University Medical Center Health System
Code of Conduct
A “No Fear” Culture
A MESSAGE FROM OUR PRESIDENT

Our hospital, our health system, and our Service is our Passion culture has been built and established over many years. And just like a career, a family or a legacy, what we build is worth protecting. Our Code of Conduct is designed with a singular focus in mind…protecting UMC Health System, its employees and our mission to serve.

Our Code of Conduct rests upon and supports our standards of behavior that define UMC such as compassion, teamwork and safety. Truthfully, compliance is more than a program, it is a consistent effort to be compliant, with regulations, laws and good business practices all of which are designed to protect UMC Health System.

Our goals remain clear: to reduce patient and employee harm, to provide an excellent patient experience, and to maximize our financial health, and thus to earn trust — in UMC. I believe our Code of Conduct helps guide each of us toward accomplishment of these goals.

Thank you for reviewing our Code of Conduct. And thank you for your contribution to our success. Blessings to you and your family.

Mark Funderburk
Program Overview

University Medical Center Health System’s (UMCHS) Code of Conduct was adopted by the UMCHS Board of Managers and has been incorporated into a compliance program aimed to reduce risk and prevent the potential for misconduct. The compliance plan is designed to foster behavior that is both ethical and consistent with our culture. The compliance program is an aide to the development of effective internal controls that promote adherence to federal and state laws as well as program requirements of federal, state, and private healthcare plans. The compliance program works to prevent fraud, waste, and abuse and supports the mission, vision, and standards of excellence for our hospital.

Code of Conduct

The Code of Conduct provides a summary of the basic written policies that govern our institution, and should answer questions you may have regarding the expected behaviors during your employment.

The UMCHS Code of Conduct applies to all members of the UMC (hospital) and UMC Physician workforce. Each member of the workforce will receive an overview of the Corporate Compliance Program and the Code of Conduct at the time of hire, annually, and then any time there are important updates or changes in laws or regulations. It is important you take the time to read the information provided in this document. As a member of the UMCHS workforce, you will be asked to sign an acknowledgement form stating you have read and understand the Code of Conduct.

At the end of this document you will find specific instructions on how to report suspected or confirmed wrong-doing within the organization. If I can be of any help to you in understanding this document or giving you guidance on Compliance issues, please contact me, Jodene Satterwhite, Chief Compliance & Privacy Officer. My email is letha.satterwhite@umchealthsystem.com, and my phone number is 806-761-0395.

Do the right thing because it is right.

Immanuel Kant
# Table of Contents

Our Mission, Vision, and Standards of Excellence
UMCHS Partnerships
Our Pillars
General Compliance Behaviors
Patient Rights
Employee Rights
Legal Responsibilities
  - Admissions, Transfers and EMTALA
  - False Claims
  - Anti-Kickback Statute
  - Self-Referral Statute – Stark
  - Reporting Fraud, Waste, and Abuse
  - Copyrighted Materials
  - Contracts
  - Ineligible Persons
  - Felony Crimes
Billing and Coding Practices
  - Accuracy of Documentation
  - Retention of Records
Confidentiality of Information
  - Health Insurance Portability Accountability Act (HIPAA)
  - Passwords
Conflict of Interest
  - Gifts to Employees
  - Gifts to Physicians
  - Entertainment
  - Relationships with Family/Vendors
Employees
  - Harassment or Discrimination
  - Non-Retaliation
  - Employee Assistance Program
Electronic Media/Social Networking
License and Certification Renewals
Auditing and Monitoring
Education and Training
Reporting Process
Failure to Comply
Our Mission
Service is our passion. We serve by providing safe, high quality care to all, achieving financial performance, and training tomorrow’s healthcare professionals.

Our Vision
To serve our patients in the best teaching hospital in the country.

Our Standards of Excellence
Attitude, Communication, Responsiveness, Compassion, Teamwork, Ownership, Safety, and Respect.

