Jade | HEALTH CARE MEDICAL GROUP
翡 翠 東 華 醫 師 協 會

SUSPECTED NONCOMPLIANCE / FRAUD REPORT FORM
To: Compliance Department
Jade Health Care Medical Group, 445 Grant Ave. Suite 200
San Francisco, CA 94108 FAX 415-217-4178

Today's Date _____ Date of Incident_____

Reported by (Your Name)*_____ Your contact #_____

Your Organization*_____

* This form can be completed and submitted anonymously, if necessary.

Type of Allegation: (Check all that apply)

☐ ID Card   ☐ Utilization   ☐ Medical Records
☐ Prescription/Pharmacy   ☐ Claims/Billing/Capitation   ☐ Credit Card
☐ Eligibility   ☐ Encounter/Data/Data Reporting   ☐ Financial
☐ Enrollment/Disenrollment   ☐ TPL/Co-Insurance/COB   ☐ Purchasing/Bidding
☐ Referrals/Denial   ☐ Credentialing/Licensing   ☐ Marketing
☐ Other

Fraud Involves: (Check all that apply)

☐ Member   ☐ Practitioner   ☐ Provider
☐ Jade Health Care Medical Group Team Member   ☐ Jade Health Care Medical Group Vendor
     ☐ Other

Name:_____ ID#:_____

Do you have documentation in your possession, which could be used as evidence? ☐ Yes   ☐ No

Is the documentation attached to this report? ☐ No ☐ Yes

Have you previously reported this? ☐ No   ☐ Yes to whom: _____

Describe the potential fraudulent activity (attach extra sheet, if necessary)**:**

Law Enforcement has been contacted?   ☐ Yes   ☐ No

Date Reported:_____ Report Number:_____

Contact Information:_____

Regulatory Agency contacted?   ☐ Yes   ☐ No

Date Reported:_____ Report Number:_____

Report Number:_____ Report Number:_____

Contact Information:_____

Resolution:

IMPORTANT

It is Jade Health Care Medical Group policy to carefully review every report of possible wrongdoing or violation of the compliance plan. It is also Jade Health Care Medical Group policy not to discipline anyone for providing any information that (s)he reasonably believes to be accurate and complete. However, anyone who intentionally provides false, misleading or incomplete information may be subject to discipline.

If you provided your name, it may be necessary for us to contact you for additional information and assistance. However, you may remain anonymous if you wish. If you have any questions, you may contact the Corporate Compliance Officer directly by telephone at 1-628-228 2720 .

Do Not Write In This Space/Compliance Use Only

Report #:_____
Received by Compliance:__/_____/_____