Code of Conduct Contents

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You are the most important part of this process because your work directly influences our organization’s reputation.

**Patient Care and Rights**

Our mission is to provide high quality health care to all of our patients. We treat all patients with respect and dignity and provide care that is both necessary and appropriate. We make no distinction in the care we provide based on race, color, religion, sex, ethnic background, sexual orientation/gender identity or national origin. Clinical care is based on identified patient health care needs, not on patient or organization economics.

Patients and their representatives will be accorded appropriate confidentiality and privacy as well as an opportunity for resolution of complaints. Patients are treated in a manner that preserves their dignity, autonomy, self-esteem, civil rights and involvement in their own care. Compassion and care are part of our commitment to the communities we serve. We strive to provide health education, health promotion and illness prevention programs as part of our efforts to improve the quality of life of our patients and our communities.

**Standards of Ethical Behavior**

Following the standards of ethical behavior is critical to achieving our mission.

University of Louisville Health's (UofL Health) reputation is its most valuable asset and is directly related to the conduct of its officers and team members. The following outlines our core ethical behavior standards:

- Honesty, integrity, dignity and compassion
- Personal accountability
- Respect for persons, property and the law
- Respect for patient confidentiality and privacy
Our continued success depends on your ability to make decisions that are consistent with these standards

Regardless of the situation, be honest in everything you do. As an employee, you are responsible for complying with all applicable laws and regulations and for knowing and complying with this Code and other policies of the company. Violations of law, this Code or other policies of the company are subject to disciplinary action, which may include termination. Your commitment to doing the right thing will strengthen our team and our reputation as a provider of quality health care.

Make good choices

When you are faced with an ethical dilemma, take action. It may seem easier to say nothing or look the other way, but taking no action can have serious consequences. Speak up if you see or suspect activity that violates our Code. As we continue to grow and innovate, you will be helping to further our mission and preserve our values.

What if I’m not sure if a particular action is a violation of our Code?

Check the Code guidelines for an answer. If the answer is still not clear, use the decision tree (next page) to help determine the right course of action and who to contact for assistance.

1) Ask yourself is this action legal?
2) Does this comply with UofL Health policies?
3) Does this reflect UofL Health values and is this in line with our mission?
4) Does this feel right?
5) Would I feel comfortable with this being publicized?

If the answer if no to any of these questions, then you know the answer to what you should do. Don’t do it!

Understand and Be Familiar with the Code

I would never knowingly violate a law or policy, but sometimes situations arise where the right thing to do is not clear…
Our Code was built to be user friendly

We believe that long-term, trusting business relationships are built by being honest, open, and fair. Our Code reflects these beliefs. It’s a guide you can rely on to help determine what is right and what’s not when it comes to our workplace. It promotes:

- Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships
- Full, fair, accurate, timely, and understandable disclosure in reports and documents that we file with, or submit to, government agencies and in other public communications
- The protection of confidential and proprietary information about UofL Health, our employees, contractors, patients, partners, and vendors
- Compliance with applicable governmental directives, laws, rules, and regulations
- Prompt internal reporting of any violations of the Code
- Accountability for adherence to the Code by every UofL Health employee, board member, volunteer and service provider

The Code applies to everyone at UofL Health

The Code applies to all UofL Health employees, service providers, volunteers and members of our Board. We also seek to do business with suppliers who adhere to similar ethical standards. The Code is monitored by our Senior VP of Compliance, Risk & Audit Services and is affirmed yearly by all Directors, employees, service providers and volunteers through an annual certification process.
You are required to know, understand, and follow the Code. Remember, **ONLY** you are in charge of your decisions and your actions, so when in doubt, check it out. No one has the authority to make you violate the Code, and any attempt to do so is unacceptable. You also have a responsibility to watch for potential violations of the Code and to report them, whether they occur inside UofL Health or through external dealings with our suppliers, vendors or other persons or businesses. Refer to the “How to Voice My Concerns” section (page 7) for guidance on how to report your concerns.

If you are a manager, you carry a leadership role and are responsible for setting a good example for your employees, encouraging open and honest communication, and taking action when ethical issues are brought to your attention. Work to ensure that those who report to you understand the requirements of the Code, and support employees who, in good faith, raise questions or concerns. You are responsible for taking action to address conduct that is in violation of the Code and to seek help from the Senior VP, Compliance, Risk & Audit Services if the proper course of action is not clear.

While our Code provides detailed guidance, no Code of Conduct can address every situation you may possibly face in the course of your workday. We rely on you to exercise good judgment in your decision-making and to seek help when you have questions or concerns that are not addressed in the Code.

We continuously monitor laws and regulations as they apply to our operations, but again, we trust our employees to follow the letter and spirit of the law and to do the right thing, even when the law is not specific. If a local or state law conflicts with our Code, we follow the law; if a local business practice conflicts with our Code, we follow our Code. When in doubt, ask for help.

**Annual Certification of the Code**

All employees are required to review and understand the Code. You will be sent reminder e-mails directing you to complete the Code certification. New hires must review and sign the Code upon hire. Even if you recently signed the Code as a new hire, you will be asked to acknowledge it again as part of annual compliance education training. An updated version may contain changes that the document you signed did not include.
What if I have a concern with a section of the Code or have reservations about completing my annual Code certification?

