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Intake Form for Reports of Compliance Issues

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This tool appears in the Health Care Compliance Association's *The Complete Compliance and Ethics Manual 2023*.^[1]

Compliance Issue Report Intake Form

Date/time of initial report:

Name of person completing the intake form:

Name of person reporting a potential issue (if provided):

Callback number or contact email for reporter (if provided):

Department in which reporter works:

Description of question or concern:

Has this issue been previously reported, and if so, to whom?

Potential issue types involved (circle primary issue type and check secondary issue types:

- ☐ Bribery
- ☐ Kickbacks
- ☐ Accounting
- ☐ Harassment
- ☐ Discrimination
- ☐ Product safety
- ☐ Health & Safety
- ☐ Environmental
- ☐ Financial controls
- ☐ Retaliation
- ☐ Conflict of interest
- ☐ Employee relations
- ☐ Fair competition
- ☐ Human trafficking/Forced labor
- ☐ Trade compliance
- ☐ Data privacy
- ☐ Misuse of company resources
- ☐ Intellectual property

Name(s) of other person(s) with potential knowledge of the issue:

Name of the person to whom this is assigned for investigation:

Date matter assigned to investigator:

Investigation plan:

Follow-up date:

Follow-up actions:

Final disposition of the issue:

- ☐ Substantiated
- ☐ Unsubstantiated
- ☐ Insufficient Information

Disciplinary action taken?

- ☐ Yes
- ☐ No

Summary of findings, issue resolution, mitigating actions, and next steps:

Issue closure date:

Time to close:

Signature of investigator:

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