UMCHS Partnerships
UMCHS has a strong and enduring partnership with Texas Tech, which helps fulfill UMCHS’s mission and helps support Texas Tech’s academic pursuits of education and research. Together with Texas Tech Physicians, UMCHS has seen an increase in market share, demand for services, and positive reputation. Sound financial planning has allowed the system to thrive.

UMCHS has seen an increase in market share and a demand for service because of the strong partnership with Texas Tech

Our Pillars
Service: To differentiate UMCHS as the market leader in patient satisfaction.

Safety/Quality: To continually improve quality as an HRO: High Reliability Organization.

Stewardship: To maximize financial strength in order to accomplish the mission.
**Teamwork:** To secure talent: an engaged team valued within our SIOP culture.

**Growth:** To build and sustain the UMCHS brand through the region.

**General Compliance Standards and Behaviors**

**Every employee will:**
- Conduct themselves in an ethical manner (acting in ways consistent with what society and individuals typically think are good behaviors).\(^1\)
- Conduct themselves with honesty, integrity, and fairness.
- Treat patients with kindness, care, and empathy.
- Participate in the initial and continuing education activities related to the Compliance Plan.
- Comply with all applicable laws, regulations, policies, and procedures.
- Report in good faith suspected violations of the law or the Compliance Plan.

**Patient Rights**

**Patients, parents, and legal guardians have a right:**
- To personal dignity and respect.
- To have a family member or representative of choice or physician notified of his/her admission.
- To privacy.
- To know the identity of all caregivers.
- To receive all communication regarding the nature of their medical condition, treatment, and outcomes.
- To participate in their care.
- To be informed about advanced directives.
- To examine and receive an explanation of the bill regardless of payment.
- To have a secure and safe environment.

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\(^1\) [www.businessdictionary.com/definition/ethical-behavior.html](http://www.businessdictionary.com/definition/ethical-behavior.html)
• To access their medical record.
• To have their pain assessed and managed in a timely manner and to be told about pain relief measures.
• To religious and other spiritual services.
• To expect respect for their cultural and personal values, beliefs, and preferences.
• To have a family member or friend to be present for emotional support unless the presence infringes on other’s rights, safety, or is medically or therapeutically contraindicated.

**Employee Rights**

_Every UMCHSHS employee has the right:_

• To work in a professional atmosphere.
• To work in an environment free from harassment.
• To work in an environment where all employees are treated with respect and dignity.
• To work in a safe environment.
• To work in an environment free from discrimination.
• To report suspicious behavior without fear of retaliation.
Legal Responsibilities

Admissions, Transfers and EMTALA

The Emergency Medical Treatment and Emergency Act (EMTALA) is a federal statute, also known as the “anti-dumping” law. EMTALA provides hospitals with regulations on how to deliver care to patients entering the Emergency Center, including those persons pregnant. All patients entering the Emergency Center will receive a medical screening exam to determine if an emergency medical condition exists. Patients entering the Emergency Center at UMCHS are seen based on their medical condition and not their ability to pay. Financial information will be obtained once the patient has been assessed and stabilized, if necessary. In the event the patient is transferred to another healthcare institution, the patient will be stabilized before the transport occurs.

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Emergency Center patients, including those pregnant must receive a medical screening exam.

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False Claims Act

The False Claims Act, also known as Lincoln’s Law, protects the government from being overcharged or sold goods or services that are not up to standard. Filing or submitting claims to Medicare or Medicaid that you know or should know are false or fraudulent results in illegal activity. Filing false claims will result in fines up to three times the amount paid plus an additional fine. Each instance an item or service is billed to Medicare or Medicaid will result in a claim so fines can add up quickly. In addition to fines, criminal penalties may include imprisonment.
Anti-Kickback Statue

The Anti-Kickback Statue (AKS) is a criminal law that prevents individuals from offering or accepting payment (money, goods, or anything of value) for referring a patient to UMCHS, a physician, or any other healthcare provider. It is a law that prevents offering or accepting payment for purchasing, leasing, ordering, or recommending the purchasing, leasing, or ordering of any good, facility, service or item.

Employees will not offer or accept payment for any services, goods, or anything of value.

