

Compliance Training for Colleagues, Volunteers, and Vendors

Instructions:

Review the training information in this packet. Then, complete the certification found on the second page and email *just* the certification page to compliance@tmh.org.

WHO WE ARE

Tallahassee Memorial HealthCare (TMH) is a leading provider of high-quality health care.

Founded in 1948, Tallahassee Memorial HealthCare (TMH) is a private, not-for-profit community healthcare system committed to transforming care, advancing health, and improving lives with an ultimate vision to elevate the standards of healthcare practice, quality and innovation in our region. Serving a 17-county area in North Florida and South Georgia, TMH is comprised of a 772-bed acute care hospital, a psychiatric hospital, multiple specialty care centers, three residency programs, 35 affiliated physician practices and partnerships with Doctors' Memorial Hospital, Florida State University College of Medicine, UF Health, Weems Memorial Hospital and Wolfson Children's Hospital. For more information, visit TMH.ORG.

Core Values

Each and every one of us is in charge of TMH's direction and the way TMH conducts business.

To accomplish this task, we can refer to the ICARE values of the company:

- Integrity
- Compassion
- Accountability
- Responsibility
- Excellence

Problems?

To achieve these values, problems must be handled quickly and efficiently.

- What if you are aware of problems at your location?
 - If possible, we recommend you communicate your concerns to your TMH department contact.
 - Problems can only be fixed if leadership knows about them.

The only way to resolve the problem is by letting leadership know that an issue exists.

By assuming the lead role and taking action, we can achieve our goals by working together.

REPORTING

How to Report

If you are not comfortable reporting to your local leader, the Compliance Program provides three avenues for reporting:

- Call Compliance Helpline for Anonymous Reporting: 1-877-772-6723—The helpline is manned by a third party company.
- Send an email to: compliance.mailbox@tmh.org
- Send a letter to:

Mary Matthews
Corporate Compliance and Privacy Officer
Tallahassee Memorial Healthcare
1300 Miccosukee Road
Tallahassee, FL 32308

- Risk Management safety portal reporting function

Responsibility to Report

When reporting, you have the option of withholding your name.

Employees that report their concerns in good faith are protected from any retribution or retaliation by peers or leaders.

Whistleblower Protection – The *False Claims Act* and many state acts contain a section designed to prevent retaliation against whistleblowers by their employers as a result of their reporting fraud.

When to Report

If you have a compliance or legal concern, it is a good indication that you should talk to a leader or contact the Compliance Helpline.

HR related concerns should be communicated to your HR manager contact or the HR Helpline at: 850-431-2797

Billing and Claims

It is the policy of Tallahassee Memorial to provide information concerning false claims recoveries as required under Section 6033 of the Deficit Reduction Act of 2005, P.L. 109-71 (the "DRA").

Workforce members should review the complete policy regarding False Claims Recovery at <https://spark.tmh.org/Interact/Pages/Content/Document.aspx?id=1239>

"Any employee who is discharged, demoted, suspended, threatened, harassed, or in any other manner discriminated against in the terms and conditions of employment by his or her employer because of lawful acts done by the employee on behalf of the employee or others in furtherance of an action under this section, including investigation for, initiation of, testimony for, or assistance in an action filed or to be filed under this section, shall be entitled to all relief necessary to make the employee whole."

"Courts have found that to slate a course of action under Section 3730(h), a plaintiff must demonstrate that: (1) he engaged in protected conduct; (i.e., acts done in furtherance of an action under 3730) and (2) that he was discriminated against because of his protected conduct."

TMH has rigorous safeguards to protect against any form of employee retaliation, including whistleblower retaliation.

INPATIENT PATIENT CARE RESPONSIBILITIES

Your Commitment

TMH is leading our community to be the healthiest in the nation by:

- Transforming Care
- Advancing Health
- Improving Lives

This is done by:

"Doing the right thing, the right way *each* and *every* time."

