

UNDERSTANDING YOUR COMPLIANCE RESPONSIBILITIES



Our Purpose

As one of the largest nonprofit health care delivery organizations in the country, we are committed to improving the health and well-being of the people and communities we serve through leadership, education, innovation and excellence in medicine.

Our Goal

To be the national model among health care delivery organizations in patient advocacy, clinical quality, medical research, employee satisfaction and financial stability.

Our Shared Principles

We are

- patient-focused
- disciplined
- knowledge-driven
- motivated leaders

We demonstrate

- trust, dignity and respect
- high ethical standards and behaviors
- teamwork and accountability

What is Compliance?

Compliance means acting in ways that are consistent with applicable laws and with public trust and expectations. This is especially true in health care, where trust and expectations play such an important role in the patient/provider relationship. The public expects health care providers to be honest and caring and to always act in their patients' best interests. In recognition of this fact, BJC has developed and adopted a formal code of conduct that stresses honesty, integrity and an ethical basis for compliance.

Policy Overview

BJC HealthCare is committed to excellence in patient care. We expect all health care and other professionals working and providing services at BJC HealthCare member hospitals or other locations (workforce members) to learn the information and to follow the requirements to ensure acceptable practices at BJC HealthCare.

Equal Employment Opportunity, No Discrimination, No Harassment Policy

BJC HealthCare is committed to providing a working environment in which its employees are treated with courtesy, respect, and dignity. BJC will not tolerate any action by any person, including vendors, agents, agency staff or other third parties, which constitutes harassment or discrimination.

BJC HealthCare will not tolerate harassment. BJC policy defines "harassment" as any unwelcome verbal or physical conduct that denigrates or shows hostility or aversion towards an employee based on his or her race, color, ancestry, national origin, gender, religion, age, disability, genetic information, military or veteran status or any other legally protected status, if such conduct:

- has the purpose or effect of creating an overall hostile or offensive work environment for an employee or applicant, or
- interferes with an individual's ability to perform his or her job or otherwise affects the individual's employment opportunities.

The Compliance Policies, Code of Conduct and Compliance Handbooks are available on BJCnet. <http://corporatecompliance.carenet.org/>

Code of Conduct Acknowledgement

BJC is committed to demonstrating the reliability, honesty, trustworthiness and high degree of integrity expected of a leading health care organization. To help strengthen this commitment, each workforce member must be committed to understanding and complying with BJC's Compliance Program, including the Code of Conduct, the Privacy Compliance Policies, and any other applicable BJC compliance policies and procedures. All workforce members of BJC HealthCare have an obligation to act fairly and honestly at all times. The purpose of the Code of Conduct is to help employees understand what it means to act in a compliant manner in today's increasingly complex and highly regulated health care environment.

BJC workforce members are required to understand and pledge to uphold the BJC Code of Conduct.

It is your responsibility to report any alleged or suspected violation of any laws, regulations or BJC policies. You should raise any compliance questions or concerns with a supervisor, a BJC Compliance or Privacy Liaison, the Compliance Officer or the Compliance Action Line.

ETHICS AND COMPLIANCE HOTLINE 1-800-525-BJC1 (2521) • www.bjc.ethicspoint.com

To protect BJC information resources, IS Security Services has implemented a process for workforce members to sign an Access Confidentiality Agreement prior to receiving electronic information access. Any misuse or disclosure of any confidential information (electronic or otherwise) or permitting improper computer access to any unauthorized party may result in irreparable harm to BJC, or its affiliates or patients, and may result in revocation of your access privileges and/or termination of your employment or affiliation with BJC or its affiliates.

How does BJC Manage the Risks?

Health care compliance risks are numerous. BJC manages these risks with an effective Compliance Plan. The Compliance Plan highlights the framework for processes to prevent, detect and correct non-compliance as well as fraud, waste and abuse.

Components of the Compliance Plan include:

- Maintaining written policies, procedures and standards of conduct
- Designating a Compliance Officer, Compliance Committee and high level oversight
- Providing effective training and education
- Offering effective lines of communication
- Communicating and enforcing disciplinary standards
- Ensuring an effective system for routine monitoring and identification of compliance risks
- Implementing procedures and systems for prompt response to compliance issues

What are Compliance Risks?

Fraud, Waste and Abuse

Fraud is defined as intentionally submitting false information to the government or a government contractor in order to get money or a benefit. Waste and abuse may involve obtaining an improper payment, but do not require the same intent and knowledge.

False Claims Act

Prohibits:

- Presenting a false claim for payment or approval – *Seeking payment for goods and services that were never provided or were falsely described*
- Making or using a false record or statement in support of a false claim – *Service was provided as documented but something else about the claim is false such as an incorrect diagnosis code*
- Conspiring to violate the False Claims Act
- Embezzlement
- Knowingly concealing or knowingly and improperly avoiding or decreasing an obligation to pay the government

Patient Confidentiality (HIPAA)

All health care personnel have an obligation to protect confidential information about patients and the status of their health. The HIPAA Privacy & Security Rules require that covered entities establish privacy policies and procedures to ensure appropriate safeguards are in place for each specific setting to protect patient privacy. HIPAA applies to **Protected Health Information**, or PHI, in all forms, including, but not limited to **written, spoken or electronic**.

