

OHIOHEALTH

# *Code of Conduct*



OhioHealth



## A Message From Our Chief Ethics and Compliance Officer



Our OhioHealth Ethics and Compliance (E&C) Program exists to help you do the right thing – every day, every time. The Program and the E&C team members serve as resources for you as we all work together to improve the health of those we serve. The Code of Conduct is the key document that outlines our program, and also defines your responsibilities as an associate. We must comply with federal and state laws, OhioHealth policy and procedure and this Code. Further, we must live the OhioHealth values, including Integrity, in all that we do.

The E&C team designed the Code to:

- + Summarize important laws and regulations that apply to our work;
- + Help you identify compliance and ethics issues; and
- + Guide you in reporting concerns.

If you think you've found a violation of law, our policies, or our Code, report your concern. Our policies and procedures require you to do so. You may report by contacting your leader, the E&C department or an individual team member, or the Office of the General Counsel. You may also use our anonymous hotline that is operated by a third party. The Code contains more details on the available methods for reporting. Remember that it is less important how you report a concern to OhioHealth than it is important that you report. We commit to reviewing all reports, and we prohibit retaliation for good faith reporting.

If you have questions about reporting or the Code of Conduct, please contact your supervisor or the E&C Department for support. Thank you for all that you do to live our values, uphold the Code, and serve our community.

A handwritten signature in black ink that reads "Valda Clark Christian".

Valda Clark Christian, Senior Vice President, Chief Ethics and Compliance Officer

3430

## A Message From Our CEO



The OhioHealth Ethics and Compliance program was established to help our organization navigate the complexities of evolving healthcare regulations and guide our actions in a way that aligns with OhioHealth's values.

Valda Clark Christian and her team are committed to helping our board members, executives, physicians, and associates address ethics and compliance questions and concerns. As the Senior Vice President and Chief Ethics and Compliance Officer, Ms. Clark Christian's goal is to provide guidance consistent with OhioHealth's commitment to our mission and our values.

My ask of you: use this Code of Conduct to better understand your obligations in helping OhioHealth maintain an ethical culture. If you see something, say something. If you are unsure about a decision you are faced with, ask your leader or contact the Ethics and Compliance Office. Each one of us has a responsibility to ensure the integrity of our program.

Thank you for serving our communities with absolute integrity and conducting OhioHealth's business in accordance with the highest of ethical standards.

A handwritten signature in black ink that reads "Stephen Markovich". The signature is fluid and cursive, written in a professional style.

Stephen E. Markovich, MD



## **Our Mission**

To improve the health of those we serve.

## **Our Vision**

To provide exceptional care for all through experiences that earn a lifetime of trust.



## **Our Cardinal Value**

To honor the dignity and worth of each person.

## **Our Values**

Compassion  
Excellence

Inclusion  
Integrity

Stewardship

# Contents

**Who We Are ..... 9**

- Charitable Mission
- Purpose of OhioHealth’s Code of Conduct
- Support of the Ethics and Compliance Program
- OhioHealth Medical Staff
- Additional Responsibilities for Members of Management

**Contact Information**

**OhioHealth’s Ethics and Compliance Program ..... 15**

- Why an Ethics and Compliance Program?
- Elements of an Effective Compliance Program
- What We Do
- Ethics and Compliance Functional Areas
- The Ethics in Ethics and Compliance
- Exit Interviews and Exit Surveys
- Conflicts of Interest and Gifts
- Nondiscrimination
- Harassment-Free Workplace
- Sanction Screening
- Financial Stewardship
- Reporting Concerns: Your Responsibilities
- Non-Retaliation Policy
- Compliance Investigations
- Enforcing Standards

**Ethics and Compliance Program Policies ..... 22**

- General Compliance
- Billing Compliance

- Joint Venture Compliance
- Research Compliance
- Privacy Compliance
- Other OhioHealth Policies of Interest

**Billing Compliance** ..... 25

- What We Do
- Auditing and Monitoring
- Quality Reporting
- Things to Remember

**Privacy Compliance** ..... 31

- What We Do
- What is Protected Health Information (PHI)?
- What is HIPAA?
- Personal Responsibility
- Things to Remember
- Reporting
- HIPAA: Patient Rights

**Research Compliance** ..... 37

- What We Do
- Research Compliance Reviews
- Things to Remember

**Population Health Compliance and Joint Venture Compliance** ..... 41

- What We Do
- Accountable Care Organization
- Clinically Integrated Network
- Joint Ventures



Together we are



OhioHealth

# Who We Are

OhioHealth is a nationally recognized, not-for-profit, charitable, healthcare outreach of the United Methodist Church. Based in Columbus, Ohio, OhioHealth has been recognized as one of the top five large health systems in America by Truven Health Analytics, an honor it has received six times. It is also recognized by *Fortune* as one of the “100 Best Companies to Work For” and has been for 13 years in a row, 2007–2019. Serving its communities since 1891, OhioHealth is a family family of 35,000 associates, physicians and volunteers, and a network of 14 hospitals, 3 joint-venture hospitals, one managed-affiliate hospital 200+ ambulatory sites and other health services spanning 50-county area. It has been recognized by FORTUNE as one of the “100 Best Companies to Work For” 15 times since 2007.

## Charitable Mission

OhioHealth is dedicated to providing healthcare, education and related services to our communities. All of our businesses serve or support that purpose. Even though some of our affiliated organizations may be for-profit, even these are intended to support and enable our charitable mission, which includes:

- + Subsidizing our Patient Financial Aid and Charity Care programs.
- + Supporting our community outreach programs.
- + Maintaining and upgrading our facilities and equipment used in patient care.
- + Operating full-service emergency departments.
- + Developing new programs and services to make a difference in the health of the communities we serve.