The Right Thing :

Following clinical policy and procedure.

Know the procedures for your role and follow them.

The Right Way :

...with COMPASSION.

Treat our patients and your teammates with respect.

Every TIME:

Consistency brings positive outcomes.

ERRORS May happen and can be handled. But...FAILURE happens when we are consistently not doing the right things.

Lack of compassion and poor quality are symptoms when we fail our patients.

Licensure

The FIRST STEP to providing quality care is KNOWING which services you are eligible to provide.

Know those rules that affect your position:

- Hospital Policy & Procedure
- Medicare Regulations
- Commercial Insurer Regulations
- State Practice Act

The SECOND STEP is to keep your license current. Only properly licensed staff are eligible to treat at TMH.

Only those medical services clinically determined to be MEDICALLY NECESSARY may be provided.

These requirements support QUALITY because we have the right PEOPLE providing the right CARE.

Issues

What if quality standards are NOT being followed at your location?

Going along with QUESTIONABLE, UNETHICAL, or ILLEGAL practices impacts the quality of care.

It also places your license and livelihood in jeopardy.

When you are aware of patient care issues, your leadership should be your first point of contact. If leadership is your concern or they do not address your concerns, contact:

Divisional Leadership or The Compliance Department

Expectations

Often, our patients and their families don't know what to expect when they come to us.

Communication is key to establishing realistic and attainable expectations.

Explain: Take the time to explain the care provided.

Listen: When we listen to patients and their families it helps to avoid misunderstandings in their care.

Review

Providing the best service requires five things:

- Integrity
- Compassion
- Accountability
- Responsibility
- Excellence

Inpatient Documentation Responsibilities

Once Upon a Medical Record

The Medical Record tells a story. It is your story about the patient's time in our care. Your story has three audiences

- The other medical professionals caring for our patient.
- Billers submitting for payment.
- Surveyors or lawyers determining if *your* care was appropriate.

The story *you* write, whether it is correct or incomplete, is the final account of what happened with that patient.

WARNING! "If it wasn't documented in the medical record, it didn't happen."

The story must all be told in the same place. The use of Soft or Shadow Files are strongly discouraged.

Keeping information in a file other than the medical record makes it hard for the medical staff to communicate effectively and make informed decisions.

Each audience is looking at the record for different reasons, but they are looking for the same information. Is it *accurate*? Is it *complete*? Is it *timely*?

If your record is incomplete or inaccurate, results suffer for the:

- Medical professional, the patient's care suffers.
- Surveyor or lawyer, indicates that a lawsuit or investigation may be warranted.
- For Biller, the claim is rejected or pays at a reduced rate.

The Medical Record Contains

- Sufficient information to identify the patient, Support for the diagnosis,
- Justification of the treatment,
- The course and results of treatment,
- Continuity of care among health care providers and, Support for the charges for services rendered.

Who Can Tell the Story

Only authorized individuals may enter information into the medical record and sign each entry.

Those are:

- Licensed/certified clinicians
- Individuals authorized in accordance with company policy and procedure
- Other personnel as determined by the applicable State Practice Act

The documentation must be timely (to ensure accuracy). This generally means at the point of service or within the same day.

Good to note: TMH uses a combination of paper & electronic documentation systems.

Alterations

Remember, the medical record is the only real proof of the care and treatment provided to our patients.

If any of the information is altered, it calls the whole document into question.

The following are alterations that are not allowed in any system:

- Do not use white-out.
- Do not use erasers, erasable ink or pencils
- Do not obliterate or make the original entry illegible.
- Do not destroy any portion of a medical record and/or substitute a new entry as if it was the original entry.
- Do not enter a date and time of service other than the actual date and time.
- Do not make a medical record entry for someone else and then sign it as if you were that person.
- Do not rewrite any portion of the medical record

Legibility

Poor handwriting results in a higher risk of medical error and potential for liability. Do whatever is necessary to ensure your medical record entries are legible. If your co-workers and peers can't read it, the quality of care will suffer. Electronic medical records suffers from its own form of illegibility. Prior to ending an entry verify these items:

- Cheque your spelling!
- CasE oF lEtters - Make sure you use initial upper case and followed by lower case.
- "Correct" punctuation;.!