Physician Self-Referral Law - Stark

The Stark law prohibits physicians from referring patients who receive healthcare services paid by Medicare or Medicaid to entities with which the physician or an immediate family member has a financial relationship. For example, a physician may not refer a patient to a laboratory for lab tests if the physician owns the laboratory or if someone in the physician’s immediate family owns the laboratory. Examples of Immediate Family: husband, wife, child, brother, sister, father, mother.

Violating the Stark law results in fines and exclusion from participation in federal health care programs such as Medicare or Medicaid.
**Reporting Fraud, Waste, and Abuse**

UMCHS employees have a responsibility to report any known or suspected violations of any rules or regulations. Failure to report violations can result in serious consequences such as verbal counseling, written counseling, suspension, or termination. In addition, an employee not reporting such violations can be considered to be a participant in the violation.

*Failure to report known or suspected violations will result in verbal or written counseling, suspension, or termination.*

**Copyrighted Materials**

University Medical Center Health System prohibits the use of copyrighted, trademarked, or licensed material. Please contact UMCHS Marketing before using any UMCHS brands.

**Contracts**

All contracts must be reviewed by the UMCHS Contracts Group and/or the Office of General Counsel. Some may even require review by UMCHS’s outside Counsel. Under no circumstances should agreements be made by a “private understanding”.

*All contracts must be in writing, submitted to the Contracts Group for review, and signed by all appropriate individuals.*
**Ineligible Individuals and Felony Crimes**

UMCHS will not knowingly form a contract with, purchase from, or enter into any business relationship with any individual or business entity that is publicly listed by a federal agency as debarred, suspended, or proposed from debarment. Medical providers will not be allowed to work at UMCHS if the provider is excluded from any federally or state-funded healthcare programs such as Medicare and Medicaid. Any UMCHS employee or provider that becomes ineligible to participate in federal or state-funded healthcare programs must notify the Corporate Compliance department as soon as it is known. Any UMCHS employee or provider that is charged or convicted with a felony crime must disclose this to the Corporate Compliance department as soon as possible.

**Questions (Q) and Answers (A)**

**Q:** I work in the Emergency Center and have noticed that patients who are triaged are considered to have had a medical screening exam completed. Is this okay?

**A:** No, patients that are assessed during Triage are not considered to have had a medical screening exam. A provider must exam the patient and document the findings in the patient’s medical record.

**Q:** I work in a Clinic where the physician meets with sales vendors to discuss future use of a product. The usage and cost are decided between the two of them and no contract is signed. Should I be concerned since there is no formal contract signed?

**A:** All agreements between UMCHS and a sales vendor should be in writing and signed by all parties involved. The Contracts Review Group and Legal should review the contract to ensure there are no issues with the terms of the agreement.

**Q:** I am an employee in our business office. Rent is not being paid by a physician who is occupying office space from the hospital. What should I do?
A: This could be a violation of the Anti-Kickback Statue. If this is the case, the hospital could be subject to criminal penalties. Rent must be collected and paid at fair market value. You should report this at once to your Supervisor or the Corporate Compliance department.

**Billing and Coding Practices**

**Accuracy of Documentation and Coding**

UMCHS is responsible for ensuring that all billing claims accurately reflect the services rendered and the supplies used to treat our patients. Patients will be billed only for the services and care provided. Employees are expected to understand and comply with appropriate billing practices. Any overpayments received by UMCHS will be promptly returned.

In order to bill accurately, there must be documentation that supports the use of supplies, services, and procedures. Accurate and detailed documentation, in turn, provides the necessary information in order to determine the correct billing code as well as the diagnosis code. Individuals that suspect improper billing or documentation has occurred should immediately notify their supervisor. Any individual may contact the UMCHS Hotline or the Corporate Compliance department if there is a concern with improper billing.

*Only bill for services that are ordered and performed.*

**Retention of Records**

UMCHS will ensure records required by federal or state law are created and maintained. UMCHS employees are responsible for the integrity and accuracy of
UMCHS documents and records. It is important to maintain records in the event UMCHS must defend our practices and actions. Records must not be tampered with, removed, or destroyed prior to a specified date. No one may alter or falsify information on any record or document.