As physicians, associates and volunteers, both individually and as a team, our OhioHealth family has an opportunity to make a real difference in our communities.

One of the most tangible measures of OhioHealth’s value to our communities is the amount of Community Benefit we continue to provide. OhioHealth Community Relations extends the OhioHealth mission “to improve the health of those we serve” beyond our hospital walls.



We collaborate with a diverse group of organizations to best support the needs of our community through:

- + Associate volunteer involvement
- + Intellectual/in-kind support
- + Financial support

In an effort to ensure that the interests of our communities are served, the Board of Directors that governs OhioHealth is composed of prominent civic leaders. We rely on these leaders, who do not have any direct economic interests in the organization, to represent the communities we serve.

## **Purpose of OhioHealth's Code of Conduct**

Among other things, OhioHealth's Code of Conduct communicates the organization's commitment to compliance and business ethics as well as the expectation that all associates and others acting on behalf of OhioHealth do so in a manner consistent with this commitment. This Code of Conduct has been designed to define OhioHealth's Ethics and Compliance program and assist us all in carrying out our daily activities within appropriate ethical and legal standards. These obligations apply to our relationships with patients, physicians, third-party payers, subcontractors, independent contractors, vendors, consultants, volunteers and one another.

## **Support of the Ethics and Compliance Program**

The success and effectiveness of OhioHealth's Ethics and Compliance program depends on you.

Everyone, regardless of job title, plays an important role in helping OhioHealth achieve its commitment to doing the right thing.

OhioHealth's Code of Conduct is disseminated through the all-associate Initial Compliance Education, which associates are required to complete within the first 60 days of employment. OhioHealth's Code of Conduct is also included as part of the Annual Compliance Education, which must be completed annually. In both education formats, associates are asked to attest that they are familiar with the objectives of the Ethics and Compliance program and the Code of Conduct, and that they agree to abide by the Code of Conduct during their employment.

All OhioHealth associates are expected to:

- + Complete required education and training sessions related to the Ethics and Compliance program.
- + Understand and adhere to the guidelines outlined in the Ethics and Compliance program, especially those which relate to the associate's functions within the organization.
- + Be aware of all relevant policies and procedures of the Ethics and Compliance program, including the mandatory duty of all associates to report actual or perceived violations of laws and regulations.

The Ethics and Compliance Office maintains open lines of communication and offers a number of reporting mechanisms. It is less important how you report concerns, as long as you report them. Associates may report concerns using any of the following methods:

- + To their supervisor, if comfortable doing so.
- + Directly to the OhioHealth Ethics and Compliance Office: (614) 544-4200.
- + To the OhioHealth Ethics and Compliance Hotline: (866) 411-6181.
- + Using the online reporting tool: [MyComplianceReport.com](https://mycompliancereport.com) (Access ID: OHH).



## OhioHealth Medical Staff

Beyond OhioHealth's Code of Conduct, each member of OhioHealth's Medical Staff also adheres to the ethical standards applicable to his or her licensure. In addition, the Medical Staff Bylaws for OhioHealth hospitals establish expectations for appropriate professional ethics and conduct that practitioners with a Medical Staff appointment and/or privileges are expected to know and to abide by. Medical Staff policies may also establish a code of conduct specific to physicians to highlight the unique role of physicians in fostering a professional, collegial, and congenial environment in which executives, physicians, and associates may work. OhioHealth's Code of Conduct should complement such documents, but as noted in the Medical Staff Bylaws for OhioHealth hospitals, in the event that a conflict exists between the System's code of regulations, a System/Hospital policy and the Medical Staff Bylaws, the System's code of regulations or System/Hospital policy shall control; provided, however, that such conflict shall then be referred to the Quality of Care Committee for recommendation to the Board as to how such conflict can be resolved.

## Additional Responsibilities for Members of Management

While it is imperative that all OhioHealth associates abide by the Code of Conduct, members of management are expected to lead by example and must:

- + Act in a manner that is respectful, kind, thoughtful and sensitive.
- + Operate within an environment where all associates are free to raise concerns.
- + Ensure that the associates they supervise complete mandatory trainings and have sufficient information to comply with OhioHealth's Code of Conduct as well as the laws, rules and regulations that impact their specific areas.

OhioHealth requires that performance evaluations for all members of management include how well they promote and adhere to the elements of the Ethics and Compliance program.

OhioHealth managers are encouraged to contact the Ethics and Compliance Office for targeted training regarding their compliance responsibilities.

## Contacting the Ethics & Compliance Office

The Ethics & Compliance Office maintains open lines of communication with associates and workforce members, and offers a number of reporting mechanisms. **It is less important how you report concerns, so long as you report them.** Concerns may be reported:

- + To your Supervisor, if you are comfortable doing so;
- + Directly to the Ethics & Compliance Office: (614) 544-4200;
- + To the OhioHealth Ethics & Compliance Hotline: (866) 411-6181; or
- + Using the online reporting tool: [MyComplianceReport.com](https://mycompliancereport.com) (Access ID: OHH).

You can also contact specific areas within the Ethics & Compliance Office at the following email addresses:

- + Compliance Operations issues:  
[ComplianceOperations@ohiohealth.com](mailto:ComplianceOperations@ohiohealth.com)
- + Privacy Compliance logistical issues, please use:  
[CompliancePrivacy@ohiohealth.com](mailto:CompliancePrivacy@ohiohealth.com)
- + Compliance Investigations logistical issues, please use:  
[ComplianceMonitoring@ohiohealth.com](mailto:ComplianceMonitoring@ohiohealth.com)
- + Research Compliance logistical issues, please use:  
[ComplianceResearch@ohiohealth.com](mailto:ComplianceResearch@ohiohealth.com)

The Ethics and Compliance Office's mailing address is:

Ethics & Compliance Office  
3430 OhioHealth Pkwy  
Columbus, OH 43202



 OhioHealth

Venkatarama Gollam, MD  
Interventional Cardiology  
OhioHealth Marion Area Hospitals

# OhioHealth's Ethics and Compliance Program

## Why an Ethics and Compliance Program?

OhioHealth policy requires an Ethics and Compliance program that provides OhioHealth associates with accurate, concise, and up-to-date information and advice to assure associates maintain an ethical environment compliant with applicable laws, rules and guidelines.