Errors and Corrections

There are occasions when an entry in a medical record may need to be corrected.

A single line should be drawn through the error followed by the date the correction is made, the individual's signature or initials and the correct entry.

If your error is not discovered in a timely manner and it may jeopardize the patient, an entry should be made on the current date to alert other caregivers to the error.

If you discover someone else has made an error:

- Inform the person of the error so that he/she can make the correction. If the error is substantive (e.g., is more than just a spelling error), attempt to notify all persons who may have relied upon the erroneous information.

If that person is unable to make the correction, the qualified clinician responsible for the record may correct the information following the correction policy and procedure.

There are times when there won't be enough space to correct the error that was made in the medical record. The correction can be made by entering the information in a subsequent entry, which is then referenced to the original entry.

Late Entries

A late entry can be added to the medical record to supplement the existing notes to provide pertinent information needed to complete the medical record. The following are TMH's policies regarding late entries:

- Making a late entry for the purpose of increasing reimbursement or "fixing" a medical record that is being reviewed is strictly prohibited.
- Late entries usually include information previously omitted from the evaluation or notes. Never backdate a documentation entry in the clinical record
- Write "late entry" and reference the date to which documentation is referring Sign your name and enter the date on which the late entry was made.
- All information in the late entry must be accurate. Do not guess or make up information.

If there is not room on the original note for a late entry, and the documentation is added on a separate note or piece of paper, it should also state "out of treatment order" or "late entry for (date)"

Turns and Repositions

All patient turns/repositioning must be documented as they happen.

If turns are not documented there is no way to confirm that they occurred. If the patient's condition deteriorates and turns/repositioning were not documented, that becomes a possible reason for the deterioration.

Abbreviations

Communication among clinicians is key to assuring safe delivery of patient care.

Hospitals strive to ensure that written communication in the patient's medical record is understandable. Standard terminology, definitions, abbreviations, acronyms, symbols and dose designations are available.

Regular Wound Care

Not all wounds heal. In these instances it is essential for patient care to document regular wound care has taken place so other options of patient care can be considered.

If a wound gets worse and there is no documentation, the assumption is made that regular care did not take place.

Skin Integrity

The condition of the patient's overall skin integrity needs to be charted. This is the responsibility of all nurses involved in the patient's care.

Patient's Story

The documentation must tell the story of the patient's stay.

It is essential to document the patient's status on a daily basis so that there is a logical progression from their admission to their current status.

Quality concerns are raised when physician orders and our actions don't match with the documentation in the patient's record.

It is important to complete physician orders and document the care.

If the patient status changes and physician orders are revised it is essential to document the changes and the reason for the changes.

Record Retention

Record storage and retention requirements for medical information are governed by state laws and regulations, and are reflected in TMH record retention policies and procedures.

These are located on the Intranet under Compliance.

No records are to be destroyed before the prescribed retention period.

When records are to be destroyed, destruction must be accomplished by a means that protects the confidentiality of the patient, such as shredding or incineration.

Remember

An accurate, timely, and well documented record is the best tool to ensure:

- Safe, high quality patient care
- Reduced liability for practitioners and the facility
- Appropriate reimbursement

INFORMATION SECURITY POLICY STATEMENT RECERTIFICATION

What is the Information Security Policy Statement?

The Information Security Policy outlines your responsibilities while using TMH computers and systems. It is a requirement of all workforce members upon hire to read and acknowledge that you understand and will adhere to the established Tallahassee Memorial Healthcare policy.

Electronic Acknowledgement of ISP

By using the vendormate system all users will be asked to read and sign off electronically that they have read and understand both the Information Access Security and Patient Confidentiality Agreement and the TMH Information Security Handbook.

