



Reporting Suspected Non-Compliance
Subject: Compliance Monitoring & Oversight
Policy Number: BPS CMO- 002

PURPOSE

The purpose of BPS CMO 002 is to provide (1) a statement of Bluestone's (BPS) policy with respect to reporting suspected instances of non-compliance, and (2) procedures to ensure Bluestone's practices are consistent with its stated policies.

SCOPE

This policy applies to all *covered persons of Bluestone Physician Services, P.A., Bluestone National, LLC, and Bluestone Physician Services Wisconsin, and its subsidiaries and affiliates, (collectively, Bluestone Physician Services (BPS)).

DEFINITION

*Covered persons means: (a) all owners who are natural persons, officers, board members, and employees of Provider; (b) all contractors who furnish patient care items or services or perform billing or coding functions on behalf of Provider; and (c) all physicians and other non-physician practitioners who are members of Provider's active medical staff.

POLICY

Bluestone Covered Persons are required to report to the Compliance Officer any potential or suspected violations of criminal, civil, or administrative law related to the Federal health care programs or any issues or questions associated with the BPS Compliance Plan, Bluestone's Code of Conduct, Policies, and Procedures, and/or any other applicable BPS requirements. Bluestone shall provide the necessary infrastructure to facilitate such reporting, including a confidential compliance hotline that allows such individuals to report suspected non-compliance anonymously and without fear of retaliation.

PROCEDURE

A. Reporting Suspicions of Non-Compliance



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1. Reporting Required. BPS Covered Persons must report any activity, practice, or arrangement that the individual in good faith believes violates or may violate any laws or regulations, Bluestone's Compliance Plan, BPS Code of Conduct, Policies and Procedures, or other applicable requirements.
 2. Manner of Reporting. BPS Related Individuals are encouraged to report suspected Compliance Program violations in any of the following ways:
 - A. To the Compliance Officer; General Compliance email at Compliance@Bluestonemd.com or phone: 651-677-8311;
 - B. Human Resources at;
 - C. To the individual's direct supervisor or another member of BPS leadership (if this individual alone receives a report of a suspected Compliance Program violation, they must immediately report the suspected Compliance Program violations to the Bluestone Compliance Officer); or
 - D. Any member of management at the Company;
 - E. To the anonymous BPS Compliance Hotline.
 - a. The Hotline is available 24 hours a day, 7 days a week, by calling at 800-928-0084 (Organization pin: 131274 / site ID: 1) or submit a hotline report online portal Complyline.com.
 - F. The Corporate Compliance Officer and the Compliance Department are responsible for formally establishing, maintaining, and publicizing an anonymous Compliance Hotline and other alternative communication routes. The Compliance Line telephone number, online reporting, and other alternative communication routes are readily accessible and widely publicized throughout the Organization.
- B. Form of Report.
1. Reports of suspected Compliance Program violations may be made in writing or orally.
 2. Written reports include reports made via regular mail or e-mail and sent to any individuals or locations listed in **Section .A.** above.



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3. Oral reports include reports made in person or via telephone. They may be made to Bluestone's Confidential Compliance Hotline or at Complyline.com. Individuals do not need to provide their names when making a report, although they are encouraged to do so to facilitate any appropriate or necessary follow-up.

4. Anonymity. Reports (whether written or oral) may be made anonymously. However, individuals are encouraged to identify themselves when reporting, as it often is easier to assess the issues or concerns raised in a report when there is the ability to ask the reporting individual follow-up questions. At no time is the individual pressured to reveal themselves.

C. Documentation.

1. The Compliance officer, or designee, shall record all reports, disclosures, and investigations (whether or not related to a potential violation of criminal, civil, or administrative law related to the Federal healthcare programs) in the Compliance Tracking system within two business days of receipt of the disclosure, or as outlined by the Corporate Integrity Agreement. The matter is thoroughly investigated, documented and resolved, including reporting to outside agencies, before closing the matter in the compliance tracking system, ensuring appropriate follow-up is conducted. The Compliance Officer, or his/her designee, shall maintain copies of any written or oral reports submitted according to this policy in the Compliance Program tracking system, which includes electronic files.

