

Name: _____

Date: _____

McLaren Health Plan Corporate Compliance and Ethics Week

D T C A S M I A L C E S L A F D G H W I Z L V E
Z K R J A P R O C E D U R E D I A C I D E M M O
I P T T P R B U C D E M H L V X T T X H O A A D
W Y D S J P I Q O M K P J C A O W T S X J G X L
W Q T U J F H J M G T S E E A C P C P N J Z W W
M T C D N Z X T M C O H O S K E O R T V S A M A
U N O P A K L F U A N F R C U M R L R X P R N G
R E M W Q B F M N F A J H O P B Y B N E S D L Y
G M P O G X B H I L X O T L V C A P V J W H V L
L P L C U B U K T R T B I Y P B N K W F E V C Y
O U A T R W C E Y R X A A P M P P B P A J C D H
I O I F W A S T E W N P H N G Y D C L E G W J V
R C N U K N Q B X C P Z G S O P K T X C B M N P
E E T C N L M O E E J L C O O N H P T B Z O A C
B R Y Y X E E H A C O C Z W L A Y I C A D Q L I
R P I C M F O L D K X M Q X D D L M A K G Z P L
S M N Q M T J O V R E D I V O R P K O Z F T H M
Y S H Y L C L W T D J C A W W N C C Q U X N T T
K I U I C M I Q E K H N B B S U B B H V S K L B
P B N A Y I H T N H T F D R L N T R O P E R A Z
L E B Q M O L D C A E K U H N Q Y B V G L M E S
F L Y P W B H O G V V S A F D W I D Q B S T H F
W F J Y O W J E P G J W R L I Q R D T Z X X J L
N T N A N Z B B R W M W F Z Y L Q X B O I G V W

Compliance Hotline
Health Plan
Procedure
Medicaid
Report
Member
Fraud

Health Advantage
Recoupment
Anonymous
Provider
Breach
Abuse

False Claims Act
Community
Complaint
Policy
Appeal
Waste