

UtahStateUniversity_®

MESSAGE FROM THE DEAN

The Emma Eccles Jones College of Education and Human Services is committed to fostering world-class teaching, research and service, in accordance with the highest standards of integrity and ethical behavior. To succeed in our mission of providing cutting-edge clinical preparation for our students, supporting faculty research in health and human service disciplines, and extending high-quality clinical services across the lifespan to the communities we serve, we must create and maintain an environment characterized by respect and professionalism. This Code of Ethics and Conduct helps define the standards and expectations of such an environment and clarifies the legal and ethical standards to which we must all adhere.

I encourage each of you to review the Code of Ethics and Conduct and consider how it applies to your role and responsibilities within the College. Through our shared values and commitment, we are creating a truly unique interdisciplinary environment built on a foundation of honesty and fairness, grounded in evidence-based practice, and inclusive of multiple perspectives. I deeply appreciate the dedication and talent that each of you contributes to this endeavor.

Thank You,

Dr. Beth E. Foley

Dean, Emma Eccles Jones College of Education and Human Services





Purpose

Utah State University's (USU) Emma Eccles Jones College of Education and Human Services (CEHS) is committed to integrity, excellence, education, and caring. Compliance with all applicable federal and state laws and regulations is of utmost importance. CEHS is made up of a family of clinics that provide health care and services to the community. Workforce members acting on behalf of CEHS are expected to comply with relevant laws, contract agreement requirements, regulations and all applicable CEHS and University policies. Specific statutes, regulations and policies are listed in the section called "Regulations and Policies Related to the CEHS Code of Conduct."

The intent of this Code of Ethics and Conduct (Code) is to provide all workforce members and individuals included within the scope of this Code with the expected standards of conduct and behavior in their relationship with CEHS, patients and general public.

SCOPE

The code applies to all workforce members of the CEHS community including, but not limited to, clinicians, faculty and other academic personnel, staff, student employee/ trainees, and researchers. This Code is not an attempt to define everything one should and should not do, but to communicate CEHS's expectations of proper conduct and what professional conduct CEHS values. If in doubt, seek advice from your supervisor, department head, compliance officers or General Counsel.



WORKFORCE MEMBER RESPONSIBILITIES

All of us- physicians, staff, faculty, students are required to read and certify our understanding of this Code at the time of hire, and then annually thereafter. We have a general duty to conduct ourselves in a manner that will maintain and strengthen the public's trust and confidence in the integrity of CEHS. Failure to comply with this Code can have serious adverse consequences for individuals we serve as well as CEHS and the University in terms of reputation, finances, and the health and safety of the CEHS/University community. It could also result in disciplinary action up to and including dismissal of employment, and under certain circumstances, criminal or civil legal action.

We have a duty to report if we feel we are being pressured to do something we know or think is questionable or wrong, or if we believe our rights are not being respected.

We also have an obligation to report potential or known violations of the laws, rules, regulations, policies and/ or procedures.

YOUR RESPONSIBILITY TO UNDERSTAND AND REPORT

CEHS recognizes that a critical aspect of the Compliance program is the establishment of a culture that promotes prevention, detection, and resolution of instances of conduct that do not comply with the Code and all applicable laws, regulations and CEHS policies and procedures.

Reporting reflects CEHS's commitment to open and honest communication. Your reports are welcome and encouraged. If you suspect or know of a violation, you have a responsibility to report it. Failure to follow our policies or to report a suspected violation of the policies will result in disciplinary action. CEHS is relying on you to report issues or concerns. Reporting helps us identify and address issues which we wouldn't know about otherwise. All reports are taken seriously.

It is important to report concerns and violations because:

- ▶ The issue is damaging OUR workplace.
- Violations that go unreported could signal to others that policies to protect us and our community doesn't matter. That also means our ethics and integrity doesn't matter, which is not true.
- We are a team and loyal to our service mission and our colleagues. That loyalty shouldn't hold you back from reporting issues or concerns arising from your colleague's behavior or practices. It is up to all of us to help make sure that we are doing the right things the right way.

Reports can be made to:

- Supervisor
- Department head
- Compliance officer
- Internal audit department

Or through:

- E-mail
- Report form sent directly to Compliance Officer
- Telephone



CONFIDENTIALITY & NON-RETALIATION

Your report of violations may be made anonymously; however, you are encouraged to work with us in developing some method for follow-up should we have questions or need additional information regarding your report. An investigation will begin immediately regarding your concern. We will protect your confidentiality to the extent possible.