If you have an issue with a section of the Code or with the Certification you should discuss your concerns with your manager, Human Resources, the Senior VP, Compliance, Risk & Audit Services, via the Listen Up! Compliance hotline **877.4COMPLY (877.426.6759)**, or e-mail compliance@uoflhealth.org. Even if you fail to complete your certification of the Code, you are still obligated to follow it. Failure to sign may result in disciplinary action, which may include termination.

**SPEAK UP**

**My Obligation**

I understand my responsibility as a UofL Health employee to do the right thing when it comes to my own actions and to share my concerns when I see or suspect something that could harm my company. I like knowing there are places to turn when I have a question or concern.

**You have an obligation to speak up**

Every UofL Health workforce member has a responsibility for promptly reporting any issue or concern they believe, in good faith, may constitute a violation of the Code or any other UofL Health policy. Our Speak Up Non-Retaliation Policy encourages you to come forward if you encounter a situation that “just does not feel right.” Open communication and your commitment to take action to share your concerns will help to ensure an ethical workplace for everyone.

**You have several options available to you for voicing your concerns**

Maybe you have a question about the Code or want more details about a particular policy, or maybe you have seen or suspect that someone has violated the Code. Who do you contact? Start by talking with your manager, as they may be your closest link to an issue. This person has a responsibility to listen and to help. Managers have a duty to promote an open and honest environment where members of their teams can feel comfortable about voicing their concerns without fear of retaliation.
If you do not feel comfortable initially discussing your concern with your manager, contact Human Resources. If after seeking assistance you do not feel the outcome resolved your issue, please contact the Compliance, Risk & Audit Services Department at 502.588.2300. The Compliance, Risk & Audit Services Department is responsible for administering the Code and is available to all employees and service providers who wish to raise concerns or an alert about potential violations. The Compliance, Risk & Audit Services Department manages all inquiries promptly and confidentially, to the extent possible by law.

**How to Voice My Concerns**

You can call the Listen Up! Compliance hotline, available 24 hours a day, 7 days a week at **877.4COMPLY (877.426.6759)**. This is a confidential option provided by a leading third-party reporting service. Your concern is documented by a highly trained interview specialist and is disseminated to appropriate UofL Health Compliance, Risk & Audit Services personnel. Appropriate UofL Health management may be involved to promptly address the matter. Questions and concerns regarding accounting, internal accounting controls, or auditing matters (or other related issues) can be submitted via the same method as other issues/concerns noted herein.

**Whatever reporting method you choose, your concern will be promptly addressed**

Depending on the type of alleged violation, the Compliance, Risk & Audit Services Department and/or the Board of Directors will attempt to take appropriate action for each Code violation in a consistent manner based on the nature of the violation, including termination of employment if the circumstances warrant. UofL Health employees have an obligation to cooperate with investigations into ethical misconduct. Failure to cooperate and provide honest and truthful answers or information could result in disciplinary action up to, and including, termination.

**What if my manager has told me to do something that is dangerous and possibly illegal? I know I should tell someone, but I’m afraid that my manager will make my job difficult for me if I do**

The best place to raise your concerns would typically be with your manager, but since it is your manager’s request that concerns you, calling the Compliance Hotline is a good option. If you report your concerns through the hotline, you will have the assurance of knowing that UofL Health is looking into the situation and that retaliation or punishment by your manager or others will not be tolerated.
What if I reported a concern but never heard anything about it?

Did you report it anonymously to the hotline? If so, to the extent that outcomes can be reported, you will receive a call number to use to obtain an update on actions taken. While all matters will be investigated appropriately, note that it may not be appropriate for the review to be communicated in light of privacy and confidentiality issues.

What if I didn’t report any concerns but am asked to cooperate in an internal investigation by HR, Compliance, or someone in management. Must I participate?

Yes. As a UofL Health employee, you are obliged to cooperate in internal investigations. Failure to do so may result in disciplinary action up to and including termination.

What if I’m not 100% sure?

Speak up! You do not have to be 100% sure before speaking up. If you have a genuine suspicion, you should speak up and explain your concerns. These will be recorded, reviewed, and where appropriate promptly investigated. Feedback will be given providing your name is known. No retaliation will be tolerated. However, please note that speaking up is not a mechanism to raise general complaints nor should it be used maliciously or in bad faith.

NOTE: Many complaints through the hotline are traditionally Human Resource (not compliance) issues. While these will be recorded and tracked, generally these will be assigned to our Human Resources Department for investigation. Compliance, Risk & Audit Services will ensure the matter is investigated and if appropriate, action was taken.

Respect Others

What is my vision of the ideal workplace? One that is a positive environment that promotes professionalism and excellence. That’s the kind of workplace we have here at UofL Health. I’m offered opportunities to grow personally and professionally, and my manager encourages me to succeed. I’m treated with respect and dignity. In return, I recognize my duty to act responsibly, be a team player, always do my best, and treat others with respect and dignity.
You are free to do your job without fear of harassment, discrimination, or retaliation. Refer to the UofL Health Employee Handbook for detail policy information.

**We provide safeguards for your personal information**

UofL Health respects the privacy rights and interests of all its employees and provides safeguards for the protection of its employees’ personal information that is collected, held, and used. We take additional precautions when handling employees’ sensitive personal information. Everyone must respect the privacy rights of their co-workers and handle all employees’ personal information in accordance with UofL Health-related data protection policies.

**Be respectful and professional when using social media tools**

With the rise of social media, the ways in which UofL Health can communicate internally and externally continues to evolve. These emerging media tools include blogs, wikis, podcasts, virtual worlds, and social networking. UofL Health encourages employees to follow our policies and use these social media tools responsibly.

