

## UNIVERSITY POLICY

<b>SUBJECT:</b>	CORPORATE COMPLIANCE AND PRIVACY	<b>TITLE:</b>	EXCLUDED INDIVIDUALS AND ENTITIES		
<b>CATEGORY: Check One</b>	<b>Board of Trustees</b> <input type="checkbox"/>	<b>Presidential</b> <input checked="" type="checkbox"/>	<b>Functional</b> <input type="checkbox"/>	<b>School/Unit</b> <input type="checkbox"/>	
<b>Responsible Executive:</b>	Compliance Officer		<b>Responsible Office:</b>	Compliance	
<b>CODING:</b>	00-01-15-65:00	<b>ADOPTED:</b>	11/19/99	<b>AMENDED:</b>	07/01/13
				<b>LAST REVIEWED:</b> 07/01/13	

### I. PURPOSE

To establish a policy governing the Rowan University School of Medicine (SOM) employment of and entering into contracts with, individuals or entities who are currently excluded by the Office of Inspector General (OIG) , the General Service Administration (GSA), or the New Jersey Office of the Medicaid Inspector General from participation in Federal health care programs.

### II. ACCOUNTABILITY

Under the direction of the President, the Deans, Executive Vice President for Academic and Clinical Affairs, Senior Vice President for Administration, Senior Vice President and General Counsel, Senior Vice President/Chief Ethics & Compliance Officer, Senior Vice President for Finance, President/CEOs of the Healthcare Units, Vice President for Human Resources and the Vice President for Supply Chain Management shall ensure compliance with this policy. The Department Chairs/Directors in each School and all other Rowan University SOM Units shall implement this policy.

### III. APPLICABILITY

This policy applies to **all** Rowan University SOM employees and **all** individuals/entities entering into a contract with Rowan University SOM.

### IV. POLICY

In accordance with Federal law, Rowan University SOM will not employ or enter into contracts with any individual or entity which is currently excluded by the Office of Inspector General (OIG) and/or the General Service Administration (GSA), and/or from the New Jersey Medicaid Inspector General, (NJOMIG) disqualified/debarred provider list from participation in Federal health care programs.

### V. PROCEDURE

1. Prior to hiring an individual, entering into contracts with any individual or entity, or extending clinical privileges at Rowan University SOM, the Department of Human Resources must verify

that the individual or entity does not appear on the OIG or GSA listing of excluded parties, and that the individual or entity does not appear on the NJOMIG disqualified/debarred provider list.

2. Prior to entering into any contracts or purchasing agreements with any individual or entity, Purchasing Services must verify that the individual or entity certifies through an ownership disclosure statement that same does not appear on the OIG or GSA or NJOMIG listing of excluded or disqualified/debarred parties.

These listings can be accessed on the Internet in a searchable format:

- a. (For OIG)  
<http://exclusions.oig.hhs.gov/>
  - b. (For GSA)  
<http://epls.arnet.gov/>
  - c. (For NJOMIG)  
<http://www.state.nj.us/treasury/debarred/>
  - d. (For PAOMIG) <http://www.dpw.state.pa.us/publications/medichecksearch/index.htm>
  - e. (Nor NYOMIG)  
<http://www.omig.ny.gov/data/content/view/72/52/>
3. If the above searches indicate that the individual or entity is on the OIG, GSA or NJOMIG list of excluded or disqualified/debarred individuals and entities, this individual or entity cannot be employed or have any contractual relationship with Rowan University SOM, including the granting of clinical privileges.
  4. To protect Rowan University SOM against individuals or entities excluded or disqualified/debarred subsequent to their employment, during the duration of the contract, during the duration of the employment, or after the granting of clinical privileges such searches are performed by the Office of Ethics, Compliance and Corporate Integrity periodically, at least semi-annually.
  5. If it is determined that a current employee, entity with a current contract, or non-employee physician with current clinical privileges is an excluded or disqualified/debarred individual or entity, the Office of Ethics, Compliance and Corporate Integrity must be notified immediately. The Office of Ethics, Compliance and Corporate Integrity will perform an investigation to ascertain if in fact the current employee, entity with a current contract, or non-employee physician with current clinical privileges is on an exclusion or disqualified/debarred list. If it is determined that the individual and/or entity is indeed on an exclusion or disqualified/debarred list, the employment and/or contractual relationship shall be immediately terminated.
  6. If a person in a supervisory capacity learns that a member of his/her staff and/or an entity being utilized is on the excluded list, he/she must notify the Office of Ethics, Compliance and Corporate Integrity immediately. Failure to notify the Office of Ethics, Compliance and Corporate Integrity may result in sanctions being imposed, up to and including termination.
  7. If an individual learns that he/she is excluded or debarred, or if an entity he/she is doing business with is excluded or debarred, he/she must notify his or her supervisor and the Office of Ethics, Compliance and Corporate Integrity immediately. Failure to do so will result in sanctions being imposed, up to and including termination.

By Direction of the President:

## Signature on file

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Compliance Officer