Code of Conduct
MANUAL

FOR MEMBERS OF UNIVERSITY OF MISSOURI HEALTH, INCLUDING:
MU Health Care, MU School of Medicine, MU Sinclair School of Nursing and MU School of Health Professions
University of Missouri Health is committed to being values-driven in fulfilling our mission to use education and research to provide outstanding patient care and to improve the health of individuals and communities.

Each of us — doctors, nurses, professors, support staff — has an individual responsibility to do things right and to do the right things. This requires first that we understand the policies, rules and regulations that apply to the work we do. Secondly, it means that we put our values into action, act with integrity and are compliant with these policies, rules and regulations. Every day we each have the opportunity to make a profound difference. This could be at the bedside of a patient; at a computer screen; in a research lab; in the dining room, hallway or parking lot; or in a meeting or at our work station. What we do and say, how we act and how we interact all reflect on us as individuals and on our roles as employees.

Excellence is one of the core values that we strive to put into action. Excellence means being satisfied with no less than the highest goals and working together to achieve high standards across our organization. Being people of integrity and acting in compliance with policies, rules and regulations are building blocks toward achieving excellence in all that we do.

Thank you for your support of our Integrity and Compliance Program. Please use this manual to help guide the course of your respective job duties and responsibilities. If you have questions pertaining to content of our Code of Conduct Manual, discuss them with your supervisor, or contact a member of the Office of Corporate Compliance. We are in this together, and we are in it for the good health of the many people we serve.
Organizational integrity

Embracing our core values and observing professional and legal obligations enable us to achieve the highest level of organizational integrity, which is vital to achieving our mission. Organizational integrity is at the core of being a great health system. Integrity requires a well-defined set of values and beliefs that guide our behaviors, systems and practices. A strong culture of integrity helps attract and retain talented faculty and staff. It creates an environment that enables all of us to realize our full potential.

Integrity and Compliance Program

The Integrity and Compliance Program exists to support our mission by providing guidance, education and tools that help us:

- Fulfill commitments to professional and legal obligations.
- Understand the regulations and laws that govern our work.
- Put our values into action in our daily jobs.

Doing the right thing every time is our goal. The Integrity and Compliance Program informs us so that we can achieve this goal.

Our Code of Conduct serves as the foundation for the Integrity and Compliance Program and further demonstrates our commitment to ethical and legal behavior. Standards of the Code of Conduct form the basis of our compliance thinking, policies, practices and actions. They are a practical extension of our core values.

All MU Health employees, faculty and staff commit to fulfilling all professional and legal obligations by agreeing to abide by the rules, regulations and laws that govern us. These commitments apply to everyone who works for MU Health, whether we are providing patient care, conducting research, educating students, maintaining facilities, preparing meals or performing other services.
Applicable to everyone

The Code of Conduct applies to all members of our workforce including:

- Administrators, directors, managers
- Deans, fellows, residents, students
- Employees, full- and part-time
- Faculty physicians, health care professionals
- Volunteers
- Vendors and independent contractors performing work on behalf of the MU Health system

The manual applies to:

- University of Missouri Health Care
- MU School of Medicine
- MU Sinclair School of Nursing
- MU School of Health Professions
- University Physicians
- Designated affiliates and subsidiaries

Purpose of this manual

This Code of Conduct manual provides practical guidelines that support our commitment to maintain integrity and compliance. This manual also contains resources to help you resolve questions about appropriate conduct in your workplace. Every employee’s familiarity with this material will help us meet the needs of our patients and coworkers and comply with requirements of the regulatory and oversight agencies that govern health care providers and research facilities.

Other important resources

You are expected to access, review, understand and comply with the requirements that pertain to your role. If you have questions or need clarification regarding your responsibilities, please contact your immediate supervisor.

Compliance asks, “Can we do this?”

Integrity asks, “Should we do this?”

CODE OF CONDUCT

- We act with integrity and treat everyone we encounter with dignity and respect as we strive to provide high quality patient- and family-centered care.
- We abide by laws and regulations that govern our organization.
- We are trustworthy and maintain the confidentiality of patient and proprietary information.
- We maintain right relationships and avoid conflicts of interest.
- We are good stewards of resources entrusted to us — people, money, supplies, equipment and the health system’s reputation.
- We demonstrate the highest ethical standards in achieving innovation and discovery.