Social Engineering

There have been incidents in the past in which employees were tricked into providing seemingly harmless information that should not have been provided.

If you receive an email or phone call, please make sure you can identify who is making the request.

If you receive a call or email from a person claiming to be a member of the IS help desk, they should only ask for your password in response to a help desk ticket that you initiated. Thus, you should have the help desk person give you the ticket number for verification.

SPAM and PHISH ... bad for your health

Spammers continually use methods to send unsolicited bulk email (SPAMMING) or try to obtain sensitive information for criminally fraudulent purposes (PHISHING).

Although our email is constantly monitored and filtered to eliminate junk email or email with malicious or fraudulent content, vigilance on the part of our employees is required.

Tallahassee Memorial will never ask for your password.

You have no control over the final destination of any email you send.

Remember – NEVER provide personal information such as user IDs, passwords or social security numbers in email.

Removable Media Devices

Removable devices that are able to store data must be encrypted and need to follow the HIPAA Security Mobile Device and Media Policy 060.200.126

Generally, Tallahassee Memorial does not promote the use of removable media and usage should be limited to the minimum necessary for legitimate business purposes, not for storing sensitive data.

Removable Media Devices can include:

- Floppy drives
- CD Drives
- DVD Drives

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- Flash drives
 - Media Cards
 - Zip Drives
 - Portable Hard Drives
 - And portable media players (Ipod)

Here are some guidelines to keep in mind when using these tools:

Removable media may not hold any sensitive electronic Patient Health Information, Personally Identifiable Information or Proprietary Company Information (P&P, manuals).

Storing data on removable media does not provide a backup solution in the event that data becomes lost or corrupted. TMH provides secure alternatives for transferring and backing up files.

If a device is lost or stolen, it must be reported immediately to the TMH Help Desk at 431-5272.

The use of all removable media devices must be approved by the IS Security Department. Failure to do so may result in the loss of access.

If you were previously given removable media, but no longer have a business need for it, you must return it to the IS Desk.

Login and Password Security

It is essential that your login and password be secure and not shared with anyone else. This includes your supervisor or manager.

If a workforce member is going to be out of the office and their tasks need to be completed by another workforce member, please submit a System Account Request Form to request the associate be granted the appropriate permissions to complete the job functions.

If you are designating a backup, you may want to request this access before it is actually needed so that you don't have an interruption in the job function.

Information Security Policy Recertification

Tallahassee Memorial will hold employees accountable for their individual behavior associated with the Tallahassee Memorial name and all their activity conducted with Tallahassee Memorial Corporate information assets.

Electronic communications reside on corporate resources. Therefore this information is the property of Tallahassee Memorial and is to be used for valid business reasons only. Information is a critical corporate asset and as such must be protected from misuse, improper access and delays in processing. I agree to follow the Information Access Security and Patient Confidentiality Agreement and the Internet Usage Policy, and abide by the rules and regulations in this training.

IDENTITY THEFT

Overview

Most people are aware of the risk of identity theft related to financial records, social security numbers, etc. Recipients of healthcare services also run the risk of Medical Identity Theft.

Serious consequences can result if other people obtain medical services under our patient's identity.

Protection

TMH has developed policies and procedures designed to help our patients protect themselves. Two major steps are: 1) Require patients to present identification at Registration/ Intake Points and 2) Provide patients with the

Policy Keys

Request ID at Registration/Intake Points:

- Lack of ID will not delay emergency care.
- No one should be refused care because they do not have acceptable ID. But, they should be asked to bring it at the next visit.
- When Identity Theft is alleged, direct patients to law enforcement and the Federal Trade Commission (877-FTC-HELP) and TMH Compliance

Social Security Numbers

Social Security Numbers should only be used on the original patient intake form. It should NOT appear on things like:

- ID Bracelets
- M Labels
- Patient work lists

Signs of Possible Identity Theft

WARNING:

PEOPLE MAY NOT BE WHO THEY SEEM...STAY ON ALERT FOR THE FOLLOWING:

- A patient providing a photo ID that does not match the patient.
- Any patient appearing and giving an identity that has been flagged previously as having an identity theft issue. A patient giving a social security number different than one used on a previous visit.
- A patient giving information that conflicts with information in the patient file.