**Avoid Conflicts of Interest**

*When I am faced with a situation and am not sure what to do, I ask myself, “Am I doing what’s right for the company?”* Avoiding conflicts of interest means avoiding situations that create or appear to create a conflict between my personal interests and the interests of UofL Health.

**Avoid activities or relationships that might affect your objectivity**

A conflict of interest may exist if your outside activities or interests influence, or appear to influence, your ability to make objective decisions in your job. A conflict of interest may also exist if the demands of outside activities hinder or distract you from your job or cause you to use UofL Health resources for non-UofL Health purposes. It is your obligation to ensure that your interests remain free of conflicts. If you have any question about whether an outside activity might constitute a conflict of interest, you must obtain the approval of your supervisor or the Compliance, Risk & Audit Services Department.
before pursuing the activity. University of Louisville providers should follow UofL’s Potential Individual and Institutional Conflict of Interest Policy and Procedures.

**Relationships with subcontractors, suppliers and educational institutions**

We must manage our subcontractor and supplier relationships in a fair and reasonable manner, consistent with all applicable laws and good business practices. We promote competitive procurement to the maximum extent practicable. Our selection of subcontractors, suppliers and vendors will be made on the basis of objective criteria including quality, technical excellence, price, delivery, adherence to schedules, service and maintenance of adequate sources of supply. Our purchasing decisions will be made on the supplier’s ability to meet our needs and not on personal relationships and friendships. We will always employ the highest ethical standards in business practices in source selection, negotiation, determination of contract awards and the administration of all purchasing activities. We will not communicate to a third party confidential information given to us by our suppliers, unless directed in writing to do so by the supplier. We will not disclose contract pricing and information to any outside parties. (The subject of business courtesies, which might be offered by subcontractors or suppliers, is discussed later in this Code.)

**Hiring of Former and Current Government Employees**

The recruitment and employment of former or current U.S. government employees is subject to complex rules that change frequently and vary by employee. Similar rules may also apply to current or former state or local government employees or legislators and members of their immediate families.

If a former government employee or consultant wishes to become employed by (or a consultant to) UofL Health, care should be exercised to ensure that the requirements of conflict of interest laws are not violated. Each situation should be considered on an individual basis and you should consult with the Compliance, Risk & Audit Services Department on issues related to recruitment and hiring of former or current government employees.

**Do not accept compensation for speaking engagements on behalf of UofL Health**

Speaking at events, when it is determined to be in UofL Health’s best interests, is considered part of your normal job responsibilities. Because you will be compensated by UofL Health for the time spent preparing for, attending, and
delivering the presentation, you should not request or accept any form of compensation unless:

- The compensation is some type of “acceptable” novelty, favor, or entertainment as defined in UofL Health policies related to favors, gifts, and entertainment
- The Compliance, Risk & Audit Services Department provides written authorization, in advance
- University of Louisville providers should follow UofL’s Potential Individual and Institutional Conflict of Interest Policy and Procedures

**Mixing family relationships with work relationships can create special workplace challenges**

Personnel decisions can become difficult if the employee you supervise is also a member of your immediate or extended family. Even if you are careful and work to remain objective in your business dealings, the very fact that you share a personal relationship with this individual can suggest the appearance of a conflict of interest. As a result, employees must avoid a direct or indirect vertical reporting relationship with any member of their immediate or extended family (or others with whom they have a significant relationship). If such a relationship exists or occurs, report it in writing to your Human Resources representative.

UofL Health employees are not permitted to engage in outside business-related activities that involve the sale, resale, marketing, or repairing of company equipment (or any consulting activities related to the above) for profit.

**Understand Business Courtesy Policies Related to Favors, Gifts, and Entertainment**

I work with many vendors, suppliers, and other business associates and they are all vital to our success. In appropriate circumstances, business courtesies, invitations to attend an event, training, gifts and entertainment can build goodwill…but they can also create the perception of a conflict of interest that can undermine the integrity of these relationships.

“Favors, gifts, and entertainment” means anything of value

It can include meals, lodging, discounts, loans, cash, services, equipment, prizes, products, transportation, use of vehicles or vacation facilities, home improvements, tickets, gift cards, certificates, and favorable terms on a product or service. These are just examples – the list of potential favors, gifts, and entertainments of value is impossible to specify in advance.
Rules for offering and accepting favors, gifts, and entertainment can be complex, and every situation should be evaluated carefully

We want to make sure that business is won or lost based on the merits of products and services. Rules about favors, gifts, and entertainment serve a very important purpose – we want to promote successful working relationships and goodwill, but we must be careful not to create situations that suggest a conflict of interest, divided loyalty, or the appearance of an improper attempt to influence business decisions. Our business relationships must be based entirely on sound business decisions, fair dealing, and applicable laws. In all cases, use good judgment and, when in doubt, ask questions.

Know the policies regarding favors, gifts, and entertainment between UofL Health and Commercial companies

The occasional exchange of favors, gifts, or entertainment of nominal value with employees of an organization that has a business relationship with UofL Health is appropriate, unless the recipient’s employer forbids the practice. University of Louisville providers should follow UofL’s Potential Individual and Institutional Conflict of Interest Policy and Procedures.

Remember, any courtesy you extend should always comply with the policies for the recipient’s organization, and those we are doing business with should understand our policy as well. Favors, gifts, and entertainment offered to or accepted by UofL Health employees or their family members fall into three categories:

Acceptable: Refer to the Favors, Gifts & Entertainment policy for guidance.

