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Owner [Hector Lugo: Compliance Officer](#)
 Area [Compliance](#)
 References [Policy](#)

Corporate Compliance Program and Code of Conduct, COMP-08

POLICY STATEMENT

University of Michigan Health-West (UMHW) believes that conscientious dedication to the highest ethical standards is essential to its mission. This dedication is important because UMHW is charged with serving the community, and because a significant portion of UMHW services are reimbursed through governmental programs which properly require that business be conducted with complete integrity. To maintain high standards of health care, UMHW affirms a value-based leadership and management that foster a climate of personal responsibility and mutual accountability. UMHW is committed to meeting the highest standards of business practice and professional ethics in all its activities.

SCOPE

UMHW an assumed name of Metropolitan Hospital.

GENERAL

UMHW has always been committed to providing services in compliance with the letter and spirit of all applicable local, state and federal laws. Constant vigilance is necessary to avoid impropriety or the appearance of impropriety. Accordingly, UMHW has developed a Corporate Compliance Program (the "Program") to set standards for and monitor conduct of all the activities with which UMHW is involved. While implementation and enforcement of the Program will be centrally directed by a Corporate Compliance Officer and Committee, responsibility for compliance also rests with each and every UMHW employee and independent professional who enjoys staff privileges at UMHW Hospital.

UMHW has an outstanding reputation for integrity, a reputation to which all its Board of Directors, Medical Staff, associates and volunteers, past and present have contributed to since it's founding. This

reputation is more than a source of pride for us; rather it enables fulfillment of its mission of services to those in need. To assist in preserving and protecting these high standards, set forth in the Program, UMHW has also developed a Corporate Compliance Code of Conduct. The purpose of the Code of Conduct is to clearly define UMHW position regarding matters of integrity and ethics and to provide information that will assist its Board of Directors, Medical Staff, associates, and others in making good personal judgments when dealing with issues of integrity and ethics that arise in the course of their service.

GENERAL OPERATION AND STRUCTURE OF THE PROGRAM

A. Objectives of the Program

The objectives of the Program are:

- To assist UMHW in avoiding improper transactions;
- To assist UMHW in avoiding irregularities in payment, reimbursement and other transactions;
- To assist UMHW management in identifying areas of possible concern that might adversely affect Metro Health's good reputation, its participation in public programs, or its status as the holder of public licenses, certifications, and exemptions; and
- To provide additional oversight of UMHW compliance with laws, regulations, and special conditions imposed upon it by any licensing or regulatory authorities.

The success of the Program depends upon the active participation of UMHW senior executives, its board members, financial and claims staff, officers, and the leadership of the departments and the professional staff. Through the dissemination of the Corporate Compliance Program and Code of Conduct, and appropriate education and training, all such persons shall be fully advised regarding their responsibilities and the circumstances in which they should timely report regarding matters subject to review under the Program.

A. Establishment of a Corporate Compliance Officer

UMHW has established the position of Corporate Compliance Officer to administer and oversee the Program. The Corporate Compliance Officer is appointed by the CEO of UMHW, and reports directly to the CEO and the Audit and Compliance Committee of the Board who then reports to the UMHW Corporation Board of Directors. The Corporate Compliance Officer shall meet with the Corporate Board of Directors at least on an annual basis.

The Corporate Compliance Officer will be provided with the resources necessary to fulfill the responsibility for operation of the Program. They may inquire into any matter arising or appearing to arise within the purview of the Program, including, but not limited to, matters involving unethical conduct, irregular billing, claims, or payments and regulatory compliance.

UMHW is committed to investigate all reported concerns promptly and confidentially to the

extent possible. The Corporate Compliance Officer will obtain whatever assistance is necessary to coordinate any findings from the investigations and immediately recommend corrective action or changes that need to be made. It is expected that all individuals will cooperate with investigative efforts.

The Corporate Compliance Officer is responsible to report as to all identified concerns, inquire conducted, recommendations for action, any prosecutions or administrative actions commenced against UMHW and any violations of the Corporate Compliance Program Code of Conduct.

It should be clearly understood that the Corporate Compliance Officer is not responsible for the organization's actual compliance with applicable laws, rules and regulations or for transacting business in conformity thereto. Rather, the Corporate Compliance Officer is responsible for ensuring that the organization has in place, at all times, an effective Program and Code of Conduct, and that the applicable policies, procedures and practices are sufficient for purposes of communicating, monitoring and enforcing UMHW ongoing commitment to compliance.

