HIPAA, Integrity and Compliance

| Contact Information | Providence/St. Peter Hospital  
|                     | Sharon Cockrum, SOUTHWEST WA  
|                     | Compliance Manager  
|                     | Interpretive Services  
|                     | 360. 493. 7677 |

| Participants | While at Providence St. Peter Hospital, access to medical information on patients is on a need to know basis only. This includes looking at your own record.  
|              | Remember, access to medical information on patients is a privilege.  
|              | HIPAA holds violators accountable, and civil and criminal penalties can be imposed if they violate the privacy rights of any patient. Providence has sanctions policies to hold participants accountable. System access to electronic medical information is tracked and audited.  
|              | **Important Tips:**  
|              | 1. Always limit the use or disclosure of medical information to the minimum necessary.  
|              | 1. Avoid discussions using patient names or identifiable information in public areas.  
|              | 2. When talking to or about patients, always be aware of others within earshot.  
|              | 3. Safeguard healthcare information that is stored or communicated in any manner (oral, written or electronic).  
|              | 4. Protect patient confidentiality at all times, and be alert to possible risks to patient privacy.  
|              | 5. Keep personal information you may see or hear confidential.  
|              | 6. The Providence Code of Conduct guides integrity, compliance, and ethics in our work. |
# Protecting Patients Privacy: HIPAA DO’S and DO NOT’S

| Contact Information | Providence/St. Peter Hospital  
|                     | Sharon Cockrum, SOUTHWEST WA, Compliance Manager  
|                     | Interpretive Services  
|                     | 360.493.7677  

## HIPAA Do’s

- Ask yourself, “Do I need this patient information to do my job?”
- Only discuss patient information with team members who need information and others the patient has identified.
- Honor a patient’s request if they have opted-out of the Patient Directory by not telling anyone their location.
- Close the door / curtain during patient care and when talking to the patient; speak softly in semi-private areas.
- If you go to a waiting room and are greeted by a large crowd of “interested persons,” determine who is the patient representative or family communicator and ask them to accompany you to a more private location.
- Use Shredding bins for waste that contains patient information.
- Sign and return your Acceptable Use and Confidentiality Agreement.
- Wear your ID badge face out and above the waist so patients and visitors can easily identify you.

## HIPAA Do Not’s

- Do not talk about patients in public places, the elevators or cafeteria.
- Do not about patient information with someone who does not have a need to know.
- Do not walk away from open medical records in unattended or easily accessible areas.
- Do not take pictures of patients’ at Providence.
- Do not post confidential information on Facebook or other social media sites.
## Violations

You are part of the eyes and ears of Providence – you need to tell management of your concerns because they don’t have access to the same information and knowledge that you do.

### Examples of what to report:

- Theft or fraud
- Violation of privacy of employee/patient records
- Inappropriate gifts and entertainment
- Code of Conduct and policy violations
- Billing and coding concerns
- Retaliation

### Who to Contact

If you encounter an issue that violates the Code of Conduct or a Providence policy, or you think an issue might be unethical or illegal, you need to speak up.

There are a number of people you can talk to about your concerns, including:

- Your manager or a higher-level supervisor.
- Compliance Manager 360. 493.7677 or another departments such as Human Resources or Security.
- Call the Integrity Line at 888-294-8455. Available 24 hours a day, 7 days a week

All calls are strictly confidential and anonymous

Providence has a non-retaliation policy that prohibits anyone from being punished or treated unfairly just because they asked a question or reported an issue. Retaliation is a negative action against anyone for reporting good-faith concerns.

If you suspect that someone is committing fraud against the government, such as improper billing, you are required to report this concern to the Integrity and Compliance Program.

It is also important to report any retaliatory behavior that you are aware of – we can’t correct what we don’t know about!
## HIPAA, Integrity and Compliance

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### Integrity

- Each of us are accountable for the integrity of your decisions and actions at Providence.
- You are responsible for protecting Providence’s assets.
- This can include things like supplies or the use of your time.
- The Providence Code of Conduct guides integrity, compliance, and ethics in our work.
- It is available on both the Providence intranet site and the internet site.
- Please review the “Code of Conduct” handbook provided with this training. Be sure to ask questions about anything you are not clear about! You are expected to follow the “Code of Conduct” standards as well as the policies and procedures pertaining to your own experience.
- All workforce members are expected to follow the Code of Conduct.
- Ensure safeguards for protecting patient confidentiality.
- Soliciting or accepting a gift is prohibited. We do not accept gifts of cash from any source, including vendors.
Providence Code of Conduct

Doing The Right Thing Right
MESSAGE FROM JOHN KOSTER, MD, PROVIDENCE HEALTH & SERVICES PRESIDENT/CEO

WHY WE HAVE A CODE OF CONDUCT

HOW WOULD I USE THE CODE OF CONDUCT?

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BUSINESS AND FINANCIAL INFORMATION

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GLOSSARY OF TERMS
MESSAGE FROM JOHN KOSTER, MD,
Providence Health & Services President/CEO

Dear Colleague,

We live during a time where trust and confidence in business have been shaken. As people of Providence we are fortunate to work for one of the most respected health and services organizations in the country – focused on our Mission and core values in all we do.

