

PROCEDURE System_BP07

Subject:
System_BP07 Reporting a Questionable Practice

Effective Date:
September 2003

Applies to:
Houston Methodist Hospital, The Medical Center
Houston Methodist Baytown
Houston Methodist Clear Lake
Houston Methodist Continuing Care Hospital
Houston Methodist Sugar Land
Houston Methodist The Woodlands
Houston Methodist West
Houston Methodist Willowbrook
Houston Methodist Research Institute
Houston Methodist Corporate Division
Houston Methodist Global Health Care Services
Houston Methodist Institute for Academic Medicine
Houston Methodist Specialty Physician Group
Houston Methodist Primary Care Group
Houston Methodist Coordinated Care Organization

Date Revised: Sept. 2020

Originating Area:
Houston Methodist Business Practices Office

Target Review Date:
09/30/2023

I. GENERAL STATEMENT

The Business Practices vision is that all actions taken in the name of Houston Methodist are consistent with strong moral values, high ethical standards and the law. Any action that violates this vision is considered a Questionable Practice and should be reported as described in this procedure. All Houston Methodist employees and others associated with Houston Methodist are responsible for reporting Questionable Practices.

Questionable Practices need to be reported so that action can be taken to strengthen Houston Methodist and make Houston Methodist better. Reporting identifies issues that might not otherwise be raised and leads to resolution.

Reports of Questionable Practices are handled promptly, discreetly and professionally. All reports are thoroughly and timely investigated. Employees who report Questionable Practices in good faith are protected from retaliation by this Procedure and by federal and state laws.

II. DEFINITION

Questionable Practice - any action believed to violate the Business Practices Program vision that all actions taken in the name of Houston Methodist are consistent with strong moral values, high ethical standards and the law.

False Claim – any illegal claims for payment of government funds including improperly retaining overpayments made by the government. Claims for payment can be made only for medically necessary services that were actually performed. Claims cannot contain false or misleading

information. Diagnostic, procedural and billing codes are used to tell the payer what services were performed. The payer uses the codes to determine how much money to pay Houston Methodist. Therefore, the codes assigned must accurately represent the services provided. Medical records are used as evidence to support the bills Houston Methodist submits. Making a false statement in a medical record used to support billing can be a crime. Medical record documentation must follow all regulatory and accreditation requirements and professional standards. Under the federal False Claims Act and Texas False Claims laws, any person knowingly submits, or causes someone else to submit, illegal claims for payment of government funds is subject to government fines and penalties.

III. PROCEDURE

A. What to Report?

Houston Methodist employees and others affiliated with Houston Methodist shall report Questionable Practices. Some examples of Questionable Practices include:

- Disclosing confidential information without authorization
- Falsifying financial data
- Submitting a false Medicare or Medicaid claim
- Accepting personal gifts in return for Houston Methodist business
- Charting a procedure or medication that was not administered
- Sending offensive e-mails; downloading movies
- Coding procedures incorrectly
- Mistreating a patient, staff member or others associated with Houston Methodist

B. Report to Whom?

An individual who notices a Questionable Practice should first consider discussing the issue with his or her supervisor or other person in the individual's chain of command. Houston Methodist's ICARE values and blame-free reporting environment are meant to encourage an open exchange of ideas, even on difficult subjects, among every member of each work group. If a particular concern makes discussion with a supervisor inappropriate or very uncomfortable, the individual should contact:

1. Human Resources (for employment related issues)
2. [Entity Business Practices Officer](#) - Each Entity Business Practices Officer (see attached listing) is on call 24 hours a day and can be reached by calling the entity's associated page operator.
3. The Houston Methodist Business Practices Officer – The Houston Methodist Business Practices Officer (for the System) can be reached at 713-383-5124 during normal business hours or by calling the page operator at 713-790-2201 after hours.
4. *Business Practices EthicsLine* – The *Business Practices EthicsLine* toll free number is **1-800-500-0333**. The caller may be asked, but is not required, to give his/her name when reporting, and therefore, may remain anonymous. The caller will be given a tracking number for use in calling back about the status of an investigation or may access the reporting system directly at: **tmhs.myethicsline.com** The *Business Practices EthicsLine* is available 24 hours a day, 7 days a week, and 365 days per year.
5. Department of Health and Human Services (DHHS) Office of Inspector General and Texas Health and Human Services Commission's (HHSC) Office of Inspector – These government offices also accept reports of illegal claim activity.

Private parties who report illegal claim activities to the government are known as *qui tam* relators. *Qui tam* relators are able to bring actions under the False Claims Act and Texas law, and they may share in 15-30% of any proceeds from a False Claims judgment or settlement.

Employees who report illegal claim activity to DHHS or HHSC in good faith are protected from retaliation under the Business Practices Procedure and under federal and state laws. The False Claims Act, in particular, provides explicit remedies for retaliation against *qui tam* relators. Possible remedies include the reinstatement to a position with comparable seniority, two times the amount of back pay, interest on any back pay, and compensation for any special damages sustained as a result of the discrimination, including litigation costs and reasonable attorneys' fees.

Note: For assistance with end of life issues, individuals should follow their entity's process for requesting a biomedical ethics consultation.

C. Follow-up after Making the Report

1. If a caller has any question regarding the status of an investigation of a Questionable Practice or the thoroughness of an investigation, he/she should follow-up with the person to whom he/she initially reported, or choose another reporting option including calling the Houston Methodist Business Practice Office (713-383-5124).
2. If a report was made by calling the *Business Practices EthicsLine*, the caller may contact the *Business Practices EthicsLine* or the Houston Methodist Business Practices Office to check on the status of an investigation of a report using the tracking number given when the call was originally made. The caller may still remain anonymous, if desired.

A. Evaluation for Reporting to the Government or Other External Parties (including Plan Sponsors)

1. The Business Practices Officer will evaluate all founded reports to determine if the government and/or other external party should be informed regarding the matter and will determine the appropriate time frame and manner to make this report.

In consultation with the Department of Legal Services, The Business Practices Officer will determine the appropriate timeframe and manner to make any required disclosures to the government and/or other relevant external party.

IV. COUNCILS OR COMMITTEES REVIEWING OR APPROVING PROCEDURE:
Business Practices Committee

V. AUTHORITATIVE REFERENCES:

Department of Health and Human Services Office of Inspector General Compliance Program
Guidance for Hospitals

United States Code, Title 31, Chapter 37, False claims [31 U.S.C. §3729-33]

United States Code, Title 31, Chapter 38, False claims and statements; liability [31 U.S.C. §3802]

Texas Human Resources Code, Chapter 32. Medical Assistance Program

Texas Human Resources Code, Chapter 36. Medicaid Fraud Prevention

Texas Government Code, Chapter 531. Health and Human Services Commission

Medicare Managed Care Manual, Chapter 21 – Compliance Program Guidelines

VI. NAME OF APPROVING EXECUTIVE:

Signed Original on File _____
Marc L. Boom, MD
President and Chief Executive Officer

_____ Date Signed

Revision History **As required by ISO9001**

Revision	Date	Changed by	Revision Summary
1	08/18/2018	Judy Kuczynski	Update logo, entity name, phone number, hyperlink and dates.
2	9/30/2020	Cathy Meents, Michelle Bui	Updated Section D. to reflect examples of external reporting