CODE OF CONDUCT

HANDBOOK FOR EMPLOYEES OF OSU MEDICINE CLINICS

ADAPTED FOR USE BY UNIVERSITY HEALTH SERVICES





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A MESSAGE FROM OUR LEADER

HEALTH CARE IS A CALLING and privilege based on a commitment to medical excellence and compassion for healing and the prevention of illness.

The staff, health professionals and administration of OSU Medicine are proud to serve our communities with the highest quality health care through integrity, excellence, service to others, diversity and stewardship of resources.

OSU Medicine's Code of Conduct is a valuable resource designed to outline expectations, clarify corporate values and serve as a guide for moral, ethical and legal behavior.

You are encouraged to remain familiar with our Code of Conduct and reference it for ethical questions, operational decision-making, compliance and reporting procedures.

Thank you for your service to OSU Medicine and your commitment to our patients.

Sincerely, **Bill Schloss** *Chief Operating Officer OSU Center for Health Sciences*

MISSION AND VISION

As a service organization of OSU Center for Health Sciences, University Health Services is dedicated to the mission and vision of Oklahoma State University.

MISSION

University Health Services provides comprehensive medical care to ensure the well-being of the university community and preventative education in support of students' academic success.

VISION

- Provide remarkable and exceptional care.
- **Cultivate** an inclusive environment recognizing the value of every individual.
- **Collaborate** across the university community to enhance the overall student experience.
- Lead an exemplary model for college health.
- Live by The Cowboy Code.



QUALITY OF CARE AND SERVICES PATIENT RIGHTS PATIENT PRIVACY RESEARCH

QUALITY OF CARE & SERVICES

We enrich lives by providing compassionate care and amazing service to every life we touch. OSU Medicine Service Standards

SAFETY

- Be aware of environment
- Be intentional in your actions
- Ensure accuracy
- Mitigate potential hazards

COURTESY

- Welcome and actively engage in a friendly and respectful manner
- Be responsive, polite and helpful
- Demonstrate care and concern

EFFICIENCY

- Respond to needs in a timely manner
- Organize and prioritize your work
- Be available and respect others' time
- Be innovative

PRESENTATION

- Be professional
- Have a clean and neat appearance
- Maintain a clean and organized work area
- Remember what you represent at all times

We are committed to delivering the highest quality of patient care in an honest and ethical manner. We recognize the importance of maintaining an environment that promotes integrity, well-being, comfort, dignity and respect of our patients. We strive to provide an atmosphere where patients feel valued and cared for.

We demonstrate compassion and care to the communities we serve. We provide health education, health promotion and illness prevention programs as part of our efforts to improve the quality of life for our patients and our communities.

We share in the continuing responsibility to serve our patients and communities and to maintain our good name and reputation in all that we do. We will succeed only if our reputation for honesty, integrity, quality of service and excellent care is beyond measure.

PATIENT RIGHTS

- We provide safe, comprehensive health care in a manner which acknowledges the uniqueness and dignity of each patient.
- We encourage patients and families to communicate openly with their health care team, participate in their treatment choices and promote their own safety by being well informed and actively involved in matters and decisions relating to their medical care.
- We follow all applicable laws and regulations related to patient rights.
- We make reasonable efforts to provide interpretation services for patients and their representatives with communication barriers.
- We provide patients and their representatives with the information necessary to make informed decisions about their care.
- We give patients and their representatives timely access to their medical records in accordance with HIPAA regulations.
- We provide care and services that are medically necessary and appropriate.
- We provide care in a respectful and dignified manner, without regard to race, ethnicity, color, sex, sexual orientation, gender, gender identity, national origin, age, disabilities or religion.
- We provide a process for patients and their representatives to express grievances or file complaints.

PATIENT PRIVACY

We protect the privacy and confidentiality of patient medical information, financial information and personally identifiable information. We recognize that our patients are more likely to share all information necessary for the provision of excellent care if they trust us to protect that information.

We comply fully with the Health Information Portability and Accountability Act (HIPAA) and the Health Information Technology for Economic and Clinical Health Act (HITECH). We also comply with CFR 42 Part 2 privacy and confidentiality requirements in our OSU Addiction Recovery Clinic.