Due to the importance of understanding and abiding by all of UMHW standards and procedure, the Corporate Compliance Officer or their designee shall make available to each officer, director, employee and Medical Staff member a copy of the Corporate Compliance Program and Code of Conduct, no later than 90 days from date of hire/engagement.

Each officer, director, employee and medical staff member who has received the Program and Code of Conduct shall execute an electronic confirmation or a written attestation, (i) acknowledging receipt of the Policy; (ii) confirming that the recipient has read and understood the Program and Code of Conduct; and (iii) agreeing to be bound by and to comply with all compliance policies.

B. Establishment of a Corporate Compliance Committee

To assist and serve the Corporate Compliance Officer and enable UMHW to monitor the integrity and effectiveness of the Program and Code of Conduct, a Corporate Compliance Committee (the "Committee") has been established.

1. **Composition.** The Committee shall consist of those individuals selected by the CEO of UMHW Hospital or Corporate Compliance Officer for their professional knowledge, expertise and experience to best serve UMHW and the purposes of the Program and Code of Conduct. The members of the Committee shall include members of management and senior management. They shall serve at the discretion of the CEO and Corporate Compliance Officer and may be removed without cause. Additional members of the Committee may be appointed by the CEO or Corporate Compliance Officer at any time.

In addition, task forces have been established or other reporting committees, consisting of both Committee and non-committee members, to assist the Committee in carrying out its purpose and responsibilities. The goals and objectives of the task forces have been set forth as follows:

- A. **Billing** – The Revenue Cycle Committee reviews, assesses, coordinates

and implements recommended actions related to billing and coding matters on an on-going basis. This includes reviews and maintenance with respect to the chargemaster. The committee shares and coordinates activities with the Education and Monitoring & Auditing Task Forces with respect to the necessary action relating to billing and coding.

- B. **Monitoring and Auditing** - UMHW has established ongoing monitoring and auditing activities as identified in the annual compliance workplan. A hotline, pursuant to the requirements of the federal government, will be consistently maintained to enable open communication and assist in the monitoring process. This task force performs or delegates performance of various audits.
- C. **Administrative/Legal** - UMHW believes it is essential that the CEO of UMHW Hospital and its Associate General Counsel to the Board of Directors be updated on a regular basis. This activity also addresses any issues requiring legal analysis.

- 2. **Duties.** The Committee, acting through and at the direction of the Corporate Compliance Officer, is empowered to investigate, evaluate and report facts, and make recommendations regarding possible responses and/or initiatives. Committee members will be accessible to the Corporate Compliance Officer to discuss any compliance issues or potential Program or Code of Conduct violations, which arise.

As is the case with the Corporate Compliance Officer, the Committee is not responsible for the organization's actual compliance with applicable laws, rules, and regulations, but merely ensures that a continually effective Program and Code of Conduct exists and that the requisite policies, procedures and practices most appropriate for UMHW are properly communicated, monitored and enforced on an ongoing basis.

- 3. **Quorum.** The presence of at least a majority of the regular members of the Committee shall constitute a quorum. All actions by the Committee require a majority vote of the members present. The Corporate Compliance Officer shall communicate the Committee's actions and recommendations to the appropriate UMHW officers, employees, and representatives.
- 4. **Meetings.** The Committee shall meet periodically, no less than four times per year, to review and consider any inquiries conducted or supervised by the Corporate Compliance Officer and to continue to monitor the integrity and effectiveness of the Program and Code of Conduct. Meetings may be conducted in person or by telephone. Prior to or at the onset of such meetings, the Corporate Compliance Officer shall submit to each member of the Committee an agenda enumerating those matters to be reviewed by the Committee. The CEO of UMHW Hospital or the Corporate Compliance Officer may call special meetings of the Committee. Mandatory agenda items shall include the following reports: education, disciplinary matters, HIPAA Privacy and security incidents, sanction checks, disclosures, billing, monitoring and auditing and policy matters.
- 5. **Minutes.** Written agendas for all meetings of the Committee shall be prepared and maintained in the office of the Corporate Compliance Officer together with a record

of all recommendations made by the Committee. Copies of minutes shall not be maintained by any other member of the committee, but shall be turned in at the conclusion of each meeting.

