



## *Our Mission*

To serve through healing,  
education and discovery



Wisdom for Your Life.

# **Code of Conduct**

Ethics and Compliance Program

This Code of Conduct  
is not designed to replace  
any existing UHS policies.  
Please refer to specific UHS  
policies for additional information.

## To all team members

All of us who are a part of University Health System work in a demanding and complicated environment where answers are not always clear. It is important to use good clinical and business judgment to show our patients, fellow team members and the public that we place a high priority on doing what is right, legal and ethical.

The purpose of this booklet is to give us guidance in carrying out our daily activities within appropriate and expected standards. UHS has a strong commitment to a culture of safety and quality for both patients and team members. The information provided in this Code along with the Standards of Conduct housed in Human Resource policy will provide you with the education and tools you need to make the right decision in complex situations. We encourage you to refer to it often.

We are proud that we are an organization that strives to be the very best in the spirit of our mission, vision and values.

A handwritten signature in black ink, appearing to read "Joe R.", with a long horizontal line extending to the right.

Joseph R. Landsman  
President and  
Chief Executive Officer

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## ***Our Mission***

To serve through healing,  
education and discovery

## ***Our Vision***

To be nationally recognized for  
excellence in patient  
care, medical education  
and biomedical research.

## ***We Value***

Integrity • Excellence • Compassion  
Innovation • Collaboration • Dedication

## **Introduction**

The purpose of this Code of Conduct is to provide assistance to our team members in performing their jobs within appropriate ethical and legal standards. The guidelines set forth in the Code are intended to reaffirm UHS's commitment to compliance and sound ethical practices. The Code is intended to be a statement that is easily understood. In some cases, the subject discussed has so much complexity that additional guidance is needed for those directly involved with the particular area to have sufficient direction. This Code is not intended to replace other UHS policies and procedures. All UHS team members must comply with UHS policies and procedures as well as the guidelines in the Code.

## **Team Members' Responsibilities**

All team members are responsible for reading and understanding the Code and applicable department policies and procedures. Ignorance of appropriate conduct or failure to take appropriate action can lead to job termination, disciplinary action, civil penalties or criminal charges against an team member or UHS. To support our commitment to ethical and legal conduct, each team member is responsible for communicating any activity that appears to violate applicable laws, this Code or UHS policies or procedures according to the steps outlined in this Code.

## **Managers' Responsibilities**

Managers are expected to set an example by their ethical business conduct and to assure that members of their department have sufficient information to comply with the law, regulations and policies that apply to their job functions. Managers are expected to promote a culture in which team members are comfortable raising concerns when they arise. Managers must annually review with their team members the policies and procedures of their department and those contained in the Code. In addition, at least once a year, each team member serving in a management position will complete a disclosure statement concerning compliance with the Code and their department policies and procedures. The results of the disclosure statements will be reported to the UHS Board of Directors.



## Ways to Resolve an Ethical or Compliance Issue

The answers to many questions can be found in various UHS documents which contain UHS ethics and compliance policies and procedures. These documents include:

- UHS Mission, Vision and Values;
- The Code of Conduct;
- The Ethics and Compliance Manual;
- Other policies, procedures, manuals and handbooks located within a department containing information specific to the functions which occur in that area.

### Communication and Reporting Program

If you have an ethical or compliance question or concern that cannot be resolved by reviewing the various UHS documents available to you, seek to resolve the problem promptly and constructively through one of the following options:

- **Discuss the issue with your supervisor.** Your immediate supervisor knows you and the issues in your workplace. Supervisors have access to a variety of resources to address a problem.
- **Speak to your department manager.** If you and your supervisor cannot find an answer or if you do not feel your concern is getting proper attention, request a meeting with your department manager to discuss the matter further.
- **Call the Compliance Officer at 305-9118 or the Vice President for Human Resources at 305-8470.** If your department manager is unable to resolve the matter to your satisfaction, contact the Compliance Officer or Vice President for Human Resources.

- **Bring the matter to the attention of any member of the UHS management team.** Matters that are not resolved at the department level may be brought to the attention of any UHS management team member.
- **Call the AlertLine.** You may report the matter by calling the AlertLine at 1-877-591-6744 toll free 24 hours a day, 7 days a week. Calls to the AlertLine may be made anonymously and will, to the extent permitted by law, be treated confidentially. No caller will be subject to retaliation for reporting a good faith concern. Anyone who attempts to retaliate against a team member who has made a call in good faith will be subject to disciplinary action, up to and including termination of employment.