PATIENT SIGNS:

- They receive a bill or notice of insurance benefits for services they did not receive.
- They receive a collection notice from a bill collector for a bill that they think does not relate to services they received.
- Their insurance company notifies them that coverage for legitimate hospital stays are denied because insurance benefits have been depleted or a lifetime cap has been reached.
- A patient listed as the wrong gender on documentation or identification.

Protect Our Patients

Identity theft is one of the nation's fastest growing crimes.

Too often, this crime is made possible by companies providing thieves easy access to documents that were not properly discarded.

Take the necessary steps to protect our patients by following all policies and procedures associated with obtaining, using and destroying personally identifiable information.

This includes both financial and medical information.

Code of Conduct Certification

Every workforce member is required to read, understand and certify their intention to follow the Code of Conduct.

At hire, each employee verifies that he or she has read the Code of Conduct. In addition, non-select workforce members (Agency staff, volunteers, students, etc) must also comply with the Code of Conduct. This must be maintained in the workforce member's local personnel file.

Code of Conduct Recertification

Then, on an annual basis, as the final step in your Compliance Awareness module, you recertify your intention to follow the Code of Conduct.

Recertification is accomplished by reviewing the information in this module and signing the certification form.

The remainder of this module is your recertification of the Code of Conduct. Please read all of the information on the following pages.

TMH
Employee Compliance Certification form

I hereby certify that I have received, read and understand TMH's Code of Conduct (the "Code"). I agree to comply fully with all of the policies and procedures set forth in the Code, as well as all other policies and procedures that may be implemented from time to time by TMH.

I understand that my compliance with the Code and TMH's other policies and procedures is a condition to my continued employment or association with TMH, and that violation of the Code or such other policies and procedures may result in disciplinary action at the discretion of TMH, including possible termination.

I also represent to TMH that I have disclosed information regarding a) any criminal complaint, indictment or criminal proceeding (involving other than a misdemeanor offense) in which I am named a defendant; b) any criminal investigation or proceeding, whether administrative, civil or criminal, relating to an allegation against me of filing false health care claims, violating anti-kickback laws, or engaging in other billing improprieties; and c) any (past or present) threatened, proposed, or actual exclusion from any federally funded health care program, including the Medicare or Medicaid program.

I further certify that I have fully complied with the Code and all other TMH policies and procedures, and I am not aware of any Compliance Incident (as that term is used in the Code) committed by others that has not been reported as provided in the Code. If I become aware of any potential violations or Compliance Incidents in the future, I am aware of TMH's anonymous reporting Compliance Helpline (877-772-6723).

I acknowledge that the Code and TMH's other policies and procedures are for the sole and exclusive benefit of TMH and do not in any way constitute or otherwise create any employment or other legal right, privilege, assurance or contract of any kind or nature with respect to my employment or otherwise.

TALLAHASSEE MEMORIAL HEALTHCARE, INC. (TMH)
Code of Conduct and Business Practice Guide
Every Employee Must Commit to the Following Standards:

1. PROVIDE QUALITY CARE AND SERVICES

We are committed to providing quality care and services to our patients, their families, visitors and the community by:

