

Nacogdoches Memorial Health

Code of Conduct

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Dear Team Members,

This Nacogdoches Memorial Health Code of Conduct outlines the way we care for our patients, the way we conduct our business and even the way we treat each other. It helps us perform our work in an ethical and legal manner, and guides us in making the right decisions when faced with challenging ethical issues or difficult choices. Simply put, the Code of Conduct defines what it means to be a Memorial team member.

As part of the Memorial team, the trust of our patients, co-workers, business partners and community rests squarely on our collective shoulders. NMH takes this responsibility very seriously and call on you to be committed to serving this purpose with me. The Memorial Code of Conduct applies, without exception, to every employee, medical staff member, board member, volunteer, contractor and any others who conduct business or provide a service on behalf of Nacogdoches Memorial Health. The Code is the foundation of the NMH Compliance Program.

You have a duty, as a part of the Memorial team, to report concerns such as unsafe practices, unethical behavior, and violations pertaining to any of our policies, procedures, or any applicable law or regulation. If you have any concern or knowledge of failure to meet NMH obligations under our Corporate Integrity Agreement, that must also be reported.

Concerns may be reported by notifying your supervisor, any other member of management, the executive team, or Memorial Hospital's Corporate Compliance Department. You can also report concerns anonymously through the NMH Compliance Line. Memorial Hospital has partnered with a third-party vendor to provide a confidential means to make such reports and you can call that hot line 24 hours a day, toll-free at 1-800-427-7240 or you can go to NMH intranet site and submit your report thru the internet Compliance Line: www.mycompliancereport.com.

Rest assured that under the NMH Non-Retaliation Policy, you may not be discharged, demoted, suspended, threatened, harassed or discriminated against for reporting, in good faith, your concerns.

Join us all in making Nacogdoches Memorial Health the strongest hospital and health system that it can be, by supporting our shared values of compassion, integrity, respect, collaboration, leadership and excellence. Your commitment to these ideals, and this Code, is vital to our mission to meet the most essential need of our community - outstanding and ethical healthcare.

To all Team Members of Nacogdoches Memorial Hospital and Clinics:

The Compliance Program, coupled with the Code of Conduct, sets an ethical tone for conducting business and creates a company culture which enhances the reputation of the organization. The Compliance Program also provides a mechanism by which to enforce this Code of Conduct.

Our Compliance Program includes education and training, policies and procedures, monitoring, investigation, detection and reporting. Compliance with this program is required by all board members, associates, contractors and agents acting for or on behalf of the Company. Additionally, all are required to internally report all potential non-compliance with the Code or Compliance Program. The program details a variety of means to report such non-compliance, protecting confidentiality where appropriate. No individual position or influence is considered to be more important than the integrity of the Company. Those who report wrongdoing will be protected from retaliation.

As NMH's Chief Compliance Officer, I look forward to working with you, and I appreciate your commitment to compliance and NMH's Mission, Vision, and Values/Goals.

If you have any questions regarding our expectations of you, of the Code, or the Compliance Program, feel free to ask your Supervisor, Manager, Director, Administration and the Chief Compliance Officer or feel free to call our Compliance Line: 1-800-427-7240 or submit on line to our webmail address located on our home intranet page.

Thank you for your continued support in maintaining Nacogdoches Memorial Hospital's integrity, ethics and compliance standards.

Sincerely,

Noella Crayton
NMH Chief Compliance Officer
936-569-4142 or 936-564-4611 ext. 4142
craytonn@nacmem.org

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WHY A CODE OF CONDUCT?

Our Code of Conduct provides a central framework and set of guidelines to support all of our NMH colleagues in doing the right thing. By that we mean conducting our business in ways that ensure our corporate integrity, comply with the letter and spirit of the law and comply with the accepted standards of business conduct that we have incorporated as NMH policies

The Code of Conduct outlines the behavior expected of each of us and helps us ask ourselves, “Am I doing the right thing and am I doing things right?”

Health care law and business practices are becoming more and more complex. Failing to follow the law or meet NMH standards of business conduct could lead to a negative result for any one of us and for NMH as a whole. Most significant, however, is that we would not be conducting our business with integrity. Integrity is one of our key values at NMH and all of us at NMH are committed to living our values every day.

Conducting our business with integrity means we conduct our business openly and with honesty and trust. At the same time, integrity also means living up to the business standards – laws, regulations and NMH policies – that we have promised to uphold.

WHAT THE CODE MEANS TO EACH OF US

Each of us has responsibilities within the NMH Code of Conduct. We all must read and understand the Code of Conduct. Our performance on the job is evaluated on the basis of many components. One component of this evaluation is our compliance with applicable laws, regulations, policies and procedures as outlined in this Code of Conduct.

If you have any questions or concerns about what the Code’s policies, regulations and guidelines mean or how compliance with the Code affects your job evaluation, you should see your supervisor for clarification or call the Chief Compliance Officer directly at: 936-564-4611 ext. 4142 and 936-569-4142 **OR** the Compliance Line at: 1-800-427-7240. You can also submit on line on our home intranet web site.

NMH MISSION, VISION, VALUES/GOALS

Mission: Providing the best healthcare for our community in a caring way.

Vision: We will remain a progressive, benevolent, nonprofit healthcare organization. We will join other health care providers to offer high quality, low cost, comprehensive care.

