

UNIVERSITY OF MISSOURI HEALTH

Code of Conduct MANUAL

FOR MEMBERS OF MU HEALTH, INCLUDING:

MU Health Care, MU School of Medicine,
MU Sinclair School of Nursing and
MU School of Health Professions

Table of Contents

Introduction	1
Code of Conduct	2
From Leadership	3
Applying the Code at Work	4
Decision-Making Model	5
Applicability	6
Reporting	7
Responsibility	8
• Transparency	
• Workplace Environment	
• Patient Quality, Safety and Rights	
• Inclusion and Diversity	
High Ethical Standards	14
• Promoting Professionalism	
• Legal and Regulatory	
• Teaching and Research	
Confidentiality	19
• Protected Health Information	
• Data Security	
Frequently Asked Questions	24
For More Help	25

Introduction

MU Health is committed to improving the health and well-being of the people of Missouri and the world through exemplary research, education and patient-centered care. Our code is a reflection of our mission, vision and values. We live out this commitment by conducting ourselves with integrity and holding ourselves accountable to high ethical standards. This code of conduct describes key areas of workplace ethics; provides guidance on appropriate behavior; and bolsters our culture of caring, delivering, innovating and serving our patients, staff and communities. As a member of MU Health, you should read, understand and use this code in your day-to-day work. Making the right decisions solidifies our trust in each other and builds a constructive work environment. Your commitment to the core principles detailed in the code of conduct and the underlying corporate policies ensures that MU Health will always be a great place to work.

Although the code may not cover every situation, it does set forth MU Health's basic principles for conducting business with integrity.

Thank you for your time, support and commitment to MU Health.

Code of Conduct

▶ AS A MEMBER OF MU HEALTH:

I am responsible to our community to act with **integrity, dignity, respect and trust.**



I maintain the **confidentiality** of patient and proprietary information.



I hold myself to **high ethical standards** of professional behavior.

When making decisions, the right choice isn't always clear. This code, and the ethical decision-making model included, will help you use good judgment and make appropriate decisions when you find yourself in difficult situations. Although the code may not cover every situation, it sets forth MU Health's basic principles for conducting business with integrity. Throughout this document, you will find references to policies, frequently asked questions and even some "right way" and "wrong way" examples to further illustrate how the code comes to life in daily decisions and actions. So, don't put it on a shelf; use it as a resource anytime you're unsure about the right course of action.

From Leadership

As part of the MU Health community, we each have the opportunity to make a profound difference. This could be at the bedside of a patient; in a research lab; in the dining room, hallway or parking lot; 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. Beyond that, we want to build strong relationships with our patients, business partners and each other, as well as be recognized for making a positive difference in our community. Our values continue to be the compass that guides us and defines who we are and how we will work together to achieve our goals. Our continued success and the good reputation of MU Health depends on each of us living our culture every day by acting ethically, responsibly and in compliance with the law.

The code of conduct helps guide behavior when faced with difficult decisions. We expect you to read our code carefully and consult it frequently for guidance. The code does not cover every situation you might encounter and is not a substitute for good judgment and common sense. Great service and great people like you are the core of our organization, and together we can achieve our mission to improve the health and well-being of the people of Missouri and the world through exemplary research, education and patient-centered care.

If you have questions pertaining to the code, 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.

▶ WE WANT TO HEAR FROM YOU!

- Contact your supervisor or member of management.
- Call the Office of Corporate Compliance at **(573) 884-0632**.
- Email **compliance@health.missouri.edu**.
- Call the Integrity and Accountability Hotline at **(866) 447-9821**.
- Log in and file your concern at the Integrity and Accountability website at **secure.umsystem-accountability.ethicspoint.com**.
- Patient Safety Network (PSN) at **apps.muhealth.org/psn_public**.

Applying the Code at Work



How I Engage With Others

I am responsible to our community to act with integrity, dignity, respect and trust.

Fostering a workplace environment where mutual respect thrives will help us accomplish our goals. Being responsible for how we interact with others is key to our success.



Find ways to ensure everyone feels welcome and safe



Follow our policies, protocols and business processes, and help others do the same



Closely monitor what vendors and other service providers do on our behalf



Speak up when you see others engaging in risky or inappropriate behavior



How I Behave

I hold myself to high ethical standards of professional behavior.

Sometimes we need to approve things done by others — whether that's a colleague, a business partner or a service provider. And when we approve their work, we become responsible for it.



