

NORTHCARE NETWORK

POLICY TITLE: Responsibilities for Reporting Non-Compliance	CATEGORY: Compliance	
EFFECTIVE DATE: 6/1/04	BOARD APPROVAL DATE: 3/21/13	
REVIEWED DATE: 8/26/24	REVISION(S) TO POLICY STATEMENT: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	OTHER REVISION(S): <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
RESPONSIBLE PARTY: Compliance & Privacy Officer	CEO APPROVAL DATE: 9/3/24 Megan Rooney, CEO	

APPLIES TO

NorthCare Network Personnel
Network Providers

POLICY

NorthCare Network Personnel are expected to report any activity he or she believes is in violation of the law, ethical standards, or NorthCare Network policies to NorthCare’s Compliance Officer. Network Providers are expected to report any activity that is believed to be in violation of the law, ethical standards, or NorthCare Network policies as it relates to Fraud, Waste or Abuse to NorthCare’s Compliance Officer. NorthCare Network Personnel and Network Providers need **not** be certain that the violation has occurred to report. Reporting enables the Compliance Officer to ensure potential problems are investigated quickly and to take prompt action to resolve them.

Under no circumstances is retaliation for submitting a compliance issue or inquiry acceptable. This includes but is not limited to, questions and concerns an employee may discuss with an immediate supervisor, the affiliate’s compliance officer, NorthCare Network’s CO, CEO or Compliance Oversight and Risk Management Committee. Any individual reporting, in good faith, suspected fraud, waste, or abuse is protected under the Whistleblowers’ Protection Act 469 of 1980
<https://www.legislature.mi.gov/documents/mcl/pdf/mcl-Act-469-of-1980.pdf>.

All reports of wrongdoing will be evaluated promptly, thoroughly, and fairly by persons having sufficient level of expertise and knowledge about the issue presented by the caller. Investigations will normally commence within ten business days of the report.

NorthCare Network Personnel and Network Providers will have unimpeded access to the Compliance Officer for the purposes of reporting suspected or known fraud, abuse, waste, or other violations of local, state, and federal laws.

The Compliance Officer may consult with and/or refer to the appropriate Office of Recipient Rights, any report that appears to also be a violation of a recipient’s rights.

PURPOSE

To establish a system that offers flexibility for an individual to report suspected fraud, waste or abuse and other violations of local, state and federal laws easily, confidentially and anonymously, and NorthCare Policy. The goal is to present opportunities for the

identification, investigation, correction, and prevention of inappropriate activities and to articulate the expectations of NorthCare Network regarding the reporting of suspected or known fraud, waste, or abuse and/or violations of law or policy.

DEFINITIONS

1. **Abuse:** means provider practices that are inconsistent with sound fiscal, business, or clinical practices, and result in an unnecessary cost to the Medicaid program, or in reimbursement for services that are not medically necessary or that fail to meet professionally recognized standards of care. It also includes beneficiary practices that result in unnecessary costs to the Medicaid program. (42 CFR § 455.2)
2. **Fraud (Federal False Claims Act):** means an intentional deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to him/herself or some other person. It includes any act that constitutes fraud under applicable Federal or State law including but not limited to the Federal False Claims Act and the Michigan False Claims Act. (42 CFR § 455.2)
3. **Waste:** means overutilization of services, or other practices that result in unnecessary costs. Generally, not considered caused by criminally negligent actions but rather the misuse of resources.

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 Network Compliance Plan and Policies

HISTORY

REVISION DATE: 2/1/08, 3/13/13, 12/18/13, 3/18/14, 11/5/14, 7/27/16, 5/16/17, 3/13/18, 2/6/19, 12/3/19, 10/21/20, 8/23/21, 6/10/22, 5/1/23, 8/26/24

REVIEW DATE: 4/10/07, 1/11/11, 3/13/13, 12/18/13, 3/18/14, 11/5/14, 9/16/15, 7/27/16, 5/16/17, 3/13/18, 2/16/19, 12/3/19, 10/21/20, 8/23/21, 6/10/22, 5/1/23, 8/26/24

CEO APPROVAL DATE: 3/13/13, 12/18/13, 3/18/14, 11/5/14, 10/6/15, 8/2/16, 6/6/17, 3/27/18, 2/7/19, 1/7/20, 11/3/20, 9/7/21, 7/12/22, 5/2/23, 9/3/24

BOARD APPROVAL DATE: 6/1/04, 3/21/13

PROCEDURES

- A. NorthCare Network Personnel Responsibilities:
Immediately report knowledge of suspected, actual, or potential violations of fraud, waste and abuse laws, regulations, policies, and procedures of NorthCare Network and/or the Code of Conduct by any of the following methods:
 1. Any individual who wishes to remain anonymous may use a confidential Compliance Helpline to report compliance-related issues or concerns via:
 - a. Toll free at: 1-844-260-0003
 - b. The web at: <http://www.lighthouse-services.com/northcare>