Questions (Q) and Answers (A)

Q: A patient calls the Billing Office to ask that a diagnosis be changed on a claim because their insurance company will not pay for the service. Is it all right if I make the change?
A: No, coding changes can only be made if the changes are legitimate and the medical record documentation fully supports the requested change.

Q: I discovered a coding error in the billing system and corrected it. What is my next step?
A: Notify your supervisor right away who should then contact the Corporate Compliance department. There is a possibility of an overpayment and an investigation should occur to determine the magnitude of the potential error.

Confidentiality of Information

Health Insurance Portability Accountability Act (HIPAA) of 1996

HIPAA is a United States legislation enacted by Congress and signed by President Clinton that provides data privacy and security provisions for safeguarding confidential medical information, also known as protected health information or PHI. HIPAA establishes policies and procedures for maintaining the privacy and security of individually identifiable health information, states the numerous offenses relating to health care, and establishes penalties, both civil and criminal, for violations. The regulation created programs to assist with the control of fraud and abuse within the healthcare system. All UMCHS Board members, employees, volunteers, and contract workers must comply with HIPAA.

Maintaining confidential information is an important function of UMCHS operations. Confidential information includes, but is not limited to, medical records, paper, or electronic, hospital business records, strategic planning,
marketing strategies, peer review activities, personnel records, and performance improvement activities. Confidential information includes all information discussed or reported at all committee meetings at UMCHS. Proper authorization must be obtained before any confidential information is released.

All UMCHS employees will be required to sign a confidentiality statement at the time of hire.

Usernames and Passwords

Passwords and other personal security codes are confidential. Usernames and passwords to access UMCHS network, computers, and programs must never be shared with another person for any reason. If you are asked to share your username or password, respectfully decline. Sharing your username or password will result in verbal or written counseling, probation, and/or termination.

Questions (Q) and Answers (A)

Q: I work on a post-surgical unit and a physician is always asking for my username and password to log onto the computer. The physician doesn’t work here often and forgets the username and password needed to log in. Can I give the physician my username and password to help him out?

A: No. All usernames and passwords are confidential. Do not share your username and password with anyone. If you allow someone to use your username or password, you will be held accountable for the information the physician reviews or accesses.
Q: I work in an outpatient department of the hospital. Can I give a patient their medical records when they ask for them?
A: Some outpatient departments do release the portion of the patient’s medical record created in that department. For instance, Lab will release lab results as appropriate. Seek the assistance of your supervisor and refer to the specific UMC Privacy Policies for guidance.

Q: I still don’t understand the term “PHI”. What is PHI?
A: PHI is Protected Health Information and includes any information about health status, provision of health care, or payment for health care that is created or collected by a covered entity or a business associate. The information must be linked to a specific individual. In other words, it includes any part of a patient’s medical record or payment history.

Conflict of Interest

The definition of “conflict of interest” is a “situation in which a person is in a position to gain personal benefit from actions or decisions made in their official capacity”. UMCHS employees are expected to avoid any activity that conflicts with the interest of UMCHS. Sometimes a conflict of interest can interfere with the employee’s ability to make unbiased decisions. If there is something that feels like a conflict of interest, it should be disclosed for consideration by management. If the conflict cannot be avoided, management will discuss the options for resolving the conflict with you. Please contact the Corporate Compliance department if you have questions regarding a conflict of interest.

Gifts to Employees and Physicians

UMCHS employees may not accept gifts from vendors, physicians, or contractors except for gifts of minimal value such as pens, note pads, key chains, and coffee.

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2. Protected Health Information, Wikipedia, the free Encyclopedia
3. www.google.com/search?q=definition+of+conflict+interest&rlz
mugs. Physicians must not receive any gifts, payments, or other things of value in return for referrals. If this were to occur, it could be viewed as a kickback and fall under the Anti-Kickback Statute. If you suspect this happening, please notify your Supervisor and the Corporate Compliance department as soon as possible.