6. **Reporting and Confidentiality.** Through the Corporate Compliance Officer, the Committee will submit to the CEO and Board of Directors a written annual report summarizing its activities. Any report or document submitted by or to the Committee shall be considered and marked privileged and confidential.

The Committee has established a confidential reporting system that is accessible to all. All personnel are expected to comply with all federal and state health care program requirements and with all UMHW policies. Individuals may report any identified issues or questions associated with UMHW policies, conduct, practices, or procedures believed by the individual to be a potential violation of criminal, civil, or administrative law, without fear of retaliation or retribution.

7. **Education and Training.** The Committee will facilitate and ensure the proper education and training of corporate officers, directors, employees and medical staff and requires that all such individuals complete compliance training that addresses UMHW Code of Conduct and the operation of the Program. Attendance and participation in training and educational programs is imperative, and the failure to comply with training requirements may result in disciplinary action.
8. **Corrective Action and Discipline.** Violations of UMHW Program and Code of Conduct, failure to comply with applicable federal or state law, and other types of misconduct threaten UMHW status as a reliable, honest and trustworthy provider capable of participating in federal health care programs. Detected but uncorrected misconduct can seriously endanger the mission, reputation, and legal status of UMHW. Consequently, upon reports or reasonable indications of suspected noncompliance, the Corporate Compliance Officer and other designated management officials will initiate prompt steps to investigate the conduct in question. A determination as to whether a material violation of applicable law, or the requirements of UMHW Program and Code of Conduct, will be undertaken so that the appropriate measures, if necessary, can be commenced to correct the problem.

Where an internal investigation substantiates a reported violation, it is the policy of UMHW to initiate corrective action, including, as appropriate, making prompt restitution of any governmental agency, instituting whatever disciplinary action is necessary, and implementing systemic changes to prevent a similar violation from recurring in the future. All violators of UMHW Program or Code of Conduct will be subject to disciplinary action.

CODE OF CONDUCT

A. Introduction

UMHW is committed to providing quality care to its patients. As part of this commitment, anyone associated or affiliated with UMHW must always conduct business with absolute integrity and professionalism. This Compliance Code of Conduct (the "Code") provides guidance to ensure that the work of UMHW is performed in an ethical and legal manner and

emphasizes the shared common values, which guide our actions. The Code contains resources to help resolve any questions about inappropriate conduct in the work place

If there are any questions regarding this Code or encounter any situation, which are believed to violate provisions of this Code, immediately consult your supervisor, members of UMHW management team, or the Corporate Compliance Officer. We give our personal assurance there will be no retaliation or retribution for asking questions or raising concerns about the Code or for reporting possible improper conduct.

UMHW is committed to the ideals in this Compliance Code of Conduct. We are equally committed to assuring that our actions consistently reflect our words. In this spirit, we expect all of our colleagues' actions to reflect the high standards set forth in this Compliance Code of Conduct. No code of conduct can substitute for our own internal sense of fairness, honesty, and integrity. We ask you to assist us and all members associated or affiliated with UMHW are asked to support the values and principles, which are critical to achieving our mission.

B. UMHW Mission Statement

UMHW is relentlessly advancing health to serve West Michigan, In pursuit of our mission, UMHW has affirmed the following value statements:

- Caring, Innovation, Inclusion, Integrity, and Teamwork.

A. Purpose of Code of Conduct

The UMHW Code of Conduct provides guidance to all its employees and individuals associated or affiliated with its professional practices and assists those individuals in carrying out their daily activities within appropriate ethical and legal standards. These obligations apply to UMHW relationships with patients, affiliated physicians, third-party payers, subcontractors, independent contractors, vendors and consultants.

The Code is a critical component of the UMHW overall Compliance Program and has been developed to ensure that the organization meets its ethical standards and complies with applicable laws and regulations.

The Code is intended to be a statement that is comprehensive and easily understood. In some instances, the Code deals fully with the subject covered. In many cases, however, the subject discussed has so much complexity that additional guidance is necessary for those directly involved with the particular area to have sufficient direction. In those cases, it is recommended that a review of the specific UMHW or department policy and procedure for direction occur.

Though the concept of management autonomy is promoted by UMHW, the guidelines set forth in this Code and in UMHW policies and procedures are mandatory and must be followed.