One lesson we all learn early in life is to “do the right thing.” Providence Health & Services has thrived around our commitment to doing the right thing. The Sisters of Providence set our ministry on a clear path from its earliest days as they provided medical care, education and housing to all who sought their help, especially the poor and vulnerable.

Maintaining the integrity of the heritage and tradition of our ministry is the responsibility of each person of Providence. Our Integrity and Compliance Program helps to ensure that we are following our ethical commitments, laws, rules and regulations that govern our business conduct and helps to discourage, prevent and identify violations.

Our Code of Conduct will help you to fully understand the expectations we have and the critical importance of being honest and fair in all our business interactions with our customers, patients, members, payers and vendors. It also details how to report a violation or concern about potential illegal or inappropriate actions that have occurred.

Please review this Code of Conduct thoroughly and discuss any questions you may have about these standards with your supervisor. Every person of Providence is expected to take an active part in maintaining the integrity and compliance of our ministry. Thank you for your participation and your commitment to this process.

John Koster, MD,
Providence Health & Services President/CEO
MISSION
As people of Providence, we reveal God's love for all, especially the poor and vulnerable, through our compassionate service.

VISION
Together, as people of Providence, we answer the call of every person we serve: Know me, care for me, ease my way.

CORE VALUES

Respect
All people have been created in the image of God. Genesis 1:27
We welcome the uniqueness and honor the dignity of every person. We communicate openly and we act with integrity. We develop the talents and abilities of one another.

Compassion
Jesus taught and healed with compassion for all. Matthew 4:24
We reach out to people in need and give comfort as Jesus did. We nurture the spiritual, physical, and emotional well-being of one another and those we serve. We embrace those who are suffering.

Justice
This is what the Lord requires of you: act with justice, love with kindness and walk humbly with your God. Micah 6:8
We believe everyone has a right to the basic goods of the earth. We strive to remove the causes of oppression. We join with others to work for the common good and to advocate for social justice.

Excellence
Much will be expected of those who are entrusted with much. Luke 12:48
We set the highest standards for ourselves and for our ministry. We strive to transform conditions for a better tomorrow while serving the needs of today. We celebrate and encourage the contributions of one another.

Stewardship
The earth is the Lord's and all that is in it. Psalm 24:1
We believe that everything entrusted to us is for the common good. We strive to care wisely for our people, our resources and our earth. We seek simplicity in our lives and in our work.
WHY WE HAVE A CODE OF CONDUCT

Our Mission and core values provide guidance and inspiration as we make sound ethical choices to deliver quality care and services while meeting our organizational goals. The Providence commitment to integrity is a vital part of who we are as a Catholic health care and education ministry.

The Providence Code of Conduct provides us with a set of standards that guides our decision-making and our commitment to “doing the right thing right.” This means conducting our business within appropriate ethical, legal and regulatory standards, and complying with Providence’s policies and standards.

In addition to the Code of Conduct, there are system, region, facility, service line and institution policies, procedures and standards that may apply to your work. Copies of these can be obtained through your supervisor, manager or the Providence intranet.

Health care practitioners who are granted privileges at Providence ministries are governed by medical staff by-laws and must follow them. These by-laws provide a process for resolving ethical and compliance issues related to the practice of medicine at Providence. Educators within Providence education ministries must follow specific policies applicable to those ministries.

HOW WOULD I USE THE CODE OF CONDUCT?

The Providence Code of Conduct asks you to reflect on our Mission and core values as you apply ethical and legal standards to your work. Our Code of Conduct helps you answer these questions:

- Are my actions and decisions consistent with Providence’s Mission and core values?
- Am I supporting the spirit, as well as the letter of laws, regulations, policies and standards?
- Can I explain my actions or decisions without embarrassment to family, friends, co-workers, students or patients?
- Would my behavior harm Providence’s reputation in the community or as a ministry focused on health care, education and those in need?
- Who should I contact if I believe a violation has occurred?
- What do I do if retaliation occurs when I raise a concern?
- Who can help me if I still have questions?
- How do I contact my local integrity, compliance and privacy representative?

For contact information, see For More Information inside the back cover.
INTEGRITY AND COMPLIANCE
We communicate openly and we act with integrity.

PROVIDENCE FOUR-STEP REPORTING PROCESS:
1 Contact your immediate supervisor
2 department manager
3 regional compliance and privacy coordinator or manager.
4 Call the 24/7 Providence Integrity Line at (888) 294-8455.
Providence promotes compliance with all applicable laws and regulations, this Code of Conduct and Providence policies and standards. Our integrity and compliance program applies to:

1. All organizations of which Providence is the sole or majority member or shareholder.
2. Providence workforce members - all employees, board of directors, community ministry board members, foundation board members, volunteers, trainees, independent contractors and other persons under direct control of a Providence entity, whether or not they are paid by Providence.

The audit and compliance committee of the System Board provides oversight and direction for the integrity and compliance program. Providence’s vice president/chief risk officer serves as Providence’s chief compliance officer.

System and regional compliance offices are responsible for the day-to-day direction and implementation of the integrity and compliance program. This includes developing resources (policies, procedures, education programs and communication tools), providing support (managing the Providence Integrity Line and other reporting mechanisms), conducting program assessments and providing advice to facility compliance representatives and others.