OSU-CHS HIPAA POLICIES

Some of the ways we protect our patients' Protected Health Information (PHI) are:

- We only use and disclose PHI as allowed by HIPAA, and we obtain a signed patient authorization when required.
- We only use and disclose the minimum necessary PHI to perform our job duties.
- We limit discussion of patient information in public areas where we may be overheard.
- We verify patient demographic information using three (3) identifiers before releasing patient information and before accessing a patient chart; we double-check every page before giving papers to patients.
- We do not take pictures of patients for personal use or disclosure or post patient information on social media.
- We use shred bins for proper disposal of written PHI and never throw PHI in a trash can.
- We do not share passwords.
- We never leave computers or other devices that contain PHI unlocked when unattended.

RESEARCH

We adhere to an expectation of responsible and ethical behavior in research. Responsible conduct in research helps maintain the public's trust in research.

We encourage a research culture which is innovative, open and transparent. We act with integrity when planning, conducting and reporting research.

When conducting research on human subjects, we minimize harms and risks and maximize benefits; we respect human dignity, privacy and autonomy; and we strive to distribute the benefits and burdens of research fairly.

- We seek the approval of the appropriate Institutional Review Board (IRB) before conducting research, as required by regulations and OSU policies.
- We strictly follow research protocols.
- We identify and manage conflicts of interest related to research.
- We protect the rights of research participants and obtain informed consent for human subject research when required by the IRB.
- We protect the information of participants involved in human subject research.
- We take special precautions with vulnerable populations.
- We disseminate complete and accurate research results.
- We promptly report observed or suspected research misconduct.
- We strive to avoid bias in experimental design and data interpretation.

BUSINESS PRACTICES

BILLING AND CODING INTEGRITY CONFLICTS OF INTEREST GIFTS AND GRATUITIES REFERRALS BUSINESS RELATIONSHIPS

BILLING AND CODING INTEGRITY

We are committed to accuracy in coding and billing practices and to compliance with all governmental and third-party payer requirements.

We do not allow anyone who has been excluded from government health care programs to participate in OSU Medicine health care programs.

We REQUIRE our employees and other associates to report any activity that is potentially fraudulent or unethical using the appropriate reporting mechanisms.

We conduct periodic coding audits for all OSU Medicine Providers through our vendor at the American Academy for Professional Coders (AAPC). Each Provider will have 10 encounters audited per calendar year. Based on the coding accuracy of those encounters, Providers might be assigned additional audits as necessary. We also assign audits as necessary in response to alleged discrepancies and notices from regulatory authorities. We also provide various training opportunities through AAPC, which can be scheduled through the Compliance Office.

OSU-CHS REPORTING INFORMATION

- We follow federal and state laws and OSU Medicine policies and procedures to ensure our clinical billing, coding and documentation are performed accurately and timely.
- We do not present or cause to be presented any false, fictitious or fraudulent claims.
- We promptly report any suspicion of false, fictitious or fraudulent claims.
- We bill only for services that are actually provided, are medically necessary and are ordered by appropriately licensed individuals.
- We adhere to teaching physician billing requirements.
- We assign proper codes that accurately reflect the services provided.

- We cooperate fully with government and other payer auditors and their agents. We provide accurate and complete information to which auditors are entitled during an inspection or inquiry.
- We maintain appropriate and timely documentation to support coding and billing and respond to audit findings appropriately.

CONFLICTS OF INTEREST

We promptly identify and manage any actual, potential or perceived Conflict of Interest. A Conflict of Interest is a situation in which an individual's private interests — financial or otherwise — may compromise or have the appearance of compromising the individual's ability to make objective decisions related to the individual's responsibility to OSU.

OSU-CHS utilizes the COI-Smart site for Conflict of Interest disclosures and management.

COI-SMART DISCLOSURE SITE

Any staff, faculty, resident, student or other associate who receives an annual COI Disclosure notification must complete the disclosure in the COI-Smart program within the timeframe designated. When a potential Conflict arises before the next disclosure is due, the disclosure must be updated within 15 days.