B. Leadership Responsibilities

While all employees and individuals associated with UMHW are obligated to follow this Code, it is expected that the Board of Directors, Senior Leadership Vice Presidents, Directors and Management will set the example, and in every respect serve as models. They must help to

create a culture within UMHW, which promotes the highest standards of ethics and compliance. This culture must encourage everyone in the organization to raise concerns when they arise. No one at UMHW must ever sacrifice ethical and compliant behavior in the pursuit of business objectives.

C. **Commitment to Interested Parties**

UMHW affirms the following commitments, including following our Best Practice Standards:

To its patients - UMHW will provide quality medical care that is compassionate, promptly delivered and cost effective.

To its colleagues - UMHW is committed to a work environment which treats all individuals with fairness, dignity, and respect, and affords them an opportunity to develop professionally in a setting in which all ideas are valued.

To its employed and affiliated physicians - UMHW will provide a work environment, which has excellent facilities, modern equipment and outstanding professional support.

To its third-party payors - UMHW will work with its third-party payors in a manner, which reflects its commitment to contractual obligations and reflects its shared concern for quality health care and efficiency and cost effectiveness. UMHW encourages its private third-party payors to adopt their own set of comparable ethical principles to recognize their obligations to patients, as well as the need for fairness in dealing with providers.

To its suppliers - UMHW is committed to fair competition among prospective suppliers and the obligations and responsibilities required of a good customer.

To its volunteers - The concept of voluntary assistance to the needs of patients and their families is an integral part of the fabric of health care. UMHW is committed to ensuring that its volunteers feel a sense of meaning from their volunteer work and receive recognition for their volunteer efforts.

To the communities it serves - UMHW is committed to understanding the particular needs of the communities it serves and providing those communities quality, cost effective health care. UMHW recognizes that it has a responsibility to assist those in need and proudly supports worthy causes within the communities it serves.

To its regulators - UMHW is committed to an environment in which compliance with rules, regulations, and sound business practices are woven into the corporate culture. UMHW accepts the responsibility to aggressively self-govern and monitor adherence to state and federal laws and to its Program and Code of Conduct.

D. **Relationships with Health care Partners**

1. **Patients**

A. **Patient Rights**

UMHW strives to adhere to patient rights as defined by Medicare's

Conditions of Participation. Employees who have access to medical records must take all efforts to preserve their confidentiality and integrity, and no employee is permitted access to the medical record of any patient without a legitimate, service-related reason for so doing. Any unauthorized release of, or access to, medical records or a patient's medical information should be reported to a supervisor, HIPAA Privacy Officer, or the Corporate Compliance Officer.

B. Emergency care and patient transfers

Emergency care is an integral part of UMHW service to the community. UMHW complies with the Emergency Medical Treatment and Active Labor Act ("EMTALA") in providing emergency medical treatment to all patients, regardless of ability to pay.

2. Affiliated Physicians

Any business arrangement with a physician must be structured to ensure precise compliance with legal requirements. Such arrangements must be in writing and approved by UMHW legal counsel. For additional information please refer to the Federal Anti-Kickback Statute/Stark Law (Physician Self-Referral law) policy.

3. Third-Party Payors

A. Coding and Billing for Services

UMHW will take great care to assure that all billings to government and to private insurance payors reflect truth and accuracy and conform to all pertinent federal and state laws and regulations. The right to bill the Medicare and Medicaid programs, conferred through the award of a provider or supplier number, carries a responsibility that may not be abused. Violations can result in exclusion from the Medicare and Medicaid Program. Many people, throughout UMHW, have the responsibility for entering charges and procedure codes. Each of these individuals, including agents, is expected to monitor compliance with applicable billing rules. Any false, inaccurate, or questionable claims should be reported immediately to a supervisor or to the Corporate Compliance Officer.

Each employee and professional who is involved in submitting charges, preparing claims, billing and documenting services is expected to maintain the highest standards of personal, professional, and institutional responsibility. UMHW expressly prohibits anyone acting on its behalf from knowingly presenting or causing to be presented claims for payment or approval, which are false, fictitious, or fraudulent.

Any subcontractors engaged to perform billing or coding services are expected to have the necessary skills, quality control processes, systems and appropriate procedures to ensure all billings for government and commercial insurance programs are accurate and complete. UMHW requires such entities to have their own compliance programs and code of

conduct or to adopt UMHW Code as their own, and to regularly provide training and education to their staff regarding federal health care program requirements, accurate coding and submission of claims, policies, procedures and other requirements applicable to medical record documentation, and applicable reimbursement statutes, regulations and program requirements and directives, and to maintain records of such training.

