

# **Jackson Hospital**

---

## **Code of Conduct**

As a condition of your relationship and employment with Jackson Hospital, it is required that you read the Code of Conduct and follow the standards.

# **JACKSON HOSPITAL**

## **Code Of Conduct**

### **Table of Contents**

Purpose	4
Condition of Employment	4
Quality of Care/Service	4
Emergency Treatment	
Patient Confidentiality	
Employment Practices and Workplace Conduct	6
Conflicts of Interest	
Equal Employment Opportunity	
Harassment	
Workplace Violence	
License and Certification Renewals	
Hiring or Retention of Excluded Individuals or Entities	
Substance Abuse	
Gifts and Fund-Raising Among Employees	
Controlled Substances	
Personal Use of Jackson Hospital Resources	
Health and Safety	
Compliance with Laws and Regulations	9
Billing and Coding	10
Physician Relationships	10
Financial Arrangements	
Referrals	
Cost Reports	11
Conduct with Respect to Regulatory Agencies	11
Inquires and Requests for Information	
Accrediting Bodies	
Business Information and Information Systems	12
Retention and Disposal of Documents and Records	
Confidential Information	

# **JACKSON HOSPITAL**

## **Code Of Conduct**

Electronic Media	
Financial Reporting and Records	13
Subcontractors and Suppliers	13
Marketing Practices	14
Antitrust	
Obtaining Information about Competitors	
Environmental Compliance	15
Business Courtesies	15
Political Activities and Contributions	15
The Corporate Compliance Program	16
Structure	
Reporting Compliance Concerns	
Reporting Options, Guidance and Resources	
Federal and State False Claims Act	
Civil Monetary Penalties Law	
Identity Theft Prevention	
Jackson Hospital's Toll Free Ethics & Compliance Hotline	
Retribution and Retaliation	
Investigations	
Corrective Actions	
Disciplinary Actions	
Frequently Asked Questions	20
Jackson Hospital Legal Compliance Program	23
General Policy Statement	
Acknowledgement	25

# **JACKSON HOSPITAL**

## **Code Of Conduct**

### **PURPOSE**

This Code provides guidance to assist us in carrying out our daily activities while upholding our obligation to comply with the laws and regulations that govern the healthcare industry, as well as Jackson Hospital's policies and procedures. It governs our relationships with patients, physicians, third-party payors, subcontractors, independent contractors, vendors, consultants, government agencies and one another. This Code is an integral component of the Organization's Compliance Program and reflects our commitment to achieve our goals within the framework of the law through a high standard of business ethics and compliance.

This Code of Conduct will address many areas, but is not intended to be the only source of guidance. Some topics may require additional guidance and we will attempt to provide such guidance through a variety of means. Every employee should be aware that he or she has the responsibility to seek guidance and directions whenever he or she is unsure of the appropriateness of any particular course of action.

### **CONDITION OF EMPLOYMENT**

The policies incorporated into the Code of Conduct are mandatory and must be followed. Failure to comply with any of the provisions of this Code of Conduct will result in disciplinary action up to and including termination for employees and cancellation of contractual or business relationships with physicians, contractors, and agents. Violations of portions of this Code relating to federal healthcare benefit programs may lead to severe consequences including, but not limited to, civil monetary penalties and/or exclusion from federal healthcare benefit programs for employees, physicians, contractors or agents. Questions or concerns regarding interpretation of this Code should be addressed to your supervisor or the Compliance Officer.

### **QUALITY OF CARE/SERVICE**

We are committed to providing high-quality healthcare to all of our patients and delivering health services in an ethical, professional and cost-effective manner. We treat all patients with respect and dignity and provide care that is both necessary and appropriate. We make no distinction in the admission, transfer or discharge of patients or in the care we provide based on race, color, religion or national origin.

- We uphold patient rights to make decisions regarding medical care and other patient rights in accordance with applicable state and Federal laws. We ensure patients' involvement in all aspects of their care and obtain informed consent for treatment.
- Patients, or their representatives, are provided a clear explanation of their care, including diagnosis, treatment plan, their right to refuse or accept care, care decision dilemmas, estimates of treatment costs, organ donation and procurement and an explanation of the risks and benefits associated with available treatment options.

# **JACKSON HOSPITAL**

## **Code Of Conduct**

- Patients have the right to request transfers to other facilities. In such cases, the patient will be given an explanation of the benefits, risks, and alternatives.
- Patients are informed of their right to make advance directives.
- Patients and their representatives will be accorded appropriate confidentiality, privacy, security and protective services, opportunity for resolution of complaints and opportunity for pastoral counseling.
- Patients are treated in a manner that preserves their dignity, autonomy, self-esteem, civil rights and involvement in their own care.
- Jackson Hospital employees will receive training about patient rights.

