Maricopa Integrated Health System

CODE OF CONDUCT AND ETHICS

March, 2012
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Dear Member of the Maricopa Integrated Health System Team:

Personal and corporate integrity has been one of Maricopa Integrated Health System’s (MIHS) guiding principles since the day our hospital was founded. It affects everything we do and is a central part of our daily lives.

All of us need to be comfortable talking about integrity openly and in detail. This updated Code of Conduct and Ethics (Code) is the cornerstone of our Corporate Integrity Program as well as the basis for that conversation. As you read through our Code, we are sure much of it will impress you as common sense. We believe that what is written here is already second nature to you. However, as we grow and expand our operations in an increasingly regulated environment, it is more important than ever that we have a single definition of corporate integrity and a common understanding of what we expect of every member of the MIHS team.

What makes MIHS exceptional is that our roots go deep into the community. Community is an essential part of our mission. MIHS was founded on the ethical imperative to care for the less fortunate among Maricopa County’s residents. This commitment to sound values and best business practices has guided us through many difficult times.

Consider the ethical ideals on the following pages. Renew your personal commitment to the shared values that unite us as an organization and guide our decisions and actions.

Thank you for your continuing efforts.

Sincerely,

Betsey Bayless
President and Chief Executive Officer

William Vanaskie
Vice President and Chief Operating Officer

John J. Middleton
Vice President and Chief Compliance/Privacy Officer
Code of Conduct and Ethics
Revised and Effective March, 2012

I. PURPOSE

This Code of Conduct and Ethics (the “Code”) has been adopted by the Maricopa County Special Health Care District d/b/a Maricopa Integrated Health System (“MIHS”) to provide standards by which the MIHS Board of Directors, employees, officers, medical staff and agents will conduct themselves to protect and promote organization-wide integrity and to enhance MIHS’ ability to achieve its organizational mission. The Code is intended to serve as a guide to assist MIHS’ Board of Directors, employees, officers, medical staff and agents to make sound decisions in carrying out their day to day responsibilities.

II. RESPONSIBILITIES UNDER THE CODE OF CONDUCT and ETHICS

Who must comply with MIHS’ Code of Conduct and Ethics?

This Code applies to all members of the Board of Directors, employees, officers, medical staff and agents of MIHS or affiliated with MIHS throughout MIHS’ diverse operations and any other facilities or services which shall become a part of MIHS (the “Affiliates”). MIHS recognizes the different missions and services that each Affiliate provides and that the Code is designed to allow flexibility for each Affiliate in developing policies and procedures to achieve the standards and goals set forth in the Code while maintaining each Affiliate’s unique mission and services.

What are the responsibilities of each employee with regard to the Code of Conduct and Ethics?

Foster and support an atmosphere of compliance by:

- Reading the standards of the Code and think about their application to your work. You should have a basic understanding of issues covered by each standard and the supplemental compliance policies that apply to your job function.
- Seeking assistance from your supervisor, the Chief Compliance Officer, the District Counsel or other MIHS resources when you have questions about the application of the standards and other MIHS policies to your work.
- Understanding the numerous options that MIHS makes available to you for raising conduct or ethical concerns and promptly raise such concerns. You should raise such concerns with your immediate supervisor or MIHS’ Chief Compliance Officer or its District Counsel. If you prefer to raise your concerns anonymously, the MIHS Compliance Hotline Line 1-866-333-MIHS is another resource upon which you can rely. You can also submit a concern anonymously by logging onto the Copanet and click the tab titled “report a compliance concern.”
- Cooperating in MIHS’ investigations concerning potential violations of law, the Code, the MIHS Compliance Program and MIHS’ policies and procedures.

- Completing all required compliance training.

**What are the responsibilities of MIHS' officers, managers and other supervisors?**

*Build and maintain a culture of compliance by:*

- Leading by example, using your own behavior as a model for all employees.

- Knowing, understanding and following the statutes, rules and regulations that govern your area(s) of responsibility.

- Encouraging employees to raise conduct and ethical questions and concerns.

- Using employee actions and judgments in promoting and complying with MIHS’ Code and other policies as considerations when evaluating and rewarding employees.

- Providing the Office of Compliance with the resources it needs to be successful.

