



Code of Conduct

Approved by the Umpqua Health Alliance Board Oversight
Compliance Committee on January 18, 2024



UMPQUA HEALTH

Message from the CEO.....	4
Compliance Department Commitments.....	5
Introduction.....	6
Commitment	6
Compliance and FWA Prevention Program	6
Ethics.....	6
Rules & Regulations	7
Management Responsibilities	7
Policies & Procedures	7
Conflict of Interests.....	7
Gifts & Gratuities.....	7
Relevant Laws.....	8
Health Insurance Portability and Accountability Act (HIPAA).....	8
Federal False Claims Act	8
(Federal FCA)	8
Oregon False Claims Act	9
(Oregon FCA)	9
Physician Self-Referral (“Stark Law”).....	9
Anti-Kickback Statute (AKS)	9
Exclusion Statute.....	10
Civil Monetary Penalties Law (CMPL)	10
Criminal Health Care Fraud Statue	10
Fraud, Waste, & Abuse (FWA)	10
Reporting.....	11
Duty to Report.....	11
Umpqua Health’s Compliance & FWA Hotline	11
Non-Retaliation	12
Accuracy of Records.....	12
Financial	12
Clinical Records	12



Billing and Claims.....	12
System & Resources	13
Respect.....	13
Confidentiality	13
Members & Patients	13
Business Practices	13
Licenses, Credentials & Exclusions.....	14
Cooperation.....	14
Trainings.....	14
Audits & Monitoring.....	14
Investigations	14
Remediation & Sanctions	15
Resources	15

Message from the CEO

Dear Employees and Partners,

Umpqua Health is dedicated to conducting its business with the highest standards of ethics. Over the past few years, Umpqua Health has devoted a substantial amount of time and resources in its Compliance and Fraud, Waste, and Abuse (FWA) Prevention Program. The cornerstone of this Program is the Code of Conduct. The document you are about to read will outline the compliance framework and ethical behaviors Umpqua Health promotes and expects. In today's healthcare environment, operating an effective Compliance and FWA Prevention Program is not a luxury, rather a prerequisite. For this reason, I sincerely ask you spend the time to learn the ethical conduct we expect of our employees and partners.



This Code of Conduct will be a resource for you; it will identify and set the standards of the ethical and legal arena in which we operate. At times, these requirements may appear counter intuitive; and for that reason, the Code of Conduct will be a consistent guide for you during your relationship with Umpqua Health.

If at any time during our relationship you have questions or concerns, please do not hesitate to consult our Compliance Department. You can also contact our Compliance & FWA Hotline, provided by a third-party vendor, at (844) 348-4702, or www.umpquahealth.ethicspoint.com. This hotline will give you the option to report anonymously if you choose to. There may be times when individuals may not wish to report issues out of a fear of possible retaliation. Rest assured it is our commitment that there will be no retaliation against anyone who reports a violation or a concern.

Umpqua Health truly values and appreciates its employees and partners for embracing the organizational commitment of compliance and ethics. The success of the program will not be derived from one individual, but rather the commitment and collaboration from all of Umpqua Health's employees and partners. Sometimes doing the right thing is not easy; however, it is our integrity that gives us the strength to get it right.

Sincerely,

Brent Eichman, MBA, CHFP
Chief Executive Officer

Compliance Department Commitments

The Compliance Team will strive to operate and conduct itself with the following principles in mind:

- We are a resource for the individuals and organization we serve.
- We honor and understand mistakes, and desire to create an environment where we all can learn from them.
- We are mindful of organizational resources, including staff time.
- We engage to educate and support.
- We strive for honesty, transparency, and fairness.
- We welcome feedback and believe it is a necessity for continuous growth.
- We recognize that flexibility is imperative, and we are not rigid in process and thinking.
- We will provide information in a clear and concise manner.