Inappropriate: Some types of favors, gifts, or entertainment are simply wrong, either in fact or in appearance, and are never permissible. Employees and members of their immediate family may never:

- Offer or accept favors, gifts, or entertainment that would be illegal
- Offer or accept cash or cash equivalent (including loans, stock, stock options, bank checks, travelers’ checks, Visa or other type of check/cash cards, gift cards, money orders, investments securities, or negotiable instruments)
- Offer or accept gifts or entertainment during a tender or competitive bidding process
- Offer, accept, or request anything (regardless of value) as part of an agreement to do anything in return for favors, gifts, or entertainment. Refer to UofL Health’s policy regarding favors, gifts or entertainment for further information
- Use their own money or resources to pay for favors, gifts, or entertainment for a customer, vendor, or supplier.
• Participate in an activity that would cause the person giving or receiving favors, gifts, or entertainment to violate his or her own employer’s standards
• Offer, accept, or participate in favors, gifts, or entertainment that are unsavory or otherwise violate our policy. Any situation that would cause an employee to feel uncomfortable or that would embarrass UofL Health by its public disclosure (for example, adult entertainment) is inappropriate

**Questionable:** If you are unsure about whether it is appropriate to accept the favor or gift, please ask your supervisor or the Compliance, Risk & Audit Services Department for guidance.

**Government Officials & Agencies**

**When considering a gift to a U.S. federal, state or local government employee**

Know they have strict rules and laws regarding gifts, meals and other business courtesies for their employees. UofL Health’s policy is to not provide any gifts, entertainment, meals or anything else of value to any employee of the executive branch of the federal government, except for minor refreshments in connection with business discussions or promotional items with UofL Health that are valued at no more than $20.00. With regard to gifts, meals and other business courtesies involving any other category of government official or employee, contact the Compliance, Risk & Audit Services Department.

**Expense report records must accurately reflect favors, gifts, and entertainment that you provide to customers**

Because of tax and other legal reporting rules, it is essential that you accurately report expenditures for favors, gifts, or entertainment that you give as part of your UofL Health employment. Reports should accurately state the purpose of the expenditures and the identities of the individuals receiving the favors, gifts, or entertainment and identity if the favor, gift or entertainment was given to a public sector official or employee. The purpose of the entertainment must never be to induce any favorable business action. During these events, topics of a business nature must be discussed and the host must be present. These events must not include expenses paid for any travel costs (other than in a vehicle owned privately or by the host entity) or overnight lodging.
Gifts to Medicare or Medicaid Beneficiaries

Any gifts to Medicare or Medicaid beneficiaries must not exceed $10 per item and not total more than $50 per year per beneficiary. Gifts can include gift certificate/gift card, but never cash, check, or stocks.

What if...

What if we want to provide a catered lunch during a meeting with a major UofL Health supplier?

It is acceptable to offer lunch if it is offered in the spirit of our gift-giving policy and complies with the monetary guidelines for what is considered “acceptable.”

What if I have a friend who works for a major UofL Health vendor, does our policy prohibit me from buying a Christmas present for this person that exceeds the limits in our gift policy?

Not necessarily. UofL Health’s gift policy applies to gifts offered in the course of doing business, not the exchange of gifts between friends and family. If the dollar value of the gift is substantial, however, contact your manager or the Compliance, Risk & Audit Services Department to avoid a perception of an attempt to influence.

What if a vendor knows I am a big football fan and offers me two great tickets to a game? I know that the policy would not allow me to accept the tickets as a gift since the dollar value exceeds our gift policy limit, but what if I buy them from him?

You can accept the tickets if you pay for them, unless the tickets are to a “sold-out” event. Under those circumstances, you would be accepting the gift of an opportunity to buy tickets that are not generally available for purchase, and that would be inappropriate.

What if I have been offered a discount on a product sold by a UofL Health supplier, may I take advantage of it?

You may accept the discount only if it is clearly available to all UofL Health employees and approved by the company. A discount offered to you personally would be inappropriate.
What if I receive a gift that I know is inappropriate, what should I do?

Return it to the donor with a polite explanation that UofL Health’s policy prohibits you from keeping it. In some circumstances, other alternatives may be considered, such as displaying the gift in a public area or donating it to a charitable organization. Check with your manager or the Compliance, Risk & Audit Services Department for guidance.

What if I speak at a professional meeting, may I accept reimbursement of travel expenses?

Your manager is responsible for making this decision. UofL Health’s policy requires that all suppliers be treated fairly and impartially. Therefore, do not accept anything from a supplier that could suggest even the appearance of favoritism. Normally, it is inappropriate to accept payment of expenses by vendors to speak at user conferences. On the other hand, you can usually accept reimbursement for expenses from associations and professional groups because they are not vendors and would not be using the speaking invitation as a way to gain favorable treatment. University of Louisville providers should follow UofL’s Potential Individual and Institutional Conflict of Interest Policy and Procedures.

Protect What is Ours

We are a health care provider in a competitive environment. Protecting our financial base, our knowledge base, our information systems, or our brand - gives us a competitive advantage. Do not provide information regarding UofL Health to outside parties without prior written approval.

