

Valleywise Health Administrative Policy & Procedure

Effective Date: 04/26

Reviewed Dates: 00/00

Revision Dates: 00/00

Policy #: 99022 G - Finance

Policy Title: External Communications Relating to District Rate, Charge and Discount Setting Processes

Scope: **District Governance (G)**
 System-Wide (S)
 Division (D)
 Multi-Division (MD)
 Department (T)
 Multi-Department (MT)
 FQHC (F)

Purpose: To provide guidance on communications between Valleywise Health employees and agents and External Parties related to the District's rate, charge and discount setting processes to ensure compliance with laws and regulations.

Definitions:

Advanced Practice Clinicians (APCs): Individuals other than Medical Staff members who are licensed healthcare professionals who are board certified and have at least a master's degree. APCs are trained to practice medicine and prescribe within the scope of their training as outlined by their specific scope of practice and are authorized by law and by the Hospital to provide patient care services.

Allied Health Professionals (AHPs): Individuals other than Medical Staff members or APCs who are qualified by training, experience, and current competence in a discipline permitted to practice in the hospital and are authorized by law and by the Hospital to provide patient care services.

Clinical Privileges or Privileges: The authorization granted by the Board to render specific patient care services, for which the Medical Staff leaders and Board have developed eligibility and other privileging criteria and focused and ongoing professional practice evaluation standards.

House Staff: Includes residents, fellows, and Individuals licensed as appropriate, who are graduates of medical, allopathic and osteopathic, dental, or podiatric schools; who are appointed to a hospital's professional graduate training program that is approved by a nationally recognized accrediting body; and who participate in patient care under the direction of a Member of the Medical Staff of the pertinent clinical disciplines with appropriate clinical privileges in the hospital.

Medical Staff: All physicians, dentists, oral surgeons and podiatrists who have been appointed to the Medical Staff by the Board. Medical Staff are also referred to as Attendings.

Provider: A Medical Staff Member with Clinical Privileges, Resident, Advanced Practice Clinician or Allied Health Professional.

Policy:

1. POLICY STATEMENT

1.A Scope of Policy. This Policy governs communications between Valleywise Health employees and agents and External Parties related to the District's rate, charge and discount setting processes. The policy applies to all employees and agents of Valleywise Health, and to the Valleywise Health Medical Staff, House Staff and Providers.

1.B Policy Objectives. As a Special Health Care District, Valleywise Health has a unique obligation to serve low income and uninsured patients in Maricopa County. Communications regarding the District's rate, charge and discount setting processes are highly sensitive and generally proprietary in nature. Only designated employees (by individual name or job description) and properly identified agents of Valleywise Health, as determined by the District Board may participate in the decision-making process for the District's rate, charge and discount setting determinations. At its discretion and through its authorized governance process, the District Board may revise the list or categories of designated employees and agents authorized to participate in these processes.

Authorized Valleywise Health employees and agents may find communications with External Parties to be necessary from time to time to ensure that the District's rate, charge and discount setting structures are based on the complete information, or to ensure that implementation of changes to the District' rate, charge and discount setting structures benefit from input by key External Parties. The objectives of this Policy include establishing what type of communications are permissible between the employees and agents of Valleywise Health and external stakeholders, business partners, Medical Staff, House Staff and the public ("External Parties") about the District's rate, charge and discount setting processes.

This policy is intended to establish boundaries for such communications, to assure proper governance of Valleywise Health, and to limit exposure to regulatory enforcement risks that could be caused by perceived or actual conflicts of interest that may motivate the input or commentary provided in this context by External Parties to Valleywise Health, and that could implicate applicable state and federal healthcare fraud and abuse laws. All efforts undertaken pursuant to this Policy are part of Valleywise Health's Enterprise Risk Management and Corporate Compliance functions.

1.C Description of Permissible and Impermissible External Communications.

Valleywise Health employees and agents with responsibility for developing the District's rate, charge and discount setting structure proposals may request information and input from External Parties including referral sources. Such information from referral sources may be considered in the development of rate, charge and discount setting processes, but shall not control decisions made in this context for Valleywise Health. Such information may include: Usual, Customary and Reasonable (UCR) charge information from public sources, publicly available market data, Government or regulatory guidelines, impact on access to care for underserved populations, district financial conditions and the District's cost in providing patient care services. Factors that shall not be considered in the determination of rate, charges and discounts include any impact on compensation paid directly or indirectly to a referral source by Valleywise Health and Valleywise employees shall not solicit information from External Parties that could be perceived as having this type of impact.

External Parties are prohibited from providing information in the context of the District's development of rate, charge and discount setting processes, whether solicited or unsolicited, for the purpose of influencing or impacting changes to the compensation paid directly or indirectly to sources of healthcare business or referrals by Valleywise Health.

**Valleywise Health Policy & Procedure – Tracking Form (Not Part Of Policy)
(Before submitting, fill out COMPLETELY.)**

POLICY RESPONSIBLE PARTY: Chief Governance Officer and Clerk of the Board

DEVELOPMENT TEAM(S): Legal, District Clerk’s Office, Compliance

Policy #: 99022 G - Finance

Policy Title: External Communications Relating to District Rate, Charge, and Discount Setting Process

e-Signers: Melanie Talbot, Chief Governance Officer and Clerk of the Board

Place an X on the right side of applicable description:

New - X

Retire -

Reviewed -

Revised with Minor Changes -

Revised with Major Changes -

Please list revisions made below: (Other than grammatical changes or name and date changes)

List associated form(s): (If applicable)

Reviewed and Approved by in Addition to Responsible Party and E-Signer(s):

Committee: 00/00

Committee: 00/00

Committee: 00/00

Reviewed for EPIC: 00/00

Maricopa County Special Health Care District

Board of Directors: 04/26

Other: Legal 04/26

Other: Compliance 04/26