

Exceptional experiences start with integrity and respect for our patients and families. Community Health Network embraces these principles which include compliance with all rules, regulations and laws; network policies; licensure, accreditation and certification standards; and ethical standards. As a result of this dedication, the Boards of Directors created the Network Responsibility and Compliance Program (NRCP) and appointed a Network Privacy & Compliance Officer, Jackie Smith.

The entire Community team, including vendors, is held to the network's high standards of ethics, privacy and compliance. Those standards are reflected in the *Code of Conduct*, which reinforces the need to balance the business interests of the network with the best interests of our patients. It is crucial that patient access to care, clinical judgment and decision-making are never compromised, nor patient care jeopardized, by financial considerations. Resource manuals for the NRCP and for HIPAA Privacy are always available upon request.

Failure to abide by all applicable laws, rules and regulations, network policies and *Code of Conduct* can result in destruction of a provider's image, public embarrassment, and distrust by patients and the community at large, in addition to the following:

- lawsuits
- repayment of monies for False Claims Act violations, times three
- \$5,500 - \$11,000 per false claim
- civil and criminal fines and penalties for HIPAA violations
- criminal indictment, with possible fines and imprisonment
- exclusion from all federal health care programs (Medicare, Medicaid, TriCare, etc.)
- loss of professional licensure
- a governmentally required "integrity program"

**Anti-kickback Statute.** This federal law forbids anyone from receiving or paying anything of value (e.g. bribes, kickbacks) to influence referrals of government health program beneficiaries (Medicare, Medicaid, etc.). Examples of illegal activities include:

- routine waiver of co-pays and deductibles (except in the case of financial hardship)
- accepting payment of less than fair market value in exchange for referrals
- accepting gifts, such as trips, for prescribing a certain drug or promoting certain equipment
- accepting money each time you send a patient to a specific provider

**Business Courtesies (Gifts and Entertainment).** Business courtesies are the giving and receiving of any types of entertainment or gifts, whether tangible or intangible, between the network and a current, former, or potential customer (payer, sub-contractor, vendor). Examples of business courtesies include:

- cash or cash equivalents, such as gift certificates
- payment for travel and lodging costs to attend an event
- meals and entertainment
- sporting and other event tickets
- exchange of products

Various federal and state regulations govern business courtesies accepted from or extended to government employees and to persons who are in a position to refer patients to us. Vendors may not offer prizes, gifts, cash, coupons, trips, or bonuses in exchange for the network using their products. Offering or accepting these incentives when they do not fall within the acceptable guidelines established by the anti-kickback statutes is illegal.

**False Claims Act.** The False Claims Act and the Criminal False Claims Statute are federal laws that make it illegal to file a claim with a federal health care program that is not consistent with billing requirements or that contains false or misleading information. This is considered fraud and abuse. Examples of false claims include claims for services:

- not rendered
- rendered but not appropriately supported by documentation in the patient's medical record

- not medically necessary
- not covered by the governmental health plan
- rendered by one provider and billed by another provider (exceptions exist)
- do not meet governmental program billing guidelines
- prepared and sent with the intent of getting payment to which the provider is not entitled

**Solicitations.** Solicitation is approaching someone with a request or plea. All solicitation on network premises must comply with network purchasing guidelines. Examples of prohibited activities include:

- illegal activities, such as “pools” (NCAA pools, Indy 500 pools) and unlicensed raffles
- political fundraising and activities
- outside entities / vendors soliciting without network purchasing authorization

**HIPAA Privacy Rule.** The Health Insurance Portability and Accountability Act of 1996 (HIPAA) established standards for privacy of individually identifiable health information. Generally, protected health information (PHI) may be used or disclosed for treatment, payment or health care operations without the authorization of the individual. The network requires a written authorization from the patient before a vendor may observe a surgery or other invasive procedure. Vendor access to patient information must be limited to the minimum information necessary for purposes of device tracking, FDA reporting, etc.

**Non-Retaliation Policy.** Community Health Network expressly prohibits retaliation, retribution or harassment of any kind against any individual who, in good faith, reports a compliance concern or seeks guidance. Compliance questions or concerns should be directed to the Network Privacy & Compliance Officer. Concerns may also be reported anonymously through **AlertLine**, a toll-free hotline, 800-638-5071.

The network plays a critical role in the lives and livelihoods of hundreds of thousands of individuals, families and businesses and the viability of the communities we serve. As a good corporate citizen, the network has established a high level of public trust and confidence. In order to maintain our relationships with patients and families, we must conduct ourselves with the highest standards of integrity and fair dealing in everything we do. As a vendor of the network, you are expected to maintain network’s ethics and integrity.