Introduction

Umpqua Health has developed this Code of Conduct collaboratively with the Umpqua Health Alliance Board of Directors and management to serve as a guide for its employees and partners. The Code of Conduct is reviewed for compliance and formally approved annually by the Board of Directors. It will identify the ethical and compliant conduct Umpqua Health expects from all individuals. The standards outlined in the Code of Conduct and other policies cannot be waived or disregarded.

Healthcare is a complex industry and while this document is not a comprehensive list of what is required from employees and partners, it provides a brief discussion of some of the expectations.

Please take the time to carefully review this Code of Conduct.

Throughout this document the term “Employee,” encompasses employees, board members, contractors, volunteers, interns, residents, and similar roles. Additionally, the term “Partner,” will refer to participating providers, subcontractors, delegates, vendors, first tier entities, downstream entities, and related entities.

Commitment

It is our commitment to our employees and partners that we will operate in a compliant and ethical manner, with high levels of integrity. We commit to working with our employees and partners through the regulatory challenges each of us face daily. Our commitment assures Umpqua Health can maintain good standing with its members, patients, and key stakeholders. We ask all our employees and partners demonstrate this same commitment.

If you encounter a situation not specifically addressed in this Code of Conduct, it is advised to rely on the principles of integrity, honesty, and fairness in determining your response. If you are still unsure of the proper course of action, you should discuss the situation with your manager, the Human Resources Department, or the Compliance Department.

Compliance and FWA Prevention Program

This Code of Conduct is a component of Umpqua Health’s Compliance and FWA (Fraud, Waste, and Abuse) Prevention Program. The Compliance Program Manual and the FWA Prevention Handbook, details how Umpqua Health organizes the Compliance and FWA Prevention Program efforts. Employees and partners are provided with copies of the Compliance Program Manual and the FWA Prevention Handbook and are requested to thoroughly review both documents. Umpqua Health expects all employees and partners to actively participate and cooperate with its Compliance and FWA Prevention Program.

Ethics

In healthcare, many of the rules and regulations are not always straightforward. This is where ethics and integrity become crucial. Employees and partners are expected to maintain and demonstrate exceptionally high ethical standards. Ethics should serve as a guiding principle for any behavior or decision made on behalf of Umpqua Health. In the absence of regulations, employees and partners should base their decision-making on what is right, especially concerning members, patients, and Umpqua Health.

Rules & Regulations

Healthcare is a heavily regulated industry, often considered one of the most regulated sectors in the country. While we know our employees and partners may not know every rule or regulation, we ask you seek guidance in those unfamiliar areas. Umpqua Health is devoted to operating within the confines of the rules and regulations, and we expect our employees and partners to do the same.

Management Responsibilities

Integrity is the essential foundation for a successful Compliance and FWA Prevention Program. Umpqua Health places significant emphasis on its leaders to establish a robust example in demonstrating these standards. Leading by example, especially in matters of integrity, is a fundamental requirement for our leaders. Umpqua Health's leaders should encourage their employees to operate in the same fashion. Moreover, leaders should promote an environment where staff feel comfortable expressing their concerns, considering it as an opportunity for growth and improvement rather than a challenge to authority.

Umpqua Health asks its leaders to be cognizant and informed of its Compliance and FWA Prevention Program. Leaders should promote the Program within their departments, and not hesitate to refer employees to the Compliance Department or Compliance & FWA Hotline. Furthermore, leaders should not engage in any conduct that may be perceived as retaliation. Umpqua Health places a significant amount of responsibility with its leaders and values their commitment to integrity.

Policies & Procedures

While this Code of Conduct offers a broad overview of some of the expectations Umpqua

Health has for its employees and partners, it should be noted that it is not a comprehensive list. Umpqua Health has established numerous policies and procedures. We hold the expectation that our employees and partners will operate in strict accordance with these policies and procedures. Many of these documents are written to satisfy contractual, State and Federal regulations, therefore it is imperative that they are adhered to. For our employees, policies and procedures can be found in PolicyTech on the Umpqua Health Intranet. For partners, many of Umpqua Health's pertinent policies and procedures are supplied during the contracting process. However, if you have misplaced any of them, please contact your key representative at Umpqua Health for assistance.