### **Emergency Treatment**

We will follow the Emergency Medical Treatment and Active Labor Act (EMTALA) in providing emergency medical treatment to all patients, regardless of ability to pay.

- All persons arriving at the Hospital's property or in the emergency department and requesting a medical examination for an emergency medical condition will receive a medical screening examination to determine if an emergency medical condition exists.
- Anyone with an emergency medical condition is evaluated, treated and admitted based on medical necessity.
- In an emergency situation, financial and demographic information will be obtained only after the immediate needs of the patient are met. We do not admit or discharge patients simply on their ability to pay.
- Patients will be transferred to another facility only if their medical needs cannot be met at Jackson Hospital and appropriate care is knowingly available at another facility or if patient requests transfer to another hospital. Patients may only be transferred after they have been stabilized and are formally accepted by the alternate facility.

### **Patient Confidentiality**

We collect information about the patient's medical condition, history, medication, and family illnesses to provide the best possible care. We realize the sensitive nature of this information and are committed to maintaining its confidentiality. We do not release or discuss patient-specific information with others unless it is necessary to serve the patient, or required by law, unless the patient has consented to such disclosure.

- We must never disclose confidential information that violates the privacy rights of our patients. No Jackson Hospital employee, affiliated physician or other healthcare personnel has the right to any patient information other than that necessary to perform his or her job.
- Every patient can expect that his or her privacy will be protected and that patient-specific information will be released only to persons authorized by law or by the

# **JACKSON HOSPITAL**

## **Code Of Conduct**

patient's written consent. In an emergency situation, when requested by an institution or physician then treating a patient, the patient's consent is not required, but the name of the institution and the person requesting the information must be verified. This should be done as a call-back process.

- Employees shall not post pictures or other recordings of patients or post identifiable patient information on any social networking site. The use of personal cell phones for capture and/or transmittal of patient recordings or pictures for use other than a specific patient care function are strictly prohibited and may lead to disciplinary action up to and including termination.

### **EMPLOYMENT PRACTICES AND WORKPLACE CONDUCT**

Jackson Hospital values its employees. Our employees provide us a wide complement of talents, which contribute greatly to our success. We strive to create and maintain an environment in which all employees are treated with respect, dignity and fairness, where diversity is valued and opportunities are provided for professional advancement.

#### **Conflicts of Interest**

A conflict of interest may occur if outside activities or personal interests influence or appear to influence your ability to make objective decisions in the course of your job responsibilities. A conflict of interest may also exist if the demands of any outside activities hinder or distract you from the performance of your job or cause you to use Jackson Hospital resources for anything other than Jackson Hospital purposes. Employees are obligated to remain free of conflicts of interest in the performance of their Jackson Hospital responsibilities.

#### **Equal Employment Opportunity**

We are committed to providing an equal opportunity work environment. We will comply with all laws, regulations and policies related to non-discrimination in all of our personnel actions. Such actions include hiring, staff reductions, transfers, terminations, recruiting, compensation, corrective action, discipline and promotion.

- No one shall discriminate against any individual with a disability with respect to any offer, or term or condition of employment. We will make reasonable accommodations to the known physical and mental limitations of otherwise qualified individuals with disabilities.

#### **Harassment**

# **JACKSON HOSPITAL**

## **Code Of Conduct**

Each Jackson Hospital employee has the right to work in an environment free of harassment. We will not tolerate harassment by anyone. Degrading or humiliating jokes, slurs, intimidation or other harassing conduct is not acceptable in our workplace.

- Any form of sexual harassment is strictly prohibited. This prohibition includes unwelcome sexual advances or requests for sexual favors in conjunction with employment decisions. Moreover, verbal or physical conduct of a sexual nature that interferes with an individual's work performance or creates an intimidating, hostile or offensive work environment will not be tolerated.
- Employees who observe or experience any form of harassment should report the incident to their supervisor or the Assistant Administrator / Human Resources.

### **Workplace Violence**

Each Jackson Hospital employee also has the right to work in an environment free of violence. We will not tolerate any type of workplace violence.

- Workplace violence includes robbery and other commercial crimes, stalking cases, violence directed at the employer, terrorism and hate crimes committed by current or former employees.
- As part of our commitment to a safe workplace for our employees, we prohibit employees from possessing firearms, other weapons, explosive devices or other dangerous materials at Jackson Hospital.
- Employees who observe or experience any form of violence should report the incident to their supervisor or the Assistant Administrator / Human Resources.

### **License and Certification Renewals**

Persons who are required to maintain professional licenses, certifications, or credentials must maintain these items in a current and up-to-date status while complying with all pertinent Federal, state, or local requirements governing their field of expertise. Jackson Hospital may require proof of current professional licenses, certifications, or credentials. No persons requiring a professional license, certification, or credential will be allowed to perform their job duties or contracted assignments until such time he/she meets this requirement.