To that end, OhioHealth believes that:

- + Associate actions and decisions must reflect a faithful balance of our core values: Compassion, Excellence, Inclusion, Integrity and Stewardship.
- + Associates should act with absolute integrity and expect the same of those with whom they work.
- + Associates are responsible for acting in a manner consistent with OhioHealth's mission, vision and values, OhioHealth's Ethics and Compliance program, policies and procedures, as well as applicable federal and state laws, rules and guidelines.

The Mission of OhioHealth's Ethics and Compliance Program is to maintain an effective compliance program for the OhioHealth System based on current and future regulatory expectations, while serving as a trusted business partner to OhioHealth's board members, executives, physicians, and associates.

## Elements of an Effective Compliance Program

OhioHealth's Ethics and Compliance program was developed in response to federal guidance, and is based on the elements of an effective compliance program identified by the U.S. Sentencing Commission and the U.S. Department of Health and Human Services Office of Inspector General to include:

- + Designation of a compliance officer and compliance committee.
- + Development of compliance policies and procedures, including standards of conduct.
- + Development of open lines of communication.
- + Provision of appropriate training and education.
- + Response to detected offenses.
- + Performance of internal monitoring and auditing.
- + Enforcement of disciplinary standards.



## What We Do

OhioHealth's Ethics and Compliance Office is responsible for implementing, maintaining and reviewing the Ethics and Compliance program as well as:

- + Reviewing, revising and formulating appropriate policies and procedures to guide OhioHealth and the operations of the Ethics and Compliance Office.
- + Reviewing and approving training materials and educational programs encompassing general compliance, billing compliance, privacy compliance and research compliance, as well as population health compliance and joint venture compliance.
- + Maintaining, reviewing and overseeing all matters reported to OhioHealth's Ethics and Compliance Hotline, (866) 411-6181, which is managed by a third party.
- + Promoting the need to safeguard protected health information (PHI) so that it is managed with the highest levels of compassion and integrity.
- + Reviewing laws, regulations, statutes, policies and guidelines related to compliance issues, and conducting routine auditing and monitoring to foster compliance.
- + Conducting or overseeing reviews and investigations related to potential compliance concerns.

## Ethics and Compliance Functional Areas

Under the leadership of Valda Clark Christian, Senior Vice President and Chief Ethics and Compliance Officer, OhioHealth's Ethics and Compliance program comprises teams responsible for the following functional areas:

- + **Billing Compliance** to facilitate compliance with coding, documentation and billing requirements through ongoing auditing and monitoring efforts.
- + **Privacy Compliance** to facilitate compliance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA), and other federal and state privacy laws, rules and regulations.
- + **Research Compliance** to facilitate compliance with applicable laws, rules and guidelines governing OhioHealth research activities.
- + **Population Health Compliance and Joint Venture Compliance** to provide compliance guidance for OhioHealth's population health activities and patient-facing Joint Venture partners.

- + **General Compliance**, which comprises:
  - Compliance Program Operations to provide support and structure to OhioHealth's Ethics and Compliance program.
  - Compliance Investigations to review reported and detected incidents of possible noncompliance.

## The Ethics in Ethics and Compliance

OhioHealth's commitment to improving the health of those we serve while upholding OhioHealth's core values of Compassion, Excellence, Inclusion, Integrity and Stewardship is what differentiates OhioHealth from other healthcare providers. It is important that our actions reflect this unique balance, and that we all hold each other to this commitment. Doing what is right includes taking care of our communities, rising up to face the issues that confront our communities, and committing ourselves to the rights of those who make up our communities.

Maintaining OhioHealth's commitments to doing the right thing and our culture of high ethical standards require everyone, regardless of job title, to work together where integrity and compassion meet. The Code of Conduct was designed to assist us in carrying out our daily activities within appropriate ethical and legal standards. Business decisions and behavior during employment with OhioHealth are to be governed by the Code of Conduct. At OhioHealth, we strive to conduct all activities in accordance with the ethical standards of all applicable professional organizations, and all dealings, including financial and accounting matters, in accordance with high standards of business and ethical conduct.

## Exit Interviews and Exit Surveys

OhioHealth policy requires that we maintain open lines of communication for associates throughout all stages of their employment. We offer departing or separated associates the opportunity to complete an exit survey and some based on role, may be asked to participate in or attend an exit interview to obtain valuable feedback about OhioHealth's operations and culture. This feedback is instrumental in identifying potential compliance- and legal-related concerns within the organization.

*For more information, please refer to the OhioHealth Exit Interviews and Exit Surveys Policy (Policy # OH.POL.A-410.044).*



## Conflicts of Interest and Gifts

OhioHealth policy requires that we conduct business free from the influence of conflicts of interest. Accordingly, all potential conflicts of interest must be disclosed. Contact OhioHealth's Office of the General Counsel at (614) 544-4300 for guidance.

OhioHealth associates are prohibited from:

- + accepting from a patient or vendor:
  - A gift or benefit of more than nominal value; or
  - A gift of cash or cash equivalent (e.g., gift card); and/or
- + asking directly or indirectly for ANY gift or benefit from a patient or vendor.