Read everything you approve or sign



Reject anything you're not 100% comfortable with



Understand all expenses and costs before submitting or approving any work product



Follow the training you receive to complete your work



How I Access and Use Information

I maintain the confidentiality of patient and proprietary information.

Each of us works with some kind of information — much of it sensitive and private. We need this to do our jobs appropriately, and therefore it's our responsibility to protect it.



Only share if it's need-to-know



Keep information on work devices



Use strong passwords on all accounts



Report immediately if a device is stolen

Decision-Making Model

When facing an ethical dilemma:



1. PAUSE

Take the time to assess the situation and its consequences to determine if your proposed course of action in response to the situation is consistent with MU Health's culture and is in the best interest of MU Health.



2. THINK

- Is it legal?
- Does it comply with regulations, our code, and corporate policies?
- Would my colleagues or leaders approve of my actions if they found out?
- Would it be acceptable if my actions were in the news?

If you answered "No" to any one of these, then you should not engage in the conduct. If you are still unsure, then...



3. ASK

- Is there a reasonable alternative?

Consider proceeding with the alternative if the answer is "Yes." If you still have questions after applying "Pause, Think, Ask," then talk to your supervisor. If you need additional guidance, then contact the Office of Corporate Compliance, Human Resources or Legal.

Applicability

Applicable to Everyone

The code applies to all aspects of the MU Health System, including:

- Administrators, Directors, Managers
- Deans, Fellows, Residents, Students
- Employees, Full- and Part-Time
- Faculty Physicians, Health Care Professionals
- Volunteers
- Vendors and Independent Contractors
- MU Health Care
- MU School of Medicine
- MU Sinclair School of Nursing
- MU School of Health Professions
- University Physicians
- Designated Affiliates and Subsidiaries

The expectations outlined in this code apply equally to all MU Health employees (full- and part-time academic, clinical and administrative staff) and temporary workers (e.g., students, interns). We also expect individuals with whom MU Health interacts (e.g., independent contractors, vendors, others performing work on behalf of MU Health) to behave in a manner that is consistent with this code. MU Health employees working with any of these individuals should inform them about our ethical standards, be alert for anything that appears to compromise these standards, and never ask them to engage in any activity that could violate the spirit or intent of this code.

Violations of the code or its underlying policies may result in corrective actions up to and including termination and, if applicable, legal actions and referrals to governmental agencies. If you see or suspect violations of this code, corporate policies or any other unethical conduct while at work or at work-related functions, we encourage you to speak with your supervisor first. You can also raise the concern to a trusted manager, officer, any member of the Office of Corporate Compliance or Human Resources, or use the Integrity and Accountability Hotline.

Responsibility to Understand and Report

All members of the MU Health community — physicians, employees, faculty, students, researchers — are required to read and certify understanding of this code of conduct at the time of initial hire or contracting with MU Health and then annually. We are then expected to apply these standards to our respective roles and responsibilities.

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 and take appropriate action. Once reported, an investigation will begin immediately regarding the concern. We will protect your confidentiality to the greatest extent possible.

▶ 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**.

If you prefer to report the concern anonymously, you can:



Go online at secure.umssystem-accountability.ethicspoint.com.



Call the MU Integrity and Accountability Hotline at **(866) 447-9821**.

This number is answered 24/7 by a third party, Navex EthicsPoint, 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 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 (e.g., refusing to hire or rehire, disciplining or discharging, refusing to promote, or demoting an employee). In other words, reporting a concern will not put your job at risk. Anyone who retaliates against a person reporting a concern 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 a 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 concerns and maintaining the integrity of MU Health.



I am responsible to our community to act with **integrity, dignity, respect** and **trust**.

Transparency

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

Gifts

Acceptance of gifts may leave the impression of favoritism or making decisions based on personal gain. Every decision made in the workplace should reflect the best interest of our patients and their families, our coworkers and MU Health. Employees should avoid acceptance of all gifts.

Gifts to Referral Sources or Patients

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 have the appearance of inducing referrals. The Office of Corporate Compliance can advise you on how to appropriately structure a gift.

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.

Conflict of Interest

A conflict of interest involves realizing personal gain in any form that improperly influences the performance of your duties. It exists when someone knowingly uses the organization's property or funds, or his/her organizational position or power for personal or political gain.