Values/Goals:

- **Teamwork:** We believe in maintaining cooperation between the governing body, administration, medical staff, and other healthcare providers in offering high quality, low cost, comprehensive care.
- **Education and the Promotion of Health:** We seek to continuously educate and promote health for those whose care we provide.
- **Planning for the Healthcare Needs of Nacogdoches County:** We take responsibility for healthcare assessment and planning in Nacogdoches County including planning for Emergency Medical Services.
- **Service:** We are pledged to ensuring that our services will be provided in a courteous and respectful manner to all people regardless of race, creed, color, sex, national origin, or ability to pay.
- **Empowerment:** We believe that each employee should have the accountability and support necessary to contribute effectively to continuous improvement in organization performance.
- **Integrity** is one of our key values at NMH and all of us at NMH are committed to living our values every day. Conducting our business with integrity means we conduct our business openly and with honesty and trust. At the same time, integrity also means living up to the business standards – laws, regulations and NMH policies – that we have promised to uphold

ETHICAL DECISION MAKING

We recognize that all of our colleagues deal with situations in their work and personal lives that may raise questions about what they should do to follow NMH policies and this Code of Conduct. One purpose of the NMH Code of Conduct is to help us identify and deal with these challenges.

Here are some basic questions that can help guide you in the decision-making process if you are faced with a difficult or confusing business decision that seems to have ethical concerns:

- Does our Code of Conduct help guide me in my behavior and decisions?
- Are my actions consistent with the mission, vision and values embraced by NMH and presented in this Code of Conduct?
- Am I keeping to the letter of all related laws, regulations, contracts and NMH policies?
- What would my family, friends, co-workers and neighbors think about my actions?
- Will there be any direct or indirect negative outcome for NMH patients, my fellow employees or NMH as an organization because of my actions?

*If you remain unsure about what to do in a given situation, ask for help **before** you act.*

WHO SHOULD I CONTACT FOR HELP?

What do you do when you have a question or concern about business ethics or compliance with laws, regulations and policies?

If you have a question or concern about an ethical or legal issue, you have several options. Which option you select is not as important as raising the concern or asking your question and getting the help you need.

Your supervisor is the first person you should consider contacting. You may not, however, always feel comfortable discussing your question or concern with your supervisor. If this is the case, you can always raise your questions and concerns with your department director, any member of senior leadership or the Chief Compliance Officer.

Human Resources-related issues may be directed to the Human Resources Department.

The Chief Compliance Officer's job is to help employees answer ethics and compliance questions and investigate reports of possible violations of the Code of Conduct. You may report an ethics or compliance concern anonymously - without giving your name or department - by calling the Compliance Line.

WHAT DO WE MEAN BY A VIOLATION OF THE CODE OF CONDUCT?

Violations of the Code of Conduct?

Contact the Chief Compliance Officer:

*936-564-4611
ext. 4142*

or

*Compliance Line at:
1-800-427-7240 or*

mycompliancereport.com

The Compliance Line Is available to you 24 hours per day, 7 days per week, along with our Compliance on line reporting website located on our home intranet page. The Code provides a central framework and a set of guidelines for following hospital policies. If an employee fails to follow the Code of Conduct, it is the same as violating hospital policies; and we will evaluate the action and, if necessary, investigate and address violations.

If you think there may have been a violation of hospital policies or the Code of Conduct, you may contact the Chief Compliance Officer at: 936-564-4611 ext. 4142.

The Chief Compliance Officer also maintains a general mail box at the hospitals mail room located on the first floor or you can email the Chief Compliance Officer at: craytonn@nacmem.org

NMH will make every effort to maintain your confidentiality to the extent legally permissible.

NMH COMPLIANCE AND ETHICS HOTLINE

Unsure, Uncomfortable or Want to Stay Anonymous?

**Call the Compliance Line
Toll-free at:**

1-800-427-7240

mycompliancereport.com

NMH will make sure that there is no retaliation against you for making a report.

If you are ever unsure about where to bring a question or raise a concern, if you are uncomfortable about speaking with one of the people mentioned above, or if you want to raise an issue anonymously, feel free to call the Compliance Line at: **1-800-427-7240 or submit on line at the home intranet web site.**

The Compliance Line was established so that NMH employees have a place to go to raise business ethics and legal concerns. The Compliance Line is operated by an independent company that reports all calls to the NMH Chief Compliance Officer.

The Compliance Line is open for your use 24 hours per day, 7 days per week along with our online Intranet Compliance reporting site. The independent company we use to answer the Compliance Line reports, does not have any recording devices, and caller ID is not used.

When you call the Compliance Line to report an issue, you are given information on how to find out about the status of your report. You do not have to give your name in order to get the status of your report, although giving your name can often help the NMH Chief Compliance Officer investigate the issue you have raised.

NMH will make sure that there is no retaliation against you for making a report. That means NMH will protect you, and any other NMH employee, from any harm that someone may try to

cause you because you reported a concern or raised a question about a potential violation of hospital policies.

NMH maintains a strict non-retaliation policy. An employee, who, in good faith, asks a question, raises a concern or reports a perceived misconduct is following our Code of Conduct. No employee or other colleague will be allowed to retaliate against – to cause harm to – an employee for raising a concern. An individual who does take a retaliatory action will be subject to disciplinary action in accordance with NMH policy. This disciplinary action can include termination.

If you believe that you or someone you know has been **retaliated against**, you may immediately contact the Chief Compliance Officer, the ComplianceLine or Human Resources Department.

All reports of retaliation will be taken very seriously, will be investigated thoroughly, and action will be taken when appropriate.

PATIENT CARE AND SAFETY

I take time to make sure our patients get care in a safe environment.

We provide the highest quality care to all patients based on their medical need and our physicians' medical judgment and orders. Care for the patient is guided by the patient's treatment plan in accordance with established clinical standards and protocols. Using sound judgment, based on the best interest of the patient, is expected of all NMH employees at all times.

