



Code of Conduct

I. STATEMENT OF PURPOSE

MarinHealth Medical Center (Medical Center) is committed to carrying out its mission lawfully and ethically. While we serve many customers with diverse needs and expectations, our focus has always been and continues to be on our patients and must never be compromised. As such, patient access to care and clinical judgment and decision-making shall not be compromised or jeopardized by financial considerations of our patients. As our reputation is created by the collective efforts of its personnel, it is vital that everyone within Medical Center meet the highest standards of legal and ethical conduct. To guide our personnel in conducting their duties according to acceptable standards of conduct the Medical Center has established, and will revise as necessary, this Code of Conduct as part of its Compliance & Privacy Program.

II. STATEMENT OF POLICY

It is the policy of the Medical Center (and all its affiliates and subsidiaries) that all its employees, and to a lesser extent medical staff, volunteers, and contractors, ("Staff") in performing their respective duties and responsibilities on the Medical Center's behalf, shall conduct themselves according to the highest ethical standards and in accordance with all applicable laws, rules and regulations. This Code of Conduct is not meant to cover all situations. Any doubts whatsoever as to the propriety of a particular situation should be submitted to an immediate supervisor, administrator, or to the Compliance & Privacy Officer. The intent of the Medical Center's Compliance & Privacy Program is to safeguard the Medical Center's tradition of strong moral, ethical and legal standards of conduct by ensuring that all Staff understands their responsibility for maintaining full compliance with the laws and regulations, standards of care, ethical business practices and the policies and procedures of the organization.

III. COMPLIANCE WITH APPLICABLE LAWS/REGULATIONS AND MEDICAL CENTER POLICIES AND PROCEDURES

The Medical Center is committed to complying fully with all applicable laws and regulations and conducting our professional activity with the highest standards of ethics, integrity, honesty and responsibility. To this end, Staff must comply with all applicable laws and regulations as well as all Medical Center policies and procedures including but limited to the following:

Quality of Care & Services

Staff of the Medical Center will provide quality care in the most appropriate, effective and efficient manner regardless of the patient's ability to pay for these services. All patient care services will be rendered in a compassionate manner and carried out in accordance with the intended objectives of the individual patient's plan of care. The Medical Center will provide appropriate and timely care by qualified health care professionals including emergency care to all patients without regard to race, religion, disability, age, sex, national origin or other legally protected status, or the ability to pay for such care.

Medical Center Staff will adhere to the patient Bill of Rights and will maintain complete and thorough records of patient information, and will protect the privacy of all patients' health records to fulfill the requirements set forth in Medical Center policies, accreditation standards, and applicable laws and regulations.

Fraud and Abuse

Medical Center Staff shall not engage in conduct that would violate healthcare fraud and abuse laws. All Staff shall comply with all statutes, regulations and guidelines applicable to Federal and State health care programs. All Staff shall prepare and submit accurate claims and reporting documentation consistent with government and third party payer requirements.

No Staff shall give or receive any form of payment, kickback, or bribe to induce the referral or the purchase of any service, nor offer any improper inducement to patients, providers or others to encourage the referral of patients to Medical Center facilities or to use a particular product or service.

No Staff shall knowingly make any false statements, verbal or written, to government agencies or other payers. Claims for health care services shall only be made for those items that are medically necessary and for which adequate documentation supporting medical necessity is present.

False Claims Act

Both the United States Government and the State of California have statutes that impose civil liability on any person or entity who:

1. Knowingly submits a false claim to the government for payment
2. Knowingly makes or uses a false record or statement to obtain payment or approval of a claim by the government
3. Uses a false statement to decrease an obligation to the government.

The penalties for submitting false claims can be as high as \$20,000+ per claim and three times the total damages. (Note: See Policy "Federal and State False Claims Act Statutes and Whistleblower Provisions" within the Organizational Ethics section of the Policy and

Procedure Manual for more information on both the Federal and the State of California False Claims Acts and whistleblower provisions).

Medical Center will only bill for services and care provided, will ensure that coding and billing are performed accurately, will waive co-payments, coinsurance and deductibles only in accordance with established rules, policies and procedures and will maintain complete documentation to support submitted claims.

Any Staff who become aware of the potential submission of a false claim have an affirmative duty to report it through the proper channels. Failure to report regulatory violations can lead to disciplinary action. All Staff who report in good faith are protected from any and all forms of retaliation. All such reports will be investigated fully by the organization and appropriate corrective action will be taken as warranted.