- Employees shall advise their supervisor and/or the Human Resources Department if any action is taken which suspends, adversely impacts or limits their license or credentials.

### **Hiring or Retention of Excluded Individuals or Entities**

We will not knowingly hire, retain, employ or contract with any individuals or entities that have been excluded from participation in any government program. Nor will we knowingly conduct business or continue to conduct business with any individuals or

# **JACKSON HOSPITAL**

## **Code Of Conduct**

entities, whether independent contractor, subcontractors, suppliers or vendors, who have been excluded from participation in any government program.

- An appropriate background search as required by Jackson Hospital policies will be performed for each new Jackson Hospital employee or proposed employee. Retention or contracting of independent contractors, vendors and/or other business associates must also be in accordance with Jackson Hospital policy regarding exclusion from government programs.
- Employees shall advise their supervisor or the Human Resources Department if any action is taken which impacts or limits their eligibility to participate in government programs.

### **Substance Abuse**

To protect the interests of our employees and patients, we are committed to an alcohol and drug-free work environment. All employees must report for work free of the influence of alcohol and illegal drugs. Reporting to work under the influence of any illegal drug or alcohol, having an illegal drug in your system or using, possessing, or selling illegal drugs while on Jackson Hospital work time or property may result in immediate termination. We may use drug testing as a means of enforcing this policy.

### **Gifts and Fund-Raising among Employees**

No employee is compelled to give a gift to another employee, and any gifts offered or received should be appropriate to the circumstances. No employee is compelled to contribute to requests in connection with a fund-raising event.

### **Controlled Substances**

Some employees routinely have access to prescription drugs, controlled substances and other medical supplies. Many of these substances are governed and monitored by specific regulatory organizations and must be administered by physician order only. It is extremely important that these items be handled properly and only by authorized individuals to minimize risks to us and to our patients. If you become aware of the diversion of drugs from the organization, you should report the incident immediately.

### **Personal Use of Jackson Hospital Resources**

It is the responsibility of each Jackson Hospital employee to preserve our organization's assets including time, materials, supplies, equipment and information. Organizations assets are to be maintained for business-related purposes. As a general rule, the personal use of any Jackson Hospital asset without prior approval of your supervisor is prohibited. The occasional use of items, such as copying facilities or telephones, where the cost to Jackson Hospital is insignificant, is permissible. Any community or charitable use of

# **JACKSON HOSPITAL**

## **Code Of Conduct**

organizational resources must be approved in advance by your supervisor. Any use of organization resources for personal financial gain unrelated to Jackson Hospital's business is prohibited.

### **Health and Safety**

Jackson Hospital is committed to providing a safe and healthy workplace for all Employees, customers, patients, and visitors. Jackson Hospital is equally committed to minimizing any negative impact upon the environment. Jackson Hospital must comply with all government regulations and rules that promote the protection of workplace health and safety. Jackson Hospital has developed policies to protect employees from potential workplace hazards. You should become familiar with and understand these policies. 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.

### **COMPLIANCE WITH LAWS AND REGULATIONS**

Jackson Hospital provides healthcare services to the people of this community and the surrounding communities. These services may be provided only pursuant to appropriate Federal, state, and local laws and regulations.

- We comply with all applicable rules and regulations, policies, and procedures. We conduct business with honesty, fairness and integrity.
- All employees, medical staff members, other healthcare practitioners and contract service providers must be knowledgeable about and ensure compliance with the laws and regulations that are applicable to their professional duties.
- All employees, medical staff members, other healthcare practitioners and contract service providers should immediately report violations or suspected violations to a supervisor or a member of management.
- We do not pursue any business opportunity that requires engagement in any illegal activity or that we believe may be in violation of any law, rule, regulation or Jackson Hospital policy.
- We do not solicit, accept, or give anything of value to employees, physicians or others for referrals of patients.
- We ensure that all drugs and/or other controlled substances used in treatment of patients are maintained, dispensed and transported in conformance with all applicable laws and regulations.
- We ensure all accounting, reimbursement or financial reporting functions are performed accurately and in conformance with all applicable laws and regulations.
- We adhere to sound environmental and safety practices as well as the proper handling of medical or hazardous waste.

# **JACKSON HOSPITAL**

## **Code Of Conduct**

- We are familiar with the applicable laws that govern matters pertaining to our respective duties, and we understand that this familiarity is a requirement of our job and a regular part of performance evaluation.

### **BILLING AND CODING**

We take care to ensure that all billings to government and private insurance payors and patients are true, accurate and conform to applicable Federal and state laws and regulations. We prohibit any employee or agent of Jackson Hospital from knowingly presenting or causing to be presented claims for payment or approval that are false, fictitious or fraudulent.

- We operate oversight systems 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.
- As part of our documentation effort, we strive to maintain current, complete and accurate documentation.
- 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 government and commercial insurance programs are accurate and complete.
- If a billing or coding error is detected, immediate notification of your supervisor is mandatory. Any overpayments must be promptly refunded.
- For coding questions, contact the Director of Health Information Management. For questions concerning billing issues, contact the Business Office Director.