- Any OSU Medicine staff, faculty, resident, student or other associate who does not receive the notification, but has an actual, potential or perceived Conflict of Interest must request access to the program from the Compliance Office.
- Potential conflicts of interest include, but are not limited to:
 - o Owning a company that contracts or competes with OSU
 - o Using OSU resources for personal purposes
 - o Supervising a family member at OSU
 - Serving as an investigator on a research study and having a significant financial interest in the company that sponsors the study

GIFTS AND GRATUITIES

We avoid even the appearance of undue or illegal influence in providing care for patients. We do not offer or accept gifts or favors in exchange for influence or assistance in a transaction. We discourage the acceptance of gifts from patients, but may accept gifts of nominal value, given as an expression of gratitude, on behalf of the entire care team.

We follow federal and state laws, OSU policies and the Oklahoma Ethics Commission Guide for State Officers and Employees with regard to the acceptance of gifts.

OKLAHOMA ETHICS COMMISSION GUIDE FOR STATE OFFICERS & EMPLOYEES

- We do not allow our medical judgment or business decisions to be influenced by gifts from pharmaceutical companies or vendors.
- We do not solicit tips or gifts from patients.
- If a patient insists on giving a nominal gift, such as a box of chocolates, it may be graciously accepted and shared with the care team. Patients who wish to give monetary gifts or gifts of more substantial value should be referred to the OSU Foundation.
- We do not accept money or anything of value in exchange for the purchase of goods or services or the awarding of contracts.
- Items that should not be accepted include, but are not limited to:
 - o Free sports tickets to an event from a patient or vendor
 - o A monetary tip for taking a patient in a wheelchair to a car

REFERRALS

We follow all laws and regulations to ensure that patient referrals are made solely on the basis of what is best for the patient seeking treatment.

We review all financial relationships with physicians and other health care providers for compliance with the Anti-Kickback Statute and the Stark Laws.

What is the Anti-Kickback Statute? A U.S. federal criminal statute that prohibits offering or receiving, directly or indirectly, remuneration (anything of value) to induce, or in exchange for, a referral of federal health care program business, including patients, items or services.

Example: A hospital provides free office space to a physician in exchange for referrals.

What is the Stark Law? A set of U.S. federal laws that prohibit a physician from referring Medicare or Medicaid patients for "designated health services" to an entity with which the physician or an immediate family member has a "financial relationship," where no Stark exception applies.

Example: A doctor who invests in an imaging center may not refer patients to the center, and the entity may not bill for the services, unless the financial relationship fits within an exception.

- We do not offer financial incentives to anyone to increase referrals.
- We do not make payments or provide benefits, such as free office space, to a physician in return for referrals.
- When applicable, all physician contractual relationships are reviewed by Legal Counsel and are fair market value for the services rendered.
- We contact OSU CHS Legal Counsel or the Compliance Office with any questions or concerns about physician arrangements.

BUSINESS RELATIONSHIPS

Only certain OSU executives are authorized to sign contracts on behalf of OSU Medicine. Any contracts signed by individuals who are not authorized by the President are void.

- A Business Associate Agreement must be executed for all business associates, as defined by HIPAA, to support protection of PHI being used to perform a service for OSU. All Business Associate Agreements should be kept on file with the Compliance Office.
- Employees who wish to receive care or medical advice from an OSU provider should do so by establishing a physician-patient relationship with the provider through scheduled appointments.

ORGANIZATIONAL RESPONSIBILITY

ENVIRONMENT AND SAFETY DISCRIMINATION AND HARASSMENT OUR COMMUNITY TRAINING

ENVIRONMENT AND SAFETY

We have the highest level of commitment to both environmental stewardship and the safety of our patients, students, staff and others who are at our facilities. We abide by all federal and state laws, regulations and OSU policies relating to the protection of the environment and safety of our campuses.