- ◆ Providing treatment and medical services without discrimination.
- ◆ Listening and doing our best to understand the needs of our patients, families and visitors by promptly addressing any issues or complaints.
- ◆ Including patients in decisions regarding their medical care by providing complete and unbiased information with patients and families in ways that are affirming and useful.
- ◆ Ensuring clinical duties are performed by properly trained, licensed or credentialed individuals. We will conduct appropriate background checks on all potential employees and also verify credentials and qualifications of licensed health care professionals providing services at our facilities.
- ◆ Ensuring patients and families receive timely, complete, and accurate information in order to effectively participate in care and decision-making.
- ◆ Acknowledging that patients and their families are to be informed about the outcomes of care and associated risks.
- ◆ Providing the patient a choice from the available home health agencies, durable medical equipment (DME) suppliers, long-term care providers, ambulance services and rehabilitation providers.
- ◆ Providing appropriate medical screening and necessary stabilizing treatment to all individuals who come to the hospital seeking emergency care, without delay to inquire about method of payment.

2. PROMOTE FAIR EMPLOYEE TREATMENT

We are committed to providing a work environment throughout the organization that promotes fair treatment and complies with laws in all matters relating to employment at TMH by:

- ◆ Demonstrating appropriate respect and consideration for one another.

- ◆ Applying all Human Resources Policies & Procedures fairly, equitably and consistently, regardless of position.
- ◆ Hiring, training, promoting and compensating on the basis of personal competence and potential for advancement without regard for race, religion, gender, national origin, age, marital status, creed, citizenship or disability, or other classification protected by law.
- ◆ Maintaining an environment free of harassment, disruption, intimidation or hostility.
- ◆ Encouraging open expression of concerns and use of the problem-solving process.
- ◆ Protecting an employee's job status, working conditions or employment relationship if he/she, in good faith, follows the Problem Resolution Procedure or contacts the Compliance Office.

3. COMPLY WITH THE LAW IN ALL BUSINESS PRACTICES

We will provide healthcare services and otherwise conduct our business in compliance with laws, regulations and standards that apply to the services provided by TMH by:

- ◆ Pursuing only those business opportunities that are both legal and ethical.
- ◆ Refraining from engaging in illegal business practices including bribery, kick-backs or payoffs, intended to influence the decisions of TMH colleagues or any external representative.
- ◆ Marketing and advertising truthfully and accurately.
- ◆ Ensuring that every contract payment or other benefit paid to physicians is for specifically defined services at fair market value.
- ◆ Maintaining company business records accurately and truthfully and discarding them only according to retention guidelines.
- ◆ Recording financial transactions in accordance with generally accepted accounting principles, established accounting policies and internal control policies.
- ◆ Ensuring that contracts are approved by legal counsel as and when required by TMH policies and signed only by authorized agents of TMH.

- ◆ Acting in good faith in contractual relationships.
- ◆ Complying with copyright laws for materials such as software, printed and audiovisual works.
- ◆ Complying with Risk Management reporting requirements.

4. **RESPECT AND PROTECT CONFIDENTIAL INFORMATION**

We will ensure the responsible use of patient, visitor, employee, business or other confidential information by:

- ◆ Maintaining the confidentiality of protected health information concerning our patients and TMH by using and sharing it according to established Privacy and other guidelines.
- ◆ Limiting access to confidential information to only those who need to know.
- ◆ Refraining from discussing confidential information in public areas.
- ◆ Preventing others from examining, making copies of, or sharing confidential documents or information without authorization.
- ◆ Not disclosing to any outside party any restricted nonpublic business information, plans or data acquired during employment with TMH, unless specifically authorized to do so by management.
- ◆ TMH is committed to ensure compliance with HIPAA's security and privacy standards.

5. **CODE, BILL AND COLLECT IN ACCORDANCE WITH APPLICABLE GUIDELINES**

We are committed to integrity in our coding, billing and collection practices by:

- ◆ Maintaining honest and accurate records of all services provided to patients. We will submit charges for services and products in accordance with applicable laws and regulations.
- ◆ Ensuring bills submitted for payment are properly coded, documented and billed in accordance with applicable laws and regulations.
- ◆ Ensuring that medical information is properly documented in patient records in a timely manner.