What may appear to be an innocent request for information could result in serious harm to our company. Be alert to requests for information from anyone outside of UofL Health regarding:

- Overall business trends
- Acquisitions
- Pricing and cost data
- Suppliers
- Personnel data
- Patient lists
- Strategic plans
• Training materials

If you are contacted, please refer the individual to the Compliance, Risk & Audit Services Department. Violation of this policy is serious and may result in disciplinary action including immediate termination and other legal action.

Each of us is responsible for protecting the confidentiality of proprietary information

This responsibility applies not only to safeguarding UofL Health’s information, but also extends to that of our vendors and others we do business with. All employees must comply with the following requirements:

• Requests for confidential proprietary information and the disclosure of confidential proprietary information must always be made in writing
• Confidential or proprietary information should be disclosed only to those UofL Health employees or workforce members who need the information in order to do their jobs
• Proprietary information of a supplier, vendor, or other third party should not be used or copied by a UofL Health employee unless authorized in writing by UofL Health and the third party
• Any unsolicited, third-party proprietary information should be refused or, if inadvertently received by an employee, returned unopened or transferred to the UofL Health Compliance, Risk & Audit Services Department
• Employees must refrain from sharing proprietary information, unless approval has been received, in advance

Confidential Information

Our organization’s strategies and operations are valuable assets. Although you may use our confidential information to perform your job, you must not share this information with others outside of UofL Health or your department unless you are doing so within the scope of your job responsibilities, and the person to whom you intend to disclose the information has a legitimate business need to know this information.

Accuracy, Retention and Disposal of Documents and Records

Each employee is responsible for the integrity and accuracy of our organization’s documents and records, not only to comply with regulatory and legal requirements but also to ensure that records are available to defend our business practices and actions. No one may alter or falsify information on any record or document. Medical and business documents and records are retained in accordance with the law and our record retention policy. Medical and business documents include paper documents such as letters and memos, computer-based information such as e-mail or computer
files on disk or tape, and any other medium that contains information about the organization or its business activities. It is important to retain and destroy records appropriately according to our policy. You must not tamper with records or remove or destroy them prior to the date specified in company policy for such action.

**What if...**

**What if my former employer was one of our competitors? Is it okay to talk with my work group about some of their marketing strategies?**

No. You have an obligation to protect the proprietary information of your former employer, and that obligation does not end when you leave. You should disclose the fact that you formerly worked for a competitor to your manager and be sure to abide by all the obligations of confidentiality owed to your former employer.

**What if I receive a letter in the mail from an unidentified source that contains a competitor's pricing data? I can find no indication that it has been sent or received through authorized channels, what should I do?**

Do not read the document and do not share it with co-workers. The letter should be immediately sealed and transferred to the Compliance Department.

**What if the information or document is not marked "confidential?"**

Your obligations are not limited to documents and materials that are specifically marked as "confidential." If, however, a document is expressly marked as "confidential," you are expected to follow all instructions noted on such document pertaining to the photocopying, transmitting or disclosing of any information contained therein.

**What if I receive a call asking me about my compensation package?**

It is your choice if you wish to disclose your own compensation, benefits or terms and conditions of employment. You may not disclose other employee’s information known to you through any means.
Follow the Law – Medicare Fraud and Abuse Laws

Centers for Medicare & Medicaid Services (CMS)

CMS is the Federal agency responsible for administering the Medicare, Medicaid, State Children’s Health Insurance Program (SCHIP), Health Insurance Portability and Accountability Act of 1996 (HIPAA), Clinical Laboratory Improvement Amendments (CLIA) and several other health-related programs.

To prevent and detect fraud and abuse, CMS partners with individuals, entities, and law enforcement agencies, including:

- Accreditation Organizations (AOs);
- Medicare beneficiaries and caregivers;
- Physicians, suppliers, and other health care providers; and
- State and Federal law enforcement agencies, including the OIG, Federal Bureau of Investigation (FBI), Department of Justice (DOJ), State Medicaid Agencies, and Medicaid Fraud Control Units (MFCUs).

Federal laws governing Medicare fraud and abuse include the:

- False Claims Act (FCA)
- Anti-kickback Statute (AKS)
- Physician Self-Referral Law (Stark Law)
- Social Security Act; and
- United States Criminal Code

Fraud, Waste and Abuse (FWA)

You play a vital role in protecting the integrity of the Medicare Program. To combat FWA, you need to know what to watch for to protect UofL Health from potential abusive practices, civil liability, and criminal activity.
Medicare fraud is typically characterized by:

- Knowingly submitting false statements or making misrepresentations of fact to obtain a federal health care payment for which no entitlement exists;
- Knowingly soliciting, paying, and/or accepting remuneration to induce or reward referrals for items or services reimbursed by Federal health care programs; or
- Making prohibited referrals for certain designated health services

Anyone can commit fraud. The following are examples of Medicare fraud:

- Knowingly billing for services not furnished, supplies not provided, or both, including falsifying records to show delivery of such items or billing Medicare for appointments that the patient failed to keep; and
- Knowingly billing for services at a level of complexity higher than the service actually provided or documented in the file.

Defrauding the Federal government and its programs is illegal. Committing Medicare fraud exposes individuals or entities to potential criminal and civil remedies, including imprisonment, fines and penalties. Criminal and civil penalties for Medicare fraud reflect the serious harms associated with health care fraud and the need for aggressive and appropriate intervention. Providers and health care organizations that commit health care fraud risk exclusion from participation in Federal health care programs and the loss of their professional licenses.

