I. Policy Statement
   a. All medical, financial and operational decisions made within MU Health shall be made in the interest of our patients and their families, MU Health and the University of Missouri. Any decision made by an employee or medical staff member that does not uphold this policy statement will be considered as a potential Conflict of Interest that must be disclosed, reviewed and managed as necessary.
   b. This policy establishes expectations for interactions with industry representatives and Potential Referral Sources with the faculty and staff of MU Health.

II. Definitions
   a. Conflict of Interest (COI): an actual, potential or perceived Conflict of Interest occurs in those circumstances where an individual’s judgment could be affected because the individual has a personal interest in the outcome of a decision over which the individual has control or influence. A Conflict of Interest exists when an officer, agent or an employee influences any organizational business transaction, research activity or other decisions in ways that lead to personal gain or profit either directly or indirectly for the officer, agent or employee or for his/her Immediate Family Members, other than salary from the organization, or when the officer, agent or employee divides his/her loyalties or actions between the organization's interest and those of a third party.
   b. Financial Interest: income or other remuneration, as well as investments and ownership interests in a non-University business concern. It does not include stocks, bonds and other securities sold on a national exchange, mutual funds or certificates of deposits and other depository accounts at financial institutions.
   c. Immediate Family Member: a husband or wife; birth or adoptive parent, child or sibling; stepparent, stepchild, stepbrother, or stepsister; father-in-law, mother-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law; grandparent or grandchild; and spouse of a grandparent or grandchild.
Title: Corporate Compliance - Conflict of Interest - Policy

d. Potential Referral Sources: a doctor of medicine or osteopathy, a doctor of
dental surgery or dental medicine, a doctor of podiatric medicine, a doctor of
optometry, a chiropractor, or other providers (including advanced practice
registered nurses) with patient care responsibilities.

III. Process/Content
a. General Information.
i. Faculty and staff are expected to recognize and report all situations that
present or may present an actual, potential, or perceived conflict
between the workforce member’s personal interest and the best interest
of patients and the organization. Faculty and staff, in the exercise of their
clinical, operational or administrative authority and fulfillment of their
duties to the organization, shall not be unduly influenced by other faculty
and staff who have an actual or potential Conflict of Interest with the
organization. Faculty and staff who enter into undisclosed conflicts of
interest may be subject to discipline up to and including dismissal from
employment under the Collected Rules and Regulations of the University
of Missouri, as well as subject to personal liability or criminal prosecution.

ii. Interactions with industry may occur in a variety of legitimate contexts,
including marketing of new pharmaceutical products, medical devices,
and research equipment and supplies on-site, on-site training of newly
purchased devices, the research and development of new devices, drugs
and other medical products, educational support, and continuing medical
education.

iii. Faculty and staff may also participate in interactions with industry off
campus, and in scholarly research and publications. Many aspects of
these interactions are positive and important for promoting the
educational, clinical and research mission of MU Health. However, these
interactions must be ethical and cannot create conflicts of interest that
could endanger patient safety, data integrity, the integrity of our
education and training programs, or the reputation of either our faculty
and staff or the institution.

iv. Full-time faculty members are expected to devote their primary
professional loyalty, time, and energy to their teaching, research,
administrative responsibilities and patient care. Accordingly, faculty
members should arrange outside activities so as not to interfere with the
primacy of these commitments. A time commitment towards outside
activities consistent with American Association of University
Professors/American Council on Education (AAUP/AAC) recommendations may be allowed, but only if approved by the faculty member’s Dean.

v. A faculty member who serves on a Board of Directors, or is an executive of a business is not permitted to participate in clinical research on a technology owned by or obligated to the business regardless of whether he/she has a Financial Interest in the business and is not permitted to receive sponsored research from that business regardless of whether he/she has a Financial Interest in the business. This provision does not apply to a faculty member who is a member of a Scientific Advisory Board and who does not either hold an executive position or serve on the Board of Directors.

vi. The following external activities may be allowable only after disclosure, review, and approval by the faculty member’s Dean and the CEO with advice from the MU Health COI Committee (HCOIC).

1. A faculty member making clinical referrals to a business in which such faculty member, a member of his/her family, or an associated entity has a Financial Interest.