- c. Email: reports@lighthouse-services.com (must include provider name and NorthCare reference)
 - d. Fax to: 215-689-3885 (must include provider name and NorthCare reference);
2. Directly to NorthCare Network's Compliance & Privacy Officer by:
 - a. Calling: 1-906-936-6843 (voice messages are confidential)
 - b. Emailing: scoleman@northcarenetwork.org
 - c. Mailing to: NorthCare Network, ATTN: Compliance & Privacy Officer, 1230 Wilson Street, Marquette, MI 49855
 - d. Open Door Policy to the Compliance & Privacy Officer located at 1230 Wilson Street, Marquette, MI 49855
3. Directly to the NorthCare Network CEO if the report is regarding the Compliance Officer, in which case the CEO will conduct the investigation if warranted.
4. Reports can be made to the MDHHS-OIG:
 1. online at <https://www.michigan.gov/mdhhs/doing-business/providers/providers/billingreimbursement/report-medicare-fraud-and-abuse>
 2. By calling **855-MI-FRAUD (643-7283)**
 3. Sending a letter to:
Office of Inspector General
PO Box 30062
Lansing, MI 48909

Reports made using any of the above options shall be handled as confidentially as practical and/or as allowed by law.

Employees will not be subjected to retaliation, retribution, or harassment for reports of a suspected violation made in good faith.

B. NorthCare Network Compliance Officer's Responsibilities:

1. To implement and publicize a reporting process that encourages NorthCare Network Personnel and Network Providers to report compliance-related concerns.
2. Maintain a system to document and track reported compliance issues and inquiries.
3. To inform complainant of expectations of a timely response, confidentiality, non-retaliation, and progress reports regarding where in the process the review/investigation is.
4. Is a member of the NorthCare Network's Compliance Oversight and Risk Management Committee.

5. Be available to participate or assist network provider compliance officers in prompt review and investigation of all reported, known, or potential violations consistent with the procedures defined in the NorthCare Network Compliance Review and Investigation Policy.
6. Ensure proper follow-up on resolution of issues and concerns relating to potential or known non-compliance, fraud, waste, or abuse.
7. Ensure documentation of all actions taken in response to a report, including any steps taken to address identified improper conduct, if any; and
8. Report numbers of incidents and types of recorded investigations to the CORMC and annually to the Board of Directors.
9. If after consultation with legal counsel, it is determined a violation of a civil or criminal, federal or state law, the violation will be reported to the appropriate government agency as required.
10. Will respond appropriately and timely to ensure support of the employee who is reporting the suspected or known violation and ensure that employees understand that:
 - a) They have an obligation to raise concerns relating to suspected or known violations and fraud, waste, and abuse.
 - b) they may seek clarification and guidance on compliance related issues from the Compliance Officer.
 - c) they may report compliance related issues without fear of retaliation.
 - d) The compliance officer maintains an “open door” policy to support and encourage employee reporting of compliance-related issues or concerns.
 - e) reports of actual or potential violations are handled as confidentially as possible, and
 - f) high priority is placed on violations or suspected/known fraud, waste or abuse with the development and implementation of remedial action to prevent further incidents.

C. Network Providers Responsibilities:

Network Providers will report suspected and known violations consistent with the definitions of fraud, waste and abuse as stated in this policy and/or those in which one or more of the reporting thresholds noted below are met. Reports are to be made within three (3) business days to the NorthCare Network’s Compliance Officer when one or more of the following criteria are met:

1. If, during an inquiry by the Network Provider Compliance Officer, there is determined to be (reasonable person standard) fraud, waste or abuse as

defined by federal statute, CMS, HHS, OIG and applicable Michigan statute, regulation or PIHP contract definition.

2. Prior to any self-disclosure to any federal or state of Michigan authority (In no way is this intended to, nor should it be interpreted as a requirement or request to violate the letter or spirit of federal or Michigan reporting and whistleblower statutes or related regulations).
3. When, because of fraud, waste or abuse the Network Provider makes a material revision to prior reported financial statements to NorthCare Network.
4. When a Network Provider knows, or should have known, that an action or failure to act could result in the improper application or improper retention of Medicaid funds.
5. When there is a suspected or actual privacy breach of Protected Health Information.
6. When there is a suspected or actual security breach or threat to the provider's information system where PHI is stored.
7. When there is a, suspected or actual, security breach or threat to NorthCare's information system network.
8. When there is a suspected or actual violation of NorthCare Policy as it relates to Fraud, Waste or Abuse, Contract requirements, or state or federal law.

CEOs have the ultimate responsibility and authority for determining whether the thresholds above have been reached although their authority to delegate the determinations is acknowledged.

Affiliates are welcome to request technical assistance from NorthCare Network's Compliance Officer at any time. Such contacts will not automatically be considered a "report of compliance issue" by NorthCare Network.

D. Voluntary Disclosure

NorthCare Network will voluntarily disclose or report 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). NorthCare Network strongly encourages Network Provider to also voluntarily self-disclose in accordance with the OIG Provider Self Disclosure Protocol noted above.