- Ensuring that all subordinates complete all required compliance training.

- Completing all required compliance training.

- Maintaining the confidentiality of information provided to you relating to compliance activities.

*Prevent compliance problems by:*

- Identifying compliance risks and proposing appropriate policies and procedures to address such risks.

- Identifying employees whose activities involve issues covered by MIHS’ policies and procedures.

- Providing education and counseling to assist employees to understand the Code, MIHS policies and procedures and applicable law.

*Detect compliance problems by:*

- Implementing and maintaining appropriate controls to monitor compliance and mechanisms that foster the effective reporting of potential compliance issues.

- Promoting an environment that permits employees to raise concerns without fear of retaliation.
• Arranging periodic compliance reviews that are conducted with the assistance of the MIHS’ Chief Compliance Officer to assess the effectiveness of MIHS’ compliance measures and to identify methods of improving them.

Respond to compliance problems by:

• Pursuing prompt corrective action to address weaknesses in compliance measures.
• Applying appropriate disciplinary action when necessary.
• Consulting with MIHS’ Chief Compliance Officer so that compliance issues are promptly and effectively addressed.

What are the responsibilities of MIHS’ Board of Directors?

Build and maintain a culture of compliance by:

• Reading the Standards of Conduct and Ethics contained in the Code and thinking about their application to you.
• Leading by example, using your own behavior as a model for others.
• Making decisions that are in the best interest of MIHS and that are not affected by conflicts of interest.
• Being knowledgeable about the MIHS Compliance Program and exercise oversight over it.
• Receiving appropriate reports from management concerning the status of the MIHS Compliance Program, the resources required to maintain its vitality and MIHS’ response to identified compliance deficiencies.
• Receiving and acting upon advice from management, including MIHS’ Chief Executive Officer, District Counsel, and Chief Compliance Officer.
• Assuring that the Compliance Program is free from undue restraints and influences through direct reporting by the Chief Compliance Officer to the Board of Directors of compliance matters that promote the integrity of the Compliance Program and raising any concerns with the Chief Compliance Officer or the District Counsel.
• Maintaining the confidentiality of all compliance-related information provided to them, subject to the requirements of applicable law.
• Complete required compliance training.
What are the responsibilities of medical staff?

Assist MIHS to foster an atmosphere of compliance by:

- Reading the Standards of Conduct and Ethics contained in the Code and think about their application to your work. You should have a basic understanding of issues covered by each standard and the supplemental compliance policies that apply to the services you furnish to MIHS and our patients.

- Actively participating in compliance activities as requested by MIHS’ administration.

- Maintaining the confidentiality of information provided to you relating to compliance activities.

- Assisting MIHS in identifying possible compliance issues and in developing possible solutions to address those issues.

- Understanding the various options that MIHS makes available for raising conduct or ethical concerns and promptly raise such concerns. You should raise such concerns with MIHS’ Chief Compliance Officer or District Counsel. If you prefer to raise your concerns anonymously, the MIHS Compliance Hotline 1-866-333-MIHS is another resource upon which you can rely.

- Cooperating in MIHS investigations concerning potential violations of law, MIHS’ Code of Conduct and Ethics, the MIHS Compliance Program and MIHS’ policies and procedures.

- Completing required compliance training.

What are the responsibilities of agents?

Agents are responsible to participate in the MIHS compliance program by:

- Reading the Standards of Conduct and Ethics contained in the Code and think about their application to the services you furnish to MIHS. You should have a basic understanding of issues covered by each standard and the supplemental compliance policies that apply to the services you furnish to MIHS.

- Actively participating in compliance activities, such as education and training, as requested by MIHS.

- Understanding the various options that MIHS makes available for raising conduct or ethical concerns and promptly raise such concerns. You should raise such concerns with MIHS’ Compliance Officer or General Counsel. If you prefer to raise your concerns anonymously, the MIHS Compliance Hotline 1-866-333-MIHS is another resource upon which you can rely.
• Cooperating in MIHS investigations concerning potential violations of law, the MIHS Code of Conduct and Ethics, the MIHS Compliance Program and MIHS policies and procedures.

• Completing required compliance training.

