

Policy Number: **CC 16-1**

Original Date: 12/4/00

Revised: 10/09/08, 12/18/09, 06/04/12, 12/26/12,
03/12/13, 02/24/14, 5/18, 8/18, 2/21

Reviewed: 6/13/08, 6/16

Subject/Title: Compliance Reporting System

Policy:

It is Oneida Health Hospital's policy that Board members, officers, managers, and other workforce members, including employees, trainees, volunteers, providers, consultants, independent contractors, students and temporary workers ("Affected Persons"), as appropriate, have the ability to pose compliance-related questions and/or report potential non-compliance within the organization anonymously and/or confidentially without fear of retribution (intimidation) and, as part of our Corporate Compliance Program, Oneida Health Hospital (OHH) has a developed and publicized reporting system for this purpose. Non-compliance is defined as failure to comply with applicable federal and state laws, and the requirements of federal and state health programs, including regulations from the fiscal intermediary, the Medicare contractor, Office of Inspector General, Office of Medicaid Inspector General and OHH's policies. As further described in the *Whistleblower Protection Policy CC 16-33*, any individual who makes a report in good faith shall be protected from retaliation or any adverse employment consequence for making such a report.

Purpose:

This *Compliance Reporting System Policy* describes the process for reporting potential incidents of non-compliance to ensure that all Affected Persons are knowledgeable about the procedures and methods for reporting potential non-compliant activity and feel comfortable with the process, to maintain an open line of communication to the Corporate Compliance Director, Corporate Compliance Officer, members of the Corporate Compliance Committee, and the Compliance Liaisons. The Compliance Reporting System is essential to OHH efforts to prevent, detect and correct non-compliance with Medicaid requirements and New York and federal fraud, waste and abuse rules.

Scope:

This policy applies to all Affected Persons of OHH, including the hospital and all of its departments and health centers, the Extended Care Facility, OHH's affiliated physician practices (Oneida Medical Services, PLLC, Oneida Medical Practice, P.C. and Genesee Physician Practice, PLLC), and any other department or entity which is part of OHH.

Procedure:

1. Methods Available to Report:

Reports can be made in person to the Corporate Compliance Officer (COO) or Corporate Compliance Director (CCD), via email, phone, the corporate compliance hotline, or Compliance Reporting Form. The CCD is responsible for responding to all reports. Reports may also be made to a member of the Corporate Compliance Committee or the Compliance Liaisons for OMP, OMS, or GPP.

Corporate Compliance Director: Renee Olmsted, RHIA

Corporate Compliance Officer: Dr. Ofrona Reid, VP Medical Staff

Corporate Compliance Liaisons, OMP: Renee Frawley / Jessica Gurdo / Kathi Austin / Heather Stiles

Corporate Compliance Liaisons, OMS: Renee Frawley / Lisa Abbe / Heather Stiles

Corporate Compliance Liaison, GPP: Michael Fifield

Corporate Compliance Liaisons, Article 28 Health Centers: Renee Frawley, Maureen Mosack / Heather Stiles

Since many of the laws and regulations that apply to OHH are complex, individuals may have questions or concerns. If you have a question or concern, or want to report a potential circumstance of non-compliance, you can:

- A. Discuss the question or concern with the Compliance Liaison or with your direct supervisor (who in turn can seek assistance from the Compliance Director, if necessary); or

If the concern deals with your direct supervisor or Department Director, or if you feel uncomfortable going to your direct supervisor, or if your past reports to your direct supervisor remain unresolved, then you can also:

- B. Call the CCD directly at extension 2117 or phone at 315-361-2117; or
- C. Call the OHH Corporate Compliance Hotline at extension 2116 or phone at 315-361-2116, where you can leave a detailed voicemail that only the CCD has access to. You are encouraged to leave your name and contact phone number, which may be your home or cell phone number, if you prefer. You may also use this method to confidentially or anonymously report a concern; or
- D. Complete the Compliance Reporting Form (#01209) and submit the completed form directly to the Compliance Director (via inter-office mail, regular mail or in person). This form can also be given to the Compliance Officer in the absence of the CCD.