I put the needs of our patients in front of my own personal needs and desires.

We provide all services that are appropriate, safe and in compliance with applicable laws, regulations and business standards.

We believe that honest disclosure and transparency of deficiencies and errors is the right thing to do – regardless of the degree or impact on care. We bring any deficiency or error surrounding patient care to the attention of our supervisor or other appropriate individuals, according to NMH policy, to support our continual improvement efforts and a safe environment for our patients.

PATIENTS RIGHTS

NMH is committed to creating an environment of care in which patient rights and responsibilities are respected. We communicate these rights and responsibilities to our patients and to the NMH personnel who care for our patients. These rights are founded in a fundamental respect for our patients' privacy, dignity, personal values, belief systems and life philosophy.

Our patients' rights include, but are not limited to, the following:

- Appropriate and impartial access to care. No one is denied access to treatment because of sex, disability, national origin, age, color, race, religion or source of payment.
- Considerate and respectful care so that each patient has the freedom and support to express his or her spiritual beliefs and cultural practices.
- Participation in any decisions regarding the care to be given.

- Having family members or representatives of our patients' choice be with them when they receive care and appropriate notification sent to their personal physician when they are hospitalized.
- Privacy and confidentiality of personal information and medical records.
- Knowledge of the identity, professional status and experience of all caregivers.
- Ability to get help when patients have a concern of any kind.
- Understanding the charges related to the care patients receive at NMH.

Doing the Right Thing Means:

- ❖ *I actively observe and support all elements of NMH Patient Rights and Responsibilities policy.*
- ❖ *I inform my patients or their representative of their right to participate in all decisions regarding their care.*
- ❖ *Questions asked by a patient about her/his bill are answered promptly and completely.*

CONFIDENTIALITY AND PRIVACY STANDARDS

NMH employees protect the confidentiality of a patient's health information, including information in computer systems, medical records and various documents produced on a regular or as-needed basis.

I protect my patients' health information and right to privacy.

Discussions about patients and their care are done in appropriate places and at a low volume that is considerate of the patient and others and protective of the patient's right to privacy. A patient's treatment or personal information is never discussed outside the course of NMH business or with anyone who does not have a **"need to know."**

I share a patient's general condition with a caller only after they ask for the patient by name and after I check to be sure that the patient is listed in the facility directory.

Sharing appropriate patient-protected health information (PHI) with other caregivers, such as a family physician or a nursing home, is okay as long as we verify the identity of the person asking for the information and confirm that the person needs the information for the benefit of the patient.

I don't access patient information in the computer or medical record for personal reasons – for friends, family or myself.

NMH has a series of HIPAA privacy policies and forms designed to address the privacy and confidentiality of our patients' health information. **NMH also has a Privacy Officer to help you with patient privacy questions. (Mindy Winslow)**

Privacy concerns can also be reported to the NMH Compliance Line. The compliance Department will assist with the issue and forward to the appropriate department/individual.

EMERGENCY CARE

I do my part to ensure a medical screening exam is provided without inquiring about a patient's ability to pay.

A medical screening exam is provided to every patient who comes to NMH Emergency Department

NMH policy and Federal law require us to provide emergency care to any individual coming to NMH locations that provide urgent or emergency care. This emergency care includes a medical screening exam, treatment and transfer, if necessary, and appropriate for the person's medical care.

We will treat all individuals who have an emergency medical condition and will not delay the treatment or the provision of an appropriate medical screening examination in order to ask about a patient's ability to pay, including the method of payment or type of insurance coverage the patient may have.

A patient is transferred from an NMH to another health care facility in situations where the transfer is in the patient's best interest and only after the patient has been stabilized and the receiving health care facility and the accepting physician have agreed to receive the patient.

ADVANCE DIRECTIVES AND HEALTH CARE DECISIONS

I provide the highest quality of care to all patients regardless of whether they have an advanced directive

NMH will provide patients, at the time of their admission, with information about their rights regarding health care decision-making and advance medical directives. Ethical standards and applicable Federal, state and local laws shall govern such information.

NMH employees are expected to document in the patient's medical record whether the patient has advance directives and note the location and the provisions of the advance directives if disclosed by the patient. Instructions provided verbally to an NMH employee by a patient will be documented in the patient's record. Efforts should be taken by NMH to obtain a copy of the patient's advance directives and place them in his or her medical record.

NMH Is Dedicated To Operating Its Business In An Ethical Manner And In Compliance With All Applicable Laws And Regulations.

GENERAL ETHICAL STANDARDS

*I'm Doing The Right Thing
When:*

My actions are guided by good, ethical decision-making and compliance with relevant laws and policy.

The standards that apply to my profession are part of my everyday thoughts and actions.

I ensure NMH has my most current license or credential information.

I let the Chief Compliance Officer know a co-worker has been excluded by Medicare and has not informed NMH of this action.

We provide high quality care to all patients based on their medical need and our physicians' medical judgment and orders. Care for the patient is guided by the intended outcome of the treatment plan in accordance with established clinical standards and protocols. Sound judgment, based on the best interest of the patient, is expected of all NMH employees at all times.

We provide all services that are appropriate, safe and in compliance with applicable laws, regulations and business standards.

We believe that honest disclosure of deficiencies and errors is the right thing to do – regardless of the degree or impact on care. We bring any deficiency or error surrounding patient care to the attention of our supervisor or other appropriate individual, according to NMH policy, to support our continual improvement efforts and a safe environment for our patients.