Reprisals of any nature against individuals reporting suspected violations will not be tolerated. No disciplinary action or retaliation will be taken against you when you report a perceived issue, problem, concern, or violation. CEHS supports the below policies that protect you from retaliation:

The Utah Protection of Public Employee Act (Utah Code 67-21-3) states an employer may not take adverse action against an employee because the employee, or a person authorized to act on behalf of the employee, communicates in good faith, a violation or suspected violation of a law, rule or regulation adopted under the law.

The Federal False Claims Act provides protection for "whistleblowers" who are discharged, demoted, suspended or in any other manner discriminated against in the terms and condition of employment by his or her employer in retaliation for filing a False Claims Act action.

Also, Utah State University Policy 305.5 prohibits retaliation against an individual who has made a complaint or has in any way participated in an inquiry/investigation.

If you feel as though you are being retaliated against you should contact your supervisor, department head, internal audit, or general counsel. If a violation is found, the appropriate corrective actions will be taken immediately, including possible sanctioning of those involved.

DISCIPLINARY ACTIONS/SANCTIONS

Any workforce member who violates any law, regulation, CEHS policy or the Code, or is engaged in wrongdoing which could impair our status as a reliable, honest and trustworthy healthcare provider is subject to disciplinary actions. This can include verbal or written corrective/disciplinary action, up to and including involuntary termination or separation from employment.

Disciplinary actions and sanctions could occur when you:

- Don't follow the Code or Policies and Procedures
- Break any laws or regulations that apply to CEHS
- Tell another workforce member to violate the Code, a law or a regulation
- Intimidate or retaliate against a workforce member who reports a suspected violation
- Neglect to address or report a violation of the Code, a law, or regulation committed by you or someone you supervise.

CONFLICTS OF INTEREST

CEHS is committed to dealing honestly, fairly and with integrity in all matters. A conflict of interest may occur if outside activities or personal interests influence or appear to influence an individual's ability to make objective decisions in the course of job responsibilities. A conflict of interest occurs for any workforce member when that person acts, or appears to act on behalf of someone other than CEHS and has, or appears to have a self-interest of which CEHS is unaware and that is actually or potentially adverse to the best interest of CEHS. Even the appearance of a conflict of interest may damage CEHS.



Examples of conflicts of interest:

- Involving students or post-doctoral students and trainees in work that could directly benefit a company in which the faculty member supervising the students has a personal financial interest.
- Providing or accepting incentives, kickbacks, bribes, rebates or anything else of value to any party (e.g., physicians, etc.) with the intent to influence the referrals of patients.
- A workforce member accepting or requesting any gift, favor, or service that could reasonably appear to influence the workforce member in their job.

ACCURACY OF RECORDS/DOCUMENT RETENTION & DESTRUCTION

It is our duty to create and maintain accurate and complete records, as well as only destroying records in compliance with federal and state laws and applicable policies. Contact the Compliance Officer if you have questions regarding the proper creation, amendment, maintenance, retention and destruction of organizational records and documents.

FINANCIAL REPORTING

We maintain a high standard of accuracy and completeness in the documentation and reporting of all financial records. Our financial information honestly represents actual business transactions and conforms to generally accepted accounting principles or other applicable rules and regulations. We maintain a system of internal controls to ensure accuracy and completeness in documenting, maintaining and reporting financial information.

We treat credit balances and bad debt in compliance with applicable state and federal law. In some instances, a credit balance will exist in a patient account after payment by both the patient and insurance company. We endeavor to accurately and timely track, report and refund credit balances.

CODING AND BILLING FOR PATIENT CARE

We take great care to ensure that billings to the government, third-party payors and patients are accurate and conform to all applicable federal and state laws and regulations. We are committed to timely, complete and accurate coding and billing, including the following principles:

- We bill only for services that we actually provide, document, and are medically necessary.
- We assign billing codes that we believe in good faith accurately represent the services that we provide and that are supported by documentation in the medical record according to regulatory requirements and guidelines.
- We implement controls to prevent errors such as unbundling, upcoding, duplicate billing and other government-published billing errors.
- We respond to billing and coding inquiries and timely resolve inaccuracies in previously submitted claims that are discovered and confirmed.
- We do not knowingly present claims for payment that are false, fictitious or fraudulent.