Providence’s human resources managers also are highly knowledgeable about many of the employment and workplace compliance risk areas described in this Code of Conduct. You are encouraged to report any concerns about your work situation to your local human resources office. Providence integrity and compliance professionals work closely with human resources to investigate and resolve issues relating to employment and workplace situations.

**Reporting an Issue**

Providence expects that integrity, compliance or legal concerns will be promptly reported. Each Providence workforce member has a responsibility to report any activity that appears to violate laws, rules, regulations, standards, federal health care conditions of participation or this Code of Conduct.

If you have a concern that you believe poses a **serious or immediate** compliance risk that can significantly impact licensure, reimbursement, accreditation or may lead to a major legal claim, report these concerns either directly to the system integrity office or to your regional compliance office as provided under Providence’s Early Reporting policy (PROV-ICP-717).

Other integrity, compliance and legal concerns are reported using the Providence four-step reporting process:

1. Discuss the issue or concern with your immediate supervisor.
2. Discuss the issue or concern with the department manager.
3. Contact your local or regional compliance or privacy representative or manager.
4. Call the 24/7 Providence Integrity Line at (888) 294-8455. You may report concerns through this line anonymously.

If you feel uncomfortable with steps 1, 2 or 3 for any reason, go to the next step or call the Providence Integrity Line.

The Providence Integrity Line is answered by a third-party company who sends all reports to a Providence compliance office for investigation. Callers receive a tracking number to retrieve information about the status of their report.

If you report a concern anonymously, it is important to clearly describe the situation, provide a ministry location and give enough detail so that your concern can be properly investigated and resolved. We may not be able to investigate your concern if you do not provide us with enough factual information.

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For contact information, see For More Information inside the back cover.
Confidentiality of Reports
We make every attempt to protect the confidentiality of information provided in connection with a reported concern, to the extent allowed by law, unless maintaining confidentiality could create a significant health or safety risk, or could significantly impair Providence’s ability to conduct a complete investigation.

Retaliation Will Not Be Tolerated
Providence prohibits any action directed against any Providence workforce member for reporting concerns in good faith or who assists in the investigation of a concern. A manager, supervisor, employee or other workforce member who engages in retaliation or harassment directed at a person who raises a concern, is believed to have raised a concern or assists in an investigation is subject to disciplinary action in accordance with Providence policy.

Corrective Action
Where an internal investigation substantiates a reported violation, Providence will initiate corrective action, including, as appropriate, refunding overpayments, notifying the appropriate government agencies, taking disciplinary action and/or implementing other corrective actions to prevent a similar violation from occurring in the future.

Employee Responsibilities
- Follow the Providence Code of Conduct.
- Perform your job duties in accordance with all federal and state laws or regulations that apply.
- Participate in integrity and compliance program training and job-specific compliance education or departmental training as necessary for your job duties.
- Report all concerns or alleged violations promptly.
- Keep information obtained at Providence confidential.
- Whenever you are in doubt about something, ask questions.

Leadership Responsibilities
- Support the Providence commitment by upholding our Mission and core values.
- Model ethical behavior and foster a culture of transparency by listening and being receptive to employee concerns about integrity and compliance-related issues.
- Ensure that written compliance policies and procedures specific to your department are developed and followed.
- Provide employees with initial and continuing integrity and compliance education and document that education.
- Monitor and ensure compliance with the Code of Conduct, Providence policies and standards, and federal and state laws and regulations.
- Take appropriate corrective or disciplinary action to resolve issues when necessary.
- Prevent retaliation against any employee who reports, supplies information about or assists in an investigation into an integrity or compliance concern.

PROVIDENCE FOUR-STEP REPORTING PROCESS:
1. Contact your immediate supervisor
2. department manager
3. regional compliance and privacy coordinator or manager.
4. Call the 24/7 Providence Integrity Line at (888) 294-8455.
PATIENT STANDARDS
We nurture the spiritual, physical and emotional well-being of one another and those we serve.
Quality of Care and Patient Safety
At Providence, we define quality as the degree to which health services increase the likelihood of desired outcomes and are consistent with professional knowledge. We believe all health care should be:

- safe, to avoid injuries to patients from the care that is intended to help them
- timely, to reduce waits and potentially harmful delays for those who receive care
- effective, in that we match care to science to provide appropriate care
- efficient, to avoid waste and to maximize value
- equitable, to ensure care does not vary in quality, regardless of patient characteristics
- patient, and family centered to honor the individual and respect choice

We are committed to providing the best care and service at every patient encounter. Quality and safety goals are outlined in our Quality Strategic Plan. This plan is centered on meeting or exceeding national standards for quality care and patient safety, which is essential to providing the best care every time.

Community Benefit
We provide services and programs for those who are poor and vulnerable and experience difficulty in accessing health care through a wide variety of community benefit programs. Community benefit includes charity care, the unpaid costs of government-sponsored health care programs, community health services, health professional education, subsidized health services and research.

Disruptive Behaviors
Our core value of compassion leads us to nurture the spiritual, physical, and emotional well-being of those we serve. We apply this value to our work with each other and to the care and service we provide to those we serve.

