

Policy	
Reporting Compliance Matters and Investigation of Internal Compliance Complaints	
Effective Date: (administrative changes approved by Bob Cournoyer): 4/12/2023	Policy Owner: Compliance Policy Work Group
Rescission: Supersedes policy dated: 12/7/2020	Approved by: John Randolph, Vice President and Chief Compliance Officer, UMMHC
Applicability: All workforce members, Board Members, and vendors including Harrington Hospital.	Approved by: Eric Dickson MD, CEO UMass Memorial Health Care
Keywords: hotline, fraud, abuse, reporting, Privacy, Infor	 rmation Security, EthicsPoint. Confidential Reporting

Policy

UMass Memorial Health Care (UMMHC) is committed to the timely identification and resolution of compliance related issues, including privacy and information security, that may adversely affect workforce members, patients or the organization. Therefore, UMMHC has established confidential communication channels for the reporting of potential compliance matters and for questions regarding federal or state laws, the UMMHC *Code of Ethics and Business Conduct*, and policies and procedures both to the Compliance Office and via a confidential reporting system.

Ethical behavior is the responsibility of every workforce member. Each individual has a personal obligation to report any activity that appears inconsistent with the Code, applicable laws or UMass Memorial policies and procedures. Reports may be made to any of the following:

- Your immediate Supervisor.
- If circumstances prevent this, then you should contact your Manager,
- Director,
- Senior Leaders.
- Compliance Office, or
- Human Resources.

Individuals are expected to cooperate fully in the investigation of any alleged violations of which they have knowledge. UMMHC will not retaliate against any person that reports an incident in good faith.

Definitions

Confidential Reporting System (EthicsPoint) – A method of reporting potential compliance matters or questions regarding federal or state laws or UMass Memorial policies and procedures through a dedicated toll-free telephone line or website for confidential and/or anonymous reporting.

Workforce Member – All employees, contractors, volunteers, trainees (including medical students, interns, residents, allied health professionals and business students), members of the medical staff

including employed and private physicians, nurses in expanded roles, physician assistants, temporary employees, and other persons employed, credentialed or under the control of UMMHC whether or not they are paid by UMMHC.

Required Criteria for Procedure

- I. Confidential Reporting Protocol
 - A. The Confidential Reporting System consists of a dedicated toll-free telephone line and website hosted by an external vendor. After documenting reports and checking for potential involvement of the UMMHC staff who will be assigned the report, the vendor assigns each report to authorized UMMHC staff for review and resolution. Reports that reference the UMMHC staff who would be assigned the report will be assigned to an alternative reviewer who is not referenced in the report. As an alternative to using the Confidential Reporting System, individuals may elect to address concerns directly to the Compliance Office whether in-person, through in-house (confidential) mail, email or through the U.S. Postal Service.
 - B. Confidential Reporting System Protocol:
 - Reporters may report matters using a toll-free telephone number or a website. Both are hosted by an external vendor.
 - Calls are received by a third party vendor, and are not recorded or traced.
 - Reporters may choose not to identify themselves. The identity of reporters will be kept confidential to the extent possible. However, no guarantees may be made since circumstances, the nature of a complaint, or identification of a reporter may become known during the course of an investigation.
 - UMMHC is committed to assuring that no retaliation is taken against reporters for good faith use of the Confidential Reporting System. However, the Confidential Reporting System will not exonerate individuals from responsibility for participation in unethical or unlawful conduct.
 - Contacting the Compliance Office or use of the Confidential Reporting System does not relieve individuals from requirements to file reports, such as Incident Reports or Risk Management reports.
 - Reporters will be provided a Report Key and will be asked to create a password so that
 they can access the Confidential Reporting System to obtain updates and provide
 additional information while preserving their anonymity if desired.
 - C. All reports of potential compliance violations will be logged by the Compliance Office, regardless of mode of delivery.
 - D. Compliance concerns reported to other UMMHC departments, including, but not limited to, Human Resources, Internal Audit, Risk Management or the Office of the General Counsel, and compliance concerns reported to managers, should be referred to the entity Compliance Office. Compliance and the referring party will review the concern and determine which UMMHC function will take the lead to investigate and resolve the concern.
- II. Investigation of Internal Compliance Complaints
 - A. All complaints will be reviewed by the Compliance Office to determine the need for investigation. These decisions may be discussed as appropriate with the Office of the General Counsel.
 - B. The Compliance Office may request assistance in the investigation from:
 - i. Office of General Counsel;
 - ii. Internal Audit;
 - iii. Security/Public Safety;
 - iv. Patient Care Assessment Committee;

- v. Human Resources;
- vi. Other UMMHC department, committee as deemed appropriate;
- vii. Outside entity; or
- viii. Outside Counsel.
- C. UMMHC will protect the identity of anyone reporting a compliance-related concern to the extent permitted by law, unless doing so prevents UMass Memorial from fully and effectively investigating and responding to an alleged concern.
- D. The Compliance Office will determine the protocol for presenting the results of individual investigations to UMMHC management.
- E. The Compliance Office may recommend changes to preclude recurrence of non-compliant activity.

Entity/Department Specific Procedure

N/A

Supplemental Materials

N/A

References

UMMHC Code of Ethics and Business Conduct

EthicsPoint