

NorthCare Network

Policy Title: Regulatory Compliance Program Reporting and Investigative Procedures **NC Reviewed:** April 10, 2007
Text Revision: February 1, 2008
Policy Effective Date: June 2004 (Originally part of the Compliance Plan)
Board Adopted: 5/2/07

Purpose

To establish a system that offers flexibility for an employee, agent, volunteer, contractor and/or representative of a contract agency of NorthCare Network to easily and confidentially report suspected fraud, abuse, waste, or other violation of local, state and federal laws.

Application

This policy applies to all employees, agents, volunteers, contractors and representatives of a contract agency of NorthCare Network, hereinafter, referred to as "covered party" for the purpose of this policy.

Policy

It is the policy of NorthCare Network to provide unimpeded access to the Compliance Officer for the purposes of reporting, in good faith, suspected or known fraud, abuse, waste, or other violation of local, state and federal laws. Any covered party reporting suspected fraud, waste, or abuse is protected under the Whistleblowers' Protection Act 469 of 1980. The Compliance Officer may consult with and/or refer to the Office of Recipient Rights, any report that appears to also be a violation of a recipient's rights.

Procedures

NorthCare will make every effort to protect the confidentiality of the reporter. If this confidentiality cannot be accommodated because of the circumstances, the reporting employee will not suffer from any retaliation for good faith actions. Employees are encouraged to discuss with their supervisor or Compliance Officer any areas in which they are unclear regarding compliance.

A. Proper channels for reporting include:

1. Face-to-Face with the employee's supervisor, the entity's Compliance Officer or NorthCare's Compliance Officer. Keep in mind if you are not able to contact anyone noted above, you can also report to any supervisor or the Recipient Rights Officer. The important thing is to make a timely report. **[Revised: Added last two sentences under #1; Eff. 2/1/08]**
2. Verbal or written via telephone, face-to-face, U.S. Mail or E-mail to the employee's supervisor or the entity's Compliance Officer or NorthCare's Compliance Officer.
3. Anonymously
4. Written reports can be made using NorthCare's Compliance Report Form.
5. Copies of any report made directly to a supervisor must be forwarded to the entity's Compliance Officer and/or NorthCare's Compliance Officer.
6. A summary report of each substantiated violation will be forwarded to NorthCare's Compliance Officer.
7. NorthCare's Compliance Officer will work closely with key managers to identify abnormal trends in the coding and billing areas as determined by NorthCare's Documentation Review Team, Data Warehouse Manager, Regional Workgroups, etc.
8. The entity's Compliance Officer or NorthCare's Compliance Officer will provide summary reports to:
 - a) NorthCare's Regional Compliance Team at their next regularly scheduled meeting;
 - b) NorthCare's Board of Directors and Performance Management Committee annually.

B. Investigative Process

1. Upon receipt of a report of a suspected violation, the Compliance Officer and/or NorthCare's legal counsel will gather the following information and Complete NorthCare's Compliance Reporting Form (if not completed by reporter):
 - a) Date of the report
 - b) Reporter's name and phone number
 - c) Name/initials and location of the program or employee involved
 - d) Identifying information
 - ✓ Date of the incidents being reported.
 - ✓ Description of the issue.
 - ✓ Initials of Individuals involved; employees, recipients, etc.
 - ✓ Location of violation if different from the program.
 - ✓ Is this your first time reporting the incident or problem? If no, when was the problem reported previously and to whom.
 - ✓ How do these actions violate the laws, regulations, procedures or NorthCare's Code of Compliance Ethics?
 - ✓ Any other information the reporter feels is important.
 - e) Attach any and all supporting documentation.
2. NorthCare's CO will send an acknowledgement of receipt to the reporter, if the report was made openly; and,
3. Make every effort to complete the investigation within 90 days of the Compliance Officer receiving the complaint; **[Revised from 60 to 90 days Eff. 2/1/08]**
4. Additionally, NorthCare's Compliance Officer will:
 - a) upon receipt of an allegation or complaint alleging improper practices, initiate careful review, up to and including an audit, including but not limited to: documentation reviews, interviews, auditing or other investigative procedures as necessary and appropriate to the situation;
 - b) reserve the right to enlist the help of an outside agency to assist if the situation warrants additional expertise;
 - c) ensure that documentation collected in the course of an audit that is public domain be included in NorthCare's file. Documentation containing PHI and IIHI (Individually Identifiable Health Information) will remain on site at the affiliate in its original location. Only clinical information that has been summarized or de-identified will be permitted for inclusion in the complaint review file.
 - d) maintain files in a locked cabinet in NorthCare's administrative office suite;
 - e) ensure the investigation is a fair, impartial, discreet review of the issue at hand;
 - f) identify the cause of the problem, the affected parties, the laws and regulations involved, the potential regulatory impact and the desired outcome;
 - g) consult legal counsel as necessary;
 - h) inform the appropriate Executive Director and/or Human Resource Director of any reports discovered to be malicious for possible discipline;
 - i) provide recommendations that will result in a corrective action plan to be implemented by the program or agency, which will be monitored by NorthCare's Compliance Officer/Committee(s);
 - j) document and retain records of the entire investigation and outcome(s).
5. Outcome of the Investigation
 - a) The purpose of an investigation is to:
 - ✓ identify violations of a law, rule or standard;
 - ✓ identify individuals who may have knowingly or inadvertently caused noncompliance or violation of applicable laws, rules, or standards;
 - ✓ facilitate the correction of any practices not in compliance with the laws, rules and standards;
 - ✓ ensure procedures necessary to insure future compliance are implemented;

- ✓ protect NorthCare in the event of civil or criminal enforcement actions; and,
- ✓ to preserve and protect the organization's assets.

b) Upon completion of a thorough investigation, the CO will:

- 1) Document a thorough report that includes:
 - ✓ A summary of the violation, including laws, standards, etc. that were violated;
 - ✓ Identify the cause of the violation;
 - ✓ Provide recommendations that will result in a corrective action plan to be implemented by the program or provider, which will be monitored by NorthCare's Compliance Monitoring Team(s);
- 2) Retain all records pertaining to the report, investigation, and outcome.
- 3) Report, no less than annually, to the governing board or an appropriate subgroup thereof, information on the implementation and effectiveness of the compliance and ethics program.
- 4) Determine if there has been a violation of civil, criminal or administrative law.
- 5) If a potential compliance issue is uncovered, determine if self-reporting is adequate or outside auditors should be engaged through outside counsel to retain attorney-client privilege.

C. Corrective Action/Discipline/Sanctions

Enforcement of corrective action and/or disciplinary/sanction standards will be conducted in accordance with NorthCare's Sanctions Policy, applicable contracts and laws.

D. Voluntary Disclosure

NorthCare promotes voluntary disclosure or reporting of violations of civil, criminal, or administrative law to appropriate third-party law enforcement or regulatory agencies. Self-Disclosure must follow the Office of Inspector General's Provider Self-Disclosure Protocol (42 USC 1320a-7b(f)) and the requirements of the Federal False Claims Act, (31 USC 3729-3733)

Cross references:

- Medicaid False Claim Act – Act 72 of 1977
- State of Michigan Enacted Medicaid False Claim Act 272 of 1977
- Whistleblowers' Protection Act – Act 469 of 1980
- NorthCare's Compliance Program Plan
- NorthCare Sanction Policy
- NorthCare Compliance Reporting Form
- NorthCare No Reprisal For Reporting Policy
- Responding to Government Investigation Policy