How May the Code of Conduct and Ethics Be Revised? This Code may be amended, modified or waived only after a review by the Chief Executive Officer and the approval of the Board of Directors.

How Frequently will the Compliance Program Be Reviewed? The Compliance Program (including the Code of Conduct and Ethics) will be reviewed annually by the Compliance Committee to foster its effectiveness and at such times when changes to it are necessitated by changes in laws and regulations applicable to MIHS. Suggested changes to the Compliance Program will be presented to the Board of Directors for approval.

III. STANDARDS OF CONDUCT AND ETHICS

1. Patient Relationships: We are committed to providing a high quality of healthcare and services to our patients, their families, visitors and the community. We treat all patients with respect and dignity and provide care that is necessary and appropriate.

Principles:

* We will recognize the right of our patients to receive appropriate services provided by competent individuals in an efficient, cost effective and safe manner.

* We will continually monitor the clinical quality of the services we provide and will endeavor to improve the quality of the services provided.

* We will support every patient’s right to be free from all types of abuse, and will not tolerate patient abuse in any form.

* We will apply our admission, treatment, transfer and discharge policies equally to all patients based upon identified patient needs and regardless of a patient’s ability to pay.

* We will listen to our patients, families and visitors to understand any concerns or complaints and will involve patients in the decision-making process about their care.

* We will demonstrate our commitment to patient safety by continuously reviewing systems, processes and policies to detect and prevent medical errors.
* We will provide treatment and medical services without discrimination based on race, age, religion, national origin, sex, sexual orientation or disability.

* We will remain sensitive to our position as a regional leader in tertiary and specialty care and research, and to our consequent obligation as a health care leader to all segments of our community.

- We will implement policies and procedures to complete emergency assessments as required for all who request our emergency or burn services.

- We will fully and fairly evaluate requests to transfer patients to our care from our colleagues and providers in outlying areas, and will accept such transfers as clinically appropriate.

* We will maintain licensure and credentialing standards to further the provision of clinical services by properly trained and experienced practitioners.

* We will perform background checks of potential employees, medical staff members, contractors and consultants to verify credentials and to assess whether such individuals and entities have ever been excluded from participation in any of the federal health care programs, including the Medicare and Medicaid programs.

* We will respect the privacy of our patients, and we will treat all patient information with confidentiality, in accordance with all applicable laws, regulations and professional standards.

2. General Legal and Regulatory Compliance: MIHS will continuously and vigorously promote full compliance with applicable laws.

Principles

* We will continuously study our legal obligations and create policies and procedures that facilitate compliance by our Board of Directors, employees, officers, medical staff and agents with such legal obligations.

* We will recognize the critical role of research in improving the health status of our community, and we are committed to conducting all research activities in compliance with the highest ethical, moral, and legal standards.

* We will engage in open and fair competition and marketing practices, based on the needs of our community and consistent with the furtherance of our mission.
* We will treat our employees with respect, and will engage in human relations practices that promote the personal and professional advancement of each employee.

* We will recognize that our employees work in a variety of situations and with a variety of materials, some of which may pose a risk of injury. We are committed to providing a safe work environment, and will implement and monitor policies and procedures for workplace safety that are designed to comply with federal and state safety laws, regulations, and workplace safety directives.

* We will recognize that the provision of health care may in some instances produce hazardous waste products or other risks involving environmental impact. We are committed to compliance with applicable environmental laws and regulations, and will follow proper procedures with respect to handling and disposing of hazardous and biohazardous waste.

* We will expect our Board of Directors, employees, officers, medical staff and agents to understand the basic legal obligations that pertain to their individual job functions or services they furnish to MIHS and our patients, and will require that they strive to make certain that their decisions and actions are conducted in conformity with such laws, regulations, policies and procedures.

* We will support educational and other training sessions to teach MIHS’ Board of Directors, employees, officers, and as warranted medical staff and agents, about the impact of the law on their duties and to promote compliance with our collective legal obligations.

* We will support and maintain multiple resources for MIHS’ Board of Directors, employees, officers, medical staff and agents to voice any questions about the proper interpretation of a particular law, regulation, policy or procedure.