LICENSURE, CERTIFICATION AND EXCLUDED INDIVIDUALS (refer to NMH policy: 6.1.10 Background & Exclusion Check Processes)

NMH is dedicated to ensuring that only qualified health professionals treat NMH patients. Health care professionals treating NMH patients follow all applicable licensing, credentialing and certification requirements.

NMH is prohibited by Federal law from employing or retaining anyone who is excluded from a Federal health program. To ensure compliance with this requirement, NMH has implemented a screening process to identify such excluded individuals at the time of their engagement with NMH and periodically thereafter. Our policies and procedures are designed to ensure that we do not contract with, employ or bill for services ordered, rendered or supervised by an individual or entity that is excluded, suspended, debarred or ineligible to participate in any Federal health program 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 program.

If an NMH employees becomes aware that he or she or any other NMH employee is officially excluded or proposed for exclusion from any Federal health program, that NMH employee is required to notify the Chief Compliance Officer immediately so that appropriate action can be taken.

NMH Is Dedicated To Ensuring That Qualified Health Professionals Treat NMH Patients.

COMPLIANCE WITH FEDERAL HEALTHCARE PROGRAMS (MEDICARE, MEDICAID)

I contact the Chief Compliance Officer with questions or concerns surrounding the complex laws that regulate our business.

NMH provides services that are governed by a variety of Federal, state and local laws and regulations. These laws and regulations include subjects such as filing false claims, illegal patient referrals, providing only medically necessary and appropriate services, violations of Medicare's Conditions of Participation, and other Medicare and Medicaid regulations.

I make sure that my patients' charts have complete and accurate documentation.

NMH and its employees will at all times comply with all laws and regulations that relate to Federal healthcare programs. Further, we must be knowledgeable about and enforce compliance with all laws and regulations that relate to our positions with NMH.

I enter charges only for services that were medically necessary and the coding is complete and accurate.

NMH commitment to following applicable laws and regulations includes only submitting accurate and true claims for services provided to our patients. This commitment means that we will only bill and submit claims for services that are actually provided, are documented in the medical record and are medically necessary.

If it is determined that an error has been made in the preparation or submission of a bill or claim, it is the policy of NMH to take action immediately to notify the Chief Compliance Officer, who will consult with senior management and, as appropriate, legal counsel on how to best rectify the situation. If repayment of funds is required, it is our policy to return such funds expeditiously.

A Variety Of State And Federal Laws Ensure Our Actions Are Based On Providing Necessary Services And Quality Patient Care

IMPROPER PAYMENTS

(refer to NMH policy 1.16 Refunds to Guarantors)

I do not offer or pay anything of value to persuade a party to refer a patient to NMH

NMH employees will not make or accept payment for decisions that others may view as being a bribe, kickback or other inducement to influence a decision. This decision might be the purchase of a product or service or may be intended to or perceived to affect the flow of referrals to or from NMH's clinical facilities.

I help an existing or potential referral source know our policy on improper payments.

Physicians are further restricted from making referrals to any entity in which they or their immediate family members have a financial relationship unless prior approval and clarification is sought and received from NMH Chief Compliance Officer.

GIFTS AND ENTERTAINMENT INVOLVING THIRD PARTIES

(refer to NMH Policy 6.1.9 Gifts & other Business Courtesies)

I promptly report receipt of an inappropriate gift to my supervisor, manager or the Chief Compliance Officer.

I inform a patient's family that the box of candy they have offered is not necessary. If they insist, I accept the candy and inform them that my entire unit or department will share in the treat.

I respectfully refuse a cash gift from a patient and let them know how they can make a charitable gift to support patient care.

I inform a vendor that bringing in lunch once a month is not appropriate, but an occasional, simple lunch with real education on a new product would be acceptable.

NMH aims to preserve and protect its reputation and avoid even the appearance of impropriety. Thus, NMH employees must avoid the acceptance or giving of gifts of any kind to the extent that such an action influences – or may appear to influence – a business or patient care decision.

This section of the Code is intended to provide guidance about what gifts may be accepted from third parties such as vendors, suppliers, patients and families. Please direct further questions about the appropriateness of a particular gift or an offer of entertainment to the Chief Compliance Officer.

It is NMH policy to avoid providing gifts to physicians and in no case to exceed the gift limits established by the Centers for Medicare and Medicaid Service (CMS). If you have questions about gifts to physicians, direct these questions to the NMH Chief Compliance Officer and do so before providing any such gift.

No Solicitation: NMH employees may not solicit gifts or gratuities of any kind other than gifts or donations from existing business partners, suppliers and contractors to support NMH charitable activities.

Accepting Cash Gifts from Third Parties: NMH employees may not accept a gift of cash or cash equivalent (such as gift certificates or gift cards).

Accepting Non-cash Gifts from Existing Business Partners, Suppliers, vendors and Contractors: (refer to NMH Policy 6.1.9 Gifts & other Business Courtesies)

- NMH employees may accept infrequent gifts of nominal or minimal value.
- Nominal or minimal value means something of little value. Examples of such gifts are pens or note pads with a vendor's name and logo or a tray of donuts for the department or unit.

Accepting Meals and Entertainment from Existing Business Partners, Suppliers and Contractors:

- NMH recognizes that, at times, entertainment, including meals, can be a great way to build stronger working relationships.
- NMH employees may accept meals (but no entertainment or recreational events) in connection with a legitimate educational or business presentation or discussion so long as such meals are of modest value and occur on an infrequent basis.

- Equal sharing of expenses when meals do not meet the above requirements and when participating in other forms of entertainment (golf, recreational events, sporting events, travel, etc.) allows NMH employees to enjoy social opportunities while avoiding even a perception of impropriety. Participation should be consistent with the individual's job responsibilities and with the needs and resources of NMH.