Think of the Code of Conduct as putting our values into action. The Code includes expectations of actions and behaviors of our employees, faculty and staff that support and protect the integrity of our health system. The Code further guides our day-to-day actions as we endeavor to provide the highest quality of patient- and family-centered care, educate future health professionals and conduct research in the most professional and responsible manner.
Resolution of patient complaints
We encourage any patient who experiences a concern or who has a question to inform any staff member and expect immediate assistance. The Patient Safety Network is our process for ensuring patient complaints are properly and promptly addressed. In our environment of respect, we believe it is the patient’s right to express a concern or a complaint and receive a prompt response. Furthermore, we guarantee that we will handle all communications in a confidential manner, and that no adverse reaction will occur as the result of any comments made. We value the opinion of patients and families and use all comments, both positive and negative, to improve our services. Each hospital and clinic clearly informs patients and families of these practices in written documents.

When we fail to meet a customer’s expectations, we empower employees to address the situation and to attempt service recovery. We respond to concerns and complaints to reassure our customers/patients that we truly care about making their experiences the best they can be.

Workplace environment
In support of a safe and professional workplace environment, we share the obligation to work together and to perform to the best of our abilities. By working in a cooperative and professional manner, we can deliver the highest quality patient care possible.

We seek to foster a workplace environment where mutual respect thrives, where we value one another and where we operate as a team dedicated to improving the health care provided. We expect each team member to exercise his/her job responsibilities in a manner that is kind, sensitive, thoughtful and respectful. Communication with coworkers is essential to a successful working relationship and to our ability to deliver quality health care to our patients.

We respect the diversity of others. We also respect the individual privacy of those with whom we work.

Professional behavior
Our organization strives to ensure quality patient care by promoting a safe, cooperative and professional environment free of threats and acts of violence or intimidation, and to prevent or eliminate, to the extent possible, conduct that:

• Disrupts the operation of the hospitals and clinics.
• Adversely affects the ability of others to perform their jobs effectively.
• Creates a hostile work environment for employees and staff members.
• Interferes with an individual’s ability to practice competently.
**Culture of Legal and Regulatory Compliance**

“We abide by laws and regulations that govern our organization.”

As MU Health employees, we agree to know and follow the laws, rules, regulations and policies that apply to our work.

**Policies**

All policies are stored electronically on Navex at muhealth.policytech.com. Supervisors will notify staff about publication of new policies and revisions. When this happens, we are responsible for reading the policy and applying the new information to our work as appropriate.

**Anti-Kickback Statute**

Employees must never accept or offer to take payment or compensation of any kind in exchange for patient referrals or the purchase of goods or services from vendors or outside providers. Kickbacks are illegal. If employees receive offers of such kickbacks, you should immediately report the incident to your supervisor or contact the Office of Corporate Compliance at (573) 884-0632.

**Stark Law**

The Stark Law prohibits a physician from referring patients with Medicare or Medicaid for certain “designated health services” to an entity with which the physician or an immediate family member has a “financial relationship.” The Stark Law addresses the concern that financial incentives may influence the medical decision-making of those providing care. The law helps ensure that medical decisions are made in the best interest of patients. If you have questions or concerns regarding a physician referral practice that you think may violate Stark Law, please contact the Office of Corporate Compliance.

**Anti-trust laws**

Federal and state anti-trust laws prohibit the actions of illegal monopolies which use their power to suppress competition. These laws also prohibit the actions of competitors working together to unfairly restrain trade, such as price fixing.

We adhere to anti-trust laws and will not enter into agreements or understandings with competitors on price, markets or other terms. We avoid trade practices that unfairly or unreasonably restrain competition in the health care marketplace.

**Professional behavior, continued**

Disruptive behavior may include, but is not limited to:

- Using profane, offensive or abusive language in addressing employees, other staff members, patients or visitors whether verbally or in writing.
- Displaying behavior that is offensive, threatening or intimidating.
- Acting disrespectfully or discourteously to others.
- Making inappropriate physical contact with another individual.
- Refusing to accept medical staff assignments or to participate in departmental affairs in a professional and appropriate manner.
- Posting inappropriate comments, photos or videos, or sharing confidential information over a social media networking site.