FALSE CLAIMS ACT

The False Claims Act protects government programs such as Medicare, Medicaid and Tricare from fraud and abuse. It is a violation of the False Claims Act to knowingly submit, or cause another person or entity to submit, false claims for payment with government funds. It also provides protections against retaliation for individuals reporting a false claims action.

It is illegal to submit claims for payment to the government that we know or should know are false or fraudulent. No specific intent to defraud the government is required for a claim to be a false claim. The False Claims Act defines "knowing" to include not only actual knowledge, but also instances of deliberate ignorance or reckless disregard of the truth or falsity of a claim.

We are committed to submitting claims that are accurate and truthful. If you know of a false claim, contact your supervisor, department head, or compliance officer immediately.

ELECTRONIC COMMUNICATIONS

We use electronic communication tools legally, wisely and responsibly. Some examples of electronic communications are:

- internet
- email
- text messaging
- social media

You are responsible for all of your work communications. Always respect privacy and confidentiality. Obey all applicable laws concerning copyright, privacy, and financial disclosures. Always communicate in a way that supports CEHS's best interests and reputation.

SAFEGUARD CEHS INFORMATION

Patients and their families trust us with highly personal and sensitive information. We realize the sensitive nature of this information and are committed to protect patient privacy. We do not access patient information, internally use patient information, or disclose patient information outside the organization except as necessary to perform our jobs. We are committed to complying with state and federal privacy laws, and to assisting patients with exercising their patient privacy rights. The laws include patient information that is spoken, written or in electronic form. The laws apply to past, present or future health of an individual. These laws apply to CEHS, as well as to you, even after you are no longer working here.

GUIDELINES FOR SAFEGUARDING INFORMATION

You are responsible for protecting information you access or control. Failure to protect this information may result in sanctions including termination. General guidelines for protecting ourselves and our clients are below.

- Access, use, view or send confidential information only if we are authorized and there is a valid reason to do so.
- Do not reveal restricted, confidential or proprietary information to anyone, unless required for legitimate business reasons.
- Share only the minimum necessary to meet our business needs.
- Respect the confidential or restricted information of other health care facilities or companies.
- Never accept, keep or use improperly obtained information.
- Only use other people's restricted or confidential information for permitted purposes.
- Don't ask another person to improperly disclose restricted or confidential information.
- Never post or reference restricted or confidential information on social media.
- Lock up paper documents and computer terminals when not in use.
- Encrypt all restricted and confidential information sent or stored electronically outside of CEHS.
- Comply with CEHS security and privacy policies. If you have any questions about your area's security and privacy policies, ask your Privacy or Security Officer for help.
- Follow all retention requirements for records.
- Properly dispose of all information.
- When information is no longer needed, dispose of it in a way that keeps the contents safe and private until the document can be destroyed properly.
- Never destroy a record that could be relevant to an anticipated or pending lawsuit or investigation.

RESPECT IN THE WORKPLACE

We strive for an environment that is inclusive and safe for our workforce members. Our policies are designed to promote fairness and respect for all individuals and to foster a workplace where diversity and inclusion are valued. We treat one another with respect. We do not tolerate discrimination, harassment, or retaliation.

HARASSMENT-FREE WORKPLACE

We strive to have a workplace that is free from harassment. Harassment is any behavior that unreasonably interferes with a person's job performance or creates a workplace that is intimidating, hostile or offensive. Supervisors are expected to:

- Administer CEHS policies and procedures in a way that is appropriate, consistent and does not discriminate.
- Monitor workplace and take steps to prevent and address inappropriate behavior.
- Support our policies and procedures.



REGULATIONS AND POLICIES RELATED TO THE CEHS CODE OF CONDUCT

HEALTH INSURANCE PORTABILITY & ACCOUNTABILITY ACT OF 1996 (HIPAA)

- Standard Transactions and Code Sets Rule
- Privacy Rule
- Security Rule

FALSE CLAIMS ACT

UTAH PROTECTION OF PUBLIC EMPLOYEE ACT UTAH CODE 67-21-3

USU POLICY 305-RETALIATION

USU POLICY 307- CONFLICTS OF INTEREST

CEHS HIPAA PRIVACY & SECURITY POLICIES AND PROCEDURES