No one should access or disclose private patient information without a job-related purpose or obtaining a HIPAA-compliant patient authorization. Only the patient, the patient's personal representative or those who are directly involved in the patient's treatment, payment or health care operations have the right to view the patient's PHI. Accessing the PHI of family members, friends or well-known people is a HIPAA violation if done without proper authorization or a job-related reason to do so.



Everyone who has been granted access to BJC computer systems must **keep their password secure**. We are required to protect the integrity, confidentiality and availability of electronic protected health information.

A **breach** is defined as "the unauthorized acquisition, access, use or disclosure of protected health information (PHI) which compromises the privacy or security of the PHI." **You must report** actual and suspected breaches of protected health information to our organization's Compliance Office immediately and no later than 24 hours following your knowledge of the event. You will not be retaliated against for reporting potential breaches.

Requests for information from federal, state and local government agencies should be immediately referred to BJC's legal department or compliance office to ensure that the response will be accurate and complete, and conform to all applicable laws. In the rare event of a search warrant, you should not obstruct the search in any way. You should, however, immediately notify your supervisor. You should also know that you are not legally required to answer any questions until you've had the chance to speak with legal counsel.

Enforcement of the HIPAA Privacy Rule is the responsibility of the Department of Health and Human Services, **Office for Civil Rights**, or OCR.



We all must remember to protect the privacy of patients in our daily work. We may all be patients or beneficiaries ourselves from time to time so we should think about how we would feel in the patient's position. Consider how you would feel if your health information was used or disclosed in a way that was harmful to you or your family. As you go about

your daily work, **if you have a question about the proper way to handle a patient's privacy, ask your supervisor or manager or contact the Compliance Office.** If we all make protecting the health information of others a personal responsibility, we will be more likely to be in compliance with HIPAA – and have integrity in the public eye.

EMTALA

EMTALA stands for the Emergency Medical Treatment and Labor Act. It is also known as the "anti-dumping statute." EMTALA requires hospitals with an emergency department to **provide an appropriate medical screening examination and emergency stabilizing treatment, regardless of the patient's ability to pay.** The hospital is required to provide the necessary stabilizing treatment it has the resources to provide. In all cases, a transfer should only be made in the best interest of the patient and with the written consent of the patient or the patient's representative.

Documentation and Coding

Documentation is the written description of a provider's encounter with a patient. It must be **legible, accurate, complete, signed and timed.** Coding is the assignment of alphanumeric or numeric codes for billing. Codes can represent diagnoses, services, supplies and products. Documentation must support the codes used. Accurate documentation and coding is extremely important – not only for compliance reasons, but for our financial stability.

Illegal Provider Relationships

Many health care providers derive a significant portion of their business from referrals. Providers should be on guard, however, against **making or receiving referrals in exchange for anything of value or perceived value.** For example, the anti-kickback regulations prohibit payments in any form, such as cash, gifts, discounts or loans, in exchange for patient referrals. Doing so may violate federal and state anti-kickback laws. Such laws prohibit payment in any form to any person in order to **induce that person to refer patients to a particular provider.**

Gifts and Gratuities

In no event may a BJC representative offer or provide payment to a referral source or potential referral source except in accordance with a written, signed agreement that has been reviewed and approved by BJC Legal Services. A BJC representative is not permitted to offer or provide any non-monetary compensation or medical staff incidental

benefit in a manner intended to induce or reward: (1) patient referrals to any BJC affiliate; (2) purchasing, leasing, ordering or arranging of any good, facility, service or items paid for by any federal or state health care program including, without limitation, Medicare or Medicaid; or (3) recommending the purchase, lease, order or arranging of any good, facility, service or items paid for by any federal or state health care program including, without limitation, Medicare or Medicaid.

Conflict of Interests

A conflict of interest occurs when a person's own interests influences or appears to influence his or her professional judgment or job performance in a way that is detrimental to the patient, organization or the government. Having no conflict of interest is ideal, especially regarding purchasing decisions. But in real life, having no conflicts may not be possible. **If there is a conflict, or the appearance of a conflict, it must be disclosed and managed.**

Compliance Conclusion

Any violation of BJC Business Practices Corporate Compliance Policies will be consistently enforced in accordance with the appropriate policy. Violations include not only a failure to comply with applicable laws and regulations, and BJC policies but also a failure to detect, report, and/or correct any offense. Violations of this policy and/or any law or other BJC policy or procedure related to compliance will result in corrective action in accordance with the appropriate policy, including possible termination of your work agreement.

We all have a responsibility to obey federal, state and local laws, rules and regulations. We are also responsible to uphold our Code of Conduct and policies and procedures. And one of the most important things we can do is to report activities we think may violate one or more of these. We cannot fix what we do not know is broken.

You should report any potential problems. You can report concerns to BJC Corporate Compliance. If you are uncomfortable reporting to the Compliance Office, report the problem on our 24 hour anonymous hotline. BJC may not retaliate against you for making a good faith effort in reporting.

BJC has an established process to receive complaints anonymously through the following:

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<http://corporatecompliance.carenet.org/ReportingaComplianceConcern.aspx>