In keeping with this core value, workforce members, medical staff members and allied health professionals are expected to treat others with respect and courtesy, and to conduct themselves in a professional manner. Expected behaviors that contribute to a positive patient care environment include:

- speaking in a respectful manner to patients, families, nurses, physicians, facility personnel and others in private and public places
- responding to requests for information in a timely and supportive manner whether related to clinical care delivery, collegial and professional interactions, or to patients and families
- handling conflicts, disagreements and other differences of opinion in appropriate settings and through appropriate administrative channels
- offering constructive feedback to improve patient care and operations
- practicing in a manner consistent with medical staff bylaws and regulations

Disruptive behavior is a style of interaction between workforce members, physicians, patients, family members, or others that interferes with patient care. Examples of disruptive behaviors may include, but are not limited to:

- threatening or abusive comments
- profanity or similarly offensive language
- demeaning behavior such as name-calling
- criticizing other caregivers in front of patients or other staff
- racial or ethnic jokes or comments
- inappropriate physical contact, sexual or otherwise
- sexual comments or innuendo
- refusal to cooperate with other workforce or medical staff members
- refusal to abide by organizational policies, rules and regulations or medical staff bylaws or to perform patient care responsibilities

As recommended by the Joint Commission and the American Medical Association, medical staff governance documents should address disruptive behaviors and establish a process for reviewing and acting on allegations of disruptive behaviors within the patient care environment.

PROVIDENCE FOUR-STEP REPORTING PROCESS:
1. Contact your immediate supervisor
2. Department manager
3. Regional compliance and privacy coordinator or manager.
4. Call the 24/7 Providence Integrity Line at (888) 294-8455.
Emergency Medical Treatment and Labor Act (EMTALA)

Providence complies with the Emergency Medical Treatment and Labor Act (EMTALA). We screen and provide stabilizing treatment to everyone who comes to a Providence hospital requesting examination or treatment for an emergency condition. We do not delay medical screening exams or stabilizing care in order to request patient financial information. We transfer emergency patients only when they request a transfer or when we lack the capability or the capacity to provide appropriate treatment and only after administering the appropriate stabilizing care.

Patient and Resident Rights

We inform our patients and residents in applicable facilities of their rights. We expect people of Providence to uphold and respect these rights.

Each Providence patient or resident is provided with a written statement of their rights and a notice of privacy practices. These statements include the rights of a patient or resident to make decisions regarding their medical care, the right to refuse or accept treatment, the nature of the facility’s Catholic sponsorship, the right to informed decision-making and a patient’s or resident’s rights related to his or her health information maintained by Providence ministries. These statements conform to all applicable state and federal laws, including but not limited to the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

Patient and Member Information and Privacy

Providence treats the protected health information (PHI) of patients and members with special care. There are numerous federal and state laws that protect the privacy and security of a patient’s information including the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and the Health Information Technology for Economic and Clinical Health Act (HITECH).

We collect PHI to provide quality care and service and will protect access to this information whether it is contained in a computer system, medical record or other documents. Consistent with HIPAA and applicable state law, we do not access, use, disclose or discuss patient-specific information with others unless it is necessary to serve the patient or complete our job duties, except as required by law, or if the patient has authorized the release. Employees are at personal risk for violations of HIPAA, including potential fines and/or jail time.
Questions To Ask About Whether You Are Protecting Patient Privacy:

- Do I have a need to know this information as part of my job?
- Can I get my job done without reviewing all of the patient's information?
- Do I understand the policies and standards that apply to this information?
- Do I avoid sharing this information in public, including public venues such as social networking sites?
- Do I protect this information from being viewed or seen by others? Have I properly disposed of the patient's information?
- If I am unsure about accessing information, do I get guidance from my manager, facility or regional privacy officer, or regional information security officer?

Providence workforce members will not access, use or disclose information that violates the privacy rights of our patients. Under Providence's privacy policies, standards and procedures, no one has a right to access patient information other than when necessary to perform his or her job. Report suspected theft, loss or inappropriate uses or disclosures of PHI promptly to your local or regional privacy officer, the system privacy officer or the Providence Integrity Line at (888) 294-8455.

Consult our system, region and facility privacy and security policies and standards for further information on how to safeguard confidential and protected health information. You may also contact your local or regional compliance and privacy representative, the regional information security officer or the system privacy officer with questions.

Best Practices for Safeguarding Patient Information:

- Do not leave patient information showing on computer screens. Activate your screensaver or log off your work station when away for extended time periods.
- Do not leave charts or other confidential information open and visible on desks or counters.
- Shred printed documents containing patient data when you are done with them or place in designated secure shred bins.
- Use the minimum necessary information for payment and operations purposes.
- Avoid patient-related discussions in public areas and on social networking sites.
- Avoid informal or casual discussions of patient situations which are not directly related to care.
- Do not leave voice or phone messages containing sensitive information.
- Avoid inadvertent disclosures and take special care in situations that are not private.
- Follow secure e-mail and fax policies for transmitting protected health information (PHI) only to those with a need to know.
- Double-check fax numbers to ensure a fax is directed to the correct recipient. If a fax is sent in error, immediately contact the recipient and request destruction or return of the fax.
- Do not take patient data off-site, except as necessary and in accordance with Providence and department policies.
- Never leave patient data, whether stored on an electronic device or on paper, in a vehicle.
LEGAL AND REGULATORY COMPLIANCE
We set the highest standards for ourselves and for our ministry.

