Compliance Reporting Policy

POLICY

The Detroit Wayne Integrated Health Network ("DWIHN") is committed to combating criminal activity or other illegal, unethical or wrongful conduct, regardless of whether such violations are intentional or not and follows strict guidelines in the event of any reported or suspected cases of criminal activity or other illegal, unethical or wrongful conduct. This Compliance Reporting Policy sets forth the means by which all suspected violations shall be reported.

PURPOSE

The purpose of this policy is to (a) provide guidance for reporting actual or suspected violations of federal and state law or regulations as set forth in DWIHN's Compliance Plan Policy, and (b) to address possible concerns regarding retaliation for reporting. This policy should be read in conjunction with the DWIHN Compliance Plan.

APPLICATION

1. The following groups are required to implement and adhere to this policy: DWIHN Board, DWIHN Staff, Contractual Staff, Access Center, Network Providers, Crisis services vendor, Credentialing Verification Organization (CVO).
2. This policy serves the following populations: Adults, Children, I/DD, SMI/SEI, SED, SUD, Autism.
3. This policy impacts the following contracts/service lines: MI-HEALTH LINK, Medicaid, SUD, Autism, Grants, General Fund.
1. Reporting of Known or Suspected Violations. An individual, who may, in the course of their activities, observe actual or suspected violations of federal or state laws or regulations, including possible criminal activity or other illegal, unethical or wrongful conduct, regardless of whether such violations are intentional or not, are required to promptly report such situations. It is important that such situations be brought to the attention of the DWIHN Corporate Compliance Office promptly, in order that an appropriate investigation may be undertaken and resolution achieved.

2. Non-Retaliation/Non-Retribution. No individual who in good faith reports an actual or suspected violation of law as set forth in the Compliance Plan shall experience any retaliation or retribution as a result of such reporting, regardless of whether or not, upon investigation, a violation is found to have occurred. Retaliation, itself, is a violation of the DWIHN Compliance Plan, which will not be tolerated and must be reported immediately.

   1. Reports of retaliation or retribution will be investigated thoroughly and expeditiously and will, if appropriate, result in disciplinary action, up to and including termination of employment.

   2. A reporting party will not be afforded the protection of this non-retaliation/non-retribution policy if his or her allegation of a violation was knowingly fabricated, knowingly exaggerated, or otherwise distorted to adversely affect another person or to protect the reporting party.

3. An individual shall report all compliance concerns, including observed actual or suspected violations of federal or state laws or regulations, in any of the following ways:

   1. Directly to their supervisor or the Corporate Compliance Officer.

   2. To the DWIHN Compliance Hotline (313-833-3502), for anonymous and confidential reporting to the extent provided by law.

   3. In writing to the Corporate Compliance Officer:

      Attn: Corporate Compliance Officer
      Detroit Wayne Integrated Health Network
      707 W. Milwaukee, Detroit MI, 48202

   OR

   4. VIA EMAIL: compliance@dwihn.org

   5. to the state's Office of Inspector General:
      Michigan Department of Health and Human Services
      Office of Inspector General
      PO Box 30062
      Lansing, MI 48909
      Ph: 855-MI-Fraud (643-7283).

   6. All complaints will be investigated. If any questions arise concerning whether any particular action is proper under the Compliance Plan, or other DWIHN compliance policies, they should be brought to the employees’ supervisor or the Corporate Compliance Officer for clarification. If for any reason an individual is uncomfortable in bringing his or her compliance issue or
question to the Corporate Compliance Officer (e.g., the questioned conduct involves the Corporate Compliance Officer or someone under the Corporate Compliance Officer’s direct supervision) the issue may be reported through use of the **DWIHNS Compliance Hotline** (313-833-3502), or otherwise brought directly to the attention of the Deputy General Counsel, the President/CEO, or the Board Chairperson

**QUALITY ASSURANCE/IMPROVEMENT**

DWIHN shall review and monitor contractor adherence to this policy as one element in its network management program, and as one element of the QAPIP Goals and Objectives.

The quality improvement programs of the direct contractors and their subcontractors must include measures for both the monitoring of and the continuous improvement of the programs or processes described in this policy.

**COMPLIANCE WITH ALL APPLICABLE LAWS**

DWIHN staff, contractors, and subcontractors are bound by all applicable local, state and federal laws, rules, regulations and policies, all federal waiver requirements, state and county contractual requirements, policies, and administrative directives, as amended.

**LEGAL AUTHORITY**

**RELATED POLICIES**

1. The Compliance Plan Policy

**CLINICAL POLICY**

NO

**INTERNAL/EXTERNAL POLICY**

EXTERNAL

Approval Signatures

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<tr>
<th>Step Description</th>
<th>Approver</th>
<th>Date</th>
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<tr>
<td>Final Approval Policy</td>
<td>Eric Doeh: President and CEO</td>
<td>01/2022</td>
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<tr>
<td>Stakeholder Feedback</td>
<td>Allison Smith: Project Manager, PMP</td>
<td>01/2022</td>
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<td>Director Review</td>
<td>Yolanda Turner: Legal Counsel</td>
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