This does not mean employees can never be engaged with outside activities. However, it does mean that any outside employment or business activities and interests (or those of your family members) must not interfere with your regular duties nor represent a potential conflict of interest. You have an obligation to avoid situations that present or may present an actual, potential or perceived conflict between your personal interest and the best interest of our patients and our organization.

Disclosure of Conflict of Interest

If you believe you have a potential conflict of interest, report it. Some employees, faculty members, physicians and staff are 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. Use the "Pause/Think/Ask" model when considering potential conflicts of interest.

All disclosure statements are reviewed by the campus Conflict of Interest Committee. Ultimately all disclosure statements require approval by leadership: 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 MU Health and our patients by avoiding or mitigating potential inappropriate influence by outside financial interests.



I was asked to consult for a pharmaceutical company. Is this OK?

Maybe. You should communicate with your supervisor first, and then report the activity prior to starting any consulting for the company.

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 in a cooperative and professional manner, while delivering the highest quality patient care possible.

Fostering a workplace environment where mutual respect thrives, where we value one another and where we operate as a team dedicated to improving health care requires that each team member exercise job responsibilities in a manner that is kind, sensitive, thoughtful and respectful. Communication with your coworkers is essential to a successful working relationship and to our ability to deliver high-quality health care to our patients. Respect the diversity of others and the individual privacy of those with whom you work and interact.

Use of Resources

Following ethical and legal standards, use of MU Health resources must be in support of our mission. Supplies, equipment or time should not be wasted and staff members must not use MU Health resources for unauthorized purposes or for personal reasons.

Patient Quality, Safety and Rights

MU Health pledges to provide high-quality care for our patients by upholding professional standards of care, reporting patient safety concerns and ongoing quality improvement activities.

In partnership with the community, we are committed to providing an environment that is free from abuse, neglect or harassment and strive to recognize, remove and report any incidences of abuse and neglect without delay.

Acting in the best interest of and providing an excellent customer experience for our patients and their families requires that we work competently, efficiently, expeditiously and impartially by practicing within our scope of education and expertise while advocating for processes that are fair, consistent and transparent.

As our partners in this work, our patients will be treated in a manner that preserves their dignity, autonomy, self-esteem, civil rights and involvement in their own care. Each patient is presented with our Patient Rights and Notice of Privacy Practices, which explain their rights to make decisions about their own care and inform them of our obligations related to Protected Health Information (PHI). We provide this information, as well as our policies, in a language, written or spoken, that the patient can understand.

Inclusion and Diversity

MU Health is committed to fostering an engaging environment that recognizes and encourages the diverse perspectives, experiences and contributions of our community toward fulfilling our mission. Providing culturally relevant care in an environment where everyone is welcome and treated with respect achieves our mission. Everyone is responsible for ensuring that we have a healthy and productive environment by exhibiting our culture and demonstrating professionalism, respect and civility at all times.

Our inclusion efforts apply to every facet of MU Health; from recruitment and hiring to professional development and training, we strive to create an inclusive environment where everyone is valued.



I want to learn how to be more inclusive, but I don't know where to start. Are there any resources to help me?

Yes! Connect with an Employee Resource Group (ERG). Keep reading for more about our ERGs.

Employee Resource Group

Employee Resource Groups (ERGs) are MU Health Care-sponsored and employee-managed groups. The membership is comprised of employees from underrepresented backgrounds that organize around a shared interest or identity to foster a diverse and inclusive workplace, and align with our mission, values and goals. ERGs provide opportunities for employees to connect through a common background or as an ally of support, and are a cornerstone of MU Health Care's diversity, inclusion and equity efforts to ensure a cohesive work environment. For more information, please contact askhr@health.missouri.edu.

Non-Discrimination and Title IX

The university prohibits discrimination and/or harassment due to: race, color, national origin, ancestry, religion, sexual orientation, gender identity, gender expression, age, disability, veteran status and sex/gender, including: sexual misconduct, pregnancy, sexual harassment, stalking, dating/intimate partner violence and sexual exploitation. Retaliation for making or supporting a report of discrimination or harassment is also prohibited. All students, employees (faculty and staff), volunteers, applicants and visitors at the University of Missouri, including its campuses, hospitals and clinics, Extension offices and other university-sponsored or university-supervised functions, are protected by the university's nondiscrimination policies.