For contact information, see For More Information inside the back cover.
Licensure, Certification and Excluded Individuals

Providence verifies the qualifications of health care professionals who treat our patients and educators who serve our students. Providence health care and education professionals are required to follow all applicable licensing, credentialing and certification requirements.

Federal and state laws prohibit Providence from employing or retaining anyone who has been excluded from participation in government programs. We regularly review published information to check for excluded individuals. When individuals have been excluded, they cannot be Providence employees, providers or vendors.

Providence will not employ, contract with or bill for services ordered, rendered or supervised by an individual or entity that is excluded, suspended, debarred or ineligible to participate in a federal health program, or has been convicted of a criminal offense relating to the provision of health care items or services and has not been reinstated in a federal health care program.

Workforce members are required to notify their manager, human resources, and/or the Providence regional compliance office or system integrity office if they receive notice that they will be or have been excluded from participation in any federal or state program.

Fraud, Waste and Abuse and False Claims

The services provided by Providence are governed by a variety of federal and state laws and regulations. These laws and regulations cover subjects such as false claims, illegal patient referrals, providing medically unnecessary services, violations of Medicare’s Conditions of Participation, submission of cost reports and other regulations. Providence is committed to full compliance with these laws and regulations.

Providence expects that those who create and file claims for payment to Medicare, Medicaid and other payers will file claims that are accurate, represent the services actually provided and indicate the conditions under which the patient received services. Billing for clinical trials will follow clinical trial billing protocols and will be submitted in accordance with federal requirements.

The following principles guide our compliance:

- Charges will be submitted only for services or supplies that are provided to the patient/resident/client and are accurately and completely documented in the medical record or other supporting documentation.
- Charges that accurately represent the level of service provided to the patient/resident/client will be billed.
- Only those services that are medically necessary and are supported by valid orders will be submitted for payment to Medicare, Medicaid and other payers.
- Under no circumstances will charges or codes be purposely selected to improperly increase the level of payment received.
- Overpayments will be reported and refunded as required by law.
- Cost reports will be accurate and filed in a timely manner.

Providence monitors billing, coding and cost reporting to detect errors and inaccuracies that could result in false claims for payment. If you believe that a false claim could be submitted, report your concern to a compliance representative or to the Providence Integrity Line.

PROVIDENCE FOUR-STEP REPORTING PROCESS:

1. Contact your immediate supervisor
2. Contact the department manager
3. Contact the regional compliance and privacy coordinator or manager.
4. Call the 24/7 Providence Integrity Line at (888) 294-8455.
**Referrals**

Federal and state Anti-Kickback Statutes and the federal Stark Law apply to relationships between hospitals and physicians. We structure our relationships with physicians to ensure compliance with these laws, with our policies and procedures and with any operational guidance that has been issued.

**Key Principles**

- **We do not pay for referrals.**
  
  We accept patient referrals and admissions solely on the patient’s medical needs and our ability to render the needed services. We do not pay or offer to pay anyone for the referral of patients. An example would be to offer discounted rent or free office space.

- **We do not accept payments for referrals we make.**
  
  No person acting on behalf of Providence may solicit or receive anything of value, directly or indirectly, in exchange for the referral of patients. When we make patient referrals to another health care provider, we do not take into account the volume or the value of referrals that the provider has made or may make to Providence.

If you have questions about a physician relationship, contact the department of legal affairs or your regional compliance office.

**Research and Clinical Trials**

Providence physicians and professional staff follow the highest ethical standards and comply with all laws, regulations, guidelines and ethical directives that govern human, animal, basic science and applied science research. We participate with other organizations responsible for protecting research participants, investigators, and sponsors. All Providence ministries maintain and communicate accurate information regarding research projects, and submit true, accurate and complete costs related to research grants. We actively promote excellence in all aspects of research.

We do not engage in research misconduct, which includes activities such as falsifying results, failing to identify and deal appropriately with investigator or institutional conflicts of interest, and proceeding without Institutional Review Board (IRB) approval or failing to follow the approved IRB protocols. Our first priority is to fully inform and protect those patients who are enrolled as human subjects and to respect their rights during research, investigation and clinical trials.

Providence promotes research consistent with its core values of providing services with concern for the responsible stewardship of resources. Such research also must be consistent with Catholic ethical principles.

For contact information, see For More Information inside the back cover.
Gifts and Entertainment

Accepting gifts and offers of entertainment creates a risk that our judgment and decisions can be influenced. In some cases, acceptance of gifts and entertainment may be considered a violation of federal and/or state laws.

Providence’s reputation is based on its commitment to integrity in the delivery of quality patient care and other services. For this reason, Providence workforce members are expected to keep relationships with patients and their family members, students and their families, members, vendors, non-employed physicians and their offices and other third parties impartial, and avoid accepting gifts or other items of value including:

- meals
- tickets to events
- special favors or loans
- discounts or free services
- tips and gratuities
- paid travel for spouses

Cash or cash equivalents, such as gift certificates or gift cards from anyone other than Providence, may never be accepted. Gift certificates and gift cards from Providence are taxable regardless of their value.