3. **Avoidance of Conflicts of Interest:** MIHS’ Board of Directors, employees, officers, medical staff and agents maintain a duty of loyalty to MIHS and to all of the citizens of Maricopa County and, as a result, must avoid any activities that may involve (or may appear to involve) a conflict of interest or that may influence or appear to influence the ability of the Board of Director’s member, employee, officer, medical staff member or agent to render objective decisions in the course of his or her job responsibilities, or other services he or she furnishes to MIHS.

**Principles.**

* We will maintain policies and procedures that make clear when an individual’s private interests may inappropriately interfere with MIHS’
interests and will provide support through which MIHS’ Board of Directors, employees, officers, medical staff and agents may pose questions about whether a particular outside activity or relationship could be construed as a conflict of interest or otherwise improper.

* We will articulate expectations of the conduct that must be demonstrated by MIHS’ Board of Directors, employees, officers, medical staff and agents in the performance of services for MIHS, and will require that such individuals remain free of conflicts of interest in the performance of their responsibilities and services to MIHS.

* The MIHS Conflicts of Interest and Gift Policy, Policy Number 01291 S, establishes the policy and procedure for MIHS’ Board of Directors, employees, officers, medical staff and agents to evaluate, analyze, and properly remediate potential and apparent conflicts of interest.

* We will require MIHS’ Board of Directors, employees, officers, medical staff and agents to inform MIHS of personal business ventures and other scenarios that could be perceived as conflicts of interest and will provide for policies and procedures for doing so.

* We will not permit MIHS’ Board of Directors, employees, officers, medical staff or agents to use any proprietary or non-public information acquired as a result of a relationship with MIHS for personal gain or for the benefit of another business opportunity.

* We will render decisions about the purchase of outside services and goods based on the supplier’s ability to best satisfy MIHS’ needs and not based on personal relationships.

* MIHS Board of Directors, officers and employees shall not use their official position for personal gain. Public influence and confidential or “inside” information must never be used for personal advantage. Conflict of interest laws, A.R.S. § 38-501 et. seq. must be scrupulously observed. The conflict of interest laws prohibit participation by public officers, elected officials, or employees in a decision or contract in which the public officer or employee has a direct or indirect pecuniary or proprietary interest.

4. **Relationship with Payers:** MIHS will consistently strive to satisfy the conditions of payment required by the payers with which MIHS transacts business.

* We will promote compliance with laws governing the submission and review of bills for our services and will deal with billing inquiries in an honest and forthright manner.

* We will implement reasonable measures to prevent the submission or filing of inaccurate, false or fraudulent claims to payers.
* We will utilize systematic methods for analyzing the payments we receive and will reconcile inaccurate payments in a timely manner after discovery and review.

* When warranted, we will investigate inaccurate billings and payments to determine whether changes to current protocol or other remedial steps are necessary.

* We will implement documentation systems sufficient to create and maintain complete and accurate documentation of services provided.

* We will review cost reports to be filed with the federal health care programs to determine whether such reports accurately and completely reflect the operations and services provided to beneficiaries and to confirm that such reports are completed in accordance with applicable federal and state regulations and MIHS’ policies and procedures.

* We will, as necessary, rely on internal and external sources to help improve MIHS’ billing and coding protocol and to identify potential areas of noncompliance.

* We will compensate billing and coding staff and consultants for services rendered, and will not compensate such persons in any way related to collections or maximization of revenues.

5. **Relationship with Physicians and Other Providers:** *MIHS will monitor its business dealings to structure relationships in ways that satisfy the needs of the community.*

* We will maintain relationships with physicians and other referral sources based only on the needs of our community and consistent with the furtherance of our mission.

* We will treat referral sources fairly and consistently, and will not provide remuneration that could be considered payment for referrals, including:
  
  - free or below-market rents;
  - administrative or staff services at no- or below-cost;
  - grants in excess of amounts for *bona fide* research or other services rendered;
  - interest-free loans; or
  - gifts, “perks” or other payments intended to induce referrals.

* We will implement policies, procedures and other protocol which require fair market value determinations for services rendered by referral sources and for services rendered by MIHS.
* We will implement procedures to require all agreements with referral sources to be reduced to writing and reviewed and approved as appropriate under law and MIHS’ policies and procedures.