When to Report

If you experience, or are aware of, any form of discrimination or retaliation, please make a report so we can work to address the situation in an appropriate manner. All members of the university community, as well as visitors and third parties, can report incidents. Many university employees are mandated reporters for allegations of sex discrimination. Please review the Sex Discrimination, Sexual Harassment and Sexual Misconduct in Education/Employment Policy (CRR 600.020) or contact MU Health Employee Relations for more information.

How to Report

If the discrimination/harassment/retaliation concerns involve patients, PHI or allegations against MU Health Care staff please report to:

▶ MU Health Care Human Resources:

 by email at employeerelations@health.missouri.edu, or
 by phone at **(573) 882-8187**.

▶ Integrity and Accountability Hotline:

 by phone at **(866) 447-9821**, or online at
 secure.ethicspoint.com/domain/media/en/gui/40803/index.html.

If the discrimination/harassment/retaliation concerns involve MU students, faculty or staff (including School of Medicine, School of Nursing and School of Health Professions staff) and do NOT involve PHI or patients, please report to:

▶ MU Office for Civil Rights & Title IX (OCRT9):

 online at civilrights.missouri.edu.



I hold myself to the **high ethical standards** of professional behavior.

Promoting Professionalism

Professional Behavior

Ethical standards include promoting a safe, cooperative and professional environment free of threats and acts of violence or intimidation. Help us to prevent or eliminate, to the extent possible, any 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; or
- Interferes with an individual's ability to practice competently.

This not only includes in-person behavior, but also any conduct through the use of social media or any other communication or information technology. Disparaging remarks or actions against a business competitor is equally inappropriate. Competitors are important parts of our broader community and deserve the same respect and dignity we give each other.

Response to Government Inquiries

Our colleagues in local, state and federal government agencies are important partners in serving our community and achieving our mission. MU Health will always cooperate with government inquiries and provide clear and truthful communications. Record retention and document curation are important to our business continuity and provide the necessary documentation of our activities. In order to ensure proper handling of these communications, please call the General Counsel's Office at (573) 882-3211 or the Office of Corporate Compliance before responding to requests from a government official.

Policies

All MU Health Care and many MU School of Medicine policies are stored electronically on Navex at muhealth.policytech.com. If you cannot find a policy you are looking for, please contact your supervisor or the Office of Corporate Compliance. Supervisors will notify staff about publication of new policies and revisions and will explain any responsibilities for reading the policy and applying the new information to your work as appropriate.

Resolution of Patient Complaints

Patients who experience a concern or who have a question can inform any staff member and expect immediate assistance. When we fail to meet a customer's expectations, you are empowered to address the situation and to attempt service recovery. Let us know about these experiences by communicating with your supervisor or through the Patient Safety Network (PSN) system.

Legal and Regulatory

The elimination of waste, fraud and abuse in the presentation of claims for payment for patient care by federal or state programs and private payers requires vigilant attention to our professional practices and the laws and regulatory structures that govern those activities. The information provided below is intended for educational purposes only and is not an analysis or legal opinion of any particular situation. Please contact the Office of Corporate Compliance if you have any questions or would like to discuss further.

Fiduciary Integrity

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

Anti-Kickback Statute

Kickbacks are illegal. Do not 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. If you receive such offers, 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 covered by 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 and ensures 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 the Stark Law, please contact the Office of Corporate Compliance.

Anti-Trust Laws

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

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

False Claims

The federal government and many states have enacted False Claims Act laws to pursue billing fraud, waste and abuse.

Documentation in the medical record supporting the services provided and the medical necessity of those services is critical to our ability to avoid billing errors. 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. If you suspect that billing errors are occurring, report your concerns to your supervisor or the Office of Corporate Compliance. As always, employees who report in good faith are protected from retaliation.

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. Additionally, the 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.

You are encouraged to report any concerns to your supervisor, Human Resources, the Office of Corporate Compliance or the Integrity and Accountability Hotline at (866) 447-9821.

Missouri Anti-Fraud Law as Related to Health Care

The Missouri Revised Statutes provide that no health care provider will knowingly make or be caused to make 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.

Teaching and Research

Teaching and Research Environment

MU Health is proud of our position as an academic health system, bringing research and teaching into our mission of clinical care. It is important that our patients understand the benefits and unique considerations of care in an academic setting. Ensure that each patient you interact with understands that we are a teaching hospital and that they have the right to request a consultation with another provider at any time. Likewise, giving our patients information about possible research participation and obtaining informed consent is an important and unique aspect of the care they can receive at MU Health Care facilities.