Conflict of Interests

Conflict of interests exist every day and are not unique to Umpqua Health. However, it is imperative if a conflict of interest is present, it is carefully mitigated. Conflict of interest can interfere with one's ability to make the best decision on behalf of Umpqua Health. Therefore, all employees and partners are required to disclose any potential conflict of interests to the Compliance Department, as outlined in the Compliance Program Manual. The Compliance Department will collaborate with the employee or partner to help determine a means to minimize the impact. The presence of a conflict is not necessarily wrong; it is when the conflict is either not disclosed, or not responsibly managed that creates the wrongdoing.

Gifts & Gratuities

While it may seem customary in the business world to provide gifts to individuals and partners, it can lead to the perception of favoritism and kickbacks. Therefore, Umpqua Health insists its employees comply with its

Receiving and Giving Gifts & Gratuities Policy, outlined in the Compliance Program Manual. Umpqua Health asks its employees to refrain from giving and accepting gifts. If you are unable to decline a gift, you are asked to report and deliver the item to the Compliance Department.

Umpqua Health asks its partners to honor our Receiving and Giving Gifts & Gratuities Policy, by not offering or providing gifts or gratuities to any of our employees or the organization. We understand there may be times where you would like to express your gratitude, and we just ask you to do so in a manner other than a gift or gratuity.

Additionally, gifting items to members or patients can create a scenario that may appear to induce services. Due to regulatory requirements surrounding gifts to members and patients, these programs need to be carefully validated. Therefore, in the event there is a desire to create some form of gift/incentive program for members and patients, employees are required to seek approval from the Compliance Department prior to commencement.

Example

Question: A vendor I frequently work with gave me tickets to a sport event. Is it okay if I keep them?

Answer: If you can, you should decline the tickets. If you are unable to do so, the tickets need to be reported to the Compliance Department who will determine the appropriate course of action..

Relevant Laws

As noted earlier, there are many rules and regulations which govern how employees and partners operate. While not inclusive, the discussion below provides a brief dialogue of some of the key laws Umpqua Health, its employees, and partners must follow.

Additional information about these laws can be found in the Compliance Program Manual and the FWA Prevention Handbook.

Health Insurance Portability and Accountability Act (HIPAA)

One of the most well-known healthcare laws is HIPAA. Enacted in 1996, HIPAA granted certain provisions as to when protected health information (PHI) may be used and disclosed. HIPAA granted administration simplification, privacy rules, and security rules around PHI. Recently, the Health Information Technology for Economic and Clinical Health Act (HITECH Act) added additional safeguards and requirements to HIPAA.

Every Umpqua Health employee is required to undergo HIPAA training upon hire and, thereafter, on an annual basis. Additionally, partners who have contact with Umpqua Health's members' or patients' PHI are required to provide their workforce HIPAA training. Depending on the contractual relationship, some partners may also be considered business associates, in which they are required to sign and follow a business associate agreement executed between the partner and Umpqua Health.

Federal False Claims Act (Federal FCA)

The Federal FCA (31 U.S.C. §§ 3729-3733 & 18 U.S.C. § 287) prohibits an individual or entity from submitting or causing to submit a

claim that is false for payment to Federal healthcare programs. The Act has broad implications in which violations of other Federal laws (e.g., Anti-Kickback Statute, Stark Law) can also trigger the Federal FCA. The Federal FCA is a strict liability law, meaning intent does not need to be proven for the Act to be violated. Penalties for violations of the Federal FCA can be found at 31 U.S.C. §§ 3729-3733 & 18 U.S.C. § 287.

Examples

Submitting a claim for a service that never occurred constitutes a false claim.

Another example is exaggerating the services provided, such as upcoding or DRG creep.