**Entertainment**

Entertainment is usually considered a social event. Sometimes business matters might be discussed at a social event but it may not be the focus of the event. Entertainment may not be offered for the purpose of influencing another in order to get business referrals. UMCHS employees must not accept any personal gifts or entertainment, such as complimentary trips, from anyone in direct competition with UMCHS.

**Relationships with Family Members, Contractors, or Vendors**

Any UMCHS employee working in a management or supervisory role will not have direct responsibility for hiring or supervising a family member. A family member is considered anyone related by blood or marriage. Employees will remain impartial with actual or potential vendors or contractors. Any association or relationship with a vendor or contractor must be disclosed.

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*It is important to always remain impartial to all vendors, suppliers, or contractors. Report all relationships that are not business relationships.*

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**Questions (Q) and Answers (A)**

Q: A physician works at our hospital and is being paid by a Vendor to speak at a regional conference. The physician wants to take his family along with him and have the Vendor pay for the expense. Is this ok?

A: *No, the additional expenses are not considered reasonable and could appear to be an enticement for referrals or use of a product the vendor is selling.*
Q: I have a cousin that wants to work in EVS with my mother who is the manager of the EVS department. Should I get my cousin to come in and meet with my mother?
A: No, family members cannot supervise other family members. Managers cannot be involved in the hiring process if related to the person interviewing for the job.

Q: I work at UMCP in a Specialty Clinic. My father is a sales rep for a company that sells medical equipment. Can my father schedule a time to meet with the staff to provide information about the equipment?
A: No. Because the vendor is related to you, the staff may be biased; however, someone else from the company could present the new equipment.

Employees

Harassment or Discrimination

Harassment and discrimination can occur in many different forms such as derogatory jokes, slurs, comments, name calling, threats, teasing, unwanted invitations, explicit posters, photographs, or cartoons. It can also be unwanted touching, blocking movement, or prevention of duties based on sex or race. Any form of harassment or discrimination is NOT allowed at UMCHS. If harassment or discrimination of any type is occurring, report it immediately to Corporate Compliance and/or Human Resources.
Non-Retaliation

As an employee of UMCHS, it is your responsibility to report any suspected wrong-doing occurring in the organization; and when doing so, there should be no fear of retaliation or harassment. UMCHS’s management team has the responsibility to create a safe atmosphere free from retaliation or harassment. Reporting any suspected or confirmed wrong-doing is to be done in good faith. To report in good faith means to report honestly and without malice. If you truly believe there is wrong-doing, you should report it.

Retaliation of any form is NOT allowed at UMCHS. If you suspect or experience retaliation is occurring, immediately report your concerns to Corporate Compliance. Failure to report can have serious adverse outcomes for all involved, including the person who chooses not to report.

Employee Assistance Program

The Employee Assistance Program, or EAP, is a counseling resource and is provided for you by UMCHS. EAP counseling is confidential. There are state laws that protect your privacy. EAP counseling is free and is for you and those in your household. Both individual and relationship counseling is offered. EAP offers six to eight sessions and is free. If an employee needs longer than six to eight sessions, referrals are provided for long-term counseling. All the EAP counselors are licensed by the state of Texas and are both knowledgeable and well prepared to help you. EAP offices are located in the Texas Tech Health Sciences Center and there is a 24-hour hotline in the event it is needed. To schedule an appointment call 806.743.1327 or send an email to eap@ttuhsc.edu.

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EAP can help with the following issues: depression, stress, anxiety, alcohol or drug abuse, workplace issues, grief and loss, couple communication, managing family conflict, self-esteem and identity issues, healing from trauma, and much more.

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4 www.merriam-webster.com
**Questions (Q) and Answers (A)**

Q: There is an employee I work with that is always making racial or sexual jokes. I have repeatedly asked the employee to stop but the jokes continue. What can I do next to make it stop?

