I. PURPOSE: To establish a Disclosure Program for covered persons to foster open communication that enables HHSC to identify and respond to compliance issues and inquiries.

II. POLICY STATEMENT: HHSC will develop and maintain a Disclosure Program to include reporting mechanisms and procedures for covered persons to disclose and report to the Chief Compliance and Privacy Officer, Regional Compliance Officers (RCO), or other designated individual(s) designated by HHSC any identified issues or questions associated with HHSC policies, conduct, practices, or procedures with respect to a federal health care program believed by the individual to be a potential violation of criminal, civil, or administrative law.

III. DEFINITIONS:

Covered Persons: Covered Persons includes all owners, officers, directors, employees, medical staff members, contractors, subcontractors, agents and other persons who provide patient care items or services or who perform billing or coding functions on behalf of HHSC and physicians with active medical staff privileges at HHSC.

Covered Persons does not include part-time or per diem employees, contractors, subcontractors, agents, and other persons who are not reasonably expected to work more than 160 hours per year, except that any such individuals shall become Covered Persons at the point when they work more than 160 hours during the calendar year.

Designated Individuals: Other designated individuals include regional chief executive officers, senior managers, department managers, nursing or department supervisors such that an individual may disclose and report outside of the individual’s chain of command.

Disclosure Program: A program that provides mechanisms for reporting concerns and potential violations of various compliance policies, practices, and/or criminal, civil, or administrative law.

Federal health care program: Includes any plan or program that provides health benefits, whether directly, through insurance, or otherwise, which is funded directly, in whole or in
part, by the United States Government or a state health care program. Examples of federal health care programs are Medicare, Medicaid, Tricare and the Veterans programs.

IV. POLICY

A. Chief Compliance and Privacy Officer (CCPO) will develop procedures and maintain internal reporting mechanisms for a disclosure program. Refer to Policy CMP0004 "Hotline and other Internal Methods of Reporting Noncompliance."

B. All Covered Persons are required to immediately report in good faith to the CCPO, RCO, or other designated individual(s), suspected violations of any federal health care program requirements or of HHSC’s own policies and procedures.

C. All individuals have the right to use HHSC’s Disclosure Program and will not be subject to retaliation or retribution. Refer to Policy CMP0018 "Non-Retaliation and Non-Retribution."

D. HHSC shall maintain, to the extent possible and allowed by law, the confidentiality and anonymity of suspected noncompliance disclosures.

E. HHSC shall conduct good faith inquiries and/or internal reviews into the allegations set forth in a disclosure to ensure that proper follow-up is conducted.

F. Individuals may be subject to appropriate disciplinary actions for failing to report noncompliance.

G. The CCPO shall report on the status of material compliance-related concerns to the President and Chief Executive Officer, the Audit and Compliance Committee of the HHSC Board of Directors, the Corporate Compliance Committee, and the HHSC Board of Directors.

V. APPLICABILITY: This policy applies to all covered individuals within HHSC.