- a. The compliance tracking system shall include the following information:
 - i. A summary of each disclosure received (whether anonymous or not),
 - ii. The date the disclosure was received,
 - iii. The individual or department responsible for reviewing the disclosure,
 - iv. The status of the review,
 - v. Any corrective action taken in response to the review, and
 - vi. The date the disclosure was resolved.



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2. Final copies of work papers, notes, and other documentation generated in connection with every written or verbal report submitted concerning suspected incidences of non-compliance shall be maintained in the Compliance Program tracking system, which includes electronic files.

3. The Bluestone Compliance Officer shall keep confidential (to the extent possible) the identity of the person(s) who report suspected Compliance Program violations.

C. The Bluestone Compliance Officer shall inform the CEO and the Compliance Committee, as part of his or her regular reporting obligations, regarding any action taken in response to reported Compliance Program violations that have been verified through investigation to be compliance violations.

D. All documentation enumerated above, including electronic documentation, shall be maintained in the Compliance Program tracking system, consistent with Bluestone's document retention policies.

ENFORCEMENT

All staff affected by this policy are expected to be familiar with the basic procedures and responsibilities created by this policy. Failure to comply with this policy will be subject to appropriate performance management under all applicable policies and procedures, including termination.

Related Policies and Procedures

- [BPS Code of Conduct](#)
- [BPS RCI-001](#) - Responding to Compliance Issues, Subject: Reports of Suspected Compliance Program Violations: Confidentiality
- [BPS RCI-002](#) - Non Retaliation: Reports of Suspected Compliance Program Violations, Subject: Responding to Compliance Issues
- [BPS RCI-003](#) - Investigation of Compliance Violation Reports, Subject: Responding to Compliance Issues



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- [BPS HE-004](#) - Duty to Report Suspected Non-Compliance, Subject: Hiring, Employment, & Contracting

RESOURCES

- [1] 42 C.F.R. 425.300.
- [2] The OIG provides detailed compliance program advice, including "best practices" at its website, www.oig.hhs.gov/compliance , including specific advice for separate types of entities. A review of compliance guidance posted here should regularly be undertaken to ensure a complete, up-to-date understanding of compliance requirements.
- [3] 42 C.F.R. 425.314.
- [4] Established under Section 3022 of the ACA, amending Title 18 of the Social Security Act by adding Section 1899, et seq.
- [5] 76 Fed. Reg. 19528 (April 7, 2011), 76 Fed. Reg. 67802 (Nov. 2, 2011), 79 Fed. Reg. 72760(Dec. 8, 2014), 80 Fed. Reg. 32692 (June 9, 2015), and 81 Fed. Reg. 37950 (June 6, 2016).
- [6] Located at <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/index.html?redirect=/sharedsavingsprogram/> .

Approval History

Date (MM/YYYY)	Stakeholders	Name/Title
10/2/04	Exec. Compliance Committee	

Revision History

Date (MM/YYYY)	Revisions	Name/Title	Version
8/2024	DRAFT	Nanc MacLeslie, Compliance Team	DRAFT



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10/2/24	Approved	ECC	1
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¹ Prepared at the direction, request, and in furtherance of the purposes of a review organization and any and all information and documentation prepared in furtherance of this policy is confidential and should not be shared outside of Bluestone Physician Services or its Affiliates. Protected under Wis. Stat. 146.38 and Minn. Stat. 145.61et seq. and FL Stat 766.101. The information contained herein is provided for informational purposes only and does not constitute legal, medical, or professional advice. Further, these policies and procedures are subject to change without prior notice, and Bluestone makes no representation to reliance on users of outdated information. Users should check back here for updates regularly.