Accepting Supplier/Vendor Sponsored Training and Education:

Supplier/vendor sponsored workshops, seminars and training sessions, including out-of town seminars, may be accepted free of charge when:

- the business value to NMH outweighs any recreational or entertainment value of the training event; and
- approval of the responsible supervisor or manager and the Chief Compliance Officer are obtained in advance.

Accepting Non-Cash Gifts from Patients or their Families or Representatives:

- Such gifts may not be accepted unless they can be shared by an entire department (e.g. flowers, modest food items).
- If a patient or her or his family or representative wants to give a gift, tell the patient, family member or other representative about the NMH gift policy and say that the gift should either be one that can be shared by the entire department or be a gift directed to the Nacogdoches Memorial Foundation.
- Care must be exercised when accepting a departmental gift to avoid creating the appearance of a conflict of interest or discomfort on the part of other hospital patients. Other patients may believe that an hospital employee will give special treatment to patients who have given a gift. In addition, patients who cannot afford to give a gift may also feel pressured to give even though they may not have the means to do so.

CONFLICTS OF INTEREST

I promptly report any financial, business or family relationship I have with an NMH competitor, patient or vendor.

I obtain approval from my supervisor and the Chief Compliance Officer prior to accepting any consulting job or establishing a business relationship with a competing hospital or vendor.

I remove myself from a product or service purchase decision when a conflict of interest exists or appears to exist. For example, when my son works for one of the companies trying to get NMH business.

NMH and NMH employees avoid activities and relationships that could get in the way or possibly appear to get in the way of our ability to run our business in an unbiased manner. We seek to promote, enhance and protect the interests of our patients and NMH, and we avoid taking any actions that might risk our dedication to those interests.

A conflict of interest occurs if personal interests influence or appear to influence our ability to make a fair and unbiased decision. A conflict of interest can also exist when an outside activity is allowed to affect one's ability to carry out his or her job or encourages the use of NMH resources for non-NMH business.

Our dedication to NMH and its mission must outweigh our relationships with others, including patients and their families, vendors, competitors and others. If you have a question about whether a certain situation is or could be considered a conflict of interest, the Chief Compliance Officer is available to help you. The Chief Compliance Officer can be used as a resource to discuss the situation and aid in resolution of the issue.

If an NMH employee has a job or plans on working elsewhere, the employee will provide the name of the outside employer and the nature of the position to his or her supervisor to determine if a conflict of interest exists. If the matter cannot be resolved at this level, the issue should be brought to the attention of the Chief Compliance Officer.

NMH And NMH Employees Avoid Activities And Relationships That Could Get In The Way Or Possibly Appear To Get In The Way Of Our Ability To Run Our Business In An Unbiased Manner.

BUSINESS INFORMATION

I keep NMH information not generally available to the public to myself and my fellow employees who have a need to know.

I find out the record retention requirements prior to destroying an old file full of budget reports.

During the normal course of business, NMH generates and receives business information that can directly affect the success of our business plans or those of our current or potential business partners. If used inappropriately, this business information could also create a benefit for those individuals who have access to that information. All NMH employees are expected to treat all such information as confidential and protect the business information from improper use and disclosure.

All financial reports, accounting records, expense accounts, time sheets and other documents should accurately and clearly represent the facts or true nature of a given transaction. These documents are retained in compliance with applicable laws, standards and NMH policies.

PHYSICAL ASSETS

I keep NMH information not generally available to the public to myself and my fellow employees who have a need to know.

I find out the record retention requirements prior to destroying an old file full of budget reports.

NMH is dedicated to appropriate and reasonable managing of our resources. This means that we protect the assets of NMH and help ensure their appropriate and allowed use. NMH assets are used only for legitimate business purposes. These assets include everything from our buildings to tables and chairs to computers and fax machines.

COMPUTER AND TELEPHONE SYSTEM

I want to send a quick e-mail birthday greeting to my brother from work, and I wait until my break or lunch or send it before or after working hours so it will not interfere with my work.

I limit the number and length of personal phone calls made and accepted at work.

I receive an offensive e-mail at work from a friend with another company, and I inform my friend that it is inappropriate to send this kind of e-mail to my work and instruct him or her to stop.

I avoid campaigning at work or on work time for my cousin running for mayor in a local suburb.

NMH provides the computer network and telephone systems that we use to conduct hospital day-to-day business. These resources are the hospital's property, and all NMH employees use them in a responsible manner. While NMH allows occasional incidental or minor personal use of computers and the telephone system, this use should not interfere with our ability to perform our duties on a daily basis.

Computers and the telephone system should never be used for personal benefit or individual financial gain. They must also never be used to access or distribute any material that may be offensive to others.

All NMH employees with an assigned computer login, use that login only for their own business-related access to NMH computers and networks. This login should not be shared with others.

NMH has specific policies about computer use that all NMH employees follow at all times. And NMH retains the right to monitor e-mail and Internet use. **(NMH has a Security Officer: James Turner)**

POLITICAL ACTIVITIES

NMH, as a government organization, does not use its assets (including employee work time) for lobbying or other political activities.

NMH respects our right to participate in or refrain from participating in political and community activities. NMH does not promote or force co-workers to support or contribute to any specific political issue, candidate or political party.

NMH Is Dedicated To Serving Our Hospital's Employees By Promoting A Positive Work Environment That Is Safe, Energizing And Built On Trust And Caring For Each Other And Our Patients.

OPEN, COMPLETE AND HONEST COMMUNICATION

I create a safe and inviting environment for communicating.

