



Title: Reporting Compliance Concerns

Responsible Department: Administration, Administration, Maryville Imaging, Surgery Center	Date Created: 07/01/2021
Approver(s): Board of Trustees, Corporate Compliance Committee, Keith Page (President), Medical Executive Committee (Manager)	Date Approved: 10/21/2021

SCOPE: This Policy applies to Anderson Healthcare, Anderson Hospital, Community Hospital of Staunton, Maryville Imaging, LLC, Anderson Medical Group, LLC, Anderson Surgery Center, Anderson Real Estate, LLC, Maryville Medical Services, LLC, Anderson Hospital Foundation, and Friends of Community Memorial Hospital (together “Anderson Healthcare”).

POLICY STATEMENT: Anderson Healthcare’s Compliance Program requires that all Covered Individuals comply with all applicable laws, rules, regulations, policies, and procedures. All Covered Individuals with a good faith belief that an activity is not in compliance has an obligation to report the activity pursuant to this Policy and the Code of Excellence/Code of Conduct. Anderson Healthcare strongly encourages open communication regarding compliance and ethical questions or concerns.

PURPOSE:

This Policy establishes procedures to ensure that all Covered Individuals know how to report compliance and ethical concerns.

DEFINITIONS:

“Chief of Compliance and Risk” or “CCR” means the individual designated by the President/CEO as the chief compliance officer and charged with the responsibility of coordinating the implementation of the Compliance Program.

“Code of Excellence/Code of Conduct” means the code setting forth the commitment of Anderson Healthcare to comply with all federal and state laws and the standards by which all Covered Individuals are required to conduct themselves in order to protect and promote organization-wide integrity.

“Committee” means the Anderson Healthcare Compliance Committee, which is charged with the responsibility of overseeing the implementation of the Compliance Program.

“Compliance Program” means Anderson Healthcare’s system-wide program addressing the compliance activities of Anderson Healthcare.

“Covered Individual” means any individual subject to Anderson Healthcare’s Compliance Program. Covered Individuals include Employees, Professionals, volunteers, students, contractors, consultants, suppliers, and vendors.



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“Employee” means an individual in the service of Anderson Healthcare who is working for salary or wages and the details of whose work Anderson Healthcare has the authority to control and direct.

“President/CEO” means the President and Chief Executive Officer of Anderson Healthcare.

“Professional” means an individual other than an Employee who is credentialed by Anderson Healthcare, including physicians, dentists, podiatrists, and allied health personnel, to the extent that the individual provides goods or services at or for Anderson Healthcare.

GUIDELINES/PROCEDURE:

A. What to Report

Covered Individuals *must* report *all* compliance and ethical concerns. Many aspects of Anderson Healthcare’s activities involve compliance and ethics. The list of compliance-related topics that may give rise to questions or reportable concerns includes, but is not limited to:

1. Discrimination of Patients or Employees
2. Harassment
3. Health and Safety
4. Drug Free Workplace
5. Conflicts of Interest
6. Employee Benefits
7. Handling of Hazardous Material and Infectious Medical Waste
8. Billing
9. Medicare Cost Reports
10. Kickbacks or Bribes
11. Stark Laws
12. Fraud, Waste, and Abuse
13. Medical Necessity
14. Patient Safety, Security, and Comfort
15. Confidentiality/Privacy of Patient Information
16. Security of Electronic Patient Information
17. Security of Employee Information
18. Emergency Treatment
19. Patient Rights
20. Quality Measures



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More information on each of those topics can be found in the Code of Excellence/Code of Conduct, Compliance Program, Employee Handbook, and policies and procedures.

B. How to Report

Covered Individuals may *anonymously* report compliance and ethical questions and concerns several ways:

1. Use the [Patient Safety/Compliance Hotline](#) located in the Quick Links section on the Anderson Healthcare intranet homepage;
2. Leave a confidential voicemail at 618-394-5362;
3. Submit a [Safety Pays](#) suggestion via the Quick Links section on the Anderson Healthcare intranet homepage;
4. Leave a Safety Pays suggestion in a Safety Pays collection box;
5. Submit an [Ethical Concern](#) form found under Miscellaneous Forms on the Anderson Healthcare intranet; or
6. Send intra-office mail to the Chief of Compliance and Risk in Administration.

Covered Individuals may also report compliance and ethical questions and concerns many other ways:

1. Contact the Chief of Compliance and Risk at BremerkampJ@AndersonHospital.org or 618-391-6410;
2. Contact the Privacy Officer at BrownAM@AndersonHospital.org or 618-391-6111;
3. Contact the Chief of Information Technology at WardM@AndersonHospital.org or 618-391-5899;
4. Contact the Chief of Human Resources at SteinmannR@AndersonHospital.org or 618-391-6431;
5. Contact the Chief of Quality at WardML@AndersonHospital.org or 618-391-6104;
6. Contact your supervisor, manager, Department Director, or Administrative Director; or
7. Contact the President of the Medical Staff.

For additional information regarding reporting privacy concerns, please see the Complaints, Privacy, Right to File policy.



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C. What Happens With Reports

Every reported concern is investigated. Confidentiality will be maintained to the extent possible; however, absolute confidentiality cannot be guaranteed. Disclosure of reported concerns to legal counsel or governmental authorities may be required.

Compliance investigations will be completed within 30 calendar days. In certain circumstances, it may be necessary to extend the investigation, but no longer than a total of 60 calendar days. When possible, a response will be provided to the individual(s) reporting the concern.

A summary of reported questions and concerns, investigations, and other activities is provided to the Committee and the President/CEO.

D. Retaliation

Covered Individuals shall not be subject to retaliation, discipline, or adverse or discriminatory action by Anderson Healthcare when acting in good faith to:

1. Report any concerns, potential wrongdoing, suspicious activity, or potential violations of the Code of Excellence/Code of Conduct;
2. Assist in any investigation; or
3. Participate in any action brought against Anderson Healthcare including, without limitation, a civil action for violation of the False Claims Act or Illinois false claims laws.

However, anyone who intentionally provides false, misleading, or incomplete information will be subject to discipline up to, and including, termination.

Covered Individuals shall immediately report any suspected retaliation for reporting pursuant to this Policy to the Chief of Compliance and Risk or Chief of Human Resources.

Anyone who is determined to have engaged in retaliation for reporting pursuant to this Policy will be subject to discipline up to, and including, termination.

E. Whistleblowers

Covered Individuals or Anderson Healthcare Business Associates may disclose private health information (PHI) based upon a good faith belief that:



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1. A Covered Individual has engaged in conduct that is unlawful or otherwise violates professional or clinical standards; or
2. The care, services, or conditions provided by a Covered Individual potentially endangers another individual.

The disclosure of PHI may be made only to:

1. A health oversight agency or Public Health Authority (e.g. IDPH, OSHA) that is authorized by law to investigate or oversee the conduct of Anderson Healthcare;
2. The Joint Commission;
3. An attorney for the purpose of determining the disclosing whistleblower’s options. This rule applies only to whistleblower actions against Anderson Healthcare, not actions against another person; or
4. A reporting mechanism identified in Section B above.