Medicare abuse describe practices that, either directly or indirectly, result in unnecessary costs to the Medicare Program. Abuse includes any practice that is not consistent with the goals of providing patients with services that are not medically necessary, meet professionally recognized standards, and priced fairly.

Examples of Medicare abuse include:

- Billing for services that were not medically necessary;
- Charging excessively for services or supplies; and
- Misusing codes on a claim, such as up-coding or unbundling codes.
Medicare abuse can also expose providers to criminal and civil liability.

**False Claims Act (FCA)**

The FCA protects the government from being overcharged or sold substandard goods or services. The FCA imposes civil liability on any person who *knowingly* submits, or causes the submission, of a false or fraudulent claim to the Federal government. The “*knowing*” standard includes acting in deliberate ignorance or reckless disregard of the truth related to the claim.

**Example:** A physician submits claims to Medicare for a higher level of medical services than actually provided or that the medical record documents.

**Penalties:** Civil penalties for violating the FCA can include fines of $5,500-$11,000 per false claim and up to three times the amount of damages sustained by the government as a result of the false claims.

There is also a criminal FCA statute by which individuals or entities that submit false claims can face criminal penalties.

**Anti-Kickback Stature (AKS)**

The AKS makes it a criminal offense to *knowingly* and *willfully* offer, pay, solicit, or receive any remuneration directly or indirectly to induce or reward referrals of items or services reimbursable by a Federal health care program.

**Example:** A provider receives cash or below fair market value rent for medical offices in exchange for referrals.

**Penalties:** Civil penalties for violating the AKS can include fines up to three times the amount of kickback. Criminal penalties for violating the AKS can include fines, imprisonment, or both.

If certain types of arrangements satisfy regulatory safe harbors, the AKS will not treat these arrangements as offenses. For more information on safe harbors, visit [https://oig.hhs.gov/compliance/safe-harbor-regulations](https://oig.hhs.gov/compliance/safe-harbor-regulations) on the Office of Inspector General website.
No employee or any other person acting on behalf of the organization is permitted to solicit or receive anything of value, directly or indirectly, in exchange for the referral of patients. Similarly, when making patient referrals to another health care provider, we do not take into account the volume or value of referrals that the provider has made (or may make) to us. We accept patient referrals based solely on the patient's clinical needs as well as our ability to provide the necessary service(s). All employees, medical staff members and privileged practitioners should immediately report violations or suspected violations to the Compliance, Risk & Audit Services Department directly or via the Compliance Hotline.

**Physician Self-Referral Law (Stark Law)**

The Physician Self-Referral Law, often called the Stark Law, prohibits a physician from making a referral for certain designated health services to an entity in which the physician (or member of his or her immediate family) has an ownership/investment interest or with which he or she has a compensation arrangement, unless an exception applies.

**Example:** a provider refers a beneficiary for a designated health service to a business in which the provider has an investment interest.

**Penalties:** Penalties for physicians who violate the Stark Law include fines, repayment of claims, and potential exclusion from participation in all Federal health care programs.

For more information, visit [http://www.cms.gov/Medicare/Fraud-and-Abuse/PhysicianSelfReferral](http://www.cms.gov/Medicare/Fraud-and-Abuse/PhysicianSelfReferral) on the CMS website.

**Criminal Health Care Fraud Statute**

The Criminal Health Care Fraud Statute prohibits *knowingly* and *willingly* executing, or attempting to execute, a scheme or artifice in connection with the delivery of payment for health care benefits, items, or services to:

- Defraud any health care benefit program; or
- Obtain (by means of false or fraudulent pretenses, representations, or promises) any of the money or property owned by, or under the custody of control of, any health care benefit program.

**Example:** Several doctors and medical clinics conspire in a coordinated scheme to defraud the Medicare Program by
submitting claims for power wheelchairs that were not medically necessary.

**Penalties:** Penalties for violating the Criminal Health Care Fraud Statute may include fines, imprisonment, or both.

**Additional Medicare Fraud and Abuse Penalties**

Aside from the civil and criminal actions brought by law enforcement agencies, the Medicare Program has additional administrative remedies applicable for certain fraud and abuse violations.

**Exclusions**

Under the Exclusion Statute, the OIG must exclude from participation in all Federal health care programs and suppliers convicted of:

- Medicare fraud;
- Patient abuse or neglect
- Felony convictions related to fraud, theft, embezzlement, breach of fiduciary responsibility, or other financial misconduct in connection with the delivery of a health care item or service; or
- Felony convictions for unlawful manufacture, distribution, prescription, or dispensing of controlled substances

The OIG also has the discretion to impose exclusions on a number or other grounds. Excluded providers cannot participate in Federal health care programs for a designated period. An excluded provider may not bill Federal health care programs (including, but not limited to, Medicare, Medicaid, and State Children’s Health Insurance Program [SCHIP]) for services he or she orders or performs. At the end of an exclusion period, an excluded provider must affirmatively seek reinstatement; reinstatement is not automatic. The OIG maintains a list of excluded parties called the List of Excluded Individuals/Entities (LEIE) on the OIG website.

**Civil Monetary Penalties Law (CMPL)**

Under the CMPL, Civil Monetary Penalties (CMP) apply for a variety of conduct. The CMPL authorizes penalties of up to $50,000 per violation, and assessments of up to three times the amount claimed for each item or service, or up to three times the amount of remuneration offered, paid, solicited, or received. Violations that may give rise to the CMPs include:
• Presenting a claim that you know or should know is for an item or service not provided as claimed or that is false and fraudulent;
• Presenting a claim that you know or should know is for an item or service for which Medicare will not pay; and
• Violating the AKS.