Additionally, the Federal FCA has the “Qui Tam,” provision, commonly referred as the “Whistleblower,” provision. This language allows an individual to sue another individual, on behalf of the government, for Federal FCA violations. The Qui Tam provision grants certain protections (e.g., non-retaliation), and incentives to the relater, including portions of any recovery that is received.

Oregon False Claims Act (Oregon FCA)

The State of Oregon also has a false claims act (FCA), which is similar to the Federal FCA. The Oregon FCA (ORS 180.750 and 180.755) is applicable when an individual or entity submits a false claim to the State of Oregon. Unlike the Federal FCA, the Oregon FCA does not have a Qui Tam provision. Penalties for violating the Oregon FCA can be found at ORS 180.760.

Physician Self-Referral (“Stark Law”)

Stark Law (42 U.S.C. § 1395nn) prohibits a physician from referring Medicare patients for certain designated health services to an entity in which the physician (or family member) has a financial relationship. There are numerous exceptions to the Stark Law where the conduct may be permitted, therefore the process and arrangement needs to be carefully reviewed prior to commencement. The penalties for violations of the Stark Law, including failure to report information, are outlined in 42 USC § 1395nn(g).

Examples

A physician receiving incentive compensation based on the volume of referrals to a hospital.

A physician receiving a salary higher than fair market value without proper justification.

Anti-Kickback Statute (AKS)

AKS is a criminal law that prohibits an individual or entity from receiving or giving anything of value to induce or reward a referral for Federal health care programs (42 U.S.C. § 1320a-7b). There are numerous safe harbors under the Anti-Kickback Statute however, navigating them requires careful consideration. To review the penalties for AKS violations, see 42 USC § 1320a-7b(b).

Examples

Paying someone \$100 for referring a patient to a clinic.

Receiving free rent for referring patients to a specialist, lab, imaging center, etc.

Exclusion Statute

One of the primary tools the government uses to enforce and prevent fraud is through the Exclusion Statute (42 U.S.C. § 1320a-7). The U.S. Health and Human Services' Office of Inspector General (HHS-OIG) has the authority to exclude individuals or entities from participation in Federal healthcare programs. HHS-OIG uses this authority for individuals or entities who are convicted of certain healthcare related offenses. If an individual or entity is excluded, they are ineligible to receive payments from Federal healthcare programs.

Umpqua Health is prohibited from employing or partnering with any individual or entity actively excluded from Federal healthcare participation. Prior to hire/contracting, and monthly thereafter, Umpqua Health screens all employees and partners against certain Federal healthcare exclusion databases. Partners are also required to screen their workforce against these same databases.

Civil Monetary Penalties Law (CMPL)

The CMPL (42 U.S.C. § 1320a-7a) is a tool the Federal government uses to sanction individuals or entities for certain conduct. Some activities that could potentially violate the CMPL include:

- Offering inducements for services to Medicare and Medicaid patients.
- Offering inducements to physicians to limit services.
- Contracting or employing an excluded individual.
- Failing to report an overpayment.

Civil penalties for CMPL violations include:

- Fines up to \$50,000.
- Denial of payment.
- Repayment of the amount paid.
- Exclusion authority.
- FCA violation.

Criminal Health Care Fraud Statute

The Criminal Health Care Fraud Statutes (18 U.S.C. Section 1347) makes it a criminal offense for knowingly and willfully engaging in a scheme to defraud healthcare programs. Penalties include:

Criminal

- Imprisonment
 - Delivery of payment for health care benefits, items, or services – 10 years.
 - Violation results in serious bodily injury - 20 years.
 - Violation results in death – any term of years or for life.
- Up to \$250,000 fine.
- Or both.

Fraud, Waste, & Abuse (FWA)

Given that many of Umpqua Health's programs are supported by State and Federal dollars, it is crucial for employees and partners to be informed about FWA and the preventive measures outlined in the FWA Prevention Handbook. FWA scenarios can lead to significant financial challenges, impacting not only Umpqua Health but also the entire healthcare industry. To combat FWA, we request that our employees and partners play a role in reducing FWA by reporting any suspicious FWA activities to the Compliance Department or Compliance & FWA Hotline.