- ◆ Using codes that accurately describe the services that were appropriately ordered by physicians or health affiliates and actually provided to patients.
- ◆ Preventing the submission of claims for payment or reimbursement of any kind that are fraudulent, abusive, inaccurate or medically unnecessary including, but not limited to the following:
 - Billing for items or services not provided to patients;
 - Upcoding for higher reimbursement than is supported by documentation;
 - Submission of claims for outpatient services that are required to be included with an inpatient stay.
 - Submission of duplicate bills (more than one claim for the same service);
 - Unbundling claims (submission of bills in a fragmented fashion to maximize reimbursement if guidelines require the services be billed together);
 - Inclusion of costs that are not allowable to be reimbursed in a cost report; and
 - Billing for a patient discharge when it is appropriate to bill the claim as a patient transfer.
- ◆ If a billing error is discovered, we will take immediate steps to correct the error, and promptly refund or collect any payments due and owing in accordance with TMH Policies and Procedures.

6. AVOID CONFLICTS OF INTEREST

We will conduct ourselves with integrity, honesty and fairness to avoid any conflict between personal interests and the interests of TMH by:

- ◆ Graciously declining any offers of money from patients, their families, visitors and others which are not intended for the benefit of TMH and refer such offers to the TMH Foundation.
- ◆ Not providing, or appearing to provide, payment or other benefits for referrals of patients.
- ◆ Not accepting gifts/gratuities offered in exchange for favorable treatment.
- ◆ Not using any proprietary or nonpublic information acquired as a result of employment with TMH for personal gain or the gain of another organization.
- ◆ Not accepting educational activities grants that create the appearance of a conflict of interest or exchange for favorable treatment.
- ◆ Following the Conflict of Interest Policy in reporting any circumstances that could cause a conflict of interest.

- ◆ Conducting all fundraising ethically, within the guidelines and in support of TMH and the TMH Foundation.
- ◆ Not contributing or donating TMH funds, products, services or other resources to any political cause, party or candidate without the advance approval of the General Counsel.

7. SAFEGUARD ASSETS, PROPERTY AND INFORMATION

We will use our resources wisely and will be accountable for their proper use by:

- ◆ Maintaining, preserving and being personally responsible for TMH assets, property, facilities, equipment and supplies, as well as the property of others.
- ◆ Reporting time records accurately and using time at work responsibly for work-related activities.
- ◆ Ensuring that property is disposed of in accordance with TMH Policies and Procedures.
- ◆ Using E-mail, Voice-mail, Intranet, Internet and other present and future electronic communications responsibly and for limited personal use in accordance with TMH policies and procedures.

8. MAINTAIN A SAFE ENVIRONMENT

We are committed to providing a safe environment for our patients, staff and visitors by:

- ◆ Recognizing, correcting and/or reporting unsafe practices, conditions or potential hazards that may violate any rule, regulation or TMH policy and procedure.
- ◆ Refraining from any threats or acts of violence. Immediately reporting such acts or threats to a supervisor and/or Security.
- ◆ Using TMH equipment, property and medical products appropriately.
- ◆ Using care in the handling and disposal of medical waste or other hazardous materials.
- ◆ Eliminating or minimizing hazards to the health and safety of employees, patients and visitors.

- ◆ Refraining from using illegal drugs either on or off the job, using non-prescribed controlled substances, or reporting to work under the influence of alcohol.
- ◆ Not manufacturing, distributing or possessing a controlled substance or drug not medically authorized.

WHAT TO DO WHEN YOU BELIEVE THERE MAY BE A PROBLEM

- ◆ Refer to TMH's Compliance Program and/or Policies and Procedures for additional information.
- ◆ Contact your department manager or, if necessary, up to the appropriate Vice President or Senior/Executive Vice President.
- ◆ Contact Human Resources for employment-related matters to begin the Problem Resolution Procedure as outlined in the TMH Personnel Policy and Procedures Manual.
- ◆ Contact the Compliance Office at 2667 or the Compliance Hotline at 877-772-6723 to seek additional information or report improper conduct.
- ◆ Submit a Compliance or Privacy concern to the HealthCare Safety Zone Portal.

