

# **INTEGRITY STANDARDS**



**University  
Health System**

**Integrity Standards**  
for the  
University Health System

**Introduction**

The University Health System has adopted an Integrity Program to demonstrate its commitment to ethical business practices. An important component of our Integrity Program is the Integrity Standards.

Integrity is defined as “rigid adherence to a code or standard of values.” More simplistically put, integrity means “doing the right thing.”

Our Integrity Standards provide guidance in carrying out our duties within appropriate ethical and legal standards. These obligations apply to our relationships with patients, physicians, third-party payors, contractors, vendors, consultants, and one another. We have developed these Standards to ensure that everyone knows and understands what is expected from them.

The Standards are intended to be comprehensive and easily understood. In some instances, the Standards deal fully with the subject covered. In many cases, however, the subject discussed is so complex that additional guidance may be needed. Such guidance can be found in your Employee Handbook, the Health System’s Policies and Regulations Manuals, your supervisor and the Integrity Officer.

The Integrity Standards set forth are mandatory and must be followed by everyone.

## **Guiding Principles**

- We will perform our duties using the highest standards of ethics and integrity.
- We will comply with Health System goals and objectives, policies and procedures, and relevant laws and regulations.
- We will provide high-quality, cost-effective health services to our patients.
- We will strive to satisfy our internal and external customers.
- We will maintain confidentiality.
- We will avoid actual or perceived conflicts of interest.
- We will be truthful in our marketing and advertising activities.
- We will only pursue business opportunities that are ethical and legal.
- We will prepare and maintain patient and company records and reports accurately, and retain and preserve such records as required.
- We will provide accurate reporting to internal and external customers.
- We will protect the Health System's assets and the assets of others, against loss, misuse, theft and abuse.
- We will promptly report areas or issues of concern through appropriate processes.

## **Integrity Standards**

### **Quality of Care**

Our mission is to provide quality health services to all of our patients. We treat all patients with respect and dignity and provide care that is both necessary and appropriate. We make no distinction in the admission, transfer or discharge, or in the care we provide our patients, based on race, color, religion, national origin, sexual preference or economic status.

### **Confidentiality**

The Health System is committed to protecting the confidentiality of patient information. Such information is to be released only to persons authorized by law or by the patient's written consent. Staff also have certain privacy interests in personal and work-related information which the Health System will protect in accordance with applicable law. Finally, there is certain confidential information about the Health System, its strategies and operations, which is a valuable asset. Staff may use such information to perform their jobs but must not share this information with outside sources, except as, and to the extent, required by law. Such confidential information may include trade secrets, personnel data, patient lists, medical information, pricing and cost data, financial data, strategic plans, and marketing strategies.

### **Media/Public Relations**

The Health System shall communicate to the media and general public with truth, accuracy, fairness, and responsibility to the public. The Health System shall not knowingly disseminate false or misleading information and shall act promptly to correct erroneous communications.

## **Antitrust**

The Health System will compete aggressively, but fairly, in the marketplace. The Health System will not agree, or attempt to agree, with its competitors to fix prices, divide geographic or product markets or make any agreement with a competitor that artificially raises the price of its services or improperly reduces competition.

## **Responsible Use of Assets**

All Health System staff are responsible for protecting Health System assets, and assets entrusted to them by others, against loss, misuse, theft and abuse. They must be equally diligent in protecting the assets of others, such as patients and co-workers.

## **Accurate Records and Retention**

All Health System transactions must be properly authorized and accurately recorded.

Documents and records of both a medical and non-medical nature will be retained and disposed of in accordance with applicable laws and the internal policy of your department. Documents and records include paper documents, electronic information and any other storage medium that contains information.

## **Employment Practices/Work Environment**

The Health System is committed to affirming the talents and contributions of its diverse staff and to providing an equal opportunity work environment where everyone is treated with fairness, dignity and respect.

The Health System will take reasonable steps to inform employees about, and to comply with, all applicable employment laws, regulations and policies, particularly those relating to non-discrimination in its employment practices.

Such practices include hiring, staff reductions, transfers, terminations, evaluations, recruiting, compensation, corrective action, discipline, and promotions. The Health System will not tolerate harassment based on the diverse characteristics or cultural backgrounds of its staff. In particular, any form of sexual harassment is prohibited. The Health System will take reasonable steps to ensure a work environment that is safe, healthy, and secure.