- **Fraud:** An intentional deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to themselves or some other person.
- **Waste:** Overutilization or inappropriate utilization of services and misuse of

resources; typically, is not criminal or intentional.

- **Abuse:** Practices that are inconsistent with sound fiscal, business, or medical practices, and result in an unnecessary cost to the Medicaid program, or in reimbursement for services that are not medically necessary, or fail to meet professionally recognized standards for health care.

Reporting

Umpqua Health relies heavily on its employees and partners to report potential issues. In order to minimize impact, we ask that employees and partners report matters in a timely manner, to ensure a prompt and appropriate review. Employees or partners are not required to confirm the issue but should promptly report it once an allegation surfaces. With this cooperation, Umpqua Health can ensure it is effectively and efficiently reviewing and responding to matters.

Duty to Report

All employees and partners are required to report any concerns related to:

- Noncompliant activities.
- Violation of this Code of Conduct.
- Violation of policies and procedures.
- Suspicion of fraud, waste, and abuse.
- Privacy or security violation.
- Any arrest and conviction within one business day of occurrence.
- Other conduct that seems unethical or inappropriate.

Umpqua Health holds its employees and partners to high standards and expects concerns to be reported promptly, without suppression or delay. Individuals who do not report a matter will be held accountable, to the same level as

the person who engaged in the misconduct. Therefore, reporting issues is a requirement. If it becomes known that an employee or partner was aware of an issue and did not report it, sanctions up to and including termination will occur. For further information, please consult the following Compliance Program Manual and the FWA Prevention Handbook.

Umpqua Health's Compliance & FWA Hotline

Umpqua Health has contracted with a third-party vendor to provide a secure hotline for employees and partners to report concerns. The hotline provides individuals the ability to report both via phone and an online platform. Issues that can be reported to this hotline include:

- Noncompliant activities.
- Violation of this Code of Conduct.
- Violation of policies and procedures.
- Suspicion of fraud, waste, and abuse.
- Privacy or security violation.
- Other conduct that seems unethical or inappropriate.

The hotline also allows individuals with the option to report issues anonymously. While Umpqua Health strives to be an "open-door," organization, we acknowledge and respect the need for individuals to remain anonymous when they choose to do so. Therefore, Umpqua Health has established a confidential reporting mechanism to ensure we can receive and address individuals' concerns while respecting their anonymity and privacy.

Compliance & FWA Hotline

(Can report anonymously)

Phone: (844) 348-4702

Online:

www.umpquahealth.ethicspoint.com

Umpqua Health uses a third-party Case Manager Database to receive, track and triage allegations, and refer to (i) Medicaid Fraud Control Unit (MFCU)/ OHA Office of Program Integrity (OPI) for fraud or abuse or (ii) to its Compliance Department to investigate, resolve, and refer the final case internally for further compliance, corrective action, or to open a Program Integrity audit to recover overpayments.

Non-Retaliation

Across all industries, the perception of retaliation can be a significant barrier for receiving and responding to compliance matters. To offset this fear, Umpqua Health has created a zero-tolerance non-retaliation policy (CO9-Non-Retaliation). Employees and partners must understand and commit that they will not engage in any activities, which may be perceived as retaliatory to individuals who bring issues forward in good faith. Any individual or entity that violates Umpqua Health's non-retaliation policy, CO9 – Non-Retaliation, will be subject to termination.

Accuracy of Records

Umpqua Health is committed to operating within the confines of the rules and regulations that govern the organization. To reach this benchmark, Umpqua Health relies heavily on its records to make informed business and clinical decisions. Therefore, Umpqua Health anticipates its employees and partners maintain

sound, accurate, and timely record-keeping practices. Furthermore, the destruction or alteration of any of Umpqua Health records outside of regulatory requirements and policies is strictly prohibited.