Associates who receive invitations or offers of gifts from vendors, patients (including family members of patients) or any other third-parties should disclose the situations to their supervisors. Contact the Office of the General Counsel for additional guidance.

*For more information, please refer to the OhioHealth Conflict of Interest Policy (Policy #OH.POL.HR-703.350) and the OhioHealth Acceptance/Solicitation of Gifts Policy (Policy # OH.POL.SC-5100.008).*

## Nondiscrimination

OhioHealth does not discriminate on the basis of race, color, national origin, ethnicity, religion, culture, language, age, disability, socioeconomic status, sex, sexual orientation, or gender identity or expression in its health programs and activities.

*For more information, please refer to OhioHealth's nondiscrimination page on eSource, <https://OHeSource.OhioHealth.com/Pages/Nondiscrimination.aspx>.*

## Harassment-Free Workplace

OhioHealth associates are entitled to a harassment-free workplace. This issue is taken very seriously and OhioHealth prohibits harassing behaviors. All associates are expected to refrain from using inappropriate language and acting inappropriately in the workplace. Should an incident of harassment occur, please immediately notify your manager or a Human Resources representative.

*For more information, please refer to the OhioHealth Harassment/Bullying Policy (Policy # OH.POL.HR-703.500).*

## Sanction Screening

OhioHealth policy requires that we do not employ or do business with ineligible parties, including those who:

- + Are currently excluded, suspended, debarred or otherwise ineligible to participate in federal or state healthcare programs.
- + Have been convicted of a criminal offense related to the provision of healthcare items or services, and have not been reinstated in the federal or state healthcare programs after a period of exclusion, suspension, debarment or ineligibility.

*For more information, please refer to the OhioHealth Sanction Screening Policy (Policy # OH.POL.A-410.034).*

## Stewardship and Sustainability

As you know from our *Values Blueprint*, stewardship to OhioHealth means, among other things, that we: (a) hold ourselves and others accountable; (b) collaborate and involve others in decisions; (c) promote wellness in our communities; (d) embrace change and commit to continuous improvement; and (e) manage resources effectively.

In accordance with our core value of Stewardship, OhioHealth has implemented policies to facilitate contracting and purchasing practices as well as to set guidelines to improve efficiency and reduce cost to the organization. As such, it is OhioHealth policy that invoices may not be paid if the Purchase Order was not obtained prior to receipt of the invoice. This is one way that helps OhioHealth continue to serve our communities with absolute integrity and to conduct OhioHealth's business in accordance with our highest ethical standards.

*For more information, please refer to the OhioHealth Corporate Contracting & Purchasing Policy (Policy # SC-5100.009).*

OhioHealth's broader commitment to stewardship means being thoughtful but charitable with our time, talent and resources, including prioritizing sustainability, so we can continue to deliver the very best care to all in need. When we pursue sustainability, we fulfill our duty to protect the health of our communities, and preserve our mission for generations to come.



## Reporting Concerns: Your Responsibilities

The Ethics and Compliance Office works to maintain open lines of communication with workforce members, and offers a number of reporting mechanisms. It is less important how you report compliance-related concerns, as long as you report them. Associates may report concerns using any of the following methods:

- + To their supervisor, if comfortable doing so.
- + To the Ethics and Compliance Office: (614) 544-4200.
- + To the OhioHealth Ethics and Compliance Hotline by calling: (866) 411-6181.
- + To the Ethics and Compliance Hotline by using the online reporting tool: MyComplianceReport.com (Access ID: OHH).

*For more information, please refer to the OhioHealth Non-Retaliation Policy (Policy # OH.POL.A-410.032).*

## Non-Retaliation Policy

OhioHealth associates have an affirmative duty and responsibility to report perceived misconduct, including actual or potential violations of laws, regulations, policies, procedures or OhioHealth's Code of Conduct. Associates may not be subject to retaliation by any person affiliated with OhioHealth based on the associate's good faith report of a perceived problem or concern.

*For more information, please refer to the OhioHealth Non-Retaliation Policy (Policy # OH.POL.A-410.032).*

## Compliance Investigations

The Ethics and Compliance Office's Compliance Investigations team is charged with reviewing compliance-related concerns and allegations that are detected by or reported to the Ethics and Compliance Office through any of the reporting mechanisms.

Examples of issues that may be investigated by the Compliance Investigations team include:

- + Allegations of charging for services not provided to patients.
- + Allegations of upcoding, which is knowingly assigning an inaccurate billing code that will result in higher reimbursement.
- + Allegations of attending physicians not following federal and state regulations regarding supervision of resident physicians in training.
- + Allegations of procedures being performed that are not medically necessary.
- + Allegations of falsification of documentation.

The Ethics and Compliance Office's Privacy Compliance team is responsible for investigating any reported matters concerning patient privacy, PHI and other matters governed by HIPAA.

OhioHealth associates are required to cooperate fully with compliance investigations and reviews. Noncooperation may be grounds for disciplinary action, up to and including termination.

*For more information, please refer to the OhioHealth Ethics and Compliance Program Policy (Policy # OH.POLA-410.042).*

## Enforcing Standards

OhioHealth upholds a zero-tolerance stance toward any illegal activity or knowing, intentional or willing noncompliance. Any associate knowingly, willingly, or intentionally violating federal or state laws, rules, guidelines, or institutional policies is subject to disciplinary actions, up to and including termination.