UMHW will operate oversight systems designed to verify that claims are submitted only for services actually provided and that services are billed as provided. These systems will emphasize the critical nature of complete and accurate documentation of services provided. As part of this documentation effort, UMHW will maintain current and accurate medical records

B. Cost Reports

UMHW business involves reimbursement under government programs that require the submission of certain reports of its costs of operation. Federal and state laws define what costs are allowable and outline the appropriate methodologies to claim reimbursement for the cost of services provided to program beneficiaries. UMHW will comply with all federal and state laws relating to the filing of its cost reports.

4. Subcontractors, Suppliers, and Institutions

UMHW must manage its subcontractor and supplier relationships in a fair and reasonable manner, consistent with all applicable laws and good business practices. UMHW should always promote competitive procurement to the maximum extent practicable. The selection of subcontractors, suppliers, and vendors will be made on the basis of objective criteria including quality, technical excellence, price, delivery, adherence to schedules, service, and maintenance of adequate sources of supply. Purchasing decisions will be made on the supplier's ability to meet our needs and not on personal relationships and friendships. UMHW will always employ the highest ethical standards and business practices in source selection, negotiation, determination of contract awards, and the administration of all purchasing activities. UMHW shall inform subcontractors, suppliers and vendors of our Program and Code of Conduct.

E. Regulatory Compliance

UMHW operates in a highly regulated industry, and must monitor compliance with a large variety of complex regulatory schemes. UMHW provides a wide range of medical services, and these services may be provided only pursuant to appropriate federal, state, and local laws and regulation. The regulatory schemes govern the licenses and certifications that allow UMHW to deliver care to its patients. The continued ability of UMHW to operate and serve the community depends upon each employee's help in regulatory compliance. For additional information please refer to the Fraud, Waste and Abuse policy.

F. Business Information and Information Systems

1. Accuracy, Retention, and Disposal of Documents and Records

UMHW is responsible for the integrity and accuracy of its organization's documents and records, not only to comply with regulatory and legal requirements, but also to ensure that records are available to reflect and/or defend its business practices and actions. No one may alter or falsify information on any record or document. Medical and business documents and records are retained in accordance with the law and UMHW record retention policy. For additional information please refer to the Records Management Policy.

2. Confidential Information

Confidential information about UMHW operations is a valuable asset. Although one may use confidential information to perform their job, it must not be shared with others outside of UMHW, unless proper authorizations have been executed and the individuals have a legitimate need to know of this information and have agreed to maintain the confidentiality of the information. Confidential information includes personnel data maintained by the organization, patient lists and clinical information, pricing and cost data, information pertaining to affiliations, financial data, research data, strategic plans, marketing strategies, techniques, employee lists, and proprietary computer software. Consistent with HIPAA, we do not use, disclose or discuss patient specific information with others unless it is necessary for treatment, payment or health care operation purposes or is required by law.

UMHW colleagues must never use or disclose confidential information that violates the privacy rights of our patients. In accordance with our access and privacy policies and procedures, which reflect HIPAA requirements, no UMHW colleagues, affiliated physician or other health care partner has a right to any patient information other than that necessary to perform their job.

Subject only to emergency exceptions, patients can expect their privacy will be protected and patient specific information will be released only to a person authorized by law or by the patient's written authorization. This provision does not restrict the right of an individual to disclose, if they wish, information about their own compensation, benefits, or terms and conditions of employment.

UMHW is committed to implementing reasonable administrative, physical and technical safeguards to protect the confidentiality, integrity, and availability of electronic Protected Health Information (PHI). Security controls may include policies and procedures, technical controls for electronic information, physical controls, and corporate wide education. UMHW has a HIPAA Privacy Officer, whose responsibility is to make sure that the health information of our patients are kept secure.

3. Electronic Media

All communication systems, electronic mail, Internet access, or voice mail is the property of the organization and are to be primarily used for business purposes.

Highly limited reasonable personal use of communications systems is permitted; however, you should assume that these communications are not private. Patient or confidential information should not be sent through electronic mail or the Internet unless encryption is used. Individuals who abuse our communications systems or use them excessively for non-business purposes may lose these privileges and be subject to disciplinary action.

