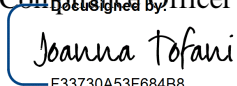


<b>Title:</b> Compliance Hotline	<b>Policy Number:</b> CMP06 V.04
<b>Issued For:</b> <input checked="" type="checkbox"/> BayCare Select Health Plans Inc.	<b>Original Issue Date:</b> 09/01/2018 <b>Select one below and input date, if applicable:</b> <input checked="" type="checkbox"/> <b>Date Last Reviewed / Revised</b> 04/27/2021 <b>OR</b> <input type="checkbox"/> <b>Date Last Reviewed / No Revisions</b> <b>OR</b> <input type="checkbox"/> <b>New Policy / N/A</b>
<b>Issuing Department:</b> Compliance	<b>Effective Date:</b> 05/13/2021
<b>Approved and Owned by:</b> Joanna Tofani, Chief Compliance Officer  <small>E33730A53F684B8</small> <b>Signature</b>	<b>Date Approved and By Whom:</b> 05/13/2021 Compliance Committee

## I. **PURPOSE**

To ensure that BayCare Select Health Plans, Inc. (BayCare Select) has established a policy to provide a Compliance Hotline (the Hotline) through which all Workforce members, members, FDRs, providers, and individuals serving on BayCare Select's Board of Directors (individually and collectively, the Board) may anonymously report suspected or actual Compliance Violations, such as fraud, waste, and abuse, HIPAA privacy and security violations, criminal activity, or illegal or unethical conduct occurring within BayCare Select, and to promptly investigate such reports. The purpose of this policy is to provide guidelines and responsibilities relating to the implementation and use of the Hotline.

## II. **SCOPE**

This policy applies to all Workforce members, members, FDRs, providers, and the Board.

## III. **DEFINITIONS**

**CMS:** The Centers for Medicare & Medicaid Services. This is the agency within the Department of Health and Human Services (HHS) that is responsible for directing the national Medicare program.

**Compliance Violation:** For the purpose of this policy, a compliance violation is an activity that results or may result in the violation by either an internal or external individual/entity of any type of applicable law or regulation, the Corporate Compliance Program, the Code of Conduct, or certain Policies and Procedures, whether deliberate or unintentional. These could include activities such as, but not limited to:

- Operational errors or failures (systems or processes) that result in actual or potential non-compliance and/or impact to beneficiaries, clients, customers, or vendors (i.e. untimeliness, inaccurate data, late payment, website errors/ functionality issues, etc.)
- Violation of regulatory requirements or guidelines
- Fraud, waste, or abuse (FWA)
- Unethical behavior
- Improper accounting practices
- Breach of confidentiality/privacy
- Theft or improper use of BayCare Select assets
- Misuse or improper access to or disclosure of protected health information
- Discrimination, harassment, or retaliation
- Falsifying documents
- Kickbacks, inducements, or other illegal remuneration
- Improper employment practices
- Conflict of interest
- Improper marketing or advertising activities
- Attempts to conceal a violation or evidence of a potential violation
- Failure to report a known or suspected violation or evidence of a potential or actual violation

**First Tier, Downstream, or Related Entity (FDR):** Has the meaning of the respective terms as defined in the Medicare Managed Care Manual, Chapter 21 – Compliance Program Guidelines and Prescription Drug Benefit Manual, Chapter 9 – Compliance Program Guidelines.

**Fraud, Waste, and Abuse:** Have the meanings of the respective terms as defined in the Medicare Managed Care Manual, Chapter 21 – Compliance Program Guidelines and Prescription Drug Benefit Manual, Chapter 9 – Compliance Program Guidelines.

**Good Faith:** Acting in “Good Faith” means having an honest and reasonable belief that the information being reported is true and accurate at the time of reporting, within the context of notifying BayCare Select that an actual or suspected violation of law or policy or other instance of non-compliance or related misconduct may have occurred.

**Retaliation:** Retaliation is defined as any adverse action that may include but is not limited to the following conduct: discharge, demotion, suspension, harassment, denial of promotion, transfer, or any other action that discriminates against the employee.

**Workforce:** For purposes of this policy a workforce member includes all current employees including, permanent, temporary, full-time, and part-time employees, volunteers (e.g. unpaid interns), consultants, who have job duties related to BayCare Select’s Medicare Advantage (Part C) and / or Prescription Drug (Part D) business, and members of the governing body (i.e., Board of Directors) responsible for oversight of the Medicare program under the director control of BayCare Select, whether or not they are paid by BayCare Select.