Ethics in Research

Research activities must be conducted in accordance with this code of conduct and any professional ethical codes applicable to the research activities. Request and oversight for research activities is submitted to applicable Institutional Review Boards (IRBs).

Participants are treated with all dignity and fairness throughout the research activities (e.g. informed consent/assent, maintenance of confidentiality, publication of research results and the right to withdraw). Where any limitations to standard of care services are unforeseeable or unavoidable, this is communicated per ethical and IRB procedures.

Ethics in Teaching

Education and training activities are developed in alignment with training and certification standards set by respective boards. Information disseminated to students and trainees must be current and accurate.

Students and trainees of all levels are treated in accordance with ethical and legal safeguards throughout selection and the complete training experience, including accurate and fair evaluation procedures.



I maintain the **confidentiality** of patient and proprietary information.



I'm conducting a really important clinical trial and one of my research subjects now says she wants to quit the trial. Do I have to honor her request?

Yes. Research participants may withdraw consent at any time. If you are concerned about how this impacts your trial, please reach out to the IRB for guidance.

Protected Health Information (PHI)

PHI includes all information obtained during a health care encounter, whether in electronic, audio, photo, video or paper form. We operate under the requirements of the Health Insurance Portability and Accountability Act (HIPAA) Privacy and Security Rules and the Health Information Technology for Economic and Clinical Health (HITECH) Act. These laws require administrative, physical and technical safeguards to ensure the confidentiality, integrity and availability of PHI. PHI may only be used, accessed or disclosed for treatment, payment or health care operations, or as required by law, without patient authorization.

Ensuring Patient Privacy

As a health care organization, MU Health is entrusted with demographic, financial and clinical information regarding our patients. We take patient privacy very seriously and must protect the information we obtain from patients while they are seeking care at our organization.

We expect employees to protect and preserve the confidentiality of PHI, meaning that what you learn while working in your role at MU Health should stay at MU Health. Employees must also follow the “minimum necessary standard,” which states that you can only use, access or disclose the minimum amount of information necessary to accomplish your job. You cannot access or look at a patient’s records for any other purpose than to do your job. This includes looking at your own, a family member’s or a friend’s medical record.



Always ask yourself: why am I looking at this patient’s information?

If the answer is anything other than for your job, stop immediately. For all questions regarding appropriate use, access or disclosure of PHI, please contact the MU Health System Privacy Officer at **(573) 882-5193**.



I’m cleaning up a patient room after discharge and need to discard an IV bag. The IV bag has a patient label on the outside. What should I do?

Remember to remove the patient label and place the label in a secure storage bin for shredding or to use a black marker to redact all PHI from the label prior to placing the bag in the regular trash.

Reporting a Breach of PHI

A breach includes any inappropriate or unauthorized use, access or disclosure of PHI. If you observe or are aware of a breach of PHI, report it immediately to your supervisor, manager, department head, appropriate school leadership, MU Health System Privacy Officer, Human Resources, or the Hotline.

Responsibility for PHI

You are responsible for all PHI that you access, create or maintain. This includes documents that you print and information accessed under your username. To prevent a HIPAA breach, you should ensure that you are securely storing paper PHI and logging off computer systems when you are finished.

Paper PHI should be securely stored in areas that can only be accessed by staff whose assigned duties require such access. Disposal of paper PHI should be done by use of shredders or secure storage bins located within the department or work unit. In the case of materials that are not suitable for shredders (e.g. patient wrist bands, medication bottles and IV bags), you should remove the patient label prior to placing the item in the regular trash or use a black marker to redact all PHI on the item.

Data Security

Data security is everyone's responsibility. Employees should never share their login credentials with anyone, including their coworkers and supervisors. When leaving a workstation unattended, you should always lock or logout of the system.

MU Health will never send you an email that asks you to click a link in order to reset your password. If you receive a suspicious email, please forward the email as an attachment to abuse@missouri.edu.

If you have been provided a laptop or mobile device by MU Health, do not let others use that device, including family members and friends. These devices are meant to be used only for business purposes.

When using personally owned devices, such as a smartphone or home computer to access MU Health resources remotely, ensure that the operating systems and applications are updated with the latest security patches, and that your devices are protected with antivirus. Reference MU Health corporate policies in Navex if you have further questions.