### **PHYSICIAN RELATIONSHIPS**

#### **Financial Arrangements**

The Hospital has established policies regarding the financial relationships, including ownership and compensation arrangements, between the Hospital and physicians and any other referral sources. All agreements for the payment or receipt of money, goods, services, or anything of value with physicians must be in writing and comply with the federal law and regulations commonly known as the Stark Law. Such financial relationships must also be reviewed to ensure compliance with the federal Anti-Kickback Statute. Before accepting physician agreements, the agreements are reviewed by Hospital's legal counsel and are approved by the Board of Trustees. This approval must be obtained even if the agreement complies with the compliance department policies. Issuance of payment to physicians under agreements must be supported by all required documentation, e.g., certification of hours of service or submission of executed agreement with request for payment.

# **JACKSON HOSPITAL**

## **Code Of Conduct**

### **Referrals**

The Hospital will not pay for referrals nor will it accept payment for referrals made to other entities. All payments made to physicians and/or other entities must be pursuant to current written agreements and must be at fair market value for actual services performed. The Hospital will not consider the value or volume of referrals, or other business generated between parties.

### **COST REPORTS**

Our business involves reimbursement under government programs which require the submission of certain reports of our costs of operation. We comply with Federal and state laws relating to all cost reports including submitting accurate cost reports based on adequate documentation that is auditable and verifiable. These laws and regulations define what costs are allowable and outline the appropriate methodologies to claim reimbursement for the cost of services provided to program beneficiaries. Jackson Hospital is committed to preparing and submitting accurate cost reports. Given their complexity, all issues related to the completion and settlement of cost reports must be communicated through or coordinated with Jackson Hospital's Chief Financial Officer.

### **CONDUCT WITH RESPECT TO REGULATORY AGENCIES**

#### **Inquiries and Requests for Information**

Jackson Hospital will be forthright in dealing with any billing inquiries. Requests for information will be answered with complete, factual and accurate information. We will cooperate with and be courteous to all government inspectors and provide them with the information to which they are entitled during an inspection.

- During a government inspection, we must never conceal, destroy or alter any documents, lie or make misleading statements to the government representative. We will not attempt to cause another employee to fail to provide accurate information or obstruct, mislead or delay the communication of information or records relating to a possible violation of law.
- In order to ensure that we fully meet all regulatory obligations, Jackson Hospital must be informed about stated areas of potential compliance concern. The Department of Health and Human Services, and particularly its Inspector General, have routinely notified healthcare providers of areas in which these government representatives believe that insufficient attention is being accorded to government regulations. We will be diligent in the face of such guidance about reviewing these elements of our system to ensure their correctness.
- Advise the Compliance Officer and your supervisor of governmental inspections and requests for information.

# **JACKSON HOSPITAL**

## **Code Of Conduct**

### **Accrediting Bodies**

We will deal with all accrediting bodies in a direct, open and honest manner. No action should ever be taken in relationships with accrediting bodies that would mislead the accrediting body or its survey teams, either directly or indirectly.

- The scope of matters related to accreditation of various bodies is extremely significant and broader than the scope of this Code of Conduct. Accrediting bodies may be concerned with issues of wide and narrow interests.

### **BUSINESS INFORMATION AND INFORMATION SYSTEMS**

Each Jackson Hospital 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 for our business purposes.

#### **Retention and Disposal of Documents and Records**

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 on any record or document.

- Medical and business documents and records must be retained in accordance with the law and our record retention policy. It is important to retain and destroy records appropriately according to our policy. We must not tamper with records, nor remove or destroy them prior to the specified date.

#### **Confidential Information**

Confidential information may be used to perform your job, but it must not be disclosed to others outside of Jackson Hospital or your department unless the individuals have a legitimate need to know this information and have agreed to maintain the confidentiality of the information.

#### **Electronic Media**

Jackson Hospital's communications systems, electronic mail, intranet and Internet access are the property of the organization and are to be primarily used for business purposes.

- Employees may not use internal communication channels to access the Internet at work to post, store, transmit, download or distribute any threatening; knowingly, recklessly, or maliciously false; or obscene materials including anything constituting or encouraging a criminal offense, giving rise to civil liability, or otherwise violating any laws.

# **JACKSON HOSPITAL**

## **Code Of Conduct**

- Employees who abuse our communication systems or use them excessively for non-business purposes may lose these privileges and be subject to disciplinary action, including termination.

### **FINANCIAL REPORTING AND RECORDS**

All financial information must reflect actual transactions and conform to Generally Accepted Accounting Principles (GAAP) and associated Financial Accounting Standards Board (FASB) rules and regulations. All assets and transactions must be properly recorded and disclosed.