## Ethics and Compliance Program Policies

### GENERAL COMPLIANCE

Ethics and Compliance Program Policy (Policy # OH.POLA-410.042)

Exit Interviews and Exit Surveys Policy (Policy # OH.POLA-410.044)

Fraud, Waste and Abuse Policy (Policy # OH.POLA-410.040)

Government Investigations Policy (Policy #OH.POL. A-410.031)

Non-Retaliation Policy (Policy # OH.POLA-410.032)

Sanction Screening Policy (Policy # OH.POLA-410.034)

### BILLING COMPLIANCE

Acceptable Use of Scribes for Documentation Policy (Policy # OH.POLA-410.038)

### JOINT VENTURE COMPLIANCE

Compliance Program Policy for Joint Venture Arrangements (Policy # OH.POLA-410.043)

### RESEARCH COMPLIANCE

Patient Privacy: Using and/or Disclosing Protected Health Information (PHI) for the Purpose of Conducting Research (Policy # OH.POLA-410.020)

### PRIVACY COMPLIANCE

Patient Privacy: Disposal of Confidential and/or Sensitive Information/Data (Policy # OH.POLA-410.001)

Patient Privacy: Disclosures of Protected Health Information (PHI) to Involved Friends and Family Policy (Policy # OH.POLA-410.003)

Patient Privacy: Joint Notice of Privacy Practices (NOPP) Policy (Policy #OH.POL. A-410.004)

Patient Privacy: Contracting for Services with Vendors who Have Access to PHI (i.e., Business Associates) Policy (Policy # OH.POLA-410.005)

Patient Privacy: Fundraising Practices When Using Protected Health Information Policy (Policy # OH.POLA-410.006)

Patient Privacy: Marketing Practices for Protected Health Information Policy (Policy # OH.POL. A-410.007)

Patient Privacy: Obligations to Report Privacy Incidents/Breaches Policy (Policy # OH.POLA-410.008)

Patient Privacy: Facsimile (Fax) Transmissions Containing Protected Health Information (PHI) Policy (Policy # OH.POL.A-410.009)

Patient Privacy: Patient Request for Confidential Communication Policy (Policy # OH.POL.A-410.011)

Patient Privacy: Facility Directory Policy (Policy # OH.POL.A-410.012)

Patient Privacy: Using and Disclosing Employee Health Information Policy (Policy # OH.POL.A-410.014)

Patient Privacy: Use and Disclosure of Protected Health Information (PHI) Policy (Policy # OH.POL.A-410.015)

Patient Privacy: Patient Right to Request a Restriction on the Use and Disclosure of Protected Health Information Policy (Policy # OH.POL.A-410.016)

Patient Privacy: Patient Request for Amendment of Protected Health Information Policy (Policy # OH.POL.A-410.017)

Patient Privacy: Right to Receive Accounting of Disclosures Policy (Policy # OH.POL.A-410.018)

Patient Privacy: Obligations of the Workforce for Privacy of Protected Health Information Policy (Policy # OH.POL.A-410.019)

Patient Privacy: De-Identification, Re-Identification and Limited Data Sets Using Protected Health Information (PHI) Policy (Policy # OH.POL.A-410.021)

Patient Privacy: Minimum Necessary Standard Policy (Policy # OH.POL.A-410.023)

Patient Privacy: Identity Theft Prevention Policy (Policy # OH.POL.A-410.024)

Patient Privacy: Securing the Confidentiality of Spoken Communications Policy (Policy # OH.POL.A-410.041)

Patient Privacy: Authorization for the Use and Disclosure of Protected Health Information Policy (Policy # OH.POL.A-410.048)

Patient Privacy: Patient Right of Access to Inspect and Copy Protected Health Information (PHI) Policy (Policy # OH.POL.A-410.049)

## **OTHER OHIOHEALTH POLICIES OF INTEREST**

Acceptance/Solicitation of Gifts Policy (Policy # OH.POL.SC-5100.0088)

Vendor Sponsored Travel Policy (Policy # OH.POL.SC-5100.007)

Conflict of Interest Policy (Policy # OH.POL.HR-703.005)

OhioHealth Joint Venture Policy (Policy # OH.POL.GC-2700.003)

OhioHealth Joint Venture – Ambulatory Surgical Center (“ASC”) Policy (Policy # OH.POL.GC-2700.004)

Mandatory Education of Staff Policy (Policy # OH.POL.HR-702.005)



OhioHealth  
SHONDA  
Physical Therapist Supervisor  
Health Services Center  
OhioHealth Physical Setting

OhioHealth

BRIDGEMOUNTAIN  
BY HEALTH

# Billing Compliance

Billing Compliance at OhioHealth is directly related to the continuum of care that we provide to our patients. All associates are responsible for maintaining the integrity of OhioHealth's business practices as well as cultivating ethical business practices to combat fraud, waste and abuse.

The OhioHealth Ethics and Compliance Office's Billing Compliance team is here to assist you in your efforts to comply with billing rules and regulations, as well as all relevant federal, state and local laws, rules, and guidelines related to licensure, permits, accreditation, access to treatment, consent for treatment, medical record-keeping, and patients' rights, as well as Medicare and Medicaid program participation requirements.

## What We Do

The Billing Compliance team is focused on maintaining the integrity of OhioHealth's billing practices. The team's responsibilities include:

- + Reviewing laws, regulations, statutes, policies and guidelines related to compliance issues.
- + Auditing specific criteria or focus areas identified by government agencies, such as the U.S. Department of Health and Human Services Office of Inspector General.
- + Conducting routine review and audit activities to determine whether or not OhioHealth is meeting all expectations.
- + Validating billing codes through review of medical records and billing statements.
- + Facilitating any required corrective actions, such as reprocessing claims, returning identified overpayments, and refining processes and procedures.
- + Routine auditing and monitoring as well as quality reporting.



OhioHealth takes great care to uphold accurate billing to governmental payers, commercial insurance payers and patients through its policies, procedures and systems. These policies, procedures and systems were developed to conform to applicable federal and state laws and regulations while furthering our mission to improve the health of those we serve.