- We immediately report any situation involving contamination by a hazardous substance, improper disposal of medical waste or other safety concerns to our supervisor or Safety staff immediately.
- We report all injuries, including needle sticks, immediately to our supervisor or Safety staff and complete the proper forms.
- We participate in and apply principles learned from safety training.
- We wear personal protective equipment as required by our tasks.
- We recycle to preserve our environment.
- We conserve energy by shutting down unnecessary equipment or lighting at the end of our shifts.
- We dispose of waste properly and in the appropriate containers.
- We follow all requirements for the proper handling of hazardous materials.
- We require every department/location to draft an Emergency Action Plan (EAP) in order to respond to weather, environmental, and other potential emergency situations.

DISCRIMINATION & HARASSMENT

Oklahoma State University, in compliance with Title VI and VII of the Civil Right Act of 1964, Executive Order 11246 as amended, and Title IX of the Education Amendments of 1972 (Higher Education Act), the Americans with Disabilities Act of 1990, and other federal and state laws and regulations, does not discriminate on the basis of race, color, national origin, genetic information, sex, age, sexual orientation, gender identity, religion, disability or status as a veteran, in any of its policies, practices or procedures.

OUR COMMUNITY

OSU Medicine is a wonderful place to work and to receive care. We demonstrate this to our community by representing ourselves in a professional manner in both our external communications as well as our internal interactions.

We allow the appropriate staff to represent OSU to the media. We do this by directing all media inquiries to OSU Brand Management. We also submit all external and internal marketing materials to OSU-CHS External Affairs for approval prior to distribution.

- We do not post negative comments about OSU patients on social media.
- We recognize that we are ambassadors for OSU Medicine whenever we are wearing our OSU badge or OSU scrubs.
- We provide appropriate channels for our staff and patients to submit complaints or grievances.
- We seek advice from our supervisor if we do not know how to handle a situation with a patient or colleague.

TRAINING

All UHS employees are required to complete the following training:

- HealthStream training. This online training is required annually and includes HIPAA, Safety, FERPA, and individually tailored professional training based on your role in the organization.
- Title IX. This online training is required annually and assigned by our Title IX Coordinator.
- Safety Awareness Training. This in-person training is required annually for all State employees. It can be scheduled for departments by emailing the Chief of Security or Safety Officer.
- Cybersecurity Awareness (KnowBe4): This online training is required quarterly and provides our staff with the tools they need to keep our network and PHI safe from cyber-attacks. We also conduct simulated phishing attacks through this program to test the readiness and training comprehension of our workforce. This training is assigned by our Informational Technology and Health Information Technology Departments.

OSU Medicine also offers several training opportunities by request:

- Sterilization best practices. Contact Safety Officer or Occupational/ Student Health Nurse to schedule.
- Additional HIPAA Training. Contact HIPAA Analyst to schedule.
- Regulatory Compliance Training. This can be provided when departments need training on a specific regulation or law. Contact Director of Compliance to schedule.
- Medical Coding Training. This will be provided through AAPC and scheduled through the Compliance Office.
- Personal Protective Equipment (PPE) best practices. Contact Safety Officer or Occupational/Student Health Nurse to schedule.
- Respirator (N95) Mask Fitting. Contact Safety Officer or Occupational/ Student Health Nurse to schedule.

CORE VALUES

INTEGRITY EXCELLENCE SERVICE TO OTHERS DIVERSITY STEWARDSHIP OF RESOURCES

INTEGRITY

We are committed to the principles of truth and honesty and we will be equitable, ethical and professional.

- Treat every individual as you want to be treated.
- Be straightforward and forthright in all communications.
- Respect the confidentiality of private communication.
- Honor commitments and promises.
- Uphold the highest ethical conduct.

EXCELLENCE

We seek excellence in all our endeavors and are committed to continuous improvement.

- Embrace change.
- Encourage others by acknowledging their strengths.
- Each day do something to improve yourself personally and professionally.
- Continually seek improvements in organizational processes and services.
- Cultivate a passion for life-long learning.

SERVICE TO OTHERS

We seek to enrich lives by providing compassionate care and amazing service.

- Anticipate the needs of others.
- Provide prompt and courteous service with a positive attitude.
- Take pride in what you do.
- Put the needs of all customers first.
- Ensure our care is safe, courteous, presentable and efficient.