- We have established and maintained a high standard of accuracy and completeness in the documentation and reporting of all financial records. These records serve as a basis for managing our business and are important in meeting our obligations to patients, employees, suppliers and others. They are also necessary for compliance with tax and financial reporting requirements.
- Jackson Hospital maintains a system of internal controls to provide reasonable assurances that all transactions are executed in accordance with management's authorization and are recorded in a proper manner as to maintain accountability to the organization's assets.

### **SUBCONTRACTORS AND SUPPLIERS**

We will employ the highest ethical standards in business practices with respect to subcontractors, suppliers and vendors in source selection, negotiation, determination of contract awards and the administration of such activities.

We will not knowingly hire, retain, employ or contract with any individuals or entities that have been excluded from participation in any government program. Nor will we knowingly conduct business or continue to conduct business with any individuals or entities, whether independent contractors, subcontractors, suppliers or vendors, who have been excluded from participation in any government program.

Any relationships entered into with such individuals or entities must be conditioned upon their eligibility to participate in government programs. Any determination or finding that an individual or entity is excluded from participation in a government program shall be cause for immediate termination of the business relationship.

Retention of or contracting with independent contractors, vendors and/or other business associates must also be in accordance with Jackson Hospital's policy regarding exclusion from government programs.

# **JACKSON HOSPITAL**

## **Code Of Conduct**

- Our decisions and selections with respect to subcontractors, suppliers and vendors will be made on the basis of appropriate objective criteria, and not on personal relationships or friendships.
- We will not communicate to a third party confidential information given to us by our suppliers unless directed to in writing to do so by the supplier.
- Gifts and entertainment that might be offered by subcontractors or suppliers must be in accordance with and subject to Jackson Hospital policies.

### **MARKETING PRACTICES**

We may use marketing and advertising activities to educate the public, provide information to the community, increase awareness of our services and to recruit employees. We will present only truthful, fully informative and non-deceptive information in these materials and announcements. All marketing materials will be consistent with services available and the level of licensure and certification.

### **Antitrust**

Antitrust laws are designed to create a level playing field in the marketplace and to promote fair competition. Jackson Hospital has committed to compliance with antitrust laws and regulations.

- Antitrust laws could be violated by discussing Jackson Hospital business with a competitor, such as how or the level at which our prices are set, disclosing the terms of supplier relationships, allocating markets among competitors or agreeing with a competitor to refuse to deal with a supplier.
- In general, avoid discussing sensitive topics with competitors or suppliers, unless you are proceeding with the advice of hospital counsel. Also, do not provide any information in response to oral or written inquiry concerning an antitrust matter without first consulting hospital counsel.

### **Obtaining Information about Competitors**

We only obtain information about other organizations, including our competitors, through legal and ethical means such as public documents, public presentations and other published or spoken information.

- We do not obtain proprietary or confidential information about a competitor through illegal means. Nor do we seek proprietary or confidential information when doing so would require anyone to violate a contractual agreement, such as a confidentiality agreement with a prior employee.

# **JACKSON HOSPITAL**

## **Code Of Conduct**

### **ENVIRONMENTAL COMPLIANCE**

We comply with all applicable environmental laws and regulations. We operate each of our facilities with the necessary permits, approvals and controls. We employ the proper procedures with respect to handling and disposal of hazardous and bio-hazardous waste, including medical waste. We immediately alert our supervisor about any situation we become aware of regarding the discharge of a hazardous substance, improper disposal of medical waste or other situation we are aware of which may be damaging to the environment.

### **BUSINESS COURTESIES**

- Jackson Hospital employees shall comply with all applicable laws, regulations and policies and procedures relating to the extension or receipt of business courtesies.
- Relationships with contractors, vendors and other business partners should be established based solely on the quality of products and services available to Jackson Hospital.
- Cash gifts or tips or cash substitutes in any amount or from any source are strictly prohibited.

### **POLITICAL ACTIVITIES AND CONTRIBUTIONS**

Jackson Hospital supports employee participation in civic affairs and political activities. These affairs and activities must not create a conflict of interest with Jackson Hospital nor reduce the employee's work performance. Employees must recognize that involvement and participation in political activities is on an individual basis, on their own time, and at their own expense. When employees speak on public issues, they must make it clear to the audience that their comments are their own personal viewpoints.

No employee is authorized to contribute, directly or indirectly, any assets of Jackson Hospital, including the work time of any employee, to any political office holder, party or campaign of any candidate for federal, state, or local office without following the appropriate approval process.

At times, Jackson Hospital may ask employees to make personal contact with government officials or to write letters to present our position on specific issues, but you shall always be free to determine whether or not to do so.