* We will train the appropriate personnel on the primary laws and regulations governing the referral of patients and other legal restrictions on the manner in which MIHS transacts business, including the penalties that may result for violations of such laws.

6. **Respect for Our Culture:** We recognize that a diverse workforce enriches the life experience of all employees and our community, and will promote diversity consistent with the MIHS Diversity Plan.

* We will provide equal employment opportunities to employees and applicants for employment without regard to race, color, religion, sex, national origin, marital status, political belief, age (over 40), veteran status, or disability, in accordance with applicable law.

* We will implement policies and procedures that promote compliance with laws governing nondiscrimination in personnel actions, including recruiting, hiring, training, evaluation, transfer, workforce reduction, termination, compensation, counseling, discipline, and promotion of employees.

* We will promote diversity with respect to individuals with disabilities, and will make reasonable accommodations to any individual as required by law.

* We will recognize the right of our employees to a workplace free of violence and harassment, and will not tolerate any form of harassment or violence toward our employees.

* We will implement policies and procedures that promote appropriate conduct in the workplace and prohibit unwanted or hostile interaction, including degrading or humiliating jokes, physical or verbal intimidation, slurs, or other harassing conduct.

* We will not tolerate any form of sexual harassment, either overt, such as request for sexual favors in return for promotions, or less obvious forms of harassment, such as sexual comments.

* We will maintain policies and procedures prohibiting workplace violence, including robbery, stalking, assault, terrorism, hate crimes, or violence directed at supervisors.

7. **Information and Information Systems:** We recognize that the provision of health care services generates business, financial, and patient-related information that requires special protection. We will establish systems that ensure such information is used appropriately and safeguarded zealously.
We are committed to the security and accuracy of documents and records in our possession, and will develop systems, policies and procedures sufficient to safeguard the integrity of our documents and records, including systems, policies and procedures to:

- Establish retention periods and protocols for business, financial, and patient records in the MIHS system.

- Prevent the altering, removal, or destruction of records or documents except according to our records retention policy and applicable ethical and legal standards.

- Promote the accurate, thorough, detailed, and complete documentation of all business, financial, and patient transactions.

- Control and monitor access to MIHS’ communications systems, electronic mail, internet access, and voicemail to ensure that such systems are accessed appropriately and used in accordance with MIHS’ policies and procedures.

- Protect the privacy and security of patient medical, billing, and claims information by implementing sufficient physical, systemic, and administrative measures to prevent unauthorized access to or use of patient information, and to track disclosures of such information as required by law.

- Provide access to medical, billing, and claims information for our patients and their legal representatives as required by law.

- Safeguard the personal and human resources information of our employees, including salary, benefits, medical, and other information retained within the human resources system as required by law.

IV. VIOLATIONS OF THE CODE OF CONDUCT AND ETHICS

MIHS is committed to providing all Board of Directors’ members, employees, officers, medical staff and agents with a means of raising questions and concerns, and reporting any conduct that the employee, officer, trustee, medical staff member or agent suspects is in violation of this Code. Board members, employees, officers, medical staff and agents are expected and required to communicate any suspected violations of the Code a direct supervisor, the Chief Compliance Officer or the District Counsel, as applicable. If you prefer, you can anonymously call the MIHS Compliance Hotline which is available 24 hours a day, 7 days a week: 1-866-333-MIHS or you can also submit a complaint anonymously via the Copanet by clicking the tab titled “report a compliance
The Chief Compliance Officer will maintain primary responsibility for investigating reports received on this hotline.

The following list, while not exhaustive, describes the type of concerns and questions that you should raise with your supervisor, the Chief Compliance Officer, the District Counsel or through the MIHS Compliance Hotline:

(i) the possible submission of false, inaccurate, or questionable claims to Medicare, Medicaid or any other payer;

(ii) the provision or acceptance of payments, discounts or gifts in exchange for referrals of patients;

(iii) the utilization of improper physician recruitment techniques under applicable law;

(iv) allegations of discrimination;

(v) potential breaches of confidentiality or privacy;

(vi) situations that could raise conflicts of interest concerns; and

(vii) retaliation.

Now that you are finished reading, please close this window and return to the online lesson window.

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Click the button that says,

2. Click here to acknowledge that you read the Code of Conduct and Ethics.