4. Financial Reporting and Records

UMHW has established and maintained a high standard of accuracy and completeness in the documentation and reporting of all financial records. These records serve as a basis for managing its business and are important in meeting its obligations to patients, colleagues, shareholders, suppliers, and others. They are also necessary for compliance with tax and financial reporting requirements.

All financial information must reflect actual transactions and conform to generally accepted accounting principals. UMHW maintains a system of internal controls to provide reasonable assurances that all transactions are executed in accordance with management's authorization and are recorded in a proper manner so as to maintain accountability of the organization's assets.

G. Workplace Conduct and Employment Practices

1. Conflict of Interest

A conflict of interest may occur if your outside activities or personal interests influence or appear to influence your ability to make objective decisions in the course of your job responsibilities. A conflict of interest may also exist if the demands of any outside activities hinder or distract you from the performance of your job or cause you to use UMHW resources for other than UMHW purposes. It is your obligation to ensure that you remain free of conflicts of interest in the performance of your responsibilities at UMHW. If you have any question about whether an outside activity might constitute a conflict of interest, you should consult with your supervisor and/or manager and refer to the appropriate policies for direction before pursuing the activity. For additional information please refer to the Conflict of Interest Disclosure policy (see COMP-16 Employee, COMP-13 Board).

2. Controlled Substances

Certain pharmacy operations of UMHW are registered to compound and dispense narcotics and other controlled substances and medical supplies. Improper use of these substances is illegal and extremely dangerous. UMHW requires that its employees comply with the terms of its controlled substances registration and policy, and with federal and state laws regulating controlled substances. Under UMHW policy, access to controlled substances is limited to persons who are properly licensed and who have express authority to handle them. No health care practitioner may dispense controlled substances except in the conformity with state and federal laws, and the terms of the practitioner's license.

Employees should carefully follow record keeping procedures established by their

departments and the pharmacy. Unauthorized manufacture, distribution, use, or possession of controlled substances by UMHW employees is strictly prohibited, and will be prosecuted to the full extent of the law. Any employee who knows of unauthorized handling of controlled substances is to provide the information immediately to his or her supervisor or the Corporate Compliance Officer.

3. **Copyrights**

Individuals associated or affiliated with UMHW may only make copies of copyrighted materials pursuant to UMHW policy on such matters.

4. **Diversity and Equal Employment Opportunity**

Individuals working on behalf of UMHW provide a wide complement of talents that contribute greatly to UMHW success. UMHW is committed to a policy of nondiscrimination and equal opportunity for all qualified applicants and employees, without regard to sex, race, color, citizenship status, national origin, ancestry, gender, sexual orientation, age, religion, creed, physical or mental disability, marital status, veteran status, height, weight or any other protected category. UMHW will comply with all laws, regulations, and policies related to nondiscrimination in all of our personnel actions. For additional information please refer to the Equal Employment Practice policy.

If an employee feels they or any patient has been discriminated against or harassed they should contact the Director of Human Resources, Compliance Officer, and/or Hotline for anonymous reporting so that an investigation may be initiated in accordance with UMHW policies and procedures.

5. **Harassment and Workplace Violence**

Each individual working on behalf of UMHW has the right to work in an environment free of harassment. UMHW will not tolerate harassment by anyone. For additional information please refer to the Policy Against Harassment.

UMHW will not tolerate any workplace violence. Individuals who observe or experience any form of harassment or violence should report the incident to their supervisor, a member of management, Human Resources or the Corporate Compliance Officer. For additional information please refer to the Workplace Violence Prevention Guidelines policy.

6. **Health and Safety**

All UMHW facilities must comply with government regulations and rules and with UMHW policies or required facility practices that promote the protection of workplace health and safety. It is important for you to advise your supervisor or the Safety Officer of any serious workplace injury or any situation presenting a danger of injury so that timely corrective action may be taken to resolve the issue.

7. **License and Certification Renewals**

Individuals retained as independent contractors in positions which require

professional licenses, certifications, or other credentials are responsible for maintaining the current status of their credentials and shall comply at all times with federal and state requirements applicable to their respective disciplines. To assure compliance, UMHW may require evidence of the individual having a current license or credential status. UMHW will not allow any colleague or independent contractor to work without valid, current licenses or credentials.

