pub. 100-16, Chap. 21, Sec. 50.6.8 (Rev. 110, Jan. 11, 2013); available at <https://www.cms.gov/regulations-and-guidance/guidance/manuals/downloads/mc86c21.pdf>.
- CMS, Medicare Prescription Benefit Manual, CMS Pub. 100-18, Chap. 9, Sec. 50.6.8 (Rev. 16, Jan. 11, 2013); available at <https://www.cms.gov/regulations-and-guidance/guidance/manuals/downloads/mc86c21.pdf>.

PROCEDURE ADDENDUM(s) REFERENCES/LINKS

- [UW Medicine Compliance Glossary](#).
- UWMC 75-18/HMC, Vendor Screening for Suppliers Including Consultants.
- ALNW, Pre-hire Background Checks.
- UWNC, Compl014 Vendor Screening.
- [UW Medicine Records Retention Schedule](#)

APPROVALS

/s/ Beth DeLair
 Beth DeLair
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 Associate Vice President for Medical Affairs, UW

6/9/2025
 Date

³ For the purpose of this policy, “participated” means ordered, referred, provided or supported the service.