Billing and coding involves submitting claims for payment of services based on identified classifications of health information, such as diagnoses and procedures. Identified codes must be reflective of care actually provided to the patient, as evidenced by documentation in the patient's medical record. It is important that all associates, including physicians and advanced practice providers, such as nurse practitioners and physician assistants, who contribute to documentation in medical records, do so in a complete, accurate and timely manner.

The Federal False Claims Act prohibits any associate or agent of OhioHealth from knowingly submitting governmental healthcare claims for reimbursement that are false and fraudulent.

*For more information, please refer to the OhioHealth Fraud, Waste and Abuse Policy (Policy # OH.POL.A-410.040).*

## Auditing and Monitoring

Examples of issues that may be handled by the Billing Compliance team include:

- + Auditing medical record documentation for the presence of all required elements related to a particular procedure code.
- + Auditing the frequency of required visits for patients enrolled in home care programs.
- + Auditing medical records for the presence of provider orders placed in compliance with federal and state insurance program requirements.
- + Monitoring the results of validation reports provided to OhioHealth by regulatory entities in response to our quality data submission.

The OhioHealth Ethics and Compliance Office Billing Compliance team also acts as a resource for associates and providers (physicians and advanced practice providers) by timely reporting the results of compliance auditing activities and offering recommendations based on identified opportunities for improvement. Providers may be contacted individually for discussion of best practices related to medical record documentation and billing requirements.

Additional monitoring may also take place after corrective actions have been implemented as a result of compliance auditing activities, with the goal of demonstrating that identified actions have been successful in correcting deficiencies.



## Quality Reporting

The OhioHealth Ethics and Compliance Office Billing Compliance team also concentrates on OhioHealth's submission of quality reporting data. As reimbursement moves away from the traditional fee-for-service system and toward payment for performance, it is vital that we report data accurately. OhioHealth, like other healthcare organizations, is faced with rigorous reporting requirements from entities, such as the Centers for Medicare and Medicaid Services (CMS) and The Joint Commission. The OhioHealth Ethics and Compliance Office Billing Compliance team strives to help OhioHealth satisfy these reporting requirements.

OhioHealth is committed to providing quality care to our communities. To measure our efforts toward this commitment, we benchmark OhioHealth's quality performance data against that of other healthcare providers. Additionally, the Billing Compliance team partners with various quality reporting entities at OhioHealth to measure quality performance through data validation and analysis.

## Things to Remember

Medical record documentation should support all required elements related to a particular procedure code, and medical records must contain provider orders, as required by federal and state insurance programs. Thorough and accurate documentation is a legal requirement and an ethical obligation to those we serve. Examples of unacceptable billing practices include:

- + Billing for items or services not accurately documented in the medical record.
- + Billing for items or services that were not actually rendered.
- + Billing for items or services not appropriately ordered.
- + Billing for items or services that were not medically necessary.
- + Billing for items or services rendered without the appropriate supervision.
- + Always assigning the same level of service.
- + Unbundling procedure codes.
- + Submitting duplicate bills.
- + Filing false or inaccurate cost reports.



Ochsner Health  
**MEGAN**  
Nurse  
New Orleans Medical Center

# Privacy Compliance

Privacy Compliance at OhioHealth means more than just complying with state and federal regulations that address safeguarding protected health information (PHI). It also means serving patients while upholding our values of Compassion, Excellence, Inclusion, Integrity and Stewardship. We should always remember that our patients place a tremendous amount of trust in us in all of our activities. Safeguarding their PHI, while a matter of law, is also an ethical obligation and one way we clearly demonstrate our cardinal value to honor the dignity and worth of each person. Privacy Compliance at OhioHealth is the responsibility of all of us, collectively and individually.

## What We Do

The OhioHealth Ethics and Compliance Office's Privacy Compliance team was developed to provide guidance and education concerning the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and other federal and state laws addressing patient privacy issues. The team also investigates and addresses privacy-related concerns, complaints and reports.



## What is Protected Health Information (PHI)?

In essence, PHI is a slate of certain identifiers in combination with an individual's past, present, or future health or condition, the provision of care to the individual, or the payment for such care. PHI includes information related to patients or the relatives, employers, or household members of patients. PHI includes:

- + Name, address, phone number and other demographic information.
- + Diagnosis, treatment, prescriptions and test results.
- + Medical Record Number and Social Security number.
- + Family history, relationships and genetic information.
- + Appointment schedules, birth date, admission dates, and surgery dates.
- + Financial account numbers, insurance, and billing and payment information.
- + Voice recordings and identifiable photographs and images.
- + Research study ID numbers.
- + Any other unique identifying number, characteristic or code.

## What is HIPAA?

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) established, among other things, the HIPAA Privacy Rule.

The HIPAA Privacy Rule limits how covered entities, including healthcare providers, their workforce members, and business associates, may use and disclose PHI. In general, PHI may not be used or disclosed without authorization from the patient unless the use or disclosure relates to treatment, payment or healthcare operations activities. For uses and disclosures related to payment or healthcare operations, HIPAA requires that covered entities, including OhioHealth, make reasonable efforts to limit the use, disclosure, or request to the minimum amount of information necessary to accomplish the intended purpose of the use, disclosure, or request. This requirement applies whether we are using or disclosing PHI, or requesting PHI from another covered entity.

**Workforce members:** Associates, volunteers, trainees, contractors, employed physicians (including residents), and other persons whose conduct, in the performance of work for OhioHealth, is under the direct control of OhioHealth, whether or not they are paid by OhioHealth.

## Personal Responsibility

Each OhioHealth workforce member is a trusted custodian of confidential information, both patient-related and business-related, and must keep this information safe at all times.