8. Research

UMHW follows high ethical standards in any research conducted by its physicians and professional staff. UMHW does not tolerate intentional research misconduct. Research misconduct includes making up or changing results or copying results from other studies without performing the research.

All patients asked to participate in a research project are given a full explanation of alternative services that might prove beneficial to them. They are also fully informed of potential discomforts and are given a full explanation of the risks, expected benefits, and alternatives. The patients are fully informed of the procedures to be followed, especially those that are experimental in nature. Refusal of a patient to participate in a research study will not compromise their access to services.

All personnel applying for or performing research of any type are responsible for maintaining the highest ethical standards in any written or oral communications regarding their research projects as well as following appropriate research guidelines. As in all accounting and financial record keeping, UMHW policy is to submit only true, accurate, and complete costs related to research grants.

9. Substance Abuse and Mental Acuity

To protect the interests of all individuals working on behalf of UMHW and its patients, UMHW is committed to an alcohol and drug-free work environment. All individuals must report for work free of the influence of any illegal drug or alcohol. Reporting to work under the influence of any illegal drug or alcohol, having an illegal drug in your system, or using, possessing, or selling illegal drugs while on UMHW work time or property may result in immediate termination. UMHW reserves the right to use drug testing as a means of enforcing this policy.

It is also recognized that individuals may be taking prescription drugs, which could impair judgment or other skills required in job performance. If you have questions about the effect of such medication on your performance, consult with your supervisor. For additional information please refer to the Drug and Alcohol Testing, Substance Abuse, Diversion, Possession policy.

10. Ineligible Persons

We do not contract with, employ, or bill for services rendered by an individual or entity that is excluded or ineligible to participate in Federal health care programs, suspended or debarred from Federal governments contracts; or has been convicted of a criminal offense related to the provision of health care items or services and has

not been reinstated in a Federal health care program after a period of exclusion, suspension, debarment, or ineligibility, provided that we are aware of such criminal offense. We routinely search the Department of Health and Human Services' Office of Inspector General and General Services Administration's lists of such excluded and ineligible persons. For additional information please refer to the Medicaid/ Medicare Sanction Check policy.

Colleagues, vendors, and privileged practitioners at UMHW are required to report to us if they become excluded, debarred or ineligible to participate in Federal health care programs; or have been convicted of a criminal offense related to the provision of health care items or services.

H. Marketing Practices

1. Antitrust Laws

Antitrust laws are designed to create a level playing field in the marketplace and to promote fair competition, free from collusive agreements among competitors on price or service terms. These laws apply to health care services, and UMHW is committed to full compliance with all state and federal antitrust laws.

Antitrust laws prohibit most agreements to fix prices, divide markets, boycott competitors or unreasonably restrain competition. Accordingly, UMHW will independently determine prices and terms, taking into account all relevant factors, including costs, market conditions, widely used reimbursement schedules and prevailing competitive prices, to the extent these can be determined in the market place. No oral or written understanding with any competitor concerning prices, pricing policies, pricing formulas, bids, or bid formulas, or concerning discounts, credit arrangements, or related terms of sale or service will be permitted. To avoid the possibility of misunderstanding or misinterpretation, UMHW policy prohibits any consultation or discussion with competitors relating to prices or terms, which UMHW or any competitor charges or intends to charge. Joint ventures and affiliations, which may require pricing discussions, must be individually reviewed by General Counsel and/or outside legal counsel for antitrust compliance.

Hospitals and other health care entities are often asked to share information concerning employee compensation. UMHW policy prohibits the sharing with competing health care providers of current information or future plans regarding salaries or salary levels. While UMHW may participate in and receive the results of general surveys, such surveys must conform to the guidelines for participation.

2. Marketing and Advertising

Marketing and advertising activities may be conducted to educate the public, provide information to the community, and increase awareness of UMHW services or for recruitment purposes. UMHW will only present truthful, fully informative, and non-deceptive information through its marketing and advertising resources and materials.

I. Physician Recruitment

The recruitment and retention of physicians requires special care to comply with UMHW policy and applicable law. Physician recruitment has implications under the anti-kickback laws, the Stark law, and the IRS rules governing the tax-exempt status of UMHW. Each recruitment package or commitment should be in writing, consistent with guidelines established with UMHW. All recruitment arrangements should be reviewed and approved by General Counsel of UMHW.