You may not accept any gift if the circumstances surrounding the giving and receipt of the gift indicate the intent to influence your behavior or decision making.

You may accept gifts valued at less than $100, such as an occasional consumable gift, if shared among employees within your department or unit. Common examples might include a fruit basket or box of chocolates.

Infrequent meals of modest value may be accepted by individual Providence workforce members in connection with education or business presentations or discussions. Generally, offers of entertainment should not be accepted. On the rare occasion where entertainment is offered in conjunction with business discussions, both parties must be present and the offer should be infrequent, of modest value and in a setting conducive to discussing business.

Report all entertainment and any gift greater than nominal value according to your facility procedures. Generally, nominal value means the item or service has little or no real value to anyone.

Questions To Ask Before Accepting A Gift:

- Is this a personal gift?
- Is this a cash gift? A gift card? A gift certificate?
- Would I feel uncomfortable disclosing acceptance of this gift to other Providence employees? Patients? Friends or family members?
- Is this gift being offered to me because my job at Providence might influence a decision in favor of the donor?

If you answered “yes” to any of the above questions, the gift does not meet Providence’s ethical standards, our Code of Conduct or legal requirements. Providence ministries or service lines may have more restrictive gift standards. Workforce members will follow the more restrictive standard. Contact your local or regional compliance representative for questions on gifts. You may also direct anyone offering a gift to a Providence foundation.

PROVIDENCE FOUR-STEP REPORTING PROCESS:
1. Contact your immediate supervisor
2. department manager
3. regional compliance and privacy coordinator or manager.
4. Call the 24/7 Providence Integrity Line at (888) 294-8455.
Conflicts of Interest

Conflicts of interest occur when personal interests or activities influence or appear to influence your actions and decisions. They also occur when we allow another interest to be more important to our decisions than the interests of Providence and its patients, members, students, residents, and customers.

As Providence workforce members, we avoid activities and relationships that may impair our independent judgment and unbiased decision-making. We do not use our positions for personal gain or advantage, or to assist others, including family members, from profiting in any way at the expense of Providence.

Conflicts of interest may arise from many sources including, but not limited to, financial interests of ourselves or a family member; service, employment or consulting arrangements with a Providence competitor; the receipt of gifts from vendors or others with whom we do business; or use of Providence resources to benefit an outside interest or our own personal interests.

Providence’s Conflicts of Interest policy provides additional guidance. Directors, officers, senior managers and other key employees are required to complete and submit a conflict of interest disclosure form annually. Other workforce members are required to disclose — to their immediate supervisors, to their regional compliance office or system integrity office — any real or potential conflicts of interest prior to making any decision or taking any action that is or may be affected by the conflict.

Potential conflicts of interest are reviewed and acted on as required. Contact the system integrity office or your regional compliance office if you have a question about a conflict of interest.

Lobbying and Political Activities

As a tax-exempt organization, Providence follows current legal and regulatory requirements for all lobbying and political activities. Providence will not participate or intervene in any political campaign for or against a candidate for public office. Providence employees may not engage in political activities on company time, but may do so on their own time. Employees with questions about lobbying or political activities are advised to contact the department of legal affairs.

Antitrust

Antitrust laws preserve and protect competition in goods and services. Antitrust violations are serious and may result in criminal charges, substantial fines and imprisonment. Providence will not engage in conduct that is illegal under antitrust laws.

Antitrust issues are complex. If you have any questions or concerns about whether a practice may be questionable, contact the department of legal affairs.

Contact by Government Investigators

Providence is committed to responding appropriately to and not interfering with any lawful government inquiry, audit or investigation. If you are contacted by a government investigator with a request for information, please follow these steps:

1. If contacted in person, ask the investigator(s) for identification and note the name, title and office location. If contacted by telephone, ask for and note the name, title, office location and a return phone number for the caller.
2. Contact your supervisor and the regional compliance office as soon as possible.

A government investigator may ask you to participate in an interview. You are free to do so, but are under no obligation to do so. If you do grant an interview to a government investigator, you should be aware that anything you say can be used against you in a criminal prosecution or in a civil enforcement proceeding. This is true regardless of whether the officer gives you any Miranda warnings. You may also request that legal counsel be present before you talk with any investigator.

If the investigating officer asks you to participate in an interview, and you would like to do so but would like legal counsel to be present at the interview, we will make counsel available for that purpose — free of charge to you. Contact the department of legal affairs.
WORKPLACE ENVIRONMENT STANDARDS
We strive to care wisely for our people, our resources and our earth.

PROVIDENCE FOUR-STEP REPORTING PROCESS:
1. Contact your immediate supervisor
2. Contact department manager
3. Contact regional compliance and privacy coordinator or manager.
4. Call the 24/7 Providence Integrity Line at (888) 294-8455.
Protecting Employee Information

During the hiring process, Providence collects personal information about employees. To protect our employees’ personal information and right to privacy, Providence will:

- take measures to safeguard employees’ personal information
- protect the confidentiality of employees’ personal information when dealing with third parties
- restrict access to such information to the employee and those with a legitimate business or legal need

Discrimination, Harassment and Workplace Violence

Providence is committed to maintaining a workplace free of discrimination, harassment, violence and other abusive conduct.