**The AlertLine is not intended to circumvent communicating with your supervisor.** The AlertLine is available when you feel uncomfortable about bringing an issue to your supervisor, department manager or a UHS officer.

**The AlertLine should not be used for accusations that are known to the caller to be false.** This does not mean there needs to be “proof” of a problem to initiate a call, merely that a team member has a reasonable basis for concern. The AlertLine should not be used to settle personal grievances by making false reports or repeating gossip.

## **Guidelines**

In general, all team members should use good judgment and high ethical standards while performing their jobs at UHS. The following guidelines summarize certain basic standards and expectations for your conduct.

### **Business Conduct**

#### **False Claims Acts**

The False Claims Acts, both federal and state, prohibit the presenting of a false or fraudulent claim for payment or approval. The Act also prohibits knowingly making or using a false record or statement to get a false or fraudulent claim paid or approved for payment.

UHS and its team members bill only for services rendered, and all bills must comply with billing requirements for government-sponsored programs as well as other payors. UHS team members will exercise care in ensuring the accuracy of any written or oral report made to any government agency or other payor. UHS will not tolerate false reports to government agencies or other payors. Deliberate inaccurate reports to government agencies or other payors may expose a team member to civil and criminal penalties, as well as termination of employment and loss of benefits. UHS maintains coding and billing policies in order to assist team members in the billing process. If you have any questions regarding the billing process, review your department policies or contact your supervisor.

## **Confidential Information**

Confidential information about our institution's strategies and operations is a valuable asset to UHS. Do not discuss confidential information outside your department or with others outside UHS. Patient confidentiality is protected by Tennessee and federal law. Confidential information includes such things as electronic or written patient records, personnel data, patient lists, strategic plans, marketing information, and supplier information. If you have a question about whether or not certain information is confidential, contact your supervisor.

## **Copyrights**

Computer software is protected under copyright law against unauthorized copying, modification, distribution or display. Accordingly, a team member may not make or distribute copies of any software or user manuals made available to the team member by UHS in the course of his or her employment. Likewise, a team member may not remove such software from UHS equipment or share it with anyone else. Further, a team member may not use any UHS computer equipment to download, upload, reproduce or distribute copies of any other software obtained for the team member's personal use. (Business Policy Sections 135 and 170)

## **Dealing with Competitors**

Certain laws that are designed to provide for fair competition in our markets could be violated by discussing UHS business with a competitor. Topics to avoid include labor and employment costs, how our prices are set, disclosing the terms of supplier relationships, allocating a service market or agreeing with a competitor to refuse to deal with a supplier. Our competitors are other providers of health services and facilities in markets where we operate.

## **Financial Reporting and Records**

UHS maintains a high standard of accuracy and completeness in the documentation and reporting of our financial records. All financial information must reflect actual transactions and conform to generally accepted accounting principles. No undisclosed or unrecorded funds or assets may be established. UHS maintains a system of internal controls to reasonably assure that all transactions are executed in accordance with proper authorization and all payments are made for the purpose stated.

## **Marketing and Advertising**

In marketing and advertising our services to the community, UHS will present only truthful, fully informative, and non-deceptive information in our materials and announcements.

## **Record Retention and Destruction**

Medical and business records or documents are retained in accordance with the law and our record retention policy. No one may alter or falsify information on any record or document. It is important not to tamper with records, nor remove or destroy them prior to their specified date. (Business Policy Section 150)

## **Team member Conduct**

### **Conflicts of Interest**

Each team member has a duty of loyalty to UHS. UHS team members must avoid any actions that may involve, or may appear to involve a conflict of interest with their obligations to UHS. A conflict of interest occurs if your activities or personal interests appear to or might influence the business decisions required by your job responsibilities. A conflict of interest may also occur if the demand of any outside interests hinder your job performance at UHS. Discuss your plans with your supervisor before pursuing any outside activity that might be perceived as a conflict of interest. (Business Policy Section 15)

