

POLICY/PROCEDURE TITLE: Conflict of Interest for Providers in Unlicensed Settings POLICY/PROCEDURE #: 709 Section: Provider Network Developed and maintained by: Provider Network Manager Scope: <input checked="" type="checkbox"/> ACCMHS Staff <input type="checkbox"/> MH/IDD, <input type="checkbox"/> Housing, <input type="checkbox"/> SUD, <input type="checkbox"/> Integrated Health, <input checked="" type="checkbox"/> ACCMHS Contract Providers <input type="checkbox"/> Other _____	Approved By: _____ (Executive Director)	
	Approved By: _____ (Medical Director; <i>as applicable</i>)	
	DATES	
	First Effective	01/2003
Revised	12/2020	
Supersedes	12/2019	

POLICY

It is the policy of Allegan County Community Mental Health Services (ACCMHS) that contractors (Providers) shall not engage in any activity that represents or appears to represent a conflict of interest which could influence business decisions or services provided to Individuals served (Individuals). A Conflict of Interest may exist with any matters that would create a conflict between the Provider’s private interest and its duty to uphold the public trust. A conflict of interest arises when a Provider or subcontractor, the Provider’s Family Member, or an organization in which the Provider is serving as an officer, director, trustee or employee or for which they act in a fiduciary capacity (collectively herein referred to as Covered Entity), has a Financial Interest, directly or indirectly or participates or proposes to participate in a transaction, arrangement, proceeding, business endeavor or other matter with ACCMHS or Individuals served.

Providers shall inform the Executive Director of ACCMHS (or Designee) in writing of any potential or actual Conflict of Interest. If ACCMHS identifies a conflict of interest situation which gives or appears to give unfair advantage to the Provider, the Executive Director and/or the Board of Directors may take action to terminate the contractual relationship. All written agreements with contractor shall have language which reflects this intent.

I) Family Member

Means a spouse, parent, children (natural or adopted), sibling (whole or half- blood), father-in-law, mother-in-law, grandchildren, great grandchildren and spouses of siblings, children, grandchildren, great grandchildren, and all step family members, wherever they reside, and any person(s) sharing the same living quarters in an intimate, personal relationship that could affect business decisions of the Provider in a manner that conflicts with this Policy.

II) Financial Interest

A Provider has a Financial Interest if he or she has, directly or indirectly, actually or potentially, through a business, investment or through a Family Member:

- A) an actual or potential ownership, control or investment interest in, or serves in a governance or management capacity for, other business entities with which ACCMHS has a transaction, arrangement, proceeding or other matter;

- B) an actual or potential compensation arrangement with other business entities with which ACCMHS has a transaction, arrangement, proceeding or other matter; or
- C) an actual or potential ownership or investment interest in, compensation arrangement with, or serves in a governance or management capacity for other business entities with which ACCMHS is contemplating or negotiating a transaction, arrangement, proceeding or other matter.

Compensation include direct and indirect remuneration, in cash or in kind.