#### **IV. OWNERSHIP**

The Chief Compliance Officer (CCO) is responsible for administration and oversight of this policy and procedure.

#### **V. POLICY**

- A. Workforce members, FDRs, providers, and members of the Board must promptly report, in Good Faith, known or suspected Compliance Violations of laws, regulations, or BayCare Select policies, including the Code of Conduct, as outlined in the CMP 20 Non-Retaliation / Duty to Report policy. BayCare Select members are encouraged to report Compliance Violations as well.
- B. The Hotline is just one of many ways to report Compliance Violations as is outlined in the BayCare Select Code of Conduct. The Hotline is the mechanism to be used to report Compliance violation if the individual reporting wishes to remain **anonymous**.
- C. BayCare Select does not intimidate, retaliate against or discipline any individual for reporting a Compliance Violation in Good Faith, as is outlined in the CMP20 Non-Retaliation / Duty to Report Policy and Procedure.
- D. Individuals shall not intentionally use the Hotline to make false allegations. The Compliance Hotline should be used only for reporting known or potential Compliance Violations and is not a means for reporting general complaints.
- E. BayCare Select contracts with an external, independent vendor to provide an anonymous and confidential Hotline, which can be accessed by telephone or website and used for reporting any compliance concerns, at any time.
  1. The Hotline telephone number(s) are:
    - **1-(833) 490-0002 (English)**
    - **1-(800) 216-1288 (Spanish)**
  2. The website address is:
    - **[www.lighthouse-services.com/baycare](http://www.lighthouse-services.com/baycare)**
- F. **Hotline Availability:** The Hotline is available 24 hours a day / 7 days a week.
- G. The Compliance Department manages oversight of the Hotline vendor.
- H. **Communication and Training:**
  1. The availability of the Hotline and how to access it is communicated, within 90 days of the date of hire and thereafter at least annually, to all Workforce members through BayCare Select's distribution of its Code of Conduct.

2. Information about the Hotline may be distributed to all stakeholders outlined in the scope of this policy and procedure in a manner as determined by the CCO or his or her designee. Additional means of communication include newsletters, policies, the Intranet, email, employee handbook, bulletin boards, the corporate website(s), educational materials, and any other means deemed appropriate.
- I. **Confidentiality:** Workforce members who have access to Hotline reports shall act with utmost discretion, integrity, and confidentiality in the handling of such information in accordance with CMP08 Compliance Violations Investigations, Prompt Responses and Reporting.
  - J. **Confidential Hotline:** Individuals using the Hotline are not required to disclose their identity and will be assured of anonymity. BayCare Select's Hotline makes no attempt to identify any individual who reports anonymously. If the individual does disclose his/her identity, BayCare Select will attempt to maintain confidentiality to the fullest extent possible and as permissible by law.
  - K. **Compliance Violation Categories:**
    1. BayCare Select has established compliance allegation categories (for example, fraud waste and abuse, financial issues, theft, unethical conduct, workplace violence, etc.) and priority levels (A - Urgent, B - Serious, and C - Important) for the Hotline vendor to use to classify and prioritize each incoming Hotline call or website submission.
    2. For those calling the Hotline, operators elicit the most complete information possible from the caller about the issue, appropriately document the caller's reported information, categorize the call per the established allegation category, and assign a priority level. The operator also informs the caller of how to access the Hotline system to obtain the ongoing status of the reported allegation.

## **VI. PROCEDURES**

### **A. Intake, Investigation, and Resolution of Issues**

1. When a Compliance Violation is reported via the Hotline, the Hotline vendor promptly sends the CCO (or designee) a report of all information collected from the caller regarding the issue.
2. The Compliance Department is responsible for the intake, processing, and resolution of all issues reported via the Hotline, and works in conjunction with the CCO and/or BayCare Select's Special Investigations Unit (SIU) as deemed necessary to investigate and resolve reported allegations in a timely manner.