### **THE CORPORATE COMPLIANCE PROGRAM**

# **JACKSON HOSPITAL**

## **Code Of Conduct**

The Corporate Compliance Program is intended to give effect to Jackson Hospital's commitment to the highest standards of conduct and to compliance with all applicable laws, regulations and Jackson Hospital policies and procedures. The Compliance Program is designed to:

- Prevent, detect and correct violations of the laws and regulations relating to government healthcare programs.
- Quantify and measure the Compliance Program effectiveness (in preventing, detecting and correcting such violations).
- Maintain sufficient documentation to be able to provide government agents with evidence of our compliance activities.

### **Structure**

The structure of the compliance program is guided and approved by the Board of Trustees. There is also a Compliance Officer and a Compliance Committee. Additional elements of the ongoing compliance program include:

- Maintenance, publication, and distribution of the Code of Conduct and compliance policies and procedures.
- Analysis of standard auditing and monitoring functions.
- Use of standard audit results to determine targets for improvement and education.
- Preparation and implementation of system-wide policies, procedures, and tools to comply with federal, state and local laws, statutes, and regulations (e.g., the False Claims Act, HIPAA/HITECH, PPS, etc.).
- Continuation of the compliance training and education program.
- Enhancement of the anonymous compliance hotline.
- Investigation of reports received through the anonymous compliance hotline.
- Assessment of the Hospital's compliance program.
- Periodic reports to the Board of Trustees.

### **Reporting Compliance Concerns**

Each employee has an individual responsibility for reporting any activity by any employee, physician, subcontractor or vendor that appears to violate applicable laws, rules, regulations, Jackson Hospital policies or this Code. This is not just encouraged, it is expected.

### **Reporting Options, Guidance and Resources**

Several options are available to you to obtain guidance on a compliance issue or to report suspected violations.

# **JACKSON HOSPITAL**

## **Code Of Conduct**

Whenever appropriate, bring your concerns to your supervisor first. However, if this is uncomfortable for you, you feel it is inappropriate or you have done so and your concerns still have not been addressed, another option is to discuss the situation with another member of management at your facility, your Human Resources Director or your Compliance Officer. In addition, Jackson Hospital's policies also provide options, such as the Problem Solving Procedures policy.

### **Federal and State False Claims Act Laws**

The Federal Deficit Reduction Act requires that certain entities, such as the Hospital, provide their employees, contractors and agents with information related to the federal False Claims Act (FCA) law. This law provides that civil penalties may be imposed against any person or entity that knowingly presents or causes to be presented a false or fraudulent claim to a federal healthcare program for payment. In addition to civil monetary penalties, violators of the Federal False Claims Act may be subject to up to treble damages for each false claim submitted to federal healthcare programs. The federal False Claims Act includes whistleblower protection provisions that protect any individual who is discharged, demoted, suspended, threatened, harassed, or in any other manner discriminated against for filing an action under the federal False Claims Act.

### **Civil Monetary Penalties Law**

The Civil Monetary Penalties Law authorizes the imposition of substantial civil money penalties against an entity that engages in activities including, but not limited to: (1) knowingly presenting or causing to be presented, a claim for services not provided as claimed or which is otherwise false or fraudulent in any way; (2) knowingly giving or causing to be given false or misleading information reasonably expected to influence the decision to discharge a patient; (3) offering or giving remuneration to any beneficiary of a federal health care program likely to influence the receipt of reimbursable items or services; (4) arranging for reimbursable services with an entity which is excluded from participation from a federal health care program; (5) knowingly or willfully soliciting or receiving remuneration for a referral of a federal health care program beneficiary; or (6) using a payment intended for a federal health care program beneficiary for another use.

### **Identity Theft Prevention**

The Hospital's Identity Theft Prevention Program was developed in compliance with federal regulations 16 C F R § 681.2 pertaining to Red Flags and Identity Theft. All employees responsible for or involved in the process of opening a covered account, restoring a covered account or accepting payment for a covered account shall be knowledgeable of red flags indicators of possible identity theft. Examples of alerts and red flags include but are not limited to:

- Personal identifying information is not consistent with personal identifying information that is currently on file.
- Identification on which the photograph or physical description is inconsistent with the appearance of the customer.

# **JACKSON HOSPITAL**

## **Code Of Conduct**

- Documents provided that appear to be altered, forged or reassembled.
- Personal identifying information provided by the customer is not consistent with other personal identifying information provided by the customer, such as a lack of correlation between the SSN range and the date of birth.
- The SSN provided is the same as that submitted by other applicants or customers.
- The SSN has not been issued, or is listed on the Social Security Administration's Death Master File.
- The hospital is notified of unauthorized charges, transactions or lack of statements in connection with the customer's account.
- The hospital is notified by a customer, law enforcement or other person that a fraudulent account has been opened for a person engaged in identity theft.