In general, support provided to a new physician is most likely to be acceptable if it is provided in order to persuade the physician to relocate to UMHW geographic service area in order to become a member of the professional staff, or if it is provided to a new physician completing his or her training. Support should be of limited duration. The physician cannot be required to refer patients to an affiliate of UMHW, and the amount of compensation or support cannot be related to the volume or value of referrals.

J. Tax-Exemption

Any non-profit UMHW entity serving charitable purposes holds federal tax-exempt status and is exempt from paying federal income tax on most of their revenue. Those entities may also accept tax-deductible charitable contributions from members of the community. Loss of exempt status would result in penalties, interest, and significant cost.

In order to qualify for tax exemption, the specific entity of UMHW must be operated exclusively for charitable purposes and provide a community benefit. Furthermore, none of their earnings may inure to the benefit of any private individual. Any such "private inurement" could cause that UMHW entity to lose its tax-exempt status. In addition, a private person may not receive more than an incidental benefit from UMHW assets, measured against the overall community benefit provided by the UMHW entity.

K. Environmental Compliance

Health care facilities produce waste of various types. UMHW is committed to safe and responsible disposal of biomedical waste and other waste products and the compliance with all-applicable environmental laws and regulation. Effective compliance requires ongoing monitoring and care. UMHW will operate each of its facilities with the necessary permits, approvals and controls. UMHW facilities use a medical waste tracking system, biohazard labels, and biohazard containers for the disposal of infectious or physically dangerous medical or biological waste. Individuals who come into contact with biological waste should be familiar with UMHW medical waste policy and procedures, and should report any deviations from the policy to their supervisor or the Corporate Compliance Officer.

Definition(s)

N/A

Reference(s)

N/A

Related University of Michigan Health-West Policies

[ADMIN-32 Vendor Relations](#)

[HR-03 Corrective Counseling Procedure](#)

[HR-26 Equal Employment Practice](#)

[HR-33 Policy Against Harassment](#)

[HR-34 Drug and Alcohol Testing, Substance Abuse, Diversion, Possession](#)

[HR-77 Workplace Violence Prevention Guidelines](#)

[COMP-18 EMTALA Compliance](#)

[COMP-21 Records Management Policy](#)

[RM-27 Patient Rights and Responsibilities](#)

[COMP-05 Non Retaliation](#)

[COMP-06 Reporting and Investigation of Compliance Issues](#)

[COMP-07 Fraud, Waste and Abuse](#)

COMP-13 Board of Directors Conflict of Interest Disclosure

COMP-16 Employee Conflict of Interest Disclosure

Attachments

[Corporate Compliance Annual Certification and Agreement of Compliance](#)

Approval Signatures

Step Description	Approver	Date
Approving Committee: BOD Chair	Jarrett Martus: Chief of Staff	04/2023
Approving Committee: Corporate Compliance Chair	Hector Lugo: Compliance Officer	04/2023
Approving Committee: Corporate Compliance	Thomas Fantin: VP - Information Technology	04/2023

Approving Committee: Corporate Compliance	Monica Taylor: Chief Operating Officer - Metro Health Medical Gro	04/2023
Approving Committee: Corporate Compliance	Bruce Carrier: Chief Human Resources Officer	04/2023
Approving Committee: Corporate Compliance	Greg Sieg: Contractor - Director	04/2023
Approving Committee: Corporate Compliance	Melissa Greaves: Director - Health Information Management	04/2023
Approving Committee: Corporate Compliance	Pete Haverkamp: DIRECTOR PHARMACY	03/2023
Approving Committee: Corporate Compliance	Gavin Faas: Privacy Officer	03/2023
Approving Committee: Corporate Compliance	Anita Talundzic: Compliance Coordinator	03/2023
Approving Committee: Corporate Compliance	Kate Veenstra: Associate Chief Nursing Officer	03/2023
Approving Committee: Corporate Compliance	Elizabeth Koetsier: Compliance Coordinator	03/2023
Approving Committee: Corporate Compliance	Jeff Postlewaite: VP - Medical Affairs & Medical Education	03/2023
Approving Committee: Corporate Compliance	Pete VanLaan: Associate General Counsel	03/2023
Approving Committee: Corporate Compliance	Dana Lewis: Director - Case Management/Social Work	03/2023
Approving Committee: Corporate Compliance	Tena Hoxsie: VP - Patient Financial Experience	03/2023
	Hector Lugo: Compliance Officer	03/2023