2. A faculty member possessing a Financial Interest in a business which competes with the services provided by the university.

b. Procedure: Disclosure of Conflicts of Interest

i. MU Health faculty and exempt staff members shall annually complete a report disclosing possible conflicts of interest using the web-based form found at https://ecompliance.missouri.edu/login. Reminders will be sent annually to all faculty and staff to submit a report.

ii. Whenever a Conflict of Interest exists or may appear to arise, a full disclosure of all relevant facts and circumstances must be made within 30 days of discovery of such a conflict. This affirmative obligation applies to all faculty and staff, exempt and non-exempt, and should be reported via the web-based form found at https://ecompliance.missouri.edu/login.

iii. All reports of potential conflict will be reviewed by the MU Health COI Committee (HCOIC) which is staffed by MU Health personnel including representatives from clinical care, education, purchasing, responsible research, University Physicians, intellectual property, and others depending on the type of reported conflict. The HCOIC will consult with a representative of the Office of General Counsel as appropriate and Office of General Counsel representative(s) may be included as advisors to the Committee. This Committee will review conflict reports and recommend
Title: Corporate Compliance - Conflict of Interest - Policy

the steps that must be taken to manage, mitigate or eliminate the potential conflict. Recommendations of the Committee will be communicated to the individual’s supervisor, contracting units, and other units as appropriate. In cases of uncertainty or disagreement regarding the existence of a potential conflict or the steps for managing, mitigating, or eliminating the potential conflict, the Deans or MU Health CEO for the affected school or operating unit shall have final approval authority.

iv. Compensation and reimbursement for travel, lodging and out of pocket expenses connected with providing legitimate speaking services to professional organizations do not require disclosure except where required by Federal regulation (see Section 420.030 of the Collected Rules, Conflicts with Interests of Federal Grant Agencies).

v. In addition to this policy, faculty and staff shall abide by Section 330.015 of the Collected Rules and Regulations Policy on Conflict of Interest and determinations of the separate campus Conflict of Interest Committee. If the requirements of this Policy and Section 330.015 or a determination of the HCOIC and the campus Conflict of Interest Committee differ, the HCOIC and the campus Conflict of Interest committee will meet to collectively review the issue and determine a course of action.

c. Procedure: Disclosure of Relationships with Industry

i. Faculty and staff are prohibited from publishing articles under their own names that are written in whole or material part by industry employees.

ii. In scholarly publications, faculty and staff must disclose their related Financial Interests in accordance with the International Committee of Medical Journal Editors (www.icmje.org).

iii. Faculty and staff with supervisory responsibilities for students, residents, trainees or staff should ensure that the workforce member’s conflict or potential Conflict of Interest does not affect, or appear to affect, his or her supervision of the student, resident, trainee, or staff member. See the Accreditation Council for Continuing Medical Education (ACCME) Standards for Commercial Support (www.accme.org) and the Accreditation Council for Graduate Medical Education (ACGME) Principles to Guide Relationships between Graduate Medical Education and Industry (www.acgme.org).

d. Gifts

i. Gifts of significant value may not be accepted for individual use by faculty and staff from any past, present or future MU Health vendor, business associate, contractor, or anyone who has or hopes to have a business
relationship with MU Health. Small tokens like pens, memo pads, trinkets, and inexpensive food are acceptable but not encouraged, so long as each instance is $5.00 per workforce member or less, and $75 or less annually per vendor per workforce member.

ii. While this policy establishes a “de minimis” standard, it is strongly advised that no form of personal gift from industry be accepted under any circumstances to avoid even the appearance of inappropriate influence. Faculty and staff should be aware of other applicable policies, such as the AMA Ethical Guidelines for Gifts to Physicians from Industry, the Accrediting Council for Continuing Medical Education Standards for Commercial Support, and the PhRMA Code on Interactions With Health Care Professionals with health care professionals.

iii. Faculty and staff may, with the facility director’s or Dean’s approval, provide gifts, entertainment and meals of greater than nominal value to customers, current and prospective business partners and other persons when such activities have a legitimate business purpose and are reasonable and consistent with applicable laws, UM Collected Rules and Regulations, and MU Health policies (see also “Corporate Compliance – Business Courtesies – Policy”).

