Policy Statement:
Renown Health ("Renown") employees are required to report any suspected compliance misconduct. In addition, others, including patients, visitors, Accountable Care Organization (ACO) participants and others are encouraged to report any suspected compliance conduct. Renown shall provide the necessary infrastructure to facilitate such reporting, including a confidential reporting line that allows employees to report suspected misconduct anonymously and without fear of retaliation.

Definition of Terms:
1. Good faith - Honesty; a sincere intention to deal fairly with others
2. Retaliation – any act of retribution in response to an actual or perceived wrong or injury
3. Wrongful conduct – any act that may violate any laws, regulations, or Renown’s Compliance Plan, Values, or policies and procedures.
4. Compliance’s document software – system used to input and track compliance issues.

Procedure:
1. Reporting Suspected Conduct.
   a. An employee should report any activity, practice or arrangement that the employee in good faith believes to be wrongful conduct to the Compliance Officer (775-982-5596), Department’s Compliance Liaison, the employee’s supervisor, or the Renown Health Confidential Reporting Line (800-611-5097).
Employee may also file a report on a form located on the Corporate Compliance web page on Inside Renown, Renown's intranet.

b. If a supervisor or Department's Compliance Liaison receives a report of suspected misconduct from an employee, the supervisor or compliance liaison must report the suspected misconduct to the Compliance Office within 24 business hours.

2. Form of Report.
   a. Reports of suspected misconduct may be made either in writing or orally.
   b. Written reports include reports made via regular mail or email. Such reports should be sent to the Corporate Compliance Officer or to the employee’s supervisor.
   c. Oral reports include reports made in-person or via telephone. Oral reports may be made to the Renown Health Confidential Reporting Line at 800-611-5097. The Confidential Reporting Line is operated by an independent third party and shall be available 24 hours a day, 7 days a week. An interview specialist will log the employee’s concern and assign a “reference number.” If the employee calls back and provides the reference number, he or she will be able to obtain an update on the status of the matter.
   d. Anonymity. Reports (whether written or oral) may be made anonymously. However, it is possible that the ability to thoroughly investigate a report may be limited if the reporting person cannot be contacted for further information; thus, the reporting person will be encouraged to call back at an agreed upon time.
   e. Renown maintains a position of non-retaliation regarding compliance concerns.

3. Timeliness.
   a. Upon receipt of a report concerning a compliance-related review, a Confidential Reporting Line report, or other information suggesting a possible compliance issue, the Compliance Officer or his/her designee will record the information in the Compliance Departments document software and start the investigation within one (1) business hours of receiving the report if the issue is determined to be high priority.

4. Investigators.
   a. The investigation of suspected misconduct shall be initiated and overseen by the Compliance Officer. The Audit and Compliance Steering Committee shall be available to provide assistance to the Compliance Officer, as needed.
   b. Depending on the nature and severity of the suspected misconduct, the Compliance Officer may utilize staff assistance, members of the Internal Audit or Human Resources department (as appropriate), and internal or outside legal counsel and auditors to assist in conducting an internal investigation.
   c. The Compliance Department Investigators shall follow its investigation processes as outlined in the Standard Work: Conducting an Investigation.
5. **Investigation.** In conducting an investigation, investigators for Renown shall, as necessary:
   a. take steps to secure, and prevent the destruction of, documents and other evidence relevant to the investigation;
   b. review relevant documents;
   c. review all applicable policies, procedures, law and regulations;
   d. interview persons with relevant information; and
   e. take all reasonable and necessary steps to stop any ongoing misconduct.

6. **Documentation.**
   a. Compliance Department’s document software will be updated as the investigation progresses. This will include:
      i. the nature of the problem;
      ii. the investigation procedures;
      iii. consistency with policy, the identity of the persons involved and the degree of culpability of said individuals; and
      iv. where appropriate, an estimate of the nature and extent of liability or overpayment due.
   b. Renown shall maintain copies of any documentation related to the compliance investigation within Compliance Department’s document software consistent with Renown’s document retention policies. This is to include any findings and recommended corrective actions, discipline or programmatic corrections.
   c. In connection with any internal investigation, Renown shall maintain in a confidential and secure fashion any document, whether electronic or hard copy, that are attorney-client communications or covered by the attorney-work product privilege. Any such documents should be appropriately labeled or stamped as attorney-client privileged or attorney work product and maintained consistent with the Renown document retention policy.

**References/Regulations:**

Renown.HRM.170 Open Door
Renown.CCD.550 Record Retention
Compliance Department Standard Work: Conducting an Investigation
Nevada Revised Statute (NRS) 357.240 – 250 Whistleblower Protections

**Contributors:**

Drew Williamsen, Manager of Compliance