3. Upon receipt of an issue from the Hotline vendor, Compliance accesses the vendor's Hotline database system and triages the report. When necessary and appropriate, Compliance addresses the issue and / or refers and / or assigns the case appropriately for investigation, based on the allegation.
4. The case may be handled by a number of investigators which include the CCO, assigned by the CCO to his / her compliance designee, Team Resource staff member, BayCare Select's SIU, or other individual as deemed appropriate. The case information is furnished to the appropriate responsible party.
5. Any case regarding HIPAA Privacy or Security requirements is referred to the CCO/Privacy Officer for investigation and will be handled in accordance with Privacy and Security policies and procedures in conjunction with BayCare Select System HIPAA staff and policies and procedures.
6. The assigned investigator(s) will:
  - a. Conduct a thorough investigation into the allegation, in accordance with CMP08 Compliance Violations, Prompt Responses and Reporting policy and procedure and / or other applicable operational policy and procedure (i.e., Team Resources, SIU, etc.).
  - b. Document investigation notes, the final determination regarding the allegation, and any corrective actions and provide a case file containing all of this information to the CCO (or designee).
7. On a regular basis, the CCO oversees each investigation to monitor the quality and timeliness of the investigation and ensure each investigation is conducted in a manner consistent with CMP08 Compliance Violations Investigations, Prompt Responses and Reporting.
8. After receiving the case file from the assigned investigator(s), the CCO (or designee) accesses the Hotline vendor's database system and enters relevant investigation details and resolution regarding the case. Documentation entered in the Hotline vendor's database will exclude confidential information, to protect BayCare Select, the identity of the reporting individual, and the names of any involved parties.
9. The CCO and / or his or her designee (i.e., Compliance Analyst) maintains a record of each Hotline allegation received. The record contains, at a minimum, the following information:
  - a. Report Date and Number

- b. Caller Name (if revealed)
  - c. Allegation Type and Priority
  - d. Referral Source
  - e. Case Status (open/closed)
  - f. Summary of Allegation
  - g. Determination and Corrective Action(s)
10. On a monthly basis, the Hotline vendor sends the Compliance Department a report summarizing all issues received in the previous month. The CCO (or designee) reviews this report and compares it to the Compliance Department records of Hotline allegations received, to ensure all calls to the Hotline are tracked, trended, and addressed timely.

#### **B. Monitoring, Reporting, and Record Retention**

- 1. Compliance periodically monitors the operations of the Hotline to verify proper functioning. This includes, but is not limited to, annual testing of the Hotline telephone number, assessing the performance of the Hotline vendor, and reviewing corrective actions taken in response to Hotline calls or submissions.
- 2. The CCO reports Compliance Hotline activity to the Compliance Committee on at least a quarterly basis.
- 3. The CCO also has the responsibility and authority to communicate Hotline matters to the Board of Directors on at least an annual basis, or more frequently if needed.
- 4. Documentation to support actions taken in response to Hotline calls or submissions is maintained in the Compliance Department in accordance with CMP13 Health Plan Document and Data Retention policy and procedure.

#### **VII. REGULATORY REFERENCES / CITATIONS**

Medicare Managed Care Manual, Chapter 21 – Compliance Program Guidelines and Prescription Drug Benefit Manual, Chapter 9 – Compliance Program Guidelines, Section 50.4  
42 C.F.R. 422.503(b)(4)(D)  
42 C.F.R. 423.504(b)(4)(D)  
42 CFR §423.505(d)

# **VIII. RELATED POLICIES & PROCEDURES**

BayCare Select Code of Conduct  
 CMP05 Compliance Education and Training  
 CMP08 Compliance Violations Investigations, Prompt Responses and Reporting  
 CMP13 Health Plan Document and Data Retention  
 CMP20 Non-Retaliation / Duty to Report

# **IX. ATTACHMENTS**

None

## **VERSION & REVIEW HISTORY:**

Version #	Action (Original Issue, Reviewed, Revised)	Date Action Taken	Brief Summary of Revision, if applicable	Individual Taking Action	Effective Date	Date Approved and By Whom:
01	Original Issue	09/01/2018	N/A	Unknown	09/01/2018	Unknown
02	Revised	07/25/2019	Annual review; removed hotline vendor priority levels which are no longer used and outdated language related to disciplinary actions. No other substantive changes.	Paul Christy, CCO	08/01/2019	Larry Costello, President  08/01/2019
03	Revised	04/15/2020	Revision and rewrite of entire P&P.	Joanna Tofani, CCO	05/13/2020	Compliance Committee 05/13/2020
04	Reviewed	04/27/2021	Revised definition of Workforce Member.	Joanna Tofani, CCO	05/13/2021	Compliance Committee 05/13/2021