*Disciplinary action, up to, and including termination, may be taken against workforce members who impermissibly use, which includes viewing, or disclose PHI.*

## Things to Remember

- + You should only access PHI if you need the PHI to perform your job.
- + You should only share PHI with another person or entity if the PHI is necessary to complete the job.
- + Viewing the PHI of family members or friends, outside of the established patient portals provided for such purposes, is considered a misuse of OhioHealth resources and is prohibited under OhioHealth's Confidentiality Statement of Understanding and Internet Use Agreement.
- + You must always lock your computer when unattended.
- + You should completely log off of multiuser workstations to prevent inappropriate access under your OPID.
- + You must never leave mobile devices containing PHI unattended or unsecured.
- + If it is necessary to send PHI or confidential business information via email to an external party, you must always encrypt the message by using (z) in the subject line.
- + You must always confirm that the identity of the patient matches the identity listed on any paperwork you provide to a patient, for example, on discharge papers and prescriptions.



## Reporting

OhioHealth policy requires that workforce members must immediately (within 24 hours) report any suspected compromise of the privacy, security or confidentiality of PHI or healthcare business information.

Reports of privacy incidents may be made by:

- + Reporting to a supervisor.
- + Calling the:
  - Ethics and Compliance Office at: (614) 544-4200.
  - OhioHealth Ethics and Compliance Hotline: (866) 411-6181.
- + Emailing details to: [CompliancePrivacy@OhioHealth.com](mailto:CompliancePrivacy@OhioHealth.com).
- + Submitting a report through OhioHealth's online reporting tool at [www.MyComplianceReport.com](http://www.MyComplianceReport.com) using access code: OHH.

*Healthcare business information is confidential information and is property of OhioHealth. This information may be defined as confidential by state or federal laws, regulatory agencies or OhioHealth management and policies. Examples include associate or physician private information, sentinel events, personal and business financial data, statistical reports, cost data, contracts, bids, research and development records, mailing labels, quality and performance improvement records and legal documents.*

## HIPAA: Patient Rights

In addition to privacy standards, HIPAA also sets out certain patient rights regarding protected health information, including the right to:

- + Copy and inspect much of their health information retained by OhioHealth.
- + Request an amendment to their health information.
- + Receive an accounting of certain disclosures of their PHI.
- + Request limits on how OhioHealth uses and discloses their PHI for treatment, payment or healthcare operations.
- + Request alternate means for receiving communications from OhioHealth regarding their PHI.
- + Obtain a paper copy of OhioHealth's Joint Notice of Privacy Practices.

*Ohio also has state laws regarding patient privacy. In a few instances, the restrictions imposed by Ohio law may take precedence over federal HIPAA requirements. Always contact the Ethics and Compliance Office at (614) 544.4200, or OhioHealth's Office of the General Counsel at (614) 544.4300, if you have questions or concerns.*



# Research Compliance

The OhioHealth Ethics and Compliance Office's Research Compliance team helps prevent research-related compliance incidents without obstructing OhioHealth's research and innovation endeavors.

## What We Do

The Research Compliance team's responsibilities include:

- + Developing, coordinating, communicating, planning, implementing and monitoring research-related compliance activities.
- + Reporting research compliance matters on a regular basis to key compliance and research stakeholders.
- + Assisting research stakeholders with establishing methods to reduce OhioHealth's exposure to research-related fraud, waste and abuse.
- + Designing and delivering research compliance training that informs associates of pertinent federal and state standards, and all applicable OhioHealth policies.
- + Developing and implementing policies and procedures that clearly convey OhioHealth's standards and expectations regarding research compliance.
- + Assisting the institution's internal or independent auditors in coordinating research compliance reviews and research compliance monitoring activities.
- + Responding to and investigating reported or detected research noncompliance.
- + Serving as the compliance liaison to the OhioHealth Research Committee and Institutional Review Boards.

At OhioHealth, our researchers, Institutional Review Boards (IRBs), OhioHealth Research and Innovation Institute, and Research Compliance Team are committed to making certain that safeguards are in place to protect those who participate in research protocols, including vulnerable populations. OhioHealth's Cardinal Value—*To honor the dignity and worth of each person*—requires that every associate in our organization remain steadfast in minimizing the risks to research participants, including vulnerable populations.



## Research Compliance Reviews

In an effort to protect the rights and well-being of OhioHealth research subjects, and to comply with research regulatory requirements, the Research Compliance team conducts confidential compliance reviews of research approved by Institutional Review Boards. Such compliance reviews may consist of evaluating conformance to Institutional Review Board and informed consent requirements, which includes reviewing documentation and individual subject cases.

Research compliance reviews may be conducted as a courtesy or on a for-cause, random or routine basis. The selection criteria for most compliance reviews are risk-based, which includes consideration of such factors as new investigators, high subject enrollment, investigational drugs or devices, and federal funding.

A research compliance review may also involve assessing research-related processes, policies, procedures and data software systems.

## Things to Remember

- + Secure Institutional Review Board approval
  - All human subject research conducted at an OhioHealth facility or involving OhioHealth patients (including data and specimens) must be approved by the appropriate OhioHealth Institutional Review Board before beginning any research-related activities.
- + Obtain Institutional Review Board approval of personnel
  - Identify all personnel prior to submitting a research request to the Institutional Review Board.
  - Maintain a log to track key personnel.
  - Review personnel approved by the Institutional Review Board during the continuing review.
  - Engage in routine touch bases with the principal investigator and other study staff.



Failure to obtain appropriate personnel approval from the Institutional Review Board may result in a privacy incident.

+ Obtain informed consent

*Be sure that your informed consent documents contain all required signatures, dates and initials. Do not alter or use altered informed consent documents without having first obtained Institutional Review Board approval.*

+ Do not exceed sample sizes approved by the Institutional Review Board

- Maintain current subject and record logs.
- Review the study sample size at regular intervals.
- Routinely touch base with the principal investigator and study staff.