Financial

In order to provide accurate and reliable financial records, all financial transactions shall be processed and recorded in accordance with generally accepted accounting principles. Internal controls are in place to provide assurance that transactions are recorded accurately and appropriately. These controls play a crucial role in maintaining the integrity and reliability of financial and operational records within the organization.

Clinical Records

The accuracy of members and patients' clinical records is a critical component of providing quality care. Employees and partners are expected to maintain clinical records that are accurate and up to date. Delays in recording or providing incorrect information in a clinical record could have dire consequences for a member or patient. Lastly, it is important to recognize that members and patients have specific rights associated with accessing and viewing their clinical records. Employees and partners should be conscientious of these rights and ensure documentation is recorded in a professional and respectful manner.

Billing and Claims

Umpqua Health expects its employees and partners to produce accurate and truthful bills and claims. Engaging in activities where a bill or claim is false or inappropriate could lead to significant consequences, not just internally but also from State and Federal regulators. Therefore, Umpqua Health prohibits any of its employees or partners from submitting any bill



or claim that is false or fraudulent; submission of a false bill or claim may result in administrative sanctions, up to and including termination.

System & Resources

During the course of an employee or partner's relationship with Umpqua Health, certain key Umpqua Health resources and systems may be utilized to conduct business. Employees and partners are expected to utilize these systems and resources appropriately and should not engage in any conduct that would destroy or alter these systems and resources. Use of Umpqua Health's system and resources, including email, internet, computers, telephone, etc. must be used appropriately and solely for Umpqua Health business purposes, and not for personal use. Furthermore, Umpqua Health reserves the right to monitor any activities associated with the use of its systems and resources. Employees and partners should presume no expectation of privacy. Upon conclusion of employees or partners' relationship with Umpqua Health, all systems and resources must be returned to Umpqua Health.

Respect

Umpqua Health prohibits all forms of discrimination and harassment. All employees, partners, members, and patients shall be treated with respect and dignity, regardless of their age, gender, race, ethnicity, national origin, religion, sexual orientation, disability, health status, socioeconomic status, or any other protected class under law. Furthermore, our patients and members also have rights related to the care they receive, and we ask those rights are followed and respected. Employees and partners are encouraged to report immediately to the Compliance Department, Human Resources Department, or Compliance & FWA Hotline if

they are exposed to or witness any conduct that is incongruent with this.

Confidentiality

Due to the nature of Umpqua Health's businesses, securing and preserving information is essential. Umpqua Health, its members, and patients give high levels of trust to employees and partners. We ask individuals to be mindful of this trust and not partake in activities that make this information vulnerable.

Members & Patients

Members and patients provide a variety of sensitive information about their health and financial situation. Employees and partners should respect this by committing to safeguarding this information. Additionally, employees and partners shall only access records pertinent to their work, and not cause any inappropriate access or disclosure of member or patient information.

Business Practices

Employees and partners may be exposed to information that is classified as trade secrets. Umpqua Health asks employees and partners to protect this information and not act in any fashion where this information is accessed or disclosed improperly. Work paper, documents, system, and any other material or systems produced during the course of your relationship with Umpqua Health, remains the property of Umpqua Health. Employees and partners are prohibited from taking any work papers, documents, systems, resources, or material created for Umpqua Health, without prior written consent.

Example

Question: During my course of employment, I created some trainings that I would like to take with me to my new employer. That is not a problem, right?

Answer: Work created while you were employed with Umpqua Health is the property of Umpqua Health. You would need to receive permission from your manager prior to taking these trainings with you.

Licenses, Credentials & Exclusions

Many of Umpqua Health employees and partners must possess certain licenses, certifications, or credentials to perform work. Umpqua Health insists its employees and partners maintain their licenses, certifications, and credentials in active and good standing order. If during the course of your relationship with Umpqua Health your license, certification, or credentials are not in good standing, you are required to report immediately to the Compliance Department, Human Resources Department, or key contact at Umpqua Health.