**Examples that counter our culture of integrity and respect**

- A resident takes offense when a patient expresses preference for a “real doctor” to provide medical care.
- Assuming the family will provide translation, the admission clerk fails to offer our free, 24/7 language service to a patient who speaks a foreign language.
- A research assistant storms out of the lab and slams the door when he and another employee disagree about a political issue.
- Upon hearing that a patient has complained about his attitude, a nurse takes his time responding to the call light when that patient requests assistance.
False claims

It is the policy of our health system to obey the law and to work to eliminate waste, fraud and abuse in the presentation of claims for payment for patient care by federal or state programs and/or private third party payers.

We devote many resources to prevent and correct errors in our billing to Medicare, Medicaid and other payers. The federal government and many states have enacted False Claims Act laws to pursue billing fraud, waste and abuse. We expect employees who suspect that billing errors are occurring to report these to management or the Office of Corporate Compliance. As always, employees who report in good faith are protected from retaliation.

In order to bill accurately, there must be documentation in the medical record that supports the services provided and the medical necessity of those services. Remember, if it is not properly documented, it did not happen. Knowingly presenting or causing to be presented claims for payment or approval which are false or fraudulent is against the law. The filing of false claims carries serious penalties and puts our entire organization at risk. Complete and accurate documentation, coding and billing protect health care providers from running into conflict with the law.

Qui tam whistleblower provisions

The federal False Claims Act includes a whistleblower provision that encourages individuals with actual, direct knowledge of a false claim to report that claim. This provision permits a person with knowledge of false claims activity to file a lawsuit on behalf of the U.S. government.

We’ve also established a provision for individuals to report suspicions of false claims activity or violations of law, regulations, policies or the Code of Conduct. Employees have an affirmative duty to report concerns to their supervisors, human resources, the compliance office or the compliance hotline.

We seek to foster an organizational culture that encourages open communication without fear of retaliation. Furthermore, the federal False Claims Act includes a provision prohibiting an employer from retaliating against an employee who files a False Claims Act case or commits other lawful acts, such as assisting in a False Claims Act investigation or providing testimony.

If you are involved in reporting a violation and have not received a satisfactory response, contact the Office of Corporate Compliance at (573) 884-0632.

Missouri anti-fraud law as related to health care

The Missouri Revised Statutes provide that no health care provider will knowingly make or cause to be made a false statement or false representation of a material fact in order to receive a health care payment. It also prohibits any person from knowingly offering or paying any remuneration, including a kickback, bribe or rebate, directly or indirectly, overtly or covertly, in case or in kind, to any person to induce this person to refer another person to a health care provider for the furnishing or arranging for the furnishing of any health care services. Contact your supervisor or the Office of Corporate Compliance if you suspect a violation.

Response to government inquiries

We cooperate with government inquiries with clear and truthful responses. We never alter or destroy records in the event of an existing or potential government inquiry. Before responding to non-routine requests by a government authority and to ensure proper handling of these contacts, please call the General Counsel’s Office at (573) 882-3211 or the Office of Corporate Compliance.

EXAMPLES THAT VIOLATE LAWS AND REGULATIONS

- A vendor offers a physician tickets to a high profile professional sports event if the doctor advocates for a particular new medical device.
- A coder overlooks missing documentation and submits an incomplete claim to the insurance company.
- A supervisor transfers an employee to a less desirable work shift after the individual reports irregularities in timekeeping in the department.
Secure email and patient portal

Our email policy requires that we transmit all restricted information in a secure manner, using the tools and methods approved by the Information Security Officer and according to all federal and state laws, rules and regulations. Patient requests for communication with providers via texting and email is becoming more prevalent. In response, we offer our patient portal, which is a secure online tool to help connect users to our providers and medical services. The patient portal is the preferred way for patients to access their health information electronically, communicate with their providers, manage appointments and prescriptions, and track their personal health histories. Providers are required to use this tool when communicating electronically with their patients.

Business information and relationships

We must offer factual, fully informative and non-deceptive information in all our marketing and advertising.

We should not identify the name of the health system in any way with the aims, policies, programs, products or opinions of any other organization or its members unless the president of the University of Missouri grants an exception.

We will not contract to obtain services or products from any individual or company convicted of a criminal offense related to health care and/or listed by a federal agency as debarred, excluded or otherwise ineligible for participation in federally funded health care programs.