### **Equal Employment Opportunity**

UHS is committed to equal employment opportunity practices that conform to both the spirit and the letter of the law. UHS is committed to nondiscrimination on the basis of race, color, religion, sex, national origin, disability, age, or veteran status. This policy extends to recruitment, employment, promotion, demotion, transfer, lay-off, termination, compensation, training, benefits and all other terms and conditions of employment. (HR Policy – Equal Employment Opportunity)

### **Team member Reporting**

The UHS Compliance Plan requires team members to come forward and report misconduct to the UHS Compliance Officer. The False Claims Acts, both federal and state, include a “qui tam” or whistleblower provision. This provision essentially allows any person with actual knowledge of allegedly false claims to the government to file a lawsuit on behalf of the US government. Referred to as a ‘relator’

or 'whistleblower', the individual may share in a portion of the recovery amount and is protected against retaliation for actions taken by them under the False Claims Act.

## **Gifts and Entertainment**

When gifts or entertainment are exchanged out of the purest motives of personal or professional relationship, they can be misunderstood. To avoid any potential for a conflict of interest, the following standards should apply to the receipt of gifts and entertainment by UHS team members:

### **1. Gifts**

Team members must not solicit gifts, gratuities, or other personal benefit or favor of any kind from any individual or company doing business with UHS. Gifts include merchandise, products, discounts on personal services and purchases, use of facilities or equipment, loans, compensation, cash equivalent, or anything of monetary value. Team members are discouraged from accepting any unsolicited gifts and are strictly prohibited from accepting gifts of money.

Team members may accept unsolicited nonmonetary gifts provided that they are items of insignificant value and do not go beyond common courtesy and accepted business practices. The value of any gift must not raise questions of any obligation on the part of the recipient. Any gift of more than insignificant value must be returned.

Team members cannot give gifts to customers beyond items of nominal value. Costs for such gifts should be reviewed and approved by your supervisor. (Business Policy Section 15)

## **2. Entertainment**

Team members may not solicit entertainment from any individual or company with which UHS does business.

From time to time, team members may accept unsolicited entertainment or provide entertainment for a customer, but only under the following conditions:

- The entertainment occurs infrequently
- The entertainment arises out of the ordinary course of business
- The expenditure is reasonable; and
- The entertainment takes place in a setting that is reasonable, appropriate and fitting to the business at hand

Any gifts or entertainment provided to physicians or potential referral sources must be according to UHS policies.

## **Health and Safety**

UHS team members must comply with all government regulations and rules and UHS policies that promote the protection of workplace health and safety. You should become familiar with and understand how these policies apply to your specific job by seeking the advice of your supervisor. Every team member is expected to comply with requirements related to the workplace through participation in required periodic training such as infection control and safety training. It is important to notify your supervisor of any workplace injury or danger of injury so that corrective action can be taken. (HR Policy – Safety Policies)



## **Honest Communication**

UHS requires candor and honesty from our team members at all times in the spirit of care and sensitivity to others in the performance of their responsibilities. No team member will knowingly make false or misleading statements to any patient, person or entity doing business with UHS about other patients, persons or entities doing business or competing with UHS.

## **Research**

All team members applying for or performing research of any type are responsible for maintaining high ethical standards in any written or oral communication regarding their research project as well as following appropriate research guidelines. The policy of UHS is to submit only true, accurate, and complete costs related to research guidelines. All patients asked to participate in a research project are given a full explanation of the risks, expected benefits and alternatives.

## **Sexual Harassment**

Any form of sexual harassment is strictly prohibited. This prohibition includes unwelcome sexual advances or requests for sexual favors in conjunction with employment decisions. Verbal or physical conduct of a sexual nature that interferes with an individual's work performance or creates an intimidating or hostile environment will not be tolerated at UHS. (HR Policy – Sexual Harassment)

## **Substance Abuse**

UHS policy prohibits the unlawful use, manufacture, possession, distribution or dispensing of drugs or alcohol on UHS property. Violation of this policy is grounds for corrective action, up to and including immediate discharge of a team

member. We may use drug testing to enforce this policy. Some individuals may be taking prescription drugs which could impair their judgment or skills required for their job. You should notify your supervisor if you have concerns about the effect of medication on your job performance. (HR Policy – Drug Free Workplace)

### **Use of UHS Equipment**

UHS property and equipment must be used only for UHS business and not loaned to individuals or organizations for personal use except as authorized by policy. (Business Policy Section 170, part 1)

### **Social Media**

Social networking through the use of Internet-based and other electronic social media tools is integrated into everyday life. UHS supports the expression of personal opinions by team members choosing to participate in social media, but also must ensure that all health information is protected in accordance with Federal HIPAA and Tennessee State privacy regulations. UHS has a social media policy to provide guidance to team members and help eliminate any confusion concerning the use of social media. Team members may not post any identifiable patient information even if the information has already been disclosed by a patient's parents, friends or family members online.