DIVERSITY

We respect others and value diversity of opinions, freedom of expression and diverse ethnic and cultural backgrounds.

- Seek opportunities to learn and understand the culture and background of others.
- Celebrate and appreciate our differences.
- Respect different opinions.
- Seek to understand before acting.
- Demonstrate sensitivity in all communications.

STEWARDSHIP OF RESOURCES

We are dedicated to the efficient and effective use of our resources.

- Pursue opportunities to deliver services more efficiently and effectively.
- Empower all to use our resources wisely.
- Accept individual responsibility for our actions as they affect the institution and those who learn and work here.
- Accept responsibility of the public's trust and be accountable for our actions.
- Prevent and report fraud, waste and abuse.

AMERICAN OSTEOPATHIC ASSOCIATION (AOA) CODE OF ETHICS

OSU Medicine recognizes the integral role that our physicians play in our community. We expect our physicians to conduct themselves in an ethical and professional manner and remember that they are representing the University anytime they put their lab coat on. Therefore, we have adopted the following provisions from the American Osteopathic Association's (AOA) Code of Ethics to guide our physicians in their professional lives.

These standards are designed to address the physician's ethical and professional responsibilities to patients, co-workers, the University, and themselves.

Section 1. The physician shall keep in confidence whatever she/he may learn about a patient in the discharge of professional duties. Information shall be divulged by the physician when required by law or when authorized by the patient.

Section 2. The physician shall give a candid account of the patient's condition to the patient or to those responsible for the patient's care.

Section 3. A physician-patient relationship must be founded on mutual trust, cooperation, and respect. The patient, therefore, must have complete freedom to choose her/his physician. The physician must have complete freedom to choose patients whom she/he will serve. However, the physician should not refuse to accept patients for reasons of discrimination, including, but not limited to, the patient's race, creed, color, sex, national origin, sexual orientation, gender identity, or disability. In emergencies, a physician should make her/his services available.

Section 4. A physician is never justified in abandoning a patient. The physician shall give due notice to a patient or to those responsible for the patient's care when she/he withdraws from the case so that another physician may be engaged.

Section 5. A physician should make a reasonable effort to partner with patients to promote their health and shall practice in accordance with the body of systematized and scientific knowledge related to the healing arts. A physician shall maintain competence in such systematized and scientific knowledge through study and clinical applications.

Section 6. The osteopathic medical profession has an obligation to society to maintain its high standards and, therefore, to continuously regulate itself. A substantial part of such regulation is due to the efforts and influence of the recognized local, state and national associations representing the osteopathic medical profession. A physician should maintain membership in and actively support such associations and abide by their rules and regulations.

Section 7. Under the law a physician may advertise, but no physician shall advertise or solicit patients directly or indirectly through the use of matters or activities which are false or misleading.

Section 9. A physician should not hesitate to seek consultation whenever she/he believes it is in the best interest of the patient.

Section 10. In any dispute between or among physicians involving ethical or organizational matters, the matter in controversy should first be referred to the appropriate arbitrating bodies of the profession.

Section 11. In any dispute between or among physicians regarding the diagnosis and treatment of a patient, the attending physician has the responsibility for final decisions, consistent with any applicable hospital rules or regulations.

Section 12. Any fee charged by a physician shall compensate the physician for services actually rendered. There shall be no division of professional fees for referrals of patients.

Section 13. A physician shall respect the law. When necessary a physician shall attempt to help to formulate the law by all proper means in order to improve patient care and public health.

Section 14. In addition to adhering to the foregoing ethical standards, a physician shall recognize a responsibility to participate in community activities and services.

Section 15. It is considered sexual misconduct for a physician to have sexual contact with any patient with whom a physician-patient relationship currently exists.

Section 16. Sexual harassment by a physician is considered unethical. Sexual harassment is defined as physical or verbal intimation of a sexual nature involving a colleague or subordinate in the workplace or academic setting, when such conduct creates an unreasonable, intimidating, hostile or offensive workplace or academic setting.