Any questions around data security may be directed to the MU Health Information Security Officer at (573) 882-3716.

Secure Email and Patient Portal

When the need to email PHI to another physician or clinic occurs, you must use the approved secure email transmission tool to ensure encryption. Insert "[secure]" in the subject line of the message to be encrypted (brackets must be included). This tells the email system to encrypt the message before it leaves the email system. The recipient receives instructions on how to access the confidential email. These instructions include having the recipient set up a username and password to access the secure email portal.

Patient requests for communication with providers via texting and email is becoming more prevalent. In response, we offer our HEALTHConnect patient portal, which is a secure online tool to help connect users to our providers and medical services. HEALTHConnect 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 should utilize this tool when communicating electronically with their patients.

Business Information and Relationships

Factual, fully informative and non-deceptive information must be included in all our marketing and advertising.

Do 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 granted an exception by University of Missouri System leadership.

Contracting to obtain services or products from any individual or company must be routed through the appropriate approval channels. All agreements such as contracts for services and offer letters to employees must be vetted in this manner.

Vendors and product representatives must display the designated form of identification. Appointments are required 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.

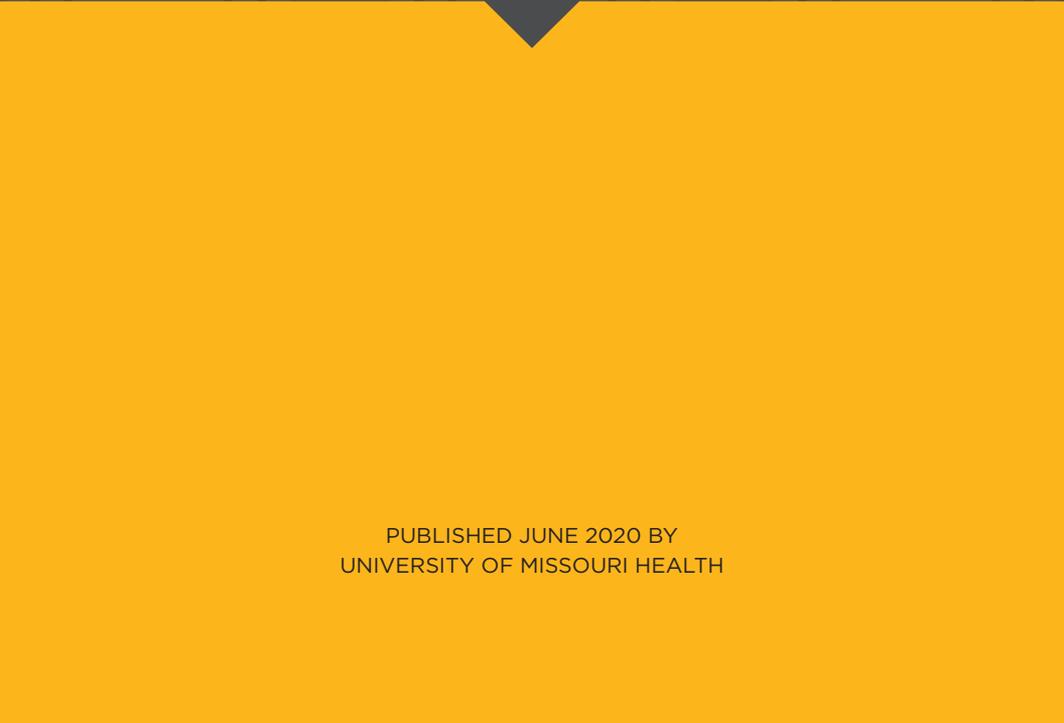
Record Retention

Clinical, financial and personnel records must be maintained in accordance with our record retention policies. The mission of the Records and Information Management Program is to establish the criteria for retention of records to ensure the University of Missouri System retains the necessary information to meet legal, financial, administrative, research and historical needs and to provide an efficient forms management program for the orderly gathering and processing of University of Missouri System's information in the most cost-effective manner. If you have questions about how to maintain or transfer records to the Records and Information Management Program, please contact your supervisor or the Office of Corporate Compliance.



I printed out a provider's surgery schedule so that I can call the patients to confirm their appointments. After calling the patients, what should I do with the list?

If you need to access the list again, remember to securely store the document to prevent others from gaining access to it. If you do not need to access the list again, you should shred the list or place it in a secure storage bin located within your department.



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