Harassment includes unsolicited remarks, gestures or physical contact; displays or circulation of written materials or pictures derogatory to any protected group (i.e., based on gender, race, ethnicity, religion, sexual orientation, disability, etc.). This list is not all-inclusive.

No form of harassment or workplace violence will be tolerated. Any such conduct will result in disciplinary action, up to and including dismissal.

Our employees will promptly report any incident of discrimination, harassment, workplace violence or other abusive conduct to their supervisor, human resources or to the Providence Integrity Line.

Health & Safety

Providence ministries comply with government regulations. Our policies and practices also promote the protection of workplace health and safety. We share a responsibility in understanding how these policies and practices apply to our job responsibilities and we seek advice when we have a question or concern.

We have an obligation to report any serious workplace injury or any situation presenting a danger of injury, so timely corrective action may be taken to resolve the issue. Employees should report injuries according to local facility policies.

Stewardship of Providence Resources

Providence is committed to effective stewardship of its resources in support of its patient care and other organizational goals. Our assets should only be used for legitimate business purposes. Incidental and minor personal use of computers is permitted provided such use is not for personal financial benefit or gain, and does not interfere with your job or the ability of others to do their jobs. If you have a question about use of Providence resources, contact your supervisor for guidance.

For contact information, see For More Information inside the back cover.
BUSINESS AND FINANCIAL INFORMATION
We strive to transform conditions for a better tomorrow while serving the needs of today.

PROVIDENCE FOUR-STEP REPORTING PROCESS:
1. Contact your immediate supervisor
2. Department manager
3. Regional compliance and privacy coordinator or manager
4. Call the 24/7 Providence Integrity Line at (888) 294-8455.
Security, Confidential Information and Electronic Media Use

In addition to safeguarding a patient’s protected health information (PHI), Providence employees have a responsibility to protect all confidential information. Confidential information includes sensitive internal documents, records or data that could seriously damage Providence if that information were lost or made public. Examples of confidential information include protected health information, information about Providence students, employee information, foundation data and information subject to federal and state notification laws.

This information is so valuable that its loss could harm our patients and our ability to do business. Data losses also have a negative impact on Providence's reputation in the community.

Any confidential information removed from a work location increases our risk. Unless it is part of your job, confidential information should never be removed from a Providence entity without authorization from your manager. If you are authorized to remove such information, you are responsible for following the appropriate security procedures required by Providence. Confidential information may never be copied onto a personal or non-Providence computer. If you use a mobile computing device, such as a PDA or Smartphone, contact your ministry information systems group for security instructions.

Employees agree to follow Providence’s Acceptable Use of IT Assets policy and other security policies and standards. Users of Providence e-mail have no right or expectation to privacy. Providence reserves the right to monitor and access any Providence information system or account. If you have a security-related concern, talk with your manager.

Records Accuracy and Retention

We prepare and maintain accurate and complete documents and records. We do this to comply with regulatory and legal requirements, and to support our business practices and actions. Records include, for example, financial records, claims made for payment, patient records, employee timesheets, student records and expense-related forms and other types of records, whether in paper or electronic formats.

We do not alter or falsify records, and do not destroy records to deny governmental authorities information that may be relevant to a government investigation.

We comply with Providence’s Record Retention policy to support the appropriate retention, protection, maintenance and disposition of all records, regardless of their format or media.

If you have questions about records retention, contact system integrity or the department of legal affairs.

Security Best Practices

- Keep your computer and voicemail passwords private and secure. Change your password if you feel it has been compromised.
- Lock your computer when unattended using Ctrl-Alt-Delete | Enter or other key combinations that will lock your computer.
- Power down your computer when leaving it for extended periods of time.
- Install a privacy guard or use automatic timeout to prevent others from seeing your computer screen.
- Never download confidential information onto a home or non-Providence computer, PDA or cell phone.
- Store shared portable devices and electronic media in a secure location and use a sign-in/sign-out procedure.
- Maintain physical control of laptops and other devices at all times when outside of a secure facility — a locked location within Providence facilities and your locked residence are considered secure facilities.
- Shut down your laptop so that encryption can protect confidential data if your laptop is lost or stolen.
- Use secure e-mail when sending confidential information.

Providence employees and other workforce members must report all known or suspected security incidents within 48 hours of occurrence. Report any incidents to the enterprise technology operations center at (866) 406-1290 or to the Providence Integrity Line at (888) 294-8455.
GLOSSARY OF TERMS

compliance: Acting in accordance with accepted standards and policies, including laws, rules and regulations.

confidentiality: Keeping information private that should not be shared with anyone else.

conflicts of interest: Situations in which someone in a position of trust has competing professional or personal interests. Such competing interests can make it difficult to fulfill that person’s duties impartially. Even if there is no evidence of improper actions, a conflict of interest can create an appearance of impropriety that can undermine confidence in the ability of that person to act properly in his/her position. Example: a purchasing department employee ordering supplies from his brother’s business.

ethical behavior: Doing what is right; acting on the basis of Providence’s Mission and core values such as acting with integrity and setting the highest standards for ourselves and for our ministry.

false claim: An inaccurate claim submitted for payment to an insurance payer such as Medicare, Medicaid or a third party. Example: charging for services or items that were not provided.

fraud & abuse: Fraud is the intentional deception or misrepresentation (in other words, lying) to receive money or some other benefit. Examples: charging for three x-rays when you know only one x-ray was performed or falsifying records. Abuse is engaging in a practice or activity that is not part of generally accepted, sound industry standards that may result in unnecessary costs or in the receipt of an improper payment.

integrity: Honesty in words and actions.

