

 <p><b>SCOPE:</b></p> <input checked="" type="checkbox"/> Children's Hospital of Pittsburgh ("CHP") Main <input type="checkbox"/> Children's Hospital of Pittsburgh Satellites <input type="checkbox"/> Children's Hospital of Pittsburgh Ambulatory Clinics <input type="checkbox"/> Children's Hospital of Pittsburgh Ancillary Service <input type="checkbox"/> CHP North Surgery Center		TITLE: <b>Organizational Ethics</b>		POLICY # <b>107.04</b>
		<input checked="" type="checkbox"/> <b>POLICY/PROCEDURE</b> <input type="checkbox"/> <b>PLAN</b> <input type="checkbox"/> <b>GUIDELINE</b>		<u><b>Approval Committee Informational Review</b></u> <input type="checkbox"/> Medical Executive Committee <input type="checkbox"/> Patient Care Leadership <input checked="" type="checkbox"/> Practice Council <input type="checkbox"/> Executive Management Group
ORIGINATION DATE: 9/1997	REVIEW/REVISION DATE: 11/2000, 11/2003, 10/2011, 5/2012, 10/2014	SECTION:  Administrative	<u><b>Approval Committee Final Approval</b></u> <input type="checkbox"/> Medical Executive Committee <input type="checkbox"/> Patient Care Leadership <input checked="" type="checkbox"/> Practice Council <input type="checkbox"/> Executive Management Group <input type="checkbox"/> Department Approval Only	

**I. PURPOSE:**

This policy is designed to outline the ethical guidelines for business practices of CHP which specifically identify the areas of marketing, admission, transfer, discharge, billing conflict resolution, organizational values, and the relationship of our staff members to other providers, educational institutions, and payors.

**II. POLICY:**

It is the responsibility of all CHP employees, professional staff, and other CHP affiliates (including but not limited to vendors, contracted employees, and volunteers), hereinafter referred to as "CHP Representatives", to act in a manner which is consistent with the following statements and related policies and procedures.

CHP recognized that all patients and their families, employees, visitors, vendors, volunteers, and physician deserve to be treated with courtesy, dignity and respect. CHP is committed to acting with integrity and it shall:

- A. Market only those services that it provides
- B. Ensure that the qualifications of the professional staff are accurately stated and that the level of licensure, and accreditation is included as appropriate in any marketing material.
- C. Provide services to meet the identified needs of patients and constantly seek to avoid the provision of those services which are unnecessary
- D. Adhere to uniform standards of care throughout the organization.
- E. Ensure that employees are made aware of the need to comply with UPMC's Code of Conduct.
- F. Comply with all applicable laws, regulations and standards.

Patients shall be admitted based on their needs of the patient and the ability of the organization to provide the service. CHP shall consistently follow well-designed standards of care based upon the needs of patients and without regard to their ability to pay. CHP shall strive to provide care that meets high quality standards.

Patients who are in need of emergency services shall not be refused due to their inability to pay or any other factor(s).

CHP and its professional staff shall invoice patients and/or payors for only those services actually provided to patients and will provide assistance to patients seeking to understand the charges relative to their care. Billing practices shall adhere to all legal and regulatory requirements. CHP shall also make every effort to attempt to resolve concerns to the satisfaction of the patient, while considering the institutions best interests as well. CHP strictly prohibit conducts that constitute or could be construed to constitute illegal self-referral, self-dealing, kickbacks/or and illegal rebates.

CHP recognized the vital need to maintain patient and other information in a confidential manner. As such, patient information shall not be accessed or shared in any unauthorized manner and sensitive information concerning personnel and management issues shall be maintained in the strictest confidence and utilized only by those individuals authorized to review and act upon such information. CHP shall handle all patient information in accordance with the UPMC Notice of Privacy Practices that it provides to its patients.

All CHP Representatives are expected to support the right of patients including their right to protective services.

- A. CHP Representatives are expected to demonstrate behavior consistent with the organization's values of patient and families first, responsibility, innovation, dignity and respect, and excellence. Patients and/or their parents or legal guardians shall be involved in decisions regarding the care delivered to the extent that such involvement is practical and possible. CHP shall consistently seek to understand and respect their point of view.
- B. In all circumstances, CHP shall attempt to treat patients in a manner giving reasonable thought and consideration to background, culture, religion, and heritage.

CHP recognized that conflicts will arise from time to time among those who provide care for patients and those who participate in care decisions. These conflicts shall be resolved all fairly and objectively. The Ethics Consultation Service will be utilized as appropriate.

CHP recognized the potential for conflicts of interest exists for decision-makers at all levels within the organization. Consequently, it shall request that the disclosure of potential conflicts of interest so that the appropriate action may be taken to ensure that such conflicts do not inappropriately influence these important decisions. Board members, executive staff, directors, department managers, professional staff, and others as deemed necessary by the UPMC Office of Compliance and Ethics are required to submit an annual Conflict of Interest Statement to disclose potential conflicts related to decisions that arise during the course of the year. Persons engaging in activity that may present a conflict have an obligation to notify and/or update (as applicable) the UPMC Office of Compliance and Ethics in addition to the annual Conflict of Interest survey. The UPMC Office of Compliance and Ethics shall determine if a conflict exists and work with the individual to resolve and/or manage the conflict.

Executive Administration and Legal Services shall review all contracts with other providers, educational institutions and payors to ensure the contractual relationship does not present any potential conflict of interest or pose a threat to the hospital's mission and commitment to the patients and community it serves.

Business transactions with physicians, vendors, contractors and other third parties shall be transacted free from offers or solicitation of gifts, favors or other improper inducements in exchange for influence in patient referrals or business transactions.

CHP Representatives shall not engage in any activity or scheme intended to defraud anyone of money, property or services.

CHP required candor and honesty from CHP Representatives in the performance of their responsibilities and in communication with in-house attorneys outside counsel and auditors.

CHP Representatives shall not use for their own purposes any confidential or propriety information belonging to CHP, another person or entity.

### III. PROCEDURE:

CHP Representatives are encouraged to report violations of this policy to their designated supervisor/manager or to their Compliance Officer.

Anonymous reporting may occur by contacting either the Compliance Officer at Children's Hospital of Pittsburgh of UPMC, the UPMC Compliance Help Line (1-877-983-8442), the Department of Health or the Joint Commission.

Regardless of the reporting method, any violation of this policy must be addressed. At a minimum, the following must occur:

- A. Communicate the issue raised with the alleged non-compliant individual;
- B. Obtain a response from the alleged non-compliant individual and if necessary, investigate the issue to confirm details or obtain additional information;
- C. Address the issue by implementing an appropriate response (i.e. education, counseling, and/or corrective action in accordance with CHP policies.
- D. Document the issue and response and make the appropriate notifications with applicable regulatory agencies, governing boards, the appropriate UPMC corporate divisions, or other external organization.
- E. Follow up with any aggrieved or complaining party to effectively respond and to determine if they have any subsequent concerns or issues.

**REFERENCES:** (as applicable for procedures)

#### FORMS RELEVANT TO THIS POLICY

Form #	Name of Form
Not applicable	

#### OTHER POLICIES RELEVANT TO THIS POLICY

Policy #	Name of Policy
Not applicable	