Confidentiality and Protection of Patient Information – HIPAA Privacy and Security Rules

We collect information about the patient’s medical condition, history, medications and family illnesses to provide the best possible care. We respect the sensitive nature of this information and are committed to maintaining its confidentiality.

We comply with all HIPAA Privacy and Security Rules and will not release or discuss patient-specific information with others unless it is necessary to serve the patient or authorized by law.

Employees must never disclose confidential information that violates the privacy rights of our patients nor UofL Health policies. No employee, affiliated physician or other health care partner has a right to any patient information other than that necessary to perform his or her job.

Patients can expect that their privacy will be protected and that patient-specific information will be released only to persons authorized by law or by the patient’s written authorization.

Third-Party Payors

Coding and Billing for Services

We will take great care to ensure that all billings to governmental and other payors reflect truth and accuracy and conform to all pertinent federal and state laws and regulations. No employee or agent of UofL Health should knowingly present or cause to be presented claims for payment or approval that are false, fictitious or fraudulent.

Our oversight systems are designed to verify that claims are submitted only for services actually provided and that services are billed as provided. These systems will emphasize the critical nature of complete and accurate documentation of services provided, so we will maintain current and accurate medical records.
Any subcontractors engaged to perform billing or coding services must have the necessary skills, quality assurance processes, systems and appropriate procedures to ensure that all billings for governmental and other payors are accurate and complete. UofL Health prefers to contract with entities that have adopted their own ethics and compliance programs. Third-party billing entities, contractors and preferred vendors that we consider must be approved per UofL Health’s Sanctions Verification Policy. For questions concerning billing issues, contact the Compliance, Risk & Audit Services Department.

All coding and billing staff are required to receive annual compliance training, which includes fraud, waste and abuse as well as the False Claims Act. The FCA is a civil anti-fraud statute providing that any person who knowingly submits or causes the submission of false claims is liable for damages and penalties. Examples of potential false claims include:

- Billing for services that were not provided at all
- Billing for services that were provided, but were not medically necessary
- Submitting inaccurate claims for services provided
- Making false statements to obtain payment for services

Reports of potential/actual fraudulent billing activities must be reported to Compliance, Risk & Audit Services at 502.588.2300, compliance@uoflhealth.org or via the Compliance Hotline (877.4COMPLY). Health plans mandate that UofL Health report any potential or actual non-compliance and/or FWA as applicable.

**Antitrust/competition laws create a level playing field in the marketplace and promote fair competition**

The economy of the United States is based on the principle of a free competitive market. UofL Health abides by these antitrust/competition laws wherever we do business, and we avoid conduct that might even suggest or make it appear that we are violating these laws. These laws could be violated by discussing business with a competitor, such as how our prices are set, disclosing the terms of supplier relationships, allocating markets among competitors or agreeing with a competitor to refuse a deal with a supplier. Our competitors are other health systems and facilities in markets where we operate.
Each of us should be familiar with antitrust/competition laws

These laws touch upon and affect almost every aspect of our operations, so it is important that you are familiar with them and keep them in mind while doing your job. Remember, violations can carry serious penalties, not only for its executives, but for you. If you ever have a question about a particular activity or practice, contact the Compliance, Risk & Audit Services Department for help. Be alert to sensitive discussion at trade association meetings; be alert to potential situations where it may not be appropriate for you to participate in discussions regarding prohibited subjects with our competitors. Prohibited subjects include any aspect of pricing, our services in the market, key costs such as labor costs, and marketing plans. If a competitor raises a prohibited subject, end the conversation immediately. Document your refusal to participate in the conversation by requesting that your objection be reflected in the meeting minutes and notify the Compliance, Risk & Audit Services Department of the incident. In general, avoid discussing sensitive topics with competitors or suppliers unless you are proceeding with the advice of the Compliance, Risk & Audit Services Department.

Gathering Information About Competitors

It is not unusual to obtain information about other organizations, including our competitors, through legal and ethical means such as public documents, public presentations, journal and magazine articles, and other published and spoken information. However, it is not acceptable for you to obtain proprietary or confidential information about a competitor through illegal means. It is also not acceptable to seek proprietary or confidential information when doing so would require anyone to violate a contractual agreement, such as a confidentiality agreement with a prior employer.

Marketing and Advertising

We may use marketing and advertising activities to educate the public, provide information to the community, increase awareness of our services and recruit employees. We will present only truthful, fully informative and no deceptive information in these materials and announcements. All marketing materials will appropriately reflect the level of services available.

Research

We follow high ethical standards and all legal requirements in any research conducted by University of Louisville physicians and professional staff. We do not tolerate intentional research misconduct. UofL Health will obtain
documentation of waivers, authorizations and Institutional Review Board approval prior to releasing PHI for research purposes, when required.

You may not use assets for political purposes

No assets – including time at work, use of premises or equipment, or direct monetary payments may be contributed to a political candidate, political action committee, or ballot measure without the written permission of the Compliance, Risk & Audit Services Department. Of course, you may participate in political activities on an individual basis, with your own money and on your own time.

Deal with Accrediting Bodies in a Direct, Open and Honest Manner

No actions should ever be taken in relationships with accrediting bodies that would mislead the accreditor or its survey teams, either directly or indirectly.