Medicaid: State-governed health care insurance generally provided to those who meet low-income guidelines. This is called “Medi-Cal” in California and the Oregon Health Plan (OHP) in Oregon.

Medicare: Federally funded and governed health care insurance provided to people over 65 years old and to other younger persons that meet disability guidelines.

non-retaliation: A policy that protects those who report alleged violations of policies, regulations or laws from negative or adverse actions as a result of having reported a violation.

policies & standards: Requirements for expected behaviors or actions by Providence workforce members.

referral: The act of sending a patient to a doctor, hospital or other health care provider or requesting health care services on behalf of the patient.

regulations: Rules enacted by a government agency that must be followed by those businesses providing the services covered by the rules.

workforce members: All employees, board of directors, community ministry board members, foundation board members, volunteers, trainees, independent contractors and other persons under direct control of a Providence entity, whether or not they are paid by Providence.
FOR MORE INFORMATION

Providence chief compliance officer - (503) 574-9700

ALASKA
Integrity, compliance and privacy office - (907) 212-2651

CALIFORNIA
Integrity, compliance and privacy office - (818) 847-3158

OREGON
Integrity, compliance and privacy office - (503) 574-9123

EASTERN WASHINGTON / MONTANA
Integrity, compliance and privacy office - (509) 474-7320

WESTERN WASHINGTON
Integrity, compliance and privacy office - (425) 687-4002
System integrity, compliance and privacy office - (425) 525-3022
Department of legal affairs - (425) 525-3034
Enterprise security - (503) 216-4562
Integrity line - (888) 294-8455 (toll free)
This Acceptable Use Agreement applies to Providence Health & Services (PH&S) employees, volunteers, trainees, and all others doing business with Providence.

Compliance with this agreement is a condition of continued employment or association with PH&S according to the Acceptable Use of Information Systems security policy found in the system policy manual.

The Acceptable Use of Information Systems policy describes the appropriate use of Providence information and technology resources including data, systems, networks and devices including but not limited to desktop computers, laptops, PDAs, fax machines and copiers and is intended to promote and protect the confidentiality, integrity, and availability of PH&S information and technology.

I am aware and agree, unless further described herein:

- Internet usage, communications and transactions are not private. All computer activity is recorded and can be traced to a specific user ID.
- Information and technology associated with or belonging to PH&S must be protected by taking appropriate measures such as keeping passwords private, encrypting all computers and devices, and locking all portable devices. Additional information and online training on how to protect information and technology is provided by Providence.
- Information and technology is for business use and must not be used for purposes which may interfere or are in conflict with the PH&S mission and/or policies. Any use of PH&S information or technology for a purpose not specifically authorized by PH&S is prohibited.
- PH&S reserves the right to limit or restrict the use of information or technology to meet the business and service obligations of the organization.

Although information and technology resources are for business use, limited personal use may be permitted with the following restrictions:

- Usage must be reasonable, lawful and ethical and cannot be offensive or disrespectful to co-workers or others in the work or patient care environment.
- Usage must not interfere or be in conflict with PH&S responsibilities or productivity.

IMPORTANT: In addition to termination, non-compliance could result in further action, including civil or criminal prosecution. Violation of these requirements by a third party contracted with PH&S may result in termination of the representative’s contractual arrangement with PH&S for default and may further result in such representative being subject to civil or criminal laws, as applicable.

By signing this document, I acknowledge that I have read, understand, and agree to abide by the Providence Health & Services Acceptable Use Agreement. This agreement does not limit my right to use my own general knowledge and experience, whether or not gained while employed by PH&S, or my right to use information which is known to the general public through no fault of my own.

Signature: ___________________________________ Date: ___/___/____ Employee ID: __________________________

Printed Name: __________________________________________________ Position: _____________________________

Department: _________________________________ Work Location/Facility Site: ______________________________

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Copyright © 2008, Providence Health & Services. All rights reserved.
These standards in the Providence Code of Conduct do not, nor were they intended to, cover every situation you may encounter. They provide only broad guidance that is defined in greater detail by the various policies, standards, procedures and guidelines of Providence, your region and your facility.

Providence is committed to the standards outlined in this Code of Conduct. Your commitment is critical to the success of this Integrity and Compliance Program. Failure to do so is grounds for disciplinary action, up to and including termination, in accordance with your personnel policies and/or collective bargaining agreement if applicable.

As with any policy, compliance with the Providence Code of Conduct is a condition for, but not a guarantee of, continued employment.

I acknowledge that I have received my copy of the Providence Code of Conduct.

I understand that I am responsible for becoming familiar with the information contained in the Code and that this Code does not include all of the specific policies of Providence.

I further understand that any clarification of the contents of this handbook will be provided during compliance education sessions or, upon my request, by my supervisor, the local or regional compliance office or the System Integrity office.

Name (Please Print)  Signature

Date  Ministry/Facility and Department