Umpqua Health is required to screen its employees and partners at hire/contracting and monthly, against Federal exclusion databases (e.g., HHS-OIG's List of Excluded Individuals and Entities (HHS-OIG's LEIE) and General Services Administration's System for Award Management (GSA's SAM). Umpqua Health is prohibited from employing or contracting with any individual that is excluded. Therefore, we ask our partners also engage in the same practice of screening its employees at hire and monthly against Federal exclusion databases.

Cooperation

Umpqua Health engages in numerous activities to support its Compliance and FWA Prevention Program. The success of this Program is often dependent of Umpqua Health's ability to effectively and appropriately navigate through activities necessary for the Program. Therefore, employees and partners are expected to cooperate and not engage in any conduct that would hinder this work.

Trainings

As noted earlier, many of the rules and regulations which govern healthcare are complex and not intuitive. Umpqua Health attempts to bridge this gap by providing routine trainings to its employees and partners. The expectation is that employees and partners are active participants during trainings, which includes completing trainings in a timely fashion. Additional information regarding training can be found in the Compliance Program Manual and the FWA Prevention Handbook.

Audits & Monitoring

Periodically, auditing, including PI audits, and monitoring of key business functions occur. During these events, employees and partners are requested to be cooperative. This can be done by promptly supplying requested documents, answering questions honestly, and being a willing participant. These activities often serve as validations of the great work being conducted by our employees and partners. Therefore, it benefits everyone to have robust auditing and monitoring processes in place to ensure that these high standards of performance are consistently upheld and maintained.

Investigations

During the course of your relationship with Umpqua Health, you may be asked to



participate in an investigation. Integrity during the investigations process is of the utmost importance. Employees and partners are expected to fully cooperate and support any investigation Umpqua Health is conducting. Any conduct which hinders an investigation will result in significant sanctions, up to and including termination.

Remediation & Sanctions

At any time during your relationship with Umpqua Health, there may come a time where corrections may be needed to enhance performance. This could be in the form of risk response plans, improvement plan, financial penalties for some partners, as well as sanctions or disciplinary actions. Employees and partners are asked to be cooperative and engaging during this process. For further information, please consult the Compliance Program Manual.

Resources

For additional information or to report a concern, please contact Umpqua Health's Compliance Officer, Compliance Department or Compliance & FWA Hotline at:

Umpqua Health Compliance Officer
Jamie Smith-Reese, AHFI, CPC-P
Phone: (541) 464-4984
Email: jsmithreese@umpquahealth.com

Umpqua Health
Attn: Compliance Department
3031 NE Stephens St.
Roseburg, OR 97470
Phone: (541) 229-7081
Email: Compliance@umpquahealth.com

Additionally, the following entities below can also receive FWA referrals.

Medicaid Fraud Control Unit (MFCU)
100 SW Market Street
Portland, OR 97201
Phone: (971) 673-1880
Fax: (971) 673-1890

OHA Office of Program Integrity (OPI)
(Provider FWA Allegations)
3406 Cherry Ave NE
Salem, OR 97303-4924
Fax: 503-378-2577
Hotline: 1-888-FRAUD01 (888-372-8301)
Web:
<https://www.oregon.gov/oha/FOD/PIAU/Pages/Report-Fraud.aspx>

DHS Fraud Investigation Unit
(Member FWA Allegation)
P.O. Box 14150
Salem, Oregon 97309-5027
Phone: 1-888-FRAUD01 (888-372-8301)
Fax: (503) 373-1525 ATTN: Hotline
Web:
<https://www.oregon.gov/oha/FOD/PIAU/Pages/Report-Fraud.aspx>

US Department of Health and Human Services
Office of Inspector General
ATTN: OIG HOTLINE OPERATIONS
PO Box 23489
Washington, DC 20026
Phone: 1-800-HHS-TIPS (1-800-447-8477)
Fax: 1-800-223-8164
Web: <https://oig.hhs.gov/fraud/report-fraud/index.asp>