## THE CHILDREN'S MERCY HOSPITAL CORPORATE COMPLIANCE EXTERNAL CONCERN REPORT FORM

## **CONFIDENTIAL**

## **Instructions:**

This form is used to report compliance concerns. The Corporate Compliance Department will investigate the reported compliance concern and if your contact information is provided we will provide you with the investigation findings.

Complete the following section in as much detail as possible.

Incident Date(s):				
Discovery Date(s):				
Patient Name and DOB:				
Incident Category:				
Billing/Reimbursement/Coding				
Conflict of Interest				
Contracts/Agreements and Contractual Relationships				
Fraud, Abuse or Waste				
Information Security				
Patient Privacy				
□ Research				
Incident Location:				
Adele Hall Campus		ICS		
Broadway		Kansas Campus		
College Boulevard		Joplin		
Crown Center		Northland		
Don Chisholm		Research Institute		
🗆 East		St. Joseph		
□ Home Care		West		
Wichita		Other:		
<b>Department(s) involved in the Incident:</b>				

Individual(s) Involved: Include name, department if unknown provide a description

Witness(es) to the Incident: Include name, department and contact information

Detailed Description of the Incident: Who, What, When and Where Additional Information can be located.

**Cause of the Violation (if known):** 

Actions Taken/Mitigation of Risk (if any):

Have you discussed this incident or concern any other CMH employee? If so, please provide their names, department and contact information.

Would you be willing to discuss this concern with the Compliance Officer or a Corporate Compliance Team Member?

\_\_\_ Yes

<i>Optional Information</i> Your Name:			-
Email:			
Telephone Number	Work	Home	□ Cell
Can we leave a message?			
Best time(s) and day(s) to call:			

*NOTE:* Every effort will be taken to ensure the confidentiality of this information. However, there may be circumstances where disclosure of this information may become necessary.

Although not required, you are encouraged to include your name and phone number where you can be contacted to ask additional questions and provide you with feedback. Inability of Compliance Department to contact you with follow-up questions can result in inability to fully investigate and address the concern.

If you choose not to include this information, it is suggested that you call the Compliance Officer within fifteen (15) days of submitting this report in order obtain an update on the report. You may reach the Compliance Officer at (816) 701-4570 during regular business hours.

## The Reporting Form can be returned through any of the avenues below:

(1) US Mail at: Compliance Officer Children's Mercy Hospital 2401 Gillham Road Kansas City, MO 64108
(2) Scanned and emailed to compliance@cmh.edu.