iv. Departments or Divisions may accept gifts from any source into official University Gift Accounts, so long as the gift meets the requirements of the UM Collected Rules and Regulations and MU Health policies.

v. Faculty and staff may not accept gifts or compensation for prescribing or changing a patient’s prescription.

vi. Faculty and staff must consciously and actively divorce clinical care decisions from any perceived or actual benefits expected from any company. It is unacceptable for patient care decisions to be influenced by the possibility of personal financial gain.

vii. Faculty and staff may not accept compensation, including the defraying of costs, for simply attending a CME or other activity or conference (assuming the workforce member is not speaking or otherwise actively participating or presenting at the event).

viii. Industry support for faculty and staff shall be free of any actual or perceived Conflict of Interest, and must be specifically for the purpose of education and must comply with all of the following provisions.
   1. The employing department, program or division selects the student or trainee.
2. The funds are provided to the department gift account, program, or division and not directly to student or trainee.
3. The department, program or division has determined that the funded conference or program has educational merit.
4. The recipient is not subject to any implicit or explicit expectation of providing something in return for the support, i.e., a “quid pro quo.”
5. This provision may not apply to national or regional merit-based awards, which are considered on a case-by-case basis.

ix. Faculty and staff shall evaluate very carefully their own participation in meetings and conferences that are fully or partially sponsored or organized by industry because of the high potential for perceived or real Conflict of Interest. The Office of Corporate Compliance is designated to assist in researching questions in this area.

x. Meeting of professional societies may receive partial industry support (meetings governed by ACCME Standards). Faculty and staff who actively participate in meetings and conferences supported in part or in whole by industry (e.g., by giving a lecture, organizing the meeting) should follow these guidelines:
   1. Financial support by industry is fully disclosed by the meeting sponsor.
   2. The meeting or lecture content is determined by the speaker and not the industrial sponsor.
   3. The lecturer is expected to provide a fair and balanced assessment of therapeutic options and to promote objective scientific and educational activities and discourse.
   4. The MU Health participant is not required by an industry sponsor to accept advice or services concerning speakers, content, etc., as a condition of the sponsor’s contribution of funds or services.
   5. The lecturer makes clear that content reflects individual views and not the views of MU Health.
   6. The use of the MU Health name in a non-MU Health event is limited to the identification of the individual by his or her title and affiliation.

e. Vendor Gifts and Reimbursement
   i. Vendors are prohibited from providing gifts of significant value to any individual workforce member (see gift section above).
ii. Vendors may provide funds to help underwrite the cost of educational programs under the following conditions:

1. MU Health does not contract with a vendor for goods and/or services and at the same time obligate the vendor to provide funding for educational programming in connection with or contingent upon a vendor providing such goods and/or services.
2. The appropriate approvals are obtained in advance.
3. The event is not limited to only MU Health participants.
4. Travel is within the continental United States and lodging is less than three nights. If the request involves travel outside the continental United States or lodging in excess of three nights, the employee must also receive approval from the facility director.
5. All funds must be received into an approved University gift account for disbursement.
6. If the request is for an executive, the CEO or appropriate Dean or their designees must approve the request.

iii. Faculty and staff who provide speaking or other services on their own time and expense may accept reasonable compensation and reimbursement for travel, lodging and out of pocket expenses connected with providing the services. Faculty and staff who provide speaking or other services on MU Health time may, with their facility director’s approval, accept reasonable compensation and reimbursement for travel, lodging and out of pocket expenses connected with providing the services, provided the funds are received into an approved University gift account. Faculty and staff must return any remuneration or reimbursement to the University for any travel, lodging and out of pocket expenses the health system may have incurred connected with providing the services.

iv. Vendor representatives who violate the above policy are subject to debarment from all MU Health facilities and vendor management will be contacted in order to request a replacement representative. Appropriate federal regulatory agencies may also be contacted.

IV. Attachments
   a. Not Applicable.

V. References, Regulatory References, Related Documents, or Links
Questions about this policy and its application and interpretation, or for research and guidance, should be directed to the MU Health Office of Corporate Compliance.

b. **AMA Ethical Guidelines for Gifts to Physicians from Industry**

c. **Accrediting Council for Continuing Medical Education Standards for Commercial Support**

d. **PhRMA Code on Interactions With Health Care Professionals**