A: *First, no one should be subjected to this type of behavior. UMCHS has a strong policy against sexual harassment. You should first report this immediately to a supervisor. If this does not stop the behavior, you can follow the chain of command or you can report your concern through the UMCHS Hotline. You may also email or call the Corporate Compliance department.*

Q: I reported a co-worker that was making racial and sexual jokes and now I am being mistreated by my other co-workers. I am being left out of discussions and gatherings. Co-workers are leaving me to work the shift alone when we once worked as a team. I wish I had never reported the co-worker.

A: *UMCHS has a strong stance against retaliation for reporting a concern. Please contact a supervisor or the Corporate Compliance department for help with the situation.*

Q: I am certain there is some wrongdoing occurring in the billing office. Can I report this?

A: *Absolutely you should report it. No harm will come to you if you report in good faith.*

Q: I need help with some issues at home. Does UMCHS have any programs I can access?

A: *Yes, the Employee Assistance Program is a program for UMCHS employees and those living in the household. It is confidential and free.*

**Electronic Media and Social Networking**

UMCHS has a strong stance against using electronic or social media that result in harm to our patients, visitors, employees or the system as a whole. *E-mail and the internet system are not to be used for inappropriate, illicit, or offensive communication.* Any social media post including photographs, that breach patient confidentially or result in any harm will be taken seriously and will in most cases
result in termination from employment. Employees need to be aware at all times of the effect their actions can have when using social media. UMCHS may look at any online activity or conduct in deciding whether to discipline, terminate, or take any other action against an employee. In accordance with the UMCHS Marketing department policy, no employee may speak on behalf of UMCHS or UMCHSP unless they are given specific approval to do so. Speaking on behalf of the system includes any online posts whether they are positive or negative.

**License and Certification Renewals**

It is the responsibility of the employee to keep license or certifications current.

Any UMCHS employee that is required to have a license or certification is responsible for keeping that license or certification current. Allowing the license or certification to lapse can result in counseling, probation, suspension, or termination. Some job roles require licensure, such as nursing; therefore, in this case, the nurse would not be allowed to work at the bedside or in any role that involves patient care.

**Auditing and Monitoring**

Auditing and monitoring is performed in many departments throughout the organization and is an important function of Corporate Compliance. There are multiple reasons auditing and monitoring may be performed:

- To ensure patient care is delivered appropriately.
- To verify patients are billed for the services provided by the organization.
• To ensure providers are documenting a complete and accurate medical record.
• To ensure medical record documentation supports billing codes.
• The result of an outside surveyor.
• To ensure UMCHS is following the rules and regulations of governmental agencies. All-in-all UMCHS wants to ensure we are compliant with the rules and regulations and that we are paid for the services provided but not “one dollar more”.

**Education and Training**

All Board of Managers, employees, volunteers, and contract workers will receive compliance training at the time of hire, annually, and whenever there are changes to applicable laws or regulations.

At the time of hire and during new employee orientation, the following will be presented: Code of Conduct, Patient Rights, EMTALA, business practices regarding billing and overpayments, conflicts of interest, the handling and security of confidential information, False Claims Act, Qui Tam (whistleblower), Anti-kickback, STARK, HIPAA, the Privacy Rule, Protected Health Information (PHI), privacy and security restricted communication, electronic media, social media, and the reporting process.

All individuals are required to complete annual compliance competency education and testing. Some department personnel will be required to complete additional job specific education; for example, employees of the Emergency Center and the Family Birth Center must complete EMTALA specific education in addition to annual compliance competency education and testing.
The Reporting Process
How to Report Suspected or Confirmed Violations

All employees, volunteers, or contract workers are expected to report any suspected or confirmed wrongdoing. The Corporate Compliance department will make all efforts to maintain the confidentiality of your report to the extent possible.

Your first option for reporting compliance concerns is to report to your Supervisor. If you feel uncomfortable reporting to your supervisor, you may report your concern by entering the report through the Hotline, submitting your concern by way of a written report, or meeting with the Compliance Officer.