*Exceeding sample sizes approved by the Institutional Review Board by reviewing additional medical records, enrolling additional subjects or collecting additional tissue samples may result in a privacy incident.*

+ Do not collect new data prior to Institutional Review Board approval

- Have thorough discussions with all data collectors prior to initiating the study.
- Routinely touch base with the principal investigator and study staff.
- Review data collection tools on a regular basis.

*Collecting new data prior to Institutional Review Board approval may result in a privacy incident.*

+ Maintain complete study-specific regulatory files

- Identify a centralized person responsible for maintaining regulatory files.
- Maintain files in real time.
- Periodically review files for completeness.

*Files must include documents approved by the Institutional Review Board and all correspondence with the Institutional Review Board.*



OHIO HEALTH  
RN

OHIO HEALTH  
RN

OHIO HEALTH  
RN

OHIO HEALTH  
RN



# Population Health Compliance and Joint Venture Compliance

The OhioHealth Ethics and Compliance Office's Population Health Compliance and Joint Venture Compliance team serves as the primary compliance oversight lead for OhioHealth's Medicare Accountable Care Organization, Clinically Integrated Network, Bundled Payments, Population Health activities and Joint Venture efforts.

## What We Do

The Population Health Compliance and Joint Venture Compliance team's responsibilities include:

- + Establishing performance metrics to validate comprehensive compliance programs for the Medicare Accountable Care Organization (ACO), Clinically Integrated Network, Bundled Payments and Joint Venture lines of business.
- + Developing and managing mechanisms for identifying and addressing compliance opportunities related to the operations and performance of the ACO, Clinically Integrated Network, Bundled Payments and Joint Venture lines of business.
- + Enhancing the scope and depth of compliance knowledge for OhioHealth's Joint Venture compliance officers and OhioHealth's ACO, ACO participants, and ACO providers and suppliers by providing education and outreach.
- + Assisting the ACO, Clinically Integrated Network, OhioHealthy Medical Plan and Joint Venture lines of business in identifying relevant emerging compliance risks.
- + Providing assistance to the Office of the General Counsel and guidance to OhioHealth Joint Venture partners with respect to OhioHealth's Annual Office of the General Counsel Checklist.

In addition, the team participates in an ongoing risk assessment conducted by the Ethics and Compliance Office, which, among other things, identifies priorities for the compliance program's work plan.



## Accountable Care Organization

OhioHealth's ACO participates in the CMS Medicare Shared Savings Program (MSSP). The MSSP is a voluntary program that allows providers and suppliers to join together to form an ACO. As part of an MSSP, an ACO provides services to Medicare beneficiaries assigned to the ACO, with the goal of facilitating coordination and cooperation among healthcare providers to improve the quality of care for Medicare fee-for-service beneficiaries.

OhioHealth's ACO is governed by the MSSP requirements as stated in 42 CFR Part 425, as well as other applicable state and federal regulatory standards. The ACO must meet all MSSP program participation requirements in order to enter into a participation agreement with CMS. A compliance program is one such requirement for MSSP participation. However, the elements of an ACO compliance program, as set forth by CMS, are not identical to the essential elements of a hospital compliance program, as set forth by the Office of Inspector General. The Ethics and Compliance Office's Population Health Compliance and Joint Venture Compliance team guides and supports the ACO's compliance program to help it address the specific compliance requirements of the ACO.

## Clinically Integrated Network

The Population Health Compliance and Joint Venture Compliance team works with the OhioHealth Group Clinically Integrated Network, which is a collective of providers, hospitals, facilities and payers that is working together to transform healthcare in the region.

## MAIN ENTRANCE



It is a network of nearly 2,000 physicians committed to working together to provide the highest quality care at the lowest cost. With a focus on population health, the Clinically Integrated Network works to reduce variation in care by implementing evidence-based guidelines approved by physician-led governing councils. Using data and analytics, opportunities are identified to reduce inefficiencies in care, including areas where utilization patterns differ from benchmarks. The OhioHealth Group Clinically Integrated Network provides a vehicle for physicians to provide high quality care while achieving value-based compensation incentives.

## Joint Ventures

OhioHealth participates in a number of patient-facing Joint Venture arrangements. Joint Venture arrangements are formed when two or more separate entities agree to share ownership of a new or existing entity. OhioHealth only participates in such arrangements when they advance OhioHealth's mission.

OhioHealth's Joint Ventures are required to adopt and implement comprehensive compliance programs designed to continually monitor high-risk areas and applicable federal and state statutes, regulations and healthcare program requirements. The Joint Venture compliance programs are required to be based in large part on the seven elements of an effective compliance program, as identified by the U.S. Sentencing Commission and the U.S. Department of Health and Human Services Office of the Inspector General. The Population Health Compliance and Joint Venture Compliance team provides guidance to OhioHealth's Joint Venture partners to help ensure the adequacy of their compliance programs.



## About OhioHealth

OhioHealth is a nationally recognized, not-for-profit, charitable, healthcare outreach of the United Methodist Church.

Based in Columbus, Ohio, OhioHealth has been recognized as one of the top five large health systems in America by Truven Health Analytics, an honor it has received six times. It is also recognized by *Fortune* as one of the “100 Best Companies to Work For” and has been for 13 years in a row, 2007–2019.

Serving its communities since 1891, OhioHealth is a family of 35,000 associates, physicians and volunteers, and a network of 14 hospitals, 3 joint-venture hospitals, one managed-affiliate hospital 200+ ambulatory sites and other health services spanning 50-county area. It has been recognized by FORTUNE as one of the “100 Best Companies to Work For” 15 times since 2007.