Vendors and product representatives must display the designated form of identification. We require appointments for vendors to call on clinicians. Product representatives must complete orientation programs annually with documentation on file in Purchasing. Please forward any questions or concerns about vendor representative behavior to Procurement or to the Office of Corporate Compliance.
Gifts
Acceptance of gifts may give the impression we will show favoritism or make decisions based on personal gain. Every decision we make in the workplace should reflect the best interest of our patients and their families, our coworkers and the MU Health system.

We discourage acceptance of all gifts. Those valued at $5 or less that do not exceed $75 from one source annually are acceptable, as long as the gift is not intended to influence care or business decisions.

Gifts to referral sources are subject to a federally imposed annual limit set by Centers for Medicare and Medicaid Services (CMS). These gifts must not be used to induce referrals, or even have the appearance of inducing referrals. The Office of Corporate Compliance can advise you about annual total limits.

Gifts to patients whose care is paid by a federal program, such as Medicare or Medicaid, are limited by federal guidelines to $15 per incident and an annual aggregate of $75. Under no circumstances should these gifts be intended or inferred as an inducement to use our services.

Culture of Transparency
“We maintain right relationships and avoid conflicts of interest.”

Our work is for the mission and not personal benefit or profit. We strive to avoid any conflicts of interest that could cause question regarding our motives.

Conflict of interest
Consistent with our values, we commit to performing our duties in a trustworthy manner and refraining from engaging in any conflict of interest.

A conflict of interest involves realizing personal gain in any form that improperly influences our conduct in performing our duties. Conflict of interest exists when we knowingly use the organization’s property, funds, position or power for personal or political gain.

This means that a faculty member’s or employee’s outside employment or business activities and interests (or those of his/her family members) must not interfere with the employee’s regular duties nor represent a potential conflict of interest. Employees and faculty have the obligation to avoid all situations that present or may present an actual, potential or perceived conflict between the individual’s personal interest and the best interest of our patients and our organization.

Disclosure of conflict of interest
Employees, faculty members, physicians and staff are each required to submit a conflict of interest disclosure statement annually and to update this statement any time there is a change in an outside financial interest. When completing the disclosure statement, the question to ask is, “Does having this financial interest have the appearance of impropriety?”

All disclosure statements are reviewed by the campus Conflict of Interest Committee. Ultimately all disclosure statements require approval by the leadership of the respective entity: the MU Health Care CEO, the dean of the School of Medicine, the dean of the Sinclair School of Nursing or the dean of the School of Health Professions. Adhering to this process minimizes risk to the system or our patients of potential adverse influence of outside financial interests.

EXAMPLES OF A CONFLICT OF INTEREST
• A purchasing director accepts a contract with a supplier in which her family member has a partnership interest.

• A researcher agrees to accept funding from a pharmaceutical company where his spouse has an executive position.

• A physician advocates strongly for a contract with a medical device company owned by his father-in-law.
Culture of Stewardship of Our Resources

“We are good stewards of resources entrusted to us — people, money, supplies, equipment and MU Health’s reputation.”

Our organization entrusts each of us with the responsibility to be conscientious about using our time, equipment and other resources required to do our respective jobs.

Use of resources

Following ethical and legal standards, we expect staff to use our resources to support our mission. This implies that we do not waste supplies, equipment or time and that staff members do not use university resources for unauthorized purposes or for personal reasons.

Financial reporting

Our financial records follow generally accepted accounting principles. We prepare and maintain accurate, clear and complete financial and cost reports, accounting records, research reports, expense accounts, time sheets and other financial data and information. We strive to file all external reports on time and to ensure that they are complete, accurate and understandable.

Record retention

We maintain clinical, financial and personnel records in accordance with our record retention policies.

EXAMPLES THAT REFLECT FAILURE TO STEWARD OUR RESOURCES PROPERLY

- An employee uses her work computer to conduct business for her consulting company that she runs out of her home.
- A groundskeeper stashes a small tool every now and then into his truck before leaving the campus.
- A cashier “rewards” her friends by letting them slip through the cafeteria line periodically without paying.

Culture of Innovation and Discovery

“We demonstrate the highest ethical standards in achieving innovation and discovery.”

We ensure that all research is conducted according to the highest ethical standards and in compliance with all applicable laws, rules and policies.