## **Health, Safety & Environmental Concerns**

The Health System will have in place policies and procedures that will provide for the health and safety of its patients, guests, and staff. Additionally, policies and procedures will be in place to protect the internal and external environment from potential chemical, infectious, radioactive, or other hazardous contamination. All policies and procedures will be based on acceptable community standards of practice and will be in compliance with all applicable regulatory agencies. Policies and procedures will be kept current and routinely monitored for compliance.

## **Claims Processing/Billing**

The Health System will strive to produce clear, concise and accurate claims/bills for all its customers, including third party payors. Claims/bills submitted for reimbursement will reflect only services actually provided and determined medically necessary; be supported by adequate documentation; be accurately coded (for third party payors); and be non-duplicative.

The Health System will follow applicable coordination of benefit rules when more than one payor may have responsibility for particular benefits/services. Improper payments and credit balances will be researched and, when appropriate, refunded (or recovered, as the case may be) in accordance with regulatory and contractual requirements and ethical business practices. Those instances suggesting fraud or abuse will be fully investigated and corrective action taken, as warranted, with notification to criminal or civil law enforcement authorities, government agencies and other parties, as necessary or prudent.

## **Gratuities**

Health System employees may not solicit gratuities from vendors for personal use. Gratuities to employees may be accepted only for use in the Health System if the value of each item is under \$25. Health System employees may accept a meal with a value of less than \$25 from a vendor during the course of a business meeting. No cash gratuities are to be accepted.

Health System employees should not be influenced by gratuities in their decision process. Any gifts of higher value must be taken to the Foundation for appropriate disposition.

## **Conflicts of Interest**

University Health System staff, officers and board members will avoid conflicts of interest. A conflict of interest occurs when personal relationships and/or activities interfere, or appear to interfere, with one's ability to act in the best interest of the Health System. All staff, officers and board members are required to disclose any actual or potential conflicts of interest to the Health System's Integrity Officer.

The following actions constitute a conflict of interest:

- Engaging in actions or decisions (either directly or indirectly) which result in a personal gain or benefit.
- Engaging in actions or decisions (either directly or indirectly) with any business in which one's self, spouse/significant other, relative or associate owns a substantial interest.
- Accepting any gift, favor or service that could influence one's ability to conduct their designated duties.
- Using one's position to secure special privileges or exemptions for one's self or others.
- Disclosing confidential information obtained through one's official capacity for personal gain.
- Accepting outside employment which conflict with one's primary obligations to the Health System.
- Steering patients or clients to products and/or services outside the Health System, when the Health System offers the same, or comparable products and/or services, for personal gain.

## Reporting Incidents of Misconduct

All Health System staff are responsible for reporting actual or suspected incidents of misconduct. Failure to report incidents of misconduct could result in disciplinary action up to and including termination. The Health System is firmly committed to encouraging timely disclosure of such concerns and prohibits any retribution, retaliation or harassment directed against a staff member for making a good faith effort to report an incident. All staff are encouraged to report their concerns to their supervisors, other managers or senior management. For staff uncomfortable using the chain of command, the Health System provides other resources as follows:

- Director, Human Resources 358-2271
- Employee Counselor 358-2332
- Risk Management 358-2005
- Safety Coordinator 358-2448
- Chief of Police 358-2450
- Integrity Officer 358-2193
- Legal Services 358-2005
- Integrity Hotline (*toll free*) 1-877-225-7152

## **Cooperating with Government Investigations**

The Health System will cooperate with all legitimate government investigations. Health System staff approached by persons presenting themselves as government investigators, whether at home or work, are encouraged to notify Legal Services (358-2005) immediately. Legal Services will verify the credentials of the investigator, determine the legitimacy of the investigation and instruct staff on the proper procedures for cooperating with the investigation.

Health System staff must never, under any circumstances:

- destroy or alter any Health System document or record (paper or electronic) in anticipation of a request for the document or record by a government agency or court
- lie or make false or misleading statements to any government investigator
- attempt to persuade any other staff member, or any other person, to provide false or misleading information to a government investigator, or otherwise to obstruct, mislead, or inappropriately delay the communication of information or records relating to a legitimate government investigation, or
- in any other way fail to cooperate with a government investigation.

## **Personal Use of Health System Resources**

It is the responsibility of all Health System staff to preserve our organization's assets including time, materials, supplies, equipment and information. Health System assets are to be used for business related purposes. As a general rule, the personal use of any Health System asset without prior approval of your supervisor is prohibited. The occasional use of items such as copy and fax machines, where the cost of the Health System is minimal, is permissible. Any community or charitable use of organization resources must be approved in advance by your supervisor. Any use of organization resources for personal financial gain unrelated to Health System business is prohibited.