

**SUBJECT TITLE:** *Reporting of Legal and Regulatory Issues*

**STANDARD/REF #:** [Standard/Reference #]

**APPROVED BY:** *Corporate Compliance*

**EFFECTIVE DATE:** 6/8/2007

**REQUIRED REVIEWERS:**

**REVIEWED DATE:** 12/21/2016

**POLICY/PURPOSE:**

The purpose of this policy is to notify employees, providers, volunteers, contractors, and vendors of MercyCare Service Corporation and its Affiliates (hereafter referred to as "Mercy") of their responsibilities in reporting perceived legal and regulatory compliance issues under the Corporate Compliance Program and to outline how the reporting may be done.

It is the responsibility of each employee, staff member, physician, volunteer, contractor, and vendor of Mercy to report any reportable compliance issues that he or she may perceive as questionable. If an individual believes a reportable compliance issue exists, that individual must report it as soon as reasonably possible. The sooner an issue is reviewed, the sooner it may be resolved.

**DEFINITIONS:**

A. "Reportable Compliance Issues" shall refer to those legal and regulatory compliance issues that must be reported under this policy, which include, but are not limited to:

1. Quality issues
2. Safety issues
3. EMTALA issues (Emergency Medical Treatment and Active Labor Act)
4. Professional Misconduct
5. Unethical behavior
6. Billing issues
7. Confidentiality, privacy, and security issues
8. Discrimination
9. Conflicts of interest
10. Coding Issues
11. Providing unnecessary medical treatment/tests
12. Fraud

B. "Affiliates" shall refer to those wholly-owned subsidiary corporations of MercyCare Service Corporation, which include: Mercy Medical Center, Cedar Rapids, Iowa; Mercy Care Management, Inc., Mercy Physician Associates, Inc.; and Mercy Physician Services, Inc.

**PROCEDURE:**

1. If an individual believes a reportable compliance issue exists, he/she should first discuss the issue with his/her supervisor.

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2. If the individual is not comfortable discussing the reportable compliance issue with his/her supervisor or does not receive what he/she believes is a satisfactory response, the individual may take one of the following actions:
  - 2.1. Reporting via telephone
    - 2.1.1 Call the Corporate Compliance Officer or Compliance Department staff member directly to report any type of perceived reportable compliance issue or
    - 2.1.2 Call the HIPAA Security Officer if the perceived reportable compliance issue pertains to security of protected health information.
    - 2.1.3 Call the HIPAA Privacy Officer if the perceived reportable compliance issue pertains to privacy of protected health information.
    - 2.1.4 The following telephone numbers may be used for internal reporting:

Corporate Compliance Officer:	319-861-7994
Senior Legal Counsel:	319-369-4544
Legal Counsel:	319-369-4740
HOTLINE:	319-369-4586
HIPAA Security Officer:	319-221-8892
HIPAA Privacy Officer:	319-398-6846
  - 2.2. Reporting by calling the Compliance Hotline. This is a voicemail system only and is checked daily, Monday through Friday. The caller may choose to remain anonymous. All the individual needs to do is outline the issue in sufficient detail for an investigation. Every attempt will be made to hold the identity of the caller confidential. However, in some instances the name may have to be revealed – such as under official government requests.
  - 2.3. Reporting by sending an e-mail to the Corporate Compliance Officer or Compliance Department staff member. The individual may not be able to remain anonymous with this method, however they can still request to have their involvement kept confidential and it will be honored, unless we are required by law to reveal the identity of the person who reported the issue.
3. Following investigation of a perceived compliance issue, Mercy will self-report any necessary concerns to outside agencies as required by law or regulation.
4. If an individual desires to report the perceived reportable compliance issue to an outside agency him/herself, the following addresses and telephone numbers may be used. (As a condition of employment every employee is required to report concerns to the Compliance Department.)

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**The Iowa Department of Inspections and Appeals**

Lucas State Office Building  
Health Facilities Division  
Des Moines, IA 50319-0083  
Phone: 515-242-6515

**State of Iowa Long-term Care Ombudsman**

Department of Elder Affairs  
Clemons Bldg., 3<sup>rd</sup> Floor  
200 10<sup>th</sup> St.  
Des Moines, IA 50309-3609  
Phone: 1-800-532-3213

**Region VII Office for Civil Rights**

(Privacy Violations or Discrimination)  
Office for Civil Rights  
U.S. Department of Health & Human Services  
601 East 12<sup>th</sup> Street – Room 248  
Kansas City, MO 64106  
Phone: 1-816-426-7278  
Fax: 1-816-426-3686

**Office of Inspector General**

Department of Health and Human Services  
Attn.: HOTLINE  
330 Independence Ave., SW  
Washington, DC 20201  
Phone: 1-800-HHS-TIPS (1-800-447-8477)  
Fax: 1-800-223-8164  
E-Mail: [HHSTips@oig.hhs.gov](mailto:HHSTips@oig.hhs.gov)

**The Joint Commission**

Office of Quality Monitoring  
The Joint Commission  
One Renaissance Boulevard  
Oakbrook Terrace, IL 60180  
Phone: 630-792-5636  
E-mail: [complaint@jointcommission.org](mailto:complaint@jointcommission.org)

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5. There will be no retaliatory action taken by Mercy against any individual that reports a perceived reportable compliance issue, whether to an internal resource or to an outside regulatory agency when an individual makes a report in good faith.

In addition, the Office of Inspector General of the Department of Human Services and the False Claims Act provides protection for whistleblowers who feel they have been harmed by reporting a perceived reportable compliance issue internally or to an outside agency. For more information please visit the Federal or State of Iowa websites:

Federal False Claims Act information: <http://www.cms.hhs.gov/>

IA Health Link: <http://www.ime.state.ia.us/>

**RELATED DOCUMENTS:**

**REFERENCES:**