You are encouraged to resolve issues, whenever possible, by utilizing TMH's existing Policies & Procedures or by contacting your department manager or, if necessary, other appropriate Vice President or Senior/Executive Vice President. If you are unsuccessful in using this approach, the Compliance Hotline is available to you 24 hours/ per day.

When calling the Compliance Hotline, you may remain anonymous. Should you choose to identify yourself, your identity will be protected to the limit of the law. Concerns brought to TMH attention through the Compliance Hotline will be promptly and thoroughly evaluated and investigated for proper resolution.

IMPORTANT TERMS TO KNOW

Abusive/Abuse – Inappropriate, consistent or incorrect practices that directly or indirectly lead to incorrect payment for services; abusive acts may be committed without certainty of knowledge, willfulness or intention.

Billing for Services and Items Not Rendered – Submitting a claim which represents that the provider performed a service all or part of which was not performed.

Colleagues - All TMH Employees, Medical Staff members, temporary per diem personnel, volunteers, students and others rendering paid or unpaid services to TMH, and all TMH Agents.

Compliance Program – A process designed to promote ethical and honest practices in our day to day operations, detect and prevent illegal activities by employees, physicians, vendors and all others providing services and/or doing business within TMH.

Conflicts of Interest – Any situation in which the personal interest of any individual may conflict with the interest of the TMH System.

Copyright Laws -- Laws granting the legal right for exclusive publications, products, sale or distribution of material to the author or designated individual. Material cannot be reproduced without written permission of the copyright holder.

Credentialed/Credentialing – The process of assessing qualifications and granting privileges to licensed healthcare professionals to treat patients.

Duplicate Billing – Submission of more than one claim for the same service of the bill is submitted to more than one primary payer at the same time.

Fraudulent/Fraud – False statements, representation or concealment of material facts to obtain a benefit or payment for which no entitlement exists; acts that are committed knowingly, willfully and intentionally.

Good Faith Reporting – Reporting an act of known or suspected non-compliance based upon facts or observations that the individual making the report considers to be true to the best of their knowledge and belief.

Harassment – An inappropriate or unwelcome act or series of acts that significantly impacts the ability of another individual to perform his/her duties.

Informed Consent – Informed consent is a process which involves exchange of information between the patient and practitioner as well as permission, approval or assent. Informed consent is consent given by the patient based on knowledge of the nature of the procedure to be performed and its risks, benefits and alternatives, including neuroleptic drugs.

TMH Agents - Includes all persons and entities that have contracted with TMH to provide health care related services, equipment or other goods or services.

Upcoding – The practice of using billing codes that provide a higher payment rate than the billing code that actually reflects the service furnished to the patient.



Code of Conduct Acknowledgement Form

I hereby acknowledge that I have received and reviewed the Code of Conduct and Business Practice Guide. I fully understand that, as an employee, volunteer, vendor or TMH agent I have an obligation to fully adhere to the policies and principles of the TMH Code of Conduct and Compliance Program.

In particular, I hereby acknowledge and affirm that;

1. I agree to comply with TMH policies and the Compliance Program.
2. When I have a concern about a possible violation of TMH Policy, I will promptly report the concern to the appropriate manager, Corporate Compliance officer, Mary Matthews at 431-2667 or Compliance Helpline at 877-772-6723 in accordance with the Compliance Program.

Signature

Date

Print Name

TMH Employee # if Applicable

Check One:

- Tallahassee Memorial Healthcare, Inc.
- Medicus Select
- Volunteer Services
- Vendor

*Return signed form to Human Resources/Employee Records**

**Vendors, email to compliance.mailbox@tmh.org or complete electronically in symplr*