The Compliance Reporting Form is located (i) outside of the ACF Human Resources office, (ii) in the ECF hallway near the nursing offices, and (iii) on the OHH Intranet using the path: Corporate, Compliance, and click on the Corporate Compliance Report Form. In addition, the report form is located on Oneida Health Hospital's external website (<https://www.oneidahealth.org/wp-content/uploads/Compliance-Reporting-Form-Staff-01209-rev-071318.pdf>) to provide greater accessibility to report potential compliance issues to the Corporate Compliance Director.

The CCD will maintain all reports submitted via a confidential method in a confidential manner, including those reports wherein the individual reporting an issue of non-compliance requests confidentiality. The identity of the individual will be kept confidential unless the matter is turned over to law enforcement. It is helpful for you to allow reported matters to be handled confidentially rather than anonymously so that the CCD can contact you with any questions and/or with the outcome of the investigation. Employees can also make a report anonymously if they wish. However, if you choose to remain anonymous, the CCD will not be able to contact you and may not be able to further investigate the matter or notify you of the outcome of any investigation. However, you may contact the CCD directly at extension 2117 or by phone at 315-361-2117 to provide further information or if you have any questions.

Note: For employee related matters such as performance evaluations, pay rate increases, time off, benefits, etc., please contact the Human Resource Department as you normally would.

2. What to Expect when Making a Compliance Report:

- A.** The CCD will initiate a response to all reports, regardless of the method in which they are made, within a reasonable time frame. Reports will not necessarily be responded to on a first-come, first-served basis, but rather by the nature and extent of potential non-compliance. If necessary, the CCD may seek advice from external legal counsel based on the severity of allegations.
- B.** The internal investigation may include interviews, review of relevant documents and consultation with external legal counsel. Records of the investigation shall include, but are not limited to, documentation of the alleged violation, key documents, findings and results of the investigation, corrective actions implemented and disciplinary actions taken. The results of the investigation may necessitate a referral to criminal and/or civil law enforcement agencies, including the New York State Department of Health or Office of the Medicaid Inspector General, and/or the development of a corrective action plan.
- C.** If the incident(s) requires disciplinary action, the disciplinary process will proceed in accordance with OHH policy, Human Resources Progressive Disciplinary Policy HR-11, as well as the Progressive Disciplinary and Sanction Policy for Compliance Program Policy CC 16-30.
- D.** In cases where the reporter is known, he or she will be notified in writing of the outcome of their report, to the extent deemed appropriate, by the CCD.
- E.** If it is determined that **criminal** misconduct has occurred, the matter will immediately be referred to external legal counsel to initiate contact with the appropriate law enforcement agency.
- F.** In the event a compliance issue relates to billing errors or non-compliance, OHH is committed to returning any overpayment obtained in error from a federal health care program or other payer.
- G.** The CCD and Compliance Liaisons, along with relevant department managers and members of the Corporate Compliance Committee, are responsible for evaluating OHH's training and education needs and ongoing monitoring activities to prevent the reoccurrence of any incidents of non-compliance.
- H.** A Compliance Report Follow-up Form (#01364) will be initiated and completed by the CCD.

3. Expectation to Report:

All Affected Persons are expected to assist in the investigation and resolution of compliance issues. Therefore, it is expected that all Affected Persons will report compliance issues according to the policies and procedures of OHH. Failure to report compliance issues of which an Affected Person is aware will result in such individual being subject to discipline in accordance with OHH policies, *Human Resources Progressive Disciplinary Policy HR-11 and Progressive Disciplinary and Sanction Policy for Compliance Program CC 16-30*, which describe sanctions for (i) failing to report suspected compliance issues, (ii) participating in or facilitating non-compliant behavior, and (iii) encouraging, directing or permitting active or passive non-compliant behavior.

Other related Policies/Procedures: See all Corporate Compliance Policies online
Human Resources Progressive Disciplinary Policy HR-11
Internal Investigations and Response CC 16-2

Progressive Disciplinary and Sanction Policy for Compliance Program CC 16-30
Whistleblower Protection Policy CC 16-33

Previous Policy #: NA

References:

Standards: NA

Forms: Compliance Reporting Form (#01209)
Compliance Report Follow Up Form (#01364)

Approved By: Corporate Compliance Committee 8/18; 3/15/21