I have the courage to speak honestly and directly.

The key to a positive work experience is an environment built on open and honest communication. We promote and commit to communicating effectively on a daily basis. This means that we communicate in an appropriate, clear, timely, relevant, complete, accurate and honest manner. This also means that we share the good news and the bad news – all the news, to ensure that complete information is available.

HARASSMENT AND VIOLENCE

(refer to NMH policy 6.1.6 Duty to Report & Non-Retaliation)

I report to my supervisor that one of my fellow employees has been telling jokes I find offensive. Even though I asked the person to stop, he or she has not done so.

I spot something that looks like sexual harassment within my department and contact my Human Resources representative to discuss my feelings and the next steps.

NMH is committed to providing a work environment that is free of discrimination, unlawful harassment and other abusive conduct. Actions, words, jokes or comments based on an individual's sex, race, ethnicity, age, religion or any other legally protected characteristics are not tolerated. Sexual harassment (both obvious and not obvious) is a form of employee misconduct that is demeaning to another person is strictly prohibited.

Any conduct that is abusive, demeaning, threatening or disrespectful or could be viewed as violent to another NMH employee is a violation of our Mission, Vision and Values along with our Code of Conduct and is prohibited. Anyone engaging in sexual or other unlawful harassment or other abusive conduct is subject to disciplinary action up to and including termination of employment.

Any employee who wants to report an incident of sexual or other unlawful harassment or other abusive conduct should promptly contact his/her supervisor, Human Resources or the Chief Compliance Officer.

Any supervisor or manager who becomes aware of possible sexual or other unlawful harassment or other abusive conduct must promptly advise his/her Human Resources, the Administrative leadership and the Chief Compliance Officer, any of which will assist in handling the matter in a timely, confidential manner.

NMH Is Committed To Providing A Work Environment That Is Free Of Discrimination, Unlawful Harassment And Other Abusive Conduct.

ALCOHOL AND DRUG ABUSE

The manufacture, possession, distribution, dispensation, sale or use of alcohol, illicit drugs and/or other controlled substances by any NMH employee on NMH premises/property is prohibited except in the case of individual use of legally obtained prescription drugs.

I contact my supervisor immediately upon learning that another worker in my unit or department has been drinking at lunch.

Where prescription narcotic or psychotropic drugs are to be used by an NMH employee, the person-employee must inform his or her supervisor of such appropriate drug use prior to the beginning of the next scheduled shift and will be reported to Human Resources. If a prescription drug could impair your ability to perform your job, work restrictions will be implemented for the duration of the period while you are under the influence of the drug. Drug tests required by law or hospital policy are performed where and when appropriate.

ENVIRONMENT AND SAFETY STANDARDS

NMH is dedicated to maintaining a safe and healthy work environment. Each of us is expected to have a proactive attitude toward issues of health and safety throughout the hospital. Safety concerns or patient/visitor injuries that occur on hospital property should be reported immediately to your supervisor and the **Risk manager for Occurrence Reporting at: 568-8531** (Michelle Nash)

I look around to make sure the area in which I work is safe from hazards like wet floors or open drawers.

Employee injuries that occur during work should be reported immediately to your supervisor or a higher-level manager.

Safety concerns or visitor/patient injuries?

*NMH Occurrence Reporting
Employee Health/Occupational
Nurse/department:*

Athena Johnson

Dept. 8650 Extension: 4667

All NMH employees should become familiar with NMH safety policies and all emergency plans regarding fire and disaster in the areas in which they work.

NMH Is Committed To Appropriately Responding To And Not Interfering With Any Lawful Government Inquiry, Audit Or Investigation. NMH Is Also Committed To An Internal Investigation Process When Appropriate.

AUDITS AND INVESTIGATIONS

I am honest and straightforward with government representatives.

I contact my supervisor/manager, Risk/Quality Management and Chief Compliance Officer immediately after being contacted by a government representative.

Audits and investigations by internal resources and external organizations, including government agencies, regulatory agencies, are part of the health care operating environment. NMH has developed a detailed policy that outlines the procedures to be followed if and when the government representatives present themselves.

In some cases, government investigators, or individuals presenting themselves as government investigators, may contact NMH employees. Before responding to any questions from a government investigator, please notify the Administrator on call and notify the Chief Compliance Officer.

NMH policy requires that we **do not do** the following:

- destroy or alter any NMH document or record in anticipation of a request for the document or record by the government or internal investigator;
- lie or make false or misleading statements to any investigator;
- try to influence any other person to give false or misleading information to an investigator; or
- fail to fully cooperate with an investigation.

When NMH finds it necessary to take corrective action against any NMH employee who fails to follow our Code of Conduct, NMH policies and procedures and applicable Federal, state and local laws will be followed.

DISCIPLINARY ACTION

The kind and degree of discipline varies based on a number of factors involved in any given situation, including but not limited to the following:

I know that I have violated NMH Code of Conduct and I report my violation to my supervisor or the Chief Compliance Office.

- Impact of the violation on NMH and its patients
- Nature of the violation and whether the violation was committed intentionally, recklessly, negligently or accidentally
- Consideration of prior violations committed by the NMH employee
- Corrective action imposed for similar past violations within NMH
- Involvement of the NMH employee (i.e., was the employee directly or indirectly involved in the violation?)
- Manner in which the violation was reported – for example, whether the NMH employee self-reported the violation in a timely manner

- Extent to which the NMH employee cooperated with NMH in the investigation of the violation.

NMH executives, including department managers, directors and senior leadership have the additional responsibility of empowering and encouraging an atmosphere in which actual or potential violations are reported and addressed.

