

**HIGHLINE MEDICAL SERVICES ORGANIZATION  
COMPLIANCE POLICY/PROCEDURE**

<b>Title: Compliance Reporting</b>	<b>Policy Number:</b>	<b>206</b>
	<b>Original Issue:</b>	<b>04/17</b>
	<b>Revision Date(s):</b>	
	<b>Review Date(s):</b>	<b>04/18, 05/19</b>

**Last Review Date: June 10, 2020**



**, President**

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**Policy**

HMSO's goal to establish and maintain a culture that promotes prevention, detection and resolution of fraud, waste and abuse; assures the privacy of protected health care information; and complies with all applicable statutory, regulatory and other MA and Part D Program requirements, and its own ethical and business policies. To support this goal the compliance Program requires that all potential compliance violations are investigated timely, with a prompt response if a reasonable inquiry concludes there is evidence of misconduct related to payment or delivery of services under its health plan contracts.

**Procedure**

HMSO prohibits any employee from retaliating against or engaging in harassment of another employee or other person who has reported suspected wrongdoing. This includes avoiding any action that might constitute retaliation, retribution or harassment against any party who has reported a concern.

Possible compliance violations or concerns can be reported in the following ways:

- Compliance Hotline: 206-878-1985 ext 704
- Email to HMSO information address: [info@hmsoinc.org](mailto:info@hmsoinc.org)
- Report to the Compliance Officer, any Manager or Director, or the President
- By mail

Possible compliance violations can also be discovered through regular compliance monitoring and auditing, including but not limited to:

- Internal department monitoring and quality audits
- Annual health plan delegation audits
- Annual financial audit
- Periodic review of annual training compliance
- Periodic review of compliance with HMSO's Conditions of Employment

The recipient of any report of a possible compliance violation will forward it to the Privacy Officer. The Privacy Officer is responsible for recordkeeping, communication, investigation and reporting on all possible compliance violations. The Privacy Officer will:

- Immediately record the violation report/concern in the Compliance Log
- Determine the appropriate investigating party
  - A member of HMSO's Leadership Team with support from others as necessary, i.e. HMSO's attorney, Medical Director, auditors or other experts
- Create both a paper and an electronic file documenting the case from initial notification to closure
  - All correspondence
  - Memos to file regarding phone conversations
  - Printed copies of emails
  - Face sheet with investigation timeline, action items, due date and completion date
- If an employee infraction refer to the responsible Manager and the President for disciplinary action
- Notify the health plans and governmental authorities as necessary
- Obtain sign off from the Compliance Officer to close any investigation
- Report to the President
- Forward the Compliance Log to the Compliance Officer and President for inclusion in annual reporting

Upon closure of a compliance issue, the Privacy Officer will prepare a summary for review with the Leadership Team. The Leadership Team will discuss and agree on follow up staff education. Completion of a corrective action plan related to non-compliance related to delegated activities will be reported by the responsible manager to to the Leadership Team.