### **Jackson Hospital's Toll-free Ethics and Compliance Hotline**

You are always free to contact the Ethics and Compliance Hotline at 1-800-273-8452, and you may always make such calls anonymously. With respect to reports which are not made anonymously, Jackson Hospital will make all reasonable efforts to maintain, within the limits of the law, the confidentiality of the identity of any individual who reports possible misconduct.

You may also contact Jackson Hospital's Compliance Officer.

### **Retribution or Retaliation**

Retribution or retaliation against anyone who, in good faith, reports a possible violation is strictly prohibited. Any employee who deliberately makes a false accusation with the purpose of harming or retaliating against another employee will be subject to discipline, up to and including termination of employment.

### **Investigations**

We are committed to investigate all reported concerns promptly and confidentially to the extent reasonably possible. The Compliance Officer will coordinate any findings from the investigations and review and recommend corrective actions or changes that need to be made. All employees are required to cooperate with the investigation efforts.

### **Corrective Actions**

Where an internal investigation substantiates a compliance violation, appropriate corrective action shall be promptly initiated. As appropriate, corrective actions may include prompt restitution of any overpayment amounts, notification of the appropriate governmental agency, institution of disciplinary action, and implementation of system modifications to prevent a similar violation from recurring in the future.

# **JACKSON HOSPITAL**

## **Code Of Conduct**

### **Disciplinary Actions**

Anyone determined to have violated the code is 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:

- Oral warning
- Written warning or reprimand
- Suspension
- Termination
- Restitution

Jackson Hospital requires all employees to sign an acknowledgement confirming they have received the Code, that they understand its provisions are mandatory, and that they agree to comply with the Code of Conduct. New employees will be required to sign this acknowledgment as a condition of employment.

Adherence to and support of Jackson Hospital's Code of Conduct and participation in related activities and training will be considered in decisions regarding hiring, promotion and compensation for all candidates and employees.

# JACKSON HOSPITAL

## Code Of Conduct

### FREQUENTLY ASKED QUESTIONS & ANSWERS

The following are some important questions and answers regarding compliance at Jackson Hospital:

*Q. What is Compliance?*

A. Compliance is the term used to describe the hospital's commitment to adhere to all federal, state and local laws.

*Q. What is my role as an employee?*

A. As an employee of the hospital, you are responsible for obeying these laws.

*Q. What laws and regulations effect our hospital?*

A. Healthcare is a heavily regulated industry. There are many laws, regulations as well as accrediting bodies that apply specifically to the way we take care of patients and provide services as a hospital. Listed below is a sample of some of these:

- Employment Laws
- Tax Laws
- State Licensure Laws
- False Claims Act
- Anti Trust Laws
- Hazardous Waste Disposal Regulations
- Occupational Safety & Health Administration (OSHA)
- Safe Medical Device Act (SMDA)
- Medicare Regulations
- Drug Enforcement Administration (DEA)
- HIPAA/HITECH
- The Joint Commission

*Q. Does Compliance really affect me directly?*

A. Yes, probably more than you realize. All employees are required to conduct themselves in an ethical and legal manner. This is not only a requirement for employment at Jackson Hospital, but there are civil and criminal penalties that can be given to people who do not obey these laws and regulations.

*Q. So, can I really get in trouble?*

# JACKSON HOSPITAL

## Code Of Conduct

A. Yes, employees who willingly and intentionally commit acts which are in violation of the laws can be subject to criminal and civil penalties. In addition, abiding by hospital policies is a requirement for employment. The hospital is also required to enforce the policies and procedures it has in place.

*Q. How do I know what I am supposed to do?*

A. Following the policies and procedures for your department is the best way. Not only do our policies and procedures help us to know how to do our job, they also provide the guidance we need to abide by rules and regulations. Part of the justification for creating policies and procedures is to assure that we are doing things in accordance with the rules and regulations under which we operate.

*Q. What other resources are available to Jackson Hospital employees for addressing Compliance issues?*

A. The Compliance Policy for Jackson Hospital is located in the hospital's Administrative Policy & Procedure Manual. This plan addresses some of the most common issues related to compliance. The Compliance Officer, Risk Manager or Director of Human Resources may be consulted for any questions that you may have regarding compliance.

*Q. Who is Jackson Hospital's Compliance Officer and how do I contact him or her?*

A. The Compliance Officer can be reached at 850-718-2822. This is a role which requires authority to make the necessary changes and set the guidelines in order for us to be in compliance with all the rules and regulations under which we operate. These rules can change quickly, which may require us to do things in a different way. The Compliance Officer is authorized to implement policy changes to keep Jackson Hospital in compliance with new rules and regulations. The function of the Compliance Officer is to coordinate the activities associated with the program and to provide information to the Board, Management and Jackson Hospital employees. The Compliance Officer can be reached at extension 2822 or you may leave a voice message at this extension regarding a compliance issue.