Corrective action may be taken against any of these leaders if they fail to detect or report a violation by a team member under their supervision. Corrective action can range from an informal consultation to termination of employment.

NMH Is Committed To Integrity In All We Do Which Is Demonstrated By Providing A Fair, Just And Safe Culture Where Compassionate And Appropriate Care Is Delivered In A Way That Is Understanding Of The Patient's Individuality, Personal Beliefs And Customs And That Protects The Patient's Rights, Confidentiality And Privacy.

FREQUENTLY ASKED QUESTIONS

Q. I think a co-worker has made a documentation error in a patient's chart. Should I just let it go?

A. If you believe a documentation error has been made by a co-worker, you should ask the co-worker to clarify the chart documentation by following appropriate policy for entering an addendum to the medical record or amending the note, as allowed. This action will help NMH make certain that all of our charts are accurate and clear and that we provide our patients with high quality care. If your co-worker does not write an addendum or amend the chart, seek guidance from your supervisor or the Chief Compliance Officer.

Q. If I see a co-worker about to make a medication delivery error, what should I do?

A. Talk with your co-worker right away or take other steps to prevent the error and possible negative patient outcome. Many medication errors are actually system issues that can be fixed. It is important that you and your co-worker let your supervisor or department director know about the situation so they can report it to Risk Management. Reporting errors or possible errors will help us maintain a safe environment for our patients and allow us to follow NMH mission, vision and values.

Q. I overheard a conversation in the cafeteria about a patient with a lot of very specific patient information. I know that the cafeteria is not an appropriate place to have a discussion about patients. What should I do?

A. If you are comfortable doing so, go up to those having the conversation and remind them to have their conversation in a more private area. If this does not take care of the problem or if you do not feel comfortable approaching the people, you can always call the Chief Compliance Officer at: 936-564-4611 ext. 8389 and 936-569-4142 or the ComplianceLine: 1-800-427-7240

They will assist with this process to ensure it is handled and addressed by the appropriate person ('s)

Q. I think a charge processing or billing error has been made. What should I do?

A. Immediately notify your supervisor or other appropriate person who has responsibility for billing. You may also follow the reporting procedures notify the Chief Compliance Officer. Billing errors, whether or not they end up with an overpayment made to NMH by a payor, should be corrected and the process that was used reviewed to determine how it can be improved to prevent any further errors of this kind.

Q. I believe that a department director in my facility has violated the NMH gift policy by accepting a very expensive gift. What should I do?

A. No one at NMH is exempt from our policies or Code of Conduct. If you have good reason to believe that someone has violated a policy or the Code, speak with that person's supervisor. If you are not comfortable doing so or if you have done this before and have not seen a change in the situation, call the Chief Compliance Officer or follow the reporting process identified in this Code of Conduct.

Q. My department wants to send a get-well card and some flowers to one of our co-workers who recently had a baby in our hospital. May I use our patient record systems to find out whether the baby is a boy or girl and what room she is in?

A. No, you may not. Looking up information about your co-worker in our patient record systems or accessing this information by looking at the paper record is a violation of patient confidentiality and a violation of NMH policies.

You may call the hospital operator and if the patient is listed in the directory, you may contact your co-worker directly to obtain this information.

Q. My son owns a business that could supply NMH with some great products at a good price. May I put my son in contact with our purchasing department?

A. NMH always wants to work with suppliers we know and trust and who provide good value for our dollar, so we do not want to ban all dealings with related parties. If you want to recommend your son's business, disclose your relationship to the business. If the purchasing decision would normally be your responsibility, advise your supervisor of the conflict of interest and remove yourself from taking part in the decision.

Q. I have a second job selling beauty care products. May I use my NMH e-mail account and telephone at work to follow up on business related to that job?

A. No, you may not. The resources that NMH gives us are to be used to serve our patients and the community. We cannot use them for personal commercial use.

NMH is dedicated to serving NMH employees by fostering a positive work environment that is safe, energizing and built on trust and caring for each other and our patients.

Q. If I see inappropriate or harassing behavior toward another employee by a co-worker or supervisor, do I need to do something, or is it up to the person being harassed to take action?

A. Maintaining a positive work environment extends beyond our own actions and the way we are treated personally. Each NMH employee takes responsibility to report an instance of observed harassment to his or her manager, Human Resources, facility leadership or the Chief Compliance Officer.

NMH is committed to appropriately responding to and not interfering with any lawful government inquiry, audit or investigation. NMH is also committed to an internal investigation process when appropriate.

Q. I know of the safety initiatives that are needed for superior patient safety, but when I try to follow them my co-workers laugh. What can I do?

A. One key to being the Best of Nac health care provider means following a critical commitment to our patients in the area of medical care and safety. All staff and physicians are bound to follow the policies and procedures that put these goals into action.

Q. From what I have heard, it's common practice for government investigators to contact employees at their homes or at other locations away from work. If this ever happens to me, what are my rights and how should I handle the situation?

A. It is important to understand that NMH policies require us to cooperate fully with any government investigation. If you are ever contacted in a location other than at work, first make sure that the government officials approaching you identify themselves and the government agency they represent. Next, ask the investigators to contact you at work during your normal business hours and give them your phone number and work location. Once the investigators have gone, contact the Chief Compliance Officer and give all relevant information to him/her.

Q. Can my supervisor or anyone else at NMH retaliate against me for calling the Chief Compliance Officer or the Compliance and Ethics Hotline? I mean, can my supervisor turn in a bad evaluation of my work or harm me in any way because I reported something to the Chief Compliance Officer or Compliance and Ethics Hotline?