## Conduct Toward Our Patients

We treat all patients with respect and dignity and provide quality health care that is necessary and appropriate. We do not discriminate in the care, admission, transfer or discharge of a patient based on disability, age, race, color, religion, sex, national origin or other protected classes of individuals under federal law. Anyone with an emergency medical condition is treated based on medical necessity and not economic considerations. We take steps to assure that patients are informed of their rights and are involved in all aspects of their care. Patients will be transferred to another facility if the patient's medical needs cannot be met at UHS or if the patient, the patient's insurance carrier or the patient's physician so requests. Patients will only be transferred after receiving medical treatment to minimize the risks associated with the transfer and acceptance at an alternate facility. If a patient is to be referred to a home health agency or other health care provider or supplier, great care should be taken to ensure that the patient's freedom of choice is preserved and that UHS discloses any financial interest it may have in such a provider.

Every team member, physician, student and others associated with UHS are expected to respect patients' rights, especially privacy. No one should access, share or discuss patient information, patient medical record information, patient billing information or other patient information who does not have a legal and approved reason to do so. The Health Insurance Portability and Accountability Act of 1996 (commonly referred to as HIPAA) applies to all health care providers who transmit protected health information (PHI). PHI is defined in the regulations as "individually identifiable information transmitted

or maintained in any form or medium.” UHS will make every reasonable effort to limit the use or disclosure of PHI to the “minimum necessary” to accomplish the intended purpose of the disclosure or usage. PHI is permitted to be disclosed when required for use in patient treatment, payment, or healthcare operations.

UHS has HIPAA Security policies to ensure the privacy and security of health information that is transmitted or stored electronically. Team members are required to protect the confidentiality, integrity and availability of electronic protected health information by complying with appropriate administrative, physical and technical safeguards. Non-compliance with UHS HIPAA Privacy or Security policies can lead to civil money penalties against the institution and to disciplinary action for those responsible, up to and including termination of employment.

Information collected in the medical record of patients is kept confidential unless it is necessary to serve the patient or required by law. In order to assure a patient’s right to privacy, specific information about a patient will be released only to persons authorized by law or by the patient’s consent. UHS will ensure that patients have access to protective services such as guardianship and child or adult protective services.

Should an ethical dilemma arise involving clinical care decisions, the Medical Ethics Committee is available to facilitate resolution. The patient, a family member, a team member, or a physician may request assistance from the Medical Ethics Committee. Ethics consults must be entered into Power Chart. To initiate the consult service, page #1198 or contact the director of Clinical Ethics at 305-5180.

## **Conduct Toward Educational Institutions**

We have a longstanding commitment to education, teaching and research. Underscoring this commitment, we support and collaborate with the University of Tennessee Graduate School of Medicine and other academic endeavors.

## **Conduct Toward Affiliated Physicians and Referral Sources**

All business relationships with physicians or referral sources must be in writing and reviewed by the General Counsel to ensure compliance with legal requirements. No team member will pay or receive anything of value for patient referrals.

Likewise, no team member will accept anything of value for referrals that we make. We accept patient referrals solely on the need or desire of the patient/referring physician and our ability to render the requested service. When making patient referrals to another health care entity, UHS does not take into account the value of previous referrals from the institution to UHS. Violation of these policies may have grave consequences for UHS and for individuals involved, including civil and criminal penalties, and possible exclusion from federally funded health care programs.

### **Physician Referrals**

Tennessee law prohibits referrals or cross referral schemes by physicians to entities in which the physicians have an investment interest, subject to certain exceptions. Additionally, federal laws prohibit physicians from making referrals to entities with which they have an ownership or compensation relationship if referrals are for certain designated health services unless certain exceptions apply. UHS will comply

with these laws. Even when referrals are permissible under state and federal law, physicians are expected to disclose to patients and referring colleagues any ownership interest in a facility or service at the time of referral and prior to utilization.

