Whistleblower Policy

PURPOSE

To implement a compliance program that promotes the highest standard of ethical and legal conduct.

To support positive employee relations and morale by promoting ongoing open communication between supervisors and their employees.

To allow employees to express their problems, concerns, and opinions on any issue, without fear of retaliation or retribution, prior to seeking resolution outside the Clifford Beers Clinic.

POLICY APPLICABILITY & SCOPE

The policy applies to all members of the Clinic, including, the Board of Directors, all employees, contractors, volunteers, and interns. The scope includes reports of any actual or suspected compliance issues or violations, including any violation of law, regulation, Clinic policy, Clinic Code of Conduct, Clinic contractual obligations, or billing fraud, waste, or abuse.

Examples of what to report to on:

Legal Issues
Violations of clinic policy
Inappropriate billing
HIPAA privacy and security concerns
Improper documentation practices

POLICY

The Compliance Department will maintain an “open door policy” to allow staff or Board members to report problems and concerns and will act upon the concern promptly and in the appropriate manner. The Compliance Hotline 203-777-8648 x 2402, compliance hotline form, and compliance email, compliance@cliffordbeers.org, are designed to permit staff or Board members to submit compliance issues/concerns anonymously or in confidence, to report problems and concerns, or to seek clarification of compliance-related issues.

All staff or Board members are responsible for promptly reporting actual or potential wrongdoing, including an actual or potential violation of law, regulation, policy or procedure. Reports may be made verbally or in writing, and may be made anonymously. Any Board member or staff who receives such a report must communicate that report to the Compliance Officer once they become aware of the issue. Reports will be kept confidential to the extent possible, consistent with the need to conduct an adequate investigation. Any allegations that prove false and to have been made maliciously or knowingly to be false, may lead to disciplinary action.

The Clinic ensures that there will be no retaliation – including intimidation, coercion, adverse employment action, or harassment – directed against any staff or Board member for:
making a good faith report of a serious or non-serious incident of non-compliance or suspected non-compliance or, for participating in any related investigation. Any retribution, retaliation or harassment will be met with disciplinary action.

Complaints or reports of retaliation should be made to whichever of the following the individual feels most comfortable utilizing: Chief Executive Officer, his/her Director, Managers, a member of the Office of Talent Management (Human Resources), the Compliance Officer, or to the Compliance Hotline.

Staff and Board members cannot exempt themselves from the consequences of wrongdoing by self-reporting, although self-reporting may be taken into account in determining the appropriate course of action.

DEFINITIONS

Code of Conduct: A set of rules outlining the social norms, rules, and responsibilities of, or proper practices for, an individual, party, or organization.

False Claims Act (FCA): Institutes civil and criminal penalties for submitting false or fraudulent claims to the federal government.

Fraud, Waste & Abuse: Billing practices and payments that do not conform to claim and reimbursement rules. Examples include medically unnecessary services, improper billing codes, and fraudulent billing for services not provided.

Qui tam: Legal term for the mechanism in the federal False Claims Act that allows persons and entities with evidence of fraud against federal programs or contracts to sue the wrongdoer on behalf of the Government. A qui tam action is one brought under the False Claims Act by a private plaintiff (relator) on behalf of the Federal Government (rather than by the Government itself).

Staff: Board Members (“Governing Body”), all CBC employees, contractors, interns, volunteers, suppliers, independent contractors, and interns (“Staff”) associated with the Clinic.

PROCEDURE

Knowledge of actual or potential wrongdoing, misconduct, or violations of the clinic policy and code of conduct must be reported immediately to the Compliance Officer or the compliance hotline.

All managers must maintain an open-door policy. They must proactively assure their staff that the organization encourages the reporting of problems and that there will be no retaliation, retribution, or harassment for doing so.

Confidentiality regarding employee concerns and problems will be maintained at all times, insofar as legal and practical, informing only those personnel who have a need to know.