A. Absolutely not. If you believe that you are being subjected to retaliation, call the Chief Compliance Officer. An NMH employee who retaliates against anyone – who tries to hurt the performance or performance record of any NMH employees for making a good faith report – is subject to corrective action up to and including termination.

FEDERAL HEALTH PROGRAM OVERVIEW – TWO KEY PROGRAMS

Originating in 1965 as a way of ensuring health care coverage and services for low income and financially needy people, *Medicaid* is administered by the states and funded jointly by both the federal and state governments.

Established in 1965 under Title XVIII of the Social Security Act, *Medicare* is a federally funded health insurance program for seniors age 65 and older as well as persons who have long-term disability or end-stage renal disease. The Medicare program has four parts. Part A provides coverage for institutional providers such as hospitals, skilled nursing facilities and hospices. Part B covers the services of physicians, nurse practitioners, home health care companies, labs and certain other providers. Part C is also known as Medicare Advantage and provides a managed care service model. Finally, Part D covers the prescription drug benefit for Medicare beneficiaries.

The Law:

The Federal False Claims Act (31 U.S.C. §§ 3729-33) makes it unlawful for any person or organization to knowingly make a false record or file a false claim with the government for payment. For the purposes of the False Claims Act, a “claim” includes any request or demand for money that is submitted to the U.S. government. “Knowing” means that the person or organization knows the information on a claim is false; seeks payment while deliberately ignoring whether or not the claim is false; or seeks payment recklessly without caring whether or not the claim is false.

Federal law also provides for administrative remedies for making false claims and statements. Administrative remedies are generally pursued by the HHS Office of the Inspector General (OIG) and can involve both monetary penalties and exclusion from participation in Medicare and Medicaid. The False Claims Act and comparable state and laws are part of the government’s efforts to prevent and detect fraud, waste and abuse.

Under certain conditions, an inaccurate Federal healthcare program claim might become a false claim. Examples of possible false claims include knowingly billing Medicare or Medicaid for services that:

- were not provided;
- were not medically necessary;
- were not properly ordered by a health professional; or
- were of a lesser value, quality or quantity than those billed (i.e., up-coding).

A person who has actual knowledge that a false claim for Medicare or Medicaid payment was knowingly submitted can file a lawsuit in federal court on behalf of the government and, in some cases, receive a reward for bringing original information about a violation to the government’s attention. The U.S. Department of Justice (DOJ) reviews these “whistle blower” cases and takes over cases which it believes have merit.

A case that the DOJ declines to take over can be prosecuted by the whistleblower. There are harsh penalties for violating the False Claims Act. Penalties can be up to three times the value of

the false claim, plus a fine of \$5,500 to \$11,000 per claim. The penalties under Federal administrative and Texas law are also significant.

WHISTLEBLOWER PROTECTIONS

The False Claims Act protects anyone pursuing a False Claim Act lawsuit from retaliation by his or her employer. Retaliation can include being fired, demoted, threatened or harassed by an employer for filing the suit. An employee who was retaliated against by an employer for filing or assisting with a False Claims Act lawsuit may file a lawsuit against that employer in federal court. If the employer retaliated, the court can order the employer to re-hire the employee, provide double the amount of back pay, and any other compensation arising from the retaliatory conduct.

NMH Policy:

Our Corporate Compliance Program includes monitoring and auditing for compliance with a wide assortment of laws and regulations. This key piece of our program helps detect and prevent errors in coding and/or billing.

NMH is committed to following applicable laws and regulations. This includes a dedication to submitting only accurate and true claims for services that are actually provided, are documented in the medical record and are medically necessary and appropriate. If it is determined that an error has been made in the preparation or submission of a bill or claim, it is our policy to take corrective action, which may include a variety of different options depending on the specifics of the situation.

NMH expects that anyone with a concern about a possible false claim at an NMH facility will immediately raise the concern so that it can be investigated and any errors corrected.

NMH maintains a strict non-retaliation policy. An employee who in good faith, asks a question, raises a concern or reports a perceived misconduct is following our Code of Conduct. No employee or vendor, contractor, agency, etc. will be allowed to retaliate against – to cause harm to – an employee who raises a concern. An individual who does take a retaliatory action will be subject to disciplinary action in accordance with NMH policy. This disciplinary action can include termination.

NMH Pledge:

Each NMH employee; including staff, physicians, volunteers, board members and others; strives to ensure every claim seeking payment for the care we provide is correct and accurate before it goes out the door. It is our goal to follow all laws, regulations, standards and internal NMH policies in fulfilling our mission – vision & values, to promote healing and wellness for the people and communities we serve.

Department: Security
Director of Security
Contact information: 936-568-8548

Title: Gun Control Policy

It is the policy of Nacogdoches Memorial Hospital to NOT allow guns of any kind into the hospital unless that gun is in possession of a licensed peace officer or a commissioned private security officer.

Peace Officers entering the hospital with a gun must have their badge prominently displayed. Private Security officers will have the word "SECURITY" prominently displayed on their clothing and are required to have their license on their person at all times that they are in the hospital.

Patients entering the hospital with a gun will have the choice of returning the gun to their vehicle or Security officers will lock the gun in a locker to be returned to the patient when they leave.

All guns that are locked up by hospital Security will be disarmed before they are locked up by unloading the weapon and storing the magazine in a different locker.

Gun control signage will be posted at each entrance to the hospital in the appropriate language prescribed by the Texas Legislature. Signage must be displayed in both English and Spanish.

The penalty of non-compliance and violations of this policy can lead to punishment up to and including termination.

For further information on this policy please reference policy # 3.12