Human subjects research

Human subjects research requires review and approval by an appropriate, officially appointed Institutional Review Board registered with the Office of Human Research Protections prior to beginning the project and without respect to the source of funding or sponsorship. We have policies that provide appropriate institutional safeguards to sustain a climate in which human subjects research can be carried out responsibly without undue influence from entrepreneurial and financial aspirations.

Compliance oversight of clinical trials

The Office of Research is responsible for overseeing research quality and compliance with regard to clinical trials. This oversight includes reviewing research contracts to ensure appropriate compliance with legal requirements and organizational policies, monitoring billing and services, resolving claims questions, and performing periodic audits of clinical trials. We communicate regulatory requirements through a compliance training program that provides continuing education credits for physicians, nurses and other health professionals.

The office’s Research Participant Advocacy Program helps ensure equitable and respectful treatment of research volunteers. We review all human subjects projects from the perspective of a potential volunteer.

The office also administers the National Institutes of Health’s Protocol Registration System of the clinicaltrials.gov research database. This involves providing user accounts for our investigators and reviewing our entries in the database. We train investigators and their study teams to use the database.
Responsibility to Understand and Report

All of us — physicians, employees, faculty, students, researchers — are required to read and certify our understanding of this Code of Conduct Manual at the time of our initial engagement with MU Health and then annually. We are likewise expected to apply these standards to our respective roles and responsibilities.

If we suspect or encounter a violation of a standard, we have the obligation to report this. Failure to follow or report a suspected violation of these standards will result in disciplinary action.

If you suspect a violation of any of the laws, rules, regulations or policies that govern our work, REPORT IT! Reporting helps us identify and address issues of which we may not otherwise be aware.

Reporting can be completed in several ways:

• Speak to your supervisor or manager about the issue.
• If they cannot help you, or you do not consider them a suitable source, contact the Office of Corporate Compliance at (573) 884-0632.

An investigation will begin immediately regarding the concern. We will protect your confidentiality to the extent possible.

If you prefer to report the concern anonymously, then please call the University of Missouri Integrity and Accountability Hotline at (866) 447-9821 or go online at www.compliance-helpline.com/UM.jsp.

This number is answered 24/7 by a third party that specializes in receiving hotline calls. The information you report will be kept confidential. At the close of the call, you will receive a unique identification number so that you can check on the status of the investigation. All hotline reports are sent to the appropriate departments (e.g., Human Resources, Facilities, Compliance) for investigation.

Reporting and non-retaliation

Open lines of communication are critical to achieving organizational integrity. Our policies forbid retaliation against employees, faculty members or staff who report concerns in good faith. In other words, making a report will not put your job at risk. Anyone who retaliates against the person reporting is subject to disciplinary action. On the other hand, if you violate a law, policy or standard, you will be held accountable even if you report it.

We each have an affirmative duty to report any actual or suspected violation of our Code of Conduct, our policies or any other law or regulation. Identifying issues early is key to addressing these issues and maintaining the integrity of the system.

False claims

The National Science Foundation (NSF) and the Public Health Service (PHS) of the Department of Health and Human Services require that grantee institutions maintain an appropriate written and enforced policy on conflict of interest consistent with provisions in the NSF Grant Policy Manual and 42 CFR Part 50 and 45 CFR Part 94. This pertains to conflicts with the interests of federal grant agencies by investigators involved in proposed or funded research by NSF or PHS (including the National Institutes of Health). The Office of Research ensures that our researchers comply with expectations of these funding sources.

EXAMPLES THAT JEOPARDIZE INNOVATION AND DISCOVERY

• In his eagerness to begin a potentially well-funded research project, a physician agrees to the contract before running the project through the Institutional Review Board.

• One month into a project, a human subject volunteer states that she doesn’t understand the full implications of the research.

• An audit of a clinical trial reveals that the sponsor of the trial was not billed for services and instead, the subject’s insurance company was billed, in violation of the contract.

• An investigator in a high profile clinical trial fails to disclose his financial interest in the company that is sponsoring the trial, in violation of NSF and PHS standards.
For More Help

If you encounter any situation that you believe violates any part of our Code of Conduct, immediately contact your supervisor or another member of management or call the Office of Corporate Compliance at (573) 884-0632.

If you prefer to report the concern anonymously:

• Call the Integrity and Accountability Hotline at (866) 447-9821.
• Email compliance@health.missouri.edu.
• Log in and file your concern or complaint at compliance-helpline.com/UM.jsp.

Notes:

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