Privacy and Confidentiality

All Staff will respect the privacy of our patients and protect the privacy of our patients' health records according to State and Federal laws and Medical Center policies and procedures. Any questions concerning patient privacy issues should be directed to **the Compliance & Privacy Officer at 415-925-7078**.

In addition, all Staff will exercise due care to ensure that confidential or proprietary information is secure and not viewed by, or disclosed to, unauthorized persons, including, but not limited to confidential business information obtained within the course and scope of employment. All Staff who have been provided access to Medical Center information systems must maintain computer passwords and access codes in a confidential and responsible manner. This section is not intended to inhibit or prevent employees from discussing wages, benefits, hours of work or any other terms and conditions of employment, or from engaging in any other discussions or disclosures that are privileged or otherwise protected by law.

Workplace Conduct and Employment Practices

Medical Center recognizes that the greatest strength of our organization lies in the efforts and talents of our Staff who create the organization's success and reputation. Medical Center provides equal employment opportunities to prospective and current employees based solely on merit, qualifications and abilities and does not discriminate in employment opportunities or practices on the basis of race, color, religion, sex, national origin, ancestry, age, physical or mental disability, sexual orientation, gender identity, veteran status or any other status protected by law.

Unlawful Harassment

Medical Center is committed to providing a workplace free of harassment and will not tolerate the unlawful harassment of Staff by leadership, co-workers, or other persons doing business with Medical Center. Harassment takes many forms, including but not

limited to, verbal statements, physical contact, posting pictures or writings, or any other conduct that creates an intimidating, offensive, or hostile work environment. Any incident of harassment should be reported to the Human Resources Services immediately.

Non-Retaliation

Medical Center does not tolerate any act of retaliation or reprisal against any Staff who in good faith reports suspected violations of law, regulations, or policy and fosters an “open door” policy that creates a work environment in which ethical concerns will be addressed. Any such acts of retaliation should be reported immediately to the **Compliance & Privacy Officer at 415-925-7078**.

Antitrust

All Staff must comply with applicable anti-trust laws and other similar laws that regulate competition. At no time will any Staff take part in any conspiracy in restraint of trade. Price fixing, disparagement, misrepresentation, or harassment of a competitor, stealing trade secrets, offering or accepting bribery or kickbacks are strictly forbidden.

Safety and Health

All Staff are responsible for maintaining a safe and healthy work environment and will comply fully with all federal, state and local health and safety laws. Staff may report work place safety and health concerns to the **Manager of Safety at 415-925-7900**.

Possession, use or being under the influence of alcohol or an illegal drug, intoxicant or controlled substance during work time or on Medical Center owned or occupied premises is strictly prohibited.

Business Ethics

Medical Center strives to conduct all business transactions with vendors, contractors, and third parties in compliance with all applicable laws. Such business relationships shall be transacted free from offers or solicitation of gifts and favors or other improper inducements in exchange for patient referrals, influence or assistance in conducting a transaction. All Staff shall accurately and honestly represent Medical Center and shall not be a party to fraudulent activities.

Gifts and Entertainment

Staff is strictly prohibited from soliciting tips, personal gratuities or gifts of any kind from a patient, family member or visitor or any other individual or entity that has or is attempting to have a relationship with Medical Center. In addition, Staff is strictly prohibited from accepting monetary tips or gratuities. If a cash gift is offered, the individual should be promptly referred to the Foundation.

No gifts or entertainment of any kind may be accepted from a vendor except in accordance with the existing Medical Center Gift Policy. In addition, unless included as part of a contractual obligation, Staff is prohibited from accepting Vendor offers to pay for employee education or related travel expenses.

Non-monetary gifts may be accepted under certain circumstances if they are of nominal value (less than \$100), accepted infrequently and would not be perceived as an attempt to influence the judgment of the recipient or appear to influence the decision making process of the employee. Any questions regarding this policy should be directed to the **Compliance & Privacy Officer at 415-925-7078.**

Contracting

Staff may not utilize insider information for any business activity conducted by or on behalf of Medical Center. Staff shall not seek to gain any advantage through improper use of payments, business courtesies or other inducements.

Financial Reporting

All financial documents, including but not limited to accounting records, research reports, expense accounts, and timesheets must be prepared accurately and clearly represent the nature of the transaction. No facts are ever to be falsified, misrepresented, or omitted in any record.

Transactions between Medical Center and all outside individuals and organizations must be promptly and accurately entered in accordance with generally accepted and applicable accounting standards.