*Q. What if I want to anonymously report a compliance issue?*

A. Jackson Hospital has established a "Healthcare Values Line" through Pinkerton Company to provide access for employees to voice questions and/or concerns twenty-four hours a day, seven days a week. Each call will remain confidential and will be investigated thoroughly. You are urged to direct your questions or concerns regarding compliance to the Compliance Officer if at all possible. The toll free

# JACKSON HOSPITAL

## Code Of Conduct

number for the “Healthcare Values Line” is posted at all Jackson Hospital time clocks and other key locations in the hospital.

*Q. Can I get in trouble for asking questions or voicing concerns about issues I think are not “in compliance”?*

A. No. If an employee has a serious concern regarding an activity that they believe is inappropriate, they should report it to the Compliance Officer or through the “Healthcare Values Line”. Even if the matter is found to be “in compliance” after investigation, there can be no retribution for the employee who reported it.

*Q. Can I get in trouble for not reporting a compliance issue that I am aware of?*

A. Yes. An employee who knows about a serious compliance issue and fails to report it is subject to disciplinary action similar to those who are actually involved in the issue of non-compliance.

*Q. How will I know if a regulation or law changes?*

A. The Compliance Officer will work with all Jackson Hospital managers to keep all employees informed of new or changing regulations and laws. Update information will also include guidance on how to comply.

*Q. How do we know if we are doing things right?*

A. Each department has certain laws and regulations which are specific to their area and function. Part of the Department Managers responsibility is to make sure that their department abides by applicable laws, regulations and policies and procedures. Steps must be taken when policies are written and new services developed to maintain compliance with the laws and regulations which govern them.

*Q. What are the penalties for violating compliance policies?*

A. Violations of compliance policies can result in discipline that may include termination and civil or criminal prosecution. You should contact the Compliance Officer or Director of Human Resources to address specific concerns.

# **JACKSON HOSPITAL**

## **Code Of Conduct**

### **JACKSON HOSPITAL LEGAL COMPLIANCE PROGRAM GENERAL POLICY STATEMENT**

It is the policy of Jackson Hospital to provide services in compliance with all state and federal laws governing its operations, and consistent with the highest standards of business and professional ethics. This policy is a solemn commitment to our patients, to our community, to those government agencies that regulate Jackson Hospital and to ourselves. In order to ensure that Jackson Hospital's compliance policies are consistently applied, Jackson Hospital has established a legal and regulatory compliance program. The program is directed by a Compliance Committee and a Compliance Officer, who are charged with reviewing our compliance policies and specific compliance situations that may arise.

All Jackson Hospital employees, as well as those professionals who enjoy staff membership, must carry out their duties for Jackson Hospital in accordance with this policy. Any violation of applicable law, or deviation from appropriate ethical standards, will subject an employee or independent professional to disciplinary action, which may include oral or written warning, disciplinary probation, suspension, reduction in salary, demotion, dismissal from employment, or revocation of privileges. These disciplinary actions also may apply to an employee's supervisor (or a staff member's department manager) who directs or approves the employee's improper actions, or is aware of those actions but does not act appropriately to correct them; or who otherwise fails to exercise appropriate supervision.

The Legal Compliance Program includes statements of the hospital's policy in a number of specific areas. All employees and professional staff members must comply with these policies, which define the scope of Jackson Hospital employment and professional staff membership. Conduct that does not comply with these statements is not authorized by Jackson Hospital, is outside the scope of Jackson Hospital employment and professional staff membership, and may subject employees and professional staff members to disciplinary action. If a question arises as to whether any action complies with Jackson Hospital policies or applicable law, an employee should present that question to that employee's supervisor, or, if appropriate, directly to the Compliance Officer, or to a member of the Compliance Committee. All employees should review this Legal Compliance Plan from time to time to make sure that these policies guide their actions on behalf of the hospital.

If, at any time, any employee or professional staff member becomes aware of any apparent violation of Jackson Hospital's policies, he or she must report it to his or her supervisor (in the case of an employee) or to the Compliance Officer. All persons making such reports are assured that such reports are treated as confidential; such reports will be shared only on a bona fide need-to-know basis. Jackson Hospital will take no adverse action against persons making such reports, whether or not the report ultimately proves to be well-founded. If an employee or professional staff member does not report conduct violating the hospital's policies, that employee or professional staff member may be subject to

# **JACKSON HOSPITAL**

## **Code Of Conduct**

disciplinary action, up to and including termination of employment or revocation of privileges.

# JACKSON HOSPITAL

## Code Of Conduct

### ACKNOWLEDGMENT

My signature on this form acknowledges that I have received and read the Jackson Hospital Code of Conduct.

I agree to comply fully with the standards contained in this book. I understand that compliance with these standards, policies and procedures is a condition of my continued employment or association with Jackson Hospital. I also understand that Jackson Hospital reserves the right to amend and modify the Code of Conduct and that I will be notified of relevant changes.

Name (Please Print): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Department: \_\_\_\_\_