The Hotline number is (888) 329-6445 or you may enter your concern through EthicsPoint at www.ethicspoint.com or on the UMCHS Intranet page, left side, under the drop-down menu there is a red telephone symbol. If you click on the red telephone symbol, you will be taken directly to the EthicsPoint website.

The webpage is hosted on EthicsPoint’s secure server and is not part of UMCHS’s website or intranet. The information you provide will be sent to UMCHS in a confidential manner. You may remain anonymous if you choose to do so; however, it is important you give as much information as possible regarding the situation. If it involves a patient, please provide the patient’s medical record number or financial number. The more information provided, the quicker the investigation will go. Once you have entered the information into EthicsPoint, you may enter additional information up to one week after the report has been closed. Once the concern has been entered, you may follow-up on a routine basis through EthicsPoint.

If you would prefer to report the concern in person, please contact the Compliance Department at 761-0984. If you are reporting a concern related to UMCP, you may also call 761-0986 or 761-0992, and a meeting will be scheduled as soon as possible.
When reporting in good faith a suspected or confirmed wrongdoing, misconduct, or violation, you will not suffer any penalty; however, if you intentionally make a false statement or misuse the reporting system, you will be subject to discipline up to and including termination of employment.

**Failure to Comply**

Failure to comply with the Compliance Plan or any laws or regulations applicable to UMCHS will result in discipline up to and including termination from employment or association with UMCHS. Misconduct includes but is not limited to:

- Failure to report known or suspected non-compliant conduct
- Being involved in the non-compliant conduct
- Failure to be aware of compliance issues in your department

In addition, if you violate the laws and regulations applicable to UMCHS you risk individual civil actions for damages to include penalties, criminal prosecution and penalties, and administrative exclusion.
I acknowledge that I have read and understand the Code of Conduct and Ethical Behavior. I am fully aware that I must comply with the standards in the Code of Conduct and the Compliance Plan or face disciplinary action. I will cooperate fully with the Compliance Committee and Compliance Office to the extent necessary and report to my supervisor and/or the Compliance Office any knowledge of unethical or illegal activities.

I acknowledge that I have read and understand the information on the Health Information Portability and Accountability Act (HIPAA) that includes but is not limited to the following:
► I understand and agree that hospital information may be confidential, either by law or by UMCHS policy, and I am responsible to protect the confidentiality of information.
► Confidential information includes all patients, personnel, financial, administrative, and other information made confidential by law or UMCHS policy. The information may be oral, written, computerized, or in other mediums.
► I will access only that information that I need to know in order to perform my job duties and responsibilities at UMCHS.
► I will follow security precautions as prescribed by UMCHS: passwords, logout requirements, access codes, etc. I agree that misuse of security measures is considered a breach of confidentiality.
► I will not disclose confidential information now, or at any time in the future, either directly or indirectly, except as required to perform my duties and responsibilities at UMCHS and/or as required by law, and then only to the extent disclosure is consistent with the authorized purpose for which the information was obtained. When applicable, I will follow UMCHS policy concerning the manner in which confidential information may be released.
► I will handle all confidential information, whether oral, written, computerized, or other in such a way as to not inadvertently reveal or disclose it to any other person.
► I will not maintain personal files other than necessary for the performance of my job duties and responsibilities. Such files are property of UMCHS and are subject to confidentiality restrictions. Also, I will use E-mail and internet access only in accordance with UMCHS policy. E-mail is subject to review by management, and my use of E-mail grants consent to such reviews. All E-mail communications are the property of UMCHS.
► I understand that access to confidential information will be audited on a random basis to determine potential breaches of confidentiality/security.
► I agree that any breach of this Acknowledgment/Agreement will result in disciplinary action, which may include immediate termination of employment. Further, I agree that such a breach may result in legal action including suit for injunction restraining my action.
► The terms of this Acknowledgement/Agreement shall be effective immediately and apply both retrospectively and prospectively, regardless of termination of employment.
► I have completed the annual compliance education and test, and scored 80% or better on the test.

Print Name: 

Signature: 

Department: 

Date: 

University Medical University-Corporate Compliance