
 <p>HAWAII HEALTH SYSTEMS CORPORATION <i>Quality Healthcare for All</i></p> <p style="text-align: center;">PROCEDURE</p>	<p>Department:</p> <p style="text-align: center;">Corporate Compliance</p>	<p>Policy No.</p> <p style="text-align: center;">CMP 0004B</p>
		<p>Supersedes Policy No.</p>
<p>Subject:</p> <p style="text-align: center;">COMPLIANCE HOTLINE AND OTHER INTERNAL METHODS OF REPORTING NONCOMPLIANCE PROCEDURE</p>	<p>Approved By:</p>  <p>By: Edward N. Chu Its: HHSC President & CEO</p>	<p>Approved Date:</p> <p style="text-align: center;">April 23, 2026</p>
		<p>Last Reviewed:</p> <p style="text-align: center;">April 23, 2026</p>

I. PURPOSE:

To establish and maintain confidential, accessible, and reliable reporting mechanisms that enable employees, medical staff, contracted providers, students, board members, vendors, agents, and volunteers to report suspected fraud, waste, abuse, or noncompliance with policies, laws, or regulations. This procedure also ensures that individuals can seek guidance on compliance-related questions or concerns without fear of retaliation.

II. PROCEDURES:

A. Reporting Mechanisms

1. Hotline Reporting
 - a. HHSC maintains a confidential telephone and email hotline available 24/7.
 - b. Hotline information is posted prominently throughout HHSC facilities and on the HHSC website.
 - c. Calls are answered by a dedicated third-party vendor trained to receive compliance-related reports.
2. Posters and Written Communications
 - a. Posters and flyers promoting the hotline and other internal reporting methods will be displayed in all HHSC facilities and updated regularly.
3. Direct Reporting
 - a. Reports may be made directly to Regional Compliance Officers, Regional Chief Executive Officers, Hospital Administrators, Chief Compliance and Privacy Officer or other Compliance staff in person, by email or by mail.
4. Regional Incident Management Systems
 - a. Noncompliance concerns may also be submitted through regional incident management systems.

B. Examples of Reportable Concerns

1. Billing and Coding Practices
 - a. Billing for services not rendered
 - b. Upcoding or unbundling of services
 - c. Inaccurate or incomplete medical record documentation
2. Patient Care and Safety
 - a. Providing care without appropriate credentials or supervision

- b. Falsification of patient records or documentation of services not performed
 - c. Unsafe or unethical clinical practices
 - 3. Privacy and Security
 - a. Unauthorized access, use, or disclosure of protected health information (PHI)
 - b. Failure to secure medical records or electronic systems
 - 4. Conflicts of Interest
 - a. Personal or financial interests influencing professional decisions
 - b. Accepting gifts, favors, or payments from vendors or patients
 - 5. Fraud, Waste, and Abuse
 - a. Misuse of organizational resources or funds
 - b. Submitting false information on timekeeping, expense reports, or other records.
 - 6. Workplace and Ethical Concerns
 - a. Retaliation against individuals who report concerns in good faith
 - b. Harassment, discrimination, or other violations of organizational policy

C. Confidentiality

- 1. HHSC will make every reasonable effort to protect the identity of the reporters.
- 2. Anonymous reporting is permitted, although providing contact information is encouraged to facilitate a thorough investigation.

D. Non-Retaliation

- 1. Individuals who report concerns in good faith will not be subject to intimidation, retaliation, or any adverse action.

E. Investigation of Reports

- 1. All reported concerns will be documented and investigated promptly in accordance with HHSC compliance procedures.
- 2. Non-compliance-related reports will be forwarded to the appropriate department.
- 3. Reporters will be informed of investigation outcomes to the extent permitted by confidentiality requirements.

F. Retention

- 1. Records shall be retained for a minimum of seven years from the date of resolution, unless a longer period is required by law, regulation, contractual obligation or litigation hold.
- 2. Records subject to a legal hold or government investigation shall not be destroyed until the hold has been formally released.

G. Education and Awareness

- 1. Training will be provided on the use of reporting mechanisms and protections under applicable non-retaliation laws.
- 2. Hotline contact information and the reporting email will be displayed throughout HHSC facilities.

III. APPLICABILITY:

This procedure applies to all HHSC employees, medical staff, contracted providers, vendors, board members, agents, volunteers and students.

IV. REFERENCE:

- HHSC Policy CMP 0004A.