

POLICY # COMP-DMG-204	Revision: 3.0	Page 1 of 4
-----------------------	---------------	-------------

TITLE: Fraud, Waste, and Abuse Detection and Prevention Policy

Department: Compliance (Team Quest) Effective date: 10/2017

Teammates must promptly report all potential violations of the Code of Conduct, DMG policies and procedures and/or applicable laws or regulations. Reports should be made to the compliance department (Team Quest), or the Compliance Hotline, 1-855-236-1448 or www.healthcarepartners.ethicspoint.com. In accordance with DMG's Non-Retaliation for Reported Compliance Violations Policy, DaVita Medical Group will not tolerate any form of retaliation against anyone who files a compliance report in good faith. Questions regarding any compliance policy may be directed to Team Quest.

1. PURPOSE

This Policy is intended to comply with the requirements of the Federal Deficit Reduction Act of 2005 (the "<u>DRA</u>"), which requires, in relevant part, that DaVita Medical Group provides to all teammates of DaVita Medical Group and or DaVita Medical Group subsidiary organizations included in the DaVita Medical Group family of brands (collectively "DaVita Medical Group"), and to all contractors and agents of DaVita Medical Group, detailed information regarding:

- (a) The role of the Federal False Claims Act (the "Federal FCA"), the Federal Program Fraud Civil Remedies Act ("PFCRA"), and analogous state laws (collectively, the "State FCAs") in preventing and detecting fraud, waste, and abuse in Federal health care programs (e.g., Medicare, Medicaid, etc.);
- (b) Administrative remedies for false claims and statements established under the Federal FCA and the State FCAs, respectively;
- (c) Whistleblower protections under the Federal FCA and the State FCAs, respectively; and
- (d) DaVita Medical Group's policies and procedures for detecting and preventing fraud, waste, and abuse.

2. SCOPE

This policy applies to DaVita Medical Group (DMG) and, subject to approval by the chief compliance officer or his/her designee; it may be customized by a business unit-specific policy(ies).

3. DEFINITIONS

Term	Definition
Federal False Claims Act	The Federal FCA (see 31 U.S.C. §§ 3729 – 3733) was enacted in 1863 by a Congress concerned that contracted suppliers of goods to the Union Army during the Civil War were defrauding the Union Army. Over the life of the
	statute, the Federal FCA has been amended several times and interpreted on

Term	Definition
	hundreds of occasions by federal courts (which sometimes issue conflicting interpretations of the statute). The purpose of this summary is not to explain how the Federal FCA evolved over the decades since its enactment or to discuss judicial interpretations of its provisions. Rather, in this summary, we endeavor to explain the most significant elements of the Federal FCA to give an introductory understanding of the Federal FCA and how it works.
Federal Program Fraud Civil Remedies Act	PFCRA is a separate, but related, statutory scheme that provides for administrative remedies against any person who makes, or causes to be made, a false claim or written statement to certain federal agencies, including the Department of Health and Human Services. In contrast to the Federal FCA, under PFCRA, the determination of whether a claim is false and the imposition of fines and penalties are made by the federal agency as opposed to the federal court system (with the exception of the judicial review process). PFCRA addresses lower dollar fraud, and generally applies to claims of \$150,000 or less. See 31 U.S.C. §§ 3801, et seq.
Good Faith	Truthful, and without malice or ill intent. A teammate who files a good faith complaint believes that a violation has occurred based on a reasonable inquiry or facts.