Generally, when a physician's interest conflicts so greatly with the patient's interest that the two are incompatible, the physician must make alternative arrangements for the care of the patient.

## **Outside Payments**

Team members may occasionally receive payments from external sources for activities for which they are also paid by UHS. Examples include honorariums and travel expenses. No team member should be compensated twice for the same activity. Should this occur, the external payment should be turned over to UHS. (Business Policy Section 70, part 1)

## **Conduct Toward Suppliers and Vendors**

Suppliers and vendors should be treated in a fair and reasonable manner, consistent with applicable laws and good business practices. The following guidelines must be followed to ensure positive, cooperative relationships with UHS vendors and suppliers:

1. All bids and proposals must be evaluated objectively on the merits of quality, service, price and suitability. (Business Policy Section 50)
2. Gifts of more than an insignificant value, personal loans, entertainment, or other special consideration should not be

accepted from an individual or business organization doing business with UHS. In general, any team member who is offered or who receives a gift of more than insignificant value should politely refuse it or return it to the giver explaining UHS's policy against the acceptance of gifts. Gifts of insignificant value may be accepted and shared with co-workers. (Business Policy Section 15)

## **Environmental Compliance**

It is the policy of UHS to comply with all environmental laws and regulations that relate to our operations. We will diligently employ the proper procedures with respect to handling and disposal of hazardous and biohazardous waste. In order to help us comply with these laws and regulations, you should immediately alert your supervisor to any situation regarding the discharge of a hazardous substance, improper disposal of medical waste, or any situation which may be potentially damaging to the environment. (Business Policy Section 57)

## **Government Requests**

It is the policy of UHS to cooperate fully with requests from any governmental agency. The fact that a government agent requests information does not mean a crime has been committed or even that the agency believes a crime was committed. If government agents contact you directly, remember:

1. you have the right to speak or decline to speak. All conversation by you is entirely voluntary;
2. you have the right to speak to an attorney before deciding to be interviewed;

3. you can insist that if you agree to be interviewed, an attorney will be present;
4. you have the right to decide where and when you will be interviewed;
5. if you agree to be interviewed, you must be truthful in all your answers.

You must notify your supervisor and the Office of General Counsel immediately of any requests for information made to you outside the ordinary scope of routine reports regularly made to government authorities.

## **Conclusion**

We must all strive to establish a spirit of proactive prevention at UHS so that we may avoid the mistakes that lead to ethical and compliance problems. Proactive prevention begins with education. Each team member is expected to know and understand UHS policies and the basic laws and regulations that affect his or her job. If you are not knowledgeable about the basic laws and regulations that affect your job, you must take advantage of the UHS sponsored educational opportunities. Start by reading the UHS policies that most directly impact your job. Study those policies and talk to your supervisor if there is anything you do not understand. Follow the Communication and Reporting Program and keep asking your questions until you get an answer that makes sense to you.

With the assistance of every team member, UHS will fulfill its commitment to provide the highest quality of care to its patients in full compliance with all laws and regulations.



## **Resource Directory**

### **Vice President-Compliance**

University Health System, Inc.  
2121 Medical Center Way, Ste. 310  
Knoxville, Tennessee 37920  
Phone: (865) 305-9118  
Fax: (865) 305-6832

### **Vice President-Human Resources**

University Health System, Inc.  
1924 Alcoa Highway, Box 90  
Knoxville, Tennessee 37920  
Phone: (865) 305-8470  
Fax: (865) 305-8475

### **General Counsel**

University Health System, Inc.  
2121 Medical Center Way, Ste. 330  
Knoxville, Tennessee 37920  
Phone: (865) 305-6925  
Fax: (865) 305-6968

**AlertLine: 1-877-591-6744**





1924 Alcoa Highway,  
Knoxville, Tennessee 37920



The University of Tennessee Medical Center is the home of the Knoxville campus of UT Graduate School of Medicine, UT College of Pharmacy and University Health System, Inc. Together, these entities embody the Medical Center's philosophy and mission to serve through healing, education and discovery.

[www.utmedicalcenter.org](http://www.utmedicalcenter.org)

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