Regulatory Compliance is Critical to our Success

We provide varied health care services across all age spectrums. These services generally may be provided only pursuant to appropriate federal, state and local laws and regulations. These may include subjects such as licenses, permits, accreditation, access to treatment, consent to treatment, medical record keeping, access to medical records and confidentiality, patients’ rights, terminal care decision-making, and Medicare and Medicaid regulations. The organization is subject to numerous other laws in addition to these health care regulations and we comply with all laws and regulations. Violations should be immediately reported to the Compliance, Risk & Audit Services Department or via the Compliance Hotline.

Health and Safety

All staff must comply with all government regulations and rules and with policies or required facility practices that promote the protection of workplace health and safety. Our policies have been developed to protect you from potential workplace
hazards. You should become familiar with and understand how these policies apply to your specific job responsibilities, and seek advice from your supervisor whenever you have a question or concern. It is important for you to advise your supervisor of any serious workplace injury or any situation presenting a danger of injury so that timely corrective action may be taken to resolve the issue.

We Exercise Our Legal Rights When Necessary

UofL Health reserves the right to contact legal authorities when there is a reasonable belief that a crime has been committed by a current or former employee connected to the workplace.

License and Certification Renewals

Employees and individuals retained as independent contractors in positions that require professional licenses, certifications or other credentials are responsible for maintaining the current status of their credentials and shall comply at all times with federal and state requirements applicable to their respective disciplines. To ensure compliance, UofL Health will require evidence of the individual having a current license or credential status.

What if…

What if a government inspector comes to my facility and asks to see some documents or asks me questions?

Be cooperative and courteous to all government inspectors and provide them with the information to which they are entitled during an inspection. During a government inspection, you must never conceal, destroy or alter any documents, lie or make misleading statements to government representatives. You should not influence another employee to provide inaccurate information or obstruct, mislead or delay the communication of information or records relating to a possible violation of law.

I’m not sure which regulations cover my area of responsibility

Ask. UofL Health will provide you with the information and education needed to comply fully with all applicable laws and regulations. If any questions remain ask your supervisor, Human Resources, or the Compliance, Risk & Audit Services Department.
What if I’m walking in the stairwell and see a pool of water that could cause a fall? Other employees are walking around it; must I report it?

Yes, all employees are accountable and responsible for keeping our facilities as safe as possible at all times.

What if I am forced to make a decision between obeying a local law or complying with the Code?

Obey the law. It takes precedence over the Code; if in doubt check with the Compliance, Risk & Audit Services Department for help.

Our Compliance Program

Program Structure

UofL Health is committed to providing quality healthcare while adhering to the highest ethical standards and complying with all applicable, Federal and state laws. As evidence of this commitment, a compliance plan has been developed and is intended to be used as a compliance roadmap for all UofL Health workforce members to follow.

Resources for Guidance and Reporting Violation

To obtain guidance on an ethics or compliance issues or to report a suspected violation, you have several options. We encourage the resolution of issues at a local level whenever possible. It is expected good practice, when you are comfortable and think it appropriate, to raise concerns first with your supervisor.

Another important resource who may be able to address issues arising out of this Code of Conduct is the Human Resources Department. These individuals are highly knowledgeable about many of the compliance risk areas described in this Code of Conduct that pertain to employment and the workplace and are responsible for ensuring compliance with various employment laws. If a concern relates to specific details of your work situation, rather than larger issues of organizational ethics and compliance, the Human Resources Department is the most appropriate course of action.
If it is uncomfortable or inappropriate to raise your concern with your supervisor or Human Resources, you are always free to contact the Compliance, Risk & Audit Services Department via e-mail at: compliance@uoflhealth.org or 502.588.2300.

Confidentiality and Retaliation

UofL Health will make every effort to maintain, within the limits of the law, the confidentiality of the identity of any individual who reports possible misconduct. There will be no retaliation for reporting a possible violation in good faith. Any employee who deliberately makes a false accusation with the purpose of harming or retaliating against another employee will be subject to discipline.

Personal Obligation to Report

We are committed to ethical and legal conduct that is compliant with all relevant laws and regulations and to correct wrongdoing wherever it may occur in the organization. You have an individual responsibility for reporting any activity by any employee, physician, subcontractor or vendor that appears to violate applicable laws, rules, regulations or this Code.

Internal Investigation of Reports

We are committed to investigate all reported concerns promptly and confidentially to the extent possible. Internal control is a major part of managing an organization and is effective in preventing and detecting fraud, waste and abuse. The Compliance, Risk & Audit Services Department will coordinate any findings from the investigations and immediately recommend corrective action or changes that need to be made. We expect all employees and physicians to cooperate with investigation efforts.

Corrective Action

Where an internal investigation substantiates a reported violation, UofL Health will initiate corrective action, to include, as appropriate, making prompt restitution of any overpayment amounts, notifying the appropriate governmental agency, instituting whatever disciplinary action is necessary and implementing systemic changes to prevent a similar violation from recurring in the future.
Discipline

All violators of the Code of Conduct will be subject to disciplinary action. The precise discipline utilized will depend on the nature, severity and frequency of the violation and may result in any of the following disciplinary actions:

- Verbal warning
- Written warning
- Suspension
- Termination and Restitution (if necessary)

Compliance Department Contact Information

- E-mail: compliance@uoflhealth.org
- UofL Health Compliance Hotline: 877.4COMPLY (877.426.6759)
- Compliance, Risk & Audit Services Main Line: 502.588.2300