

**LSU HEALTH CARE SERVICES DIVISION  
BATON ROUGE, LOUISIANA  
SANCTIONS VERIFICATION POLICY**

**POLICY NUMBER:** 8512-24

**CATEGORY:** Compliance

**CONTENT:** Sanction Checks

**APPLICABILITY:** This policy shall apply to each officer, director, employee, leased employee, contractor, vendor, or student, herein referred to as “employees” of LSU Health Care Services Division. This policy applies to individuals or entities whether or not they will or will not be compensated.

**EFFECTIVE DATE:** **Issued:** March 17, 2008  
Reviewed: June 17, 2010  
Reviewed: January 27, 2017  
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Revised: November 10, 2014  
Revised: March 2, 2015  
Revised: January 27, 2017  
Revised: November 29, 2023  
Revised: February 27, 2024

**INQUIRIES TO:** Compliance  
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**Note: Approval signatures/titles are on the last page.**

**LOUISIANA STATE UNIVERSITY  
HEALTH CARE SERVICES DIVISION  
SANCTIONS VERIFICATION POLICY**

**I. STATEMENT OF POLICY**

It is the policy of LSU Health Care Services Division (HCS D) to not knowingly employ, contract with, purchase from, or privilege any individual or entity listed by a federal agency and the State of Louisiana as excluded, debarred, suspended, or otherwise ineligible to participate in federal or state health care programs. If the HCS D is unable to terminate an already employed individual due to civil service regulations, then the HCS D will ensure that the individual is not assigned to patient contact jobs, and that no monies will be collected from federal or state funded government programs based on the services that the individual provides, including through Cost Reports.

Note: Any reference herein to HCS D also applies and pertains to Lallie Kemp Medical Center.

**II. PURPOSE**

To ensure compliance with all federal and state mandates regarding prohibitions against payment to debarred or otherwise ineligible individuals and entities.

**III. IMPLEMENTATION**

This policy and subsequent revisions to the policy shall become effective upon approval and signature of the HCS D Chief Executive Officer (CEO) or Designee\*

\*Designee should always be included as an option for signature/approval.

**IV. PROCEDURES AND RESPONSIBILITIES**

The HCS D is responsible for establishing processes to determine if individuals or entities are on any of a number of exclusion lists before hiring, contracting, purchasing or privileging individuals or entities. The HCS D is also responsible for performing monthly checks of all employees, contractors, and vendors to ensure they have not become sanctioned since initially being approved for hire or contracting. The HCS D accomplishes these checks by using a compiled database provided by LSU Health Sciences Center-New Orleans called the Exclusion List Management System (ELMS).

The HCS D divides the review of individuals and entities in ELMS amongst three departments. Those departments are responsible for the initial sanction checks for all prospective employees, contractors, vendors and medical staff, as well as the monthly checks. Those departments are:

- Human Resources
- Contracts
- Purchasing

Each department is responsible for maintaining documentation showing the required sanction checks have been completed and storing that documentation on a secure shared drive. The departments are also responsible for completing a spreadsheet documenting their sanction check findings.

Initial sanction checks must be completed on the original source website and not in ELMS. At a minimum, the OIG exclusion list and the Louisiana Adverse Actions List must be checked for all initial hires and contracts. All monthly sanction checks must be performed in ELMS.

In addition to the initial and monthly sanction checks, purchase orders and contracts must include language requiring contractors and vendors to certify that they are eligible to participate in federally and state funded programs and to notify the HCSD should they ever become ineligible due to sanctions.

Should an employee, contractor, or vendor who is active with the HCSD become sanctioned, Compliance will work with the department head, human resources, finance, cost reporting and legal to ensure that any monies related to the sanctioned individual or entity are accounted for and refunded if necessary and the individual or entity is removed or reassigned. Compliance will also self-report to the appropriate agency if required.

The process for completing and documenting sanction checks is outlined in detail and shall be followed by those responsible for conducting the sanction checks.

## **V. CONSEQUENCES**

It is critical that all employees of the HCSD understand that any incident where retaliation, retribution or harassment can be related to an employee raising/reporting an issue, either at the hospital/organization level or through the compliance program, will not be tolerated. Reports of this nature shall be investigated thoroughly and expeditiously, with appropriate disciplinary actions taken, up to and including termination of employment.

## **VI. EXCEPTION**

The HCSD CEO or designee may waive, suspend, change or otherwise deviate from any provision of this policy they deem necessary to meet the needs of the agency as long as it does not violate the intent of this policy, state and/or federal laws, Civil Service Rules and Regulations, LSU Policies/Memoranda, or any governing body regulations.

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Approver:  
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Chief Medical Informatics Officer

A handwritten signature in black ink, appearing to read "Wayne Wilbright". The signature is fluid and cursive, with a large initial "W" and a long, sweeping underline.

02/27/2024