Section 17. From time to time, industry may provide some AOA members with gifts as an inducement to use their products or services. Members who use these products and services as a result of these gifts, rather than simply for the betterment of their patients and the improvement of the care rendered in their practices, shall be considered to have acted in an unethical manner.

SECTION 18. A physician shall not intentionally misrepresent himself/herself or his/her research work in any way.

SECTION 19. When participating in research, a physician shall follow the current laws, regulations and standards of the United States or, if the research is conducted outside the United States, the laws, regulations and standards applicable to research in the nation where the research is conducted. This standard shall apply for physician involvement in research at any level and degree of responsibility, including, but not limited to, research, design, funding, participation either as examining and/or treating provider, supervision of other staff in their research, analysis of data and publication of results in any form for any purpose.

REPORTING

REPORTING REQUIREMENTS CONTACT AND REPORTING INFORMATION

REPORTING REQUIREMENTS

We report any behavior that appears to conflict with federal, state or local laws, OSU policies and procedures, ethical behavior or this Code of Conduct. We report any matter that is inconsistent with the provision of high quality health care in a compliant manner. This is a requirement and is not optional. Failure to report may result in disciplinary action.

- Depending on the nature of a situation and the individuals involved, reports can be made to a supervisor, directly to the Compliance Office, directly to Human Resources or anonymously at the Ethics Point Hotline. Reporting activity that is in violation of OSU policy, state law and/or federal law is required. Failure to report is unacceptable.
- In addition to the internal reporting mechanisms made available by OSU, an individual may report concerns to an appropriate federal or state agency.

No retaliatory action will be taken against anyone for reporting or inquiring in good faith about potential breaches of institutional policies and procedures or for seeking guidance on how to address suspected misconduct.

CONTACT AND REPORTING INFORMATION

For all after-hours emergency reporting, contact campus security, 405-744-6523

OSU REPORTING SYSTEM

To file an anonymous report

Ethics Point Hotline: 866-294-8692 https://secure.ethicspoint.com/domain/media/en/gui/ 10933/index.html

COMPLIANCE OFFICE For compliance guidance, complaints or to file a report

OSU Medicine Compliance Office 2345 Southwest Blvd, Suite 250 Tulsa, OK 74107 P: 918-586-4561 HIPAA Hotline: 918-586-4545 chs.privacy@okstate.edu

TITLE IX CONTACTS

Office of Equal Opportunity Human Resources 414 General Academic Building Stillwater, OK 74078 405-744-1156 eeo@okstate.edu

INJURY REPORTING Faculty and staff

Human Resources, Workers' Compensation 403 General Academic Building Stillwater, OK 74078 405-744-7401 workerscomp@okstate.edu

CAMPUS SECURITY

To contact campus security OSU Police 405-744-6523 osupd@okstate.edu

Rave Guardian app https://safety.okstate.edu/safety-resources/rave-guardian.html

For personal safety tips

https://safety.okstate.edu/police/personal-safety-tips/

To view the OSU Campus Annual Security & Fire Safety Report https://safety.okstate.edu/police/clery-act/annual-security-reports. html

IT INCIDENT REPORTING To report device loss, IT breach or other IT incident OSU IT Helpdesk 405-744-HELP (4357)

helpdesk@okstate.edu

SEXUAL VIOLENCE REPORTING

1 is 2 Many 405-744-5470 1is2many@okstate.edu

To file a police report

OSU Police (on campus) 405-744-6523

Stillwater Police Department (off campus) 405-372-4171

OFFICE OF RESEARCH

For research-related concerns, questions or suggestions

Division of VP for Research

405-744-6501

vpr@okstate.edu

No retaliatory action will be taken against anyone for reporting or inquiring in good faith about potential breaches of institutional policies and procedures or for seeking guidance on how to address suspected misconduct.

POLICIES AND PROCEDURES

All UHS Policies and Procedures are available on our Sharepoint website.



University Health Services

QUESTIONS ABOUT THIS CODE OF CONDUCT?

Contact the Compliance Office at: 918-586-4561 or chs.privacy@okstate.edu