4. POLICY

- 4.1. DaVita Medical Group shall provide to, or provide electronic access to, all teammates of DaVita Medical Group, and to all contractors and agents of DaVita Medical Group, this Policy, the attached addendum entitled "Summary of Federal False Claims Act and Analogous State Laws" (available on the Team Quest website on MyHCP) and all other DaVita Medical Group policies and procedures relating to the detection and prevention of fraud, waste, and abuse that are reasonably applicable to the job function of the teammate, contractor, or agent, as applicable.
 - **4.1.1.** In the event that only electronic access is provided, DaVita Medical Group shall ensure that each teammate, contractor, and agent is made aware of the existence of these policies and procedures and how to access such policies and procedures.
- **4.2.** DaVita Medical Group's business, clinical, billing, and claims submission processes and activities shall be performed in a manner consistent with the Federal FCA, any applicable State FCAs, and in accordance with DaVita Medical Group's documentation and billing policies and procedures.
- **4.3.** DaVita Medical Group shall not retaliate against any teammate of DaVita Medical Group or any DaVita Medical Group's contractor or agent or DaVita Medical Group's subsidiary organizations for taking any legal action under the Federal FCA or the State FCAs or for reporting any potential compliance concern in Good Faith.
- 4.4. DaVita Medical Group has developed many policies and procedures that are designed to detect and prevent fraud, waste, and abuse. All teammates, contractors, and agents of DaVita Medical Group are expected to review these policies and procedures, which are available through the local market intranet and on Team Quest's website. Some examples of DaVita Medical Group's policies and procedures and methods designed to detect and prevent fraud, waste, and abuse include, but are not limited to:
 - **4.4.1.** The Code of Conduct;
 - **4.4.2.** This Policy:
 - **4.4.3.** The Addendum to this Policy entitled "Summary of Federal False Claims Act and Analogous State Laws;"

- **4.4.4.** The Compliance Hotline Policy;
- **4.4.5.** The Non-Retaliation for Reporting Compliance Violations Policy;
- **4.4.6.** Responsibility to Report Suspected or Potential Violations of Laws and Regulations Policy;
- **4.4.7.** The Internal Review and Investigation of Internal Events Policy;
- **4.4.8.** Various Information Technology (IT) policies and procedures;
- 4.4.9. Various Billing policies and procedures; and
- **4.4.10.** Various other compliance-related policies and procedures.
- 4.5. Any teammate, contractor, or agent of DaVita Medical Group who performs services on behalf of DaVita Medical Group at a non-DaVita Medical Group's entity's location must abide by the fraud, waste, and abuse policies and procedures governing that non-DaVita Medical Group entity that are communicated to such individual, unless such individual has reason to believe that such non-DaVita Medical Group's entity's policies and procedures require conduct that could violate the Federal FCA, PFCRA, or any applicable State FCAs.
 - **4.5.1.** A teammate that believes the non-DaVita Medical Group entity's fraud, waste, and abuse policies and procedures could violate the Federal FCA, PFCRA, or any applicable State FCA, the teammate should notify the Compliance Department (Team Quest) immediately (See policy point #7).
- 4.6. It is the responsibility of each teammate, contractor, and agent of DaVita Medical Group to report any questions or concerns regarding compliance with the Federal FCA, PFCRA, the State FCAs, other fraud and abuse-related matters, and/or any other ethical or potential compliance concerns, via one or more of the following methods:
 - **4.6.1.** To the Team Quest Compliance Hotline:1-855-236-1448 or www.healthcarepartners.ethicspoint.com;
 - **4.6.2.** To the Team Quest Compliance E-Mail Address: corporatecompliance@davita.com;
 - **4.6.3.** To the individual's supervisor or any other management teammate; or
 - **4.6.4.** To a member of the Corporate Legal Department.
- **4.7.** Any questions or inquiries about this policy should be forwarded to the Team Quest Compliance Email Address at corporatecompliance@davita.com or the Team Quest Compliance Hotline at 1-855-236-1448 or www.healthcarepartners.ethicspoint.com
 - **4.7.1.** This would include any communications or inquiries regarding the requirements of, or compliance with, the Federal FCA, PFCRA, or any applicable State FCAs that are received by any teammate, agent, or contractor of DaVita Medical Group from any entity, provider, vendor, or third-party payor.

5. REFERENCES

- **5.1.** Federal False Claims Act: 31 U.S.C. §§ 3729 3733
- 5.2. Federal Program Fraud Civil Remedies Act: 31 U.S.C. §§ 3801, et seq

6. APPLICABLE DOCUMENTS

6.1. Summary of False Claims Act and Analogous State Laws

7. REVISION HISTORY

REVISION HISTORY					
Doc. Revision	Description	Revision Date	Last Date Reviewed		
1.0	Policy Creation	Mar 2015	Mar 2015		
2.0	Formatting change	Oct 2017	Oct 2017		
3.0	Formatting change	Feb 2018	Feb 2018		