Records Retention

All Medical Center Staff will ensure that all records are created, maintained, preserved and destroyed in accordance with the Maintenance of Required Records Policy (1113.11.3). Records containing confidential and proprietary information will be securely maintained, controlled and protected to prevent unauthorized access, use and disclosure. The unauthorized destruction, removal or use of records is prohibited. No Staff may falsify or inappropriately alter information in any record or document.

Protecting Medical Center Assets

Staff is prohibited from the unauthorized use or taking of Medical Center equipment, supplies, materials, services, proprietary information, or any other asset. Staff shall report time and attendance accurately.

Affirmative Obligation to Report

All Medical Center employees have an affirmative obligation to report to their immediate supervisor and to the Director of Human Resources upon notification of any complaint and/or investigation initiated by and against her or him by a licensing board or any other regulatory or law enforcement agency.

Conflict of Interest

In performing their duties in the best interests of Medical Center, Staff shall avoid conflicts of interest during their association with Medical Center and shall report any interests or activities that may give the appearance of a conflict. Staff should avoid taking part in any decision in which they have a self-interest and will avoid even the appearance of a conflict of interest by fully disclosing facts, which may appear to be a conflict of interest. This includes conflicts that may arise from furnishing services to any concern or business from which the hospital obtains goods or services or furnishing services in competition with Medical Center. Questions regarding potential conflicts should be directed to the **Compliance & Privacy Officer at 415-925-7078**

IV. ATTESTATION

All employees are required to review and comply fully with this Code of Conduct. On an annual basis all employees will be required to review the Code of Conduct and complete an attestation during the annual training and education process

V. RESOLVING CONCERNS WITHIN THE COMPLIANCE AND PRIVACY PROGRAM

The Medical Center Compliance & Privacy program is intended to demonstrate in clear terms Medical Center's commitment to the highest standards of ethics.

Medical Center is committed to an "open door" policy for the identification and resolution of issues and concerns. This policy begins with every member of the Staff and continues through supervisory staff and on up through senior management.

If there is a suspicion that a violation exists, Medical Center Staff have an affirmative duty in accordance with the Code of Conduct to report it through the proper channels. Initial contact should be through an immediate supervisor; concerns may then be raised with individuals up to and including senior management. If Staff is uncomfortable raising an issue through the chain of command or is not satisfied with the response to their concerns, they have alternate avenues of resolution including contacting the Compliance & Privacy Officer and using the Medical Center Hot Line.

THE Medical Center Hot Line

To afford Staff the ability to report concerns anonymously, Medical Center has established a toll-free hotline. The hotline number is 1-877-376-3852 and the hours of

operation are 24 hours a day, 7 days a week. The hotline should be used to report serious concerns supported by specific facts that can be verified by investigation regarding suspected or known instances of fraud, or violations of the Code of Conduct. The Hot Line is administered by an organization independent from Medical Center and no attempt is made to identify the number from which the call is made or the individual making the call.

Compliance & Privacy Officer

The Compliance & Privacy Officer will evaluate and respond to allegations of wrongdoing, concerns and/or inquiries made in an impartial manner. To this end, all allegations will be thoroughly investigated and verified before any action is taken. All Staff are expected to cooperate fully with investigation efforts and to keep all information confidential. The Compliance & Privacy Officer can be reached at 415-925-7078.

Non-Retaliation Policy

In accordance with the Medical Center non-retaliation policy, any Staff who reports, in good faith, an alleged act of misconduct, will not be subject to retaliation or retribution. Any Staff who feels they have been retaliated against should report this immediately to Human Resources Services or to the Compliance & Privacy Officer.

Disciplinary Action

Anyone violating a provision of the Code of Conduct will be subject to disciplinary action, up to and including discharge from the organization, and may be subject to reporting to appropriate law enforcement authorities.

Disciplinary action may be taken for, but not limited to, any of the following circumstances:

- A. Authorizing or participating in actions that violate the Code of Conduct or Medical Center policies and procedures
- B. Failing to report a possible violation of the Code of Conduct or potential compliance issue
- C. Refusing to cooperate in the investigation of a potential violation
- D. Disclosing confidential information about an investigation
- E. Retaliating against an individual for reporting a potential violation
- F. Making intentional false reports of misconduct or violations of the Code of Conduct

The nature of any disciplinary action will depend upon the nature of the violation and the circumstances involved.

WRITTEN BY: Compliance & Privacy Officer

APPROVED BY:

Compliance Committee	DATE: 8/8/2011
Policy and Procedure Committee	DATE: 8/26/2011
MEC	DATE: 9/15/2011
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REVIEWED BY:

John Wood, Compliance & Privacy Officer DATE: 12/12/18

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