CODE OF CONDUCT
Acknowledgment of Receipt of IRMC’s 

CODE OF CONDUCT

This is to acknowledge receipt of IRMC’s Code of Conduct

I have read IRMC’s Code of Conduct. I understand it is my responsibility to comply with and follow the policies and standards described herein.

Signature

Printed Name

Date

INDIANA
REGIONAL MEDICAL CENTER
Indiana Regional Medical Center’s mission is not only to deliver high quality, compassionate and affordable care, but also to conduct business in a manner that is both ethical and legal. To ensure that all employees, volunteers, physicians and Board members (hereinafter called “associates”) act in compliance with applicable laws and regulations, IRMC developed this Code of Conduct and requires all associates to regularly review its content. This Code of Conduct also applies to subsidiaries of IRMC and to IRMC Physician Group. It is the responsibility of every member of the organization to adhere to this Code and the Corporate Compliance Policies which are described in detail in the Corporate Compliance Plan on file in the office of the Chief Operating Officer. All associates are also obligated to report any potential violations of the Code of Conduct.

I. GENERAL STATEMENT

IRMC is committed to integrity, ethical behavior, and the highest moral conduct from our associates and others who act on our behalf. This Code of Conduct reaffirms our commitment to always doing what is morally and ethically right, and is intended to guide us in upholding this commitment. Each associate is expected to know, understand and abide by the guidelines outlined in this Code of Conduct, and thus ensure we continue to provide the highest levels of compassionate, quality healthcare while complying with all applicable laws, rules, and regulations.

These guidelines are designed to assist each of us in making the right choices when confronted with difficult situations. We clearly
understand the responsibility for ethical behavior rests with each of us through the judgments we make and the actions we take. We are all expected to recognize and avoid activities and relationships that involve, or might appear to involve, conflicts of interest or behavior that may cause embarrassment to the organization or compromise its integrity.

It is IRMC’s policy to prevent unethical or unlawful behavior, to stop such behavior as soon as reasonably possible after its discovery, and to discipline people who violate any applicable laws or regulations or the standards contained within this Code. We expect outside colleagues, including physicians, vendors, consultants and others whose actions are directly connected to IRMC, to adhere to the same standards in their dealings with us and with others on our behalf. Associates with questions about any part of this Code should seek advice from his/her supervisor, a member of the management staff, or the Corporate Compliance Officer.

II. CONDUCTING BUSINESS

IRMC’s activities involve hundreds of business transactions each day. We must have strict rules to guard against fraud or dishonesty and guidelines for addressing possible problems that may arise.

Proper Use of Assets
IRMC’s business records must always be prepared accurately and reliably. Proper accounting policies and procedures must be followed in order to ensure the accuracy of all records and reports and to protect IRMC’s assets. Associates may not borrow medical center property, without permission, and may not use IRMC’s facilities or equipment for unapproved purposes.
Trade Practices/Antitrust
Antitrust laws are designed to preserve and foster fair and honest competition within the free enterprise system. To accomplish this goal, the language of these laws is deliberately broad, prohibiting such activities as “unfair methods of competition” and agreements “in restraint of trade.”

Associates must never discuss business information (including strategies, prices, finances and similar matters) with others outside of the organization. All contracts and agreements are to be entered into on the basis of an objective determination of the value to be received by IRMC, and may not unfairly restrict competition or negatively affect our business.

Compliance with Anti-Kickback and Corrupt Influence Statutes
Existing law specifically prohibits any form of kickback, bribe or rebate that is intended to induce the purchase or referral of any healthcare services or supplies paid for even in part by the Medicare or Medicaid programs. IRMC associates are obligated to refrain from any activities prohibited under the law.

No employee or agent of IRMC should offer or accept any improper payment, gift, or other remuneration, directly or indirectly that is intended to induce the referral of healthcare business or decisions regarding the use of products or services.

Gifts and Entertainment
In defining illegal remuneration the federal government has included giving or receiving of gifts or entertainment, specifically if the reason for the gift or entertainment is to induce a referral. Therefore, no gifts should be offered or accepted by any IRMC employee from any outside individual or company if it can be reasonably established that the purpose of the gift is to induce referrals, to or from a IRMC facility.
If a ‘personal’ gift is such that a reasonable person would interpret it to be an attempt to improperly influence an employee or agent of IRMC, it must be refused and reported to the Compliance Officer. If the gift is of a nominal amount (i.e., less than $100 in value), and offered without the intent or expectation it will induce a referral, it may be appropriate.

IRMC expects all employees to render efficient and courteous service to its patients at all times without expectation of reward. Employees should never solicit a personal gift from a patient or family member. To avoid even the implication of impropriety, employees are prohibited from accepting any cash, cash equivalent or gift card. Staff may accept perishable items of modest value, such as food or flowers, provided that it is shared with the entire department or unit.

**Billing for Patient and Community Services**

IRMC and its staff provide a wide range of services to patients and the surrounding communities. In most cases, billing statements are provided to patients or third party insurers responsible for payment. The information included on these statements must accurately reflect the services and supplies actually provided.

We believe that no employee or other person acting on our behalf would intentionally falsify a claim. Such conduct is a crime, is never in our best interest, and would tarnish our name and result in severe sanctions. We require all associates involved in any aspect of billing to know, understand and abide by Medicare, Medicaid and other third-party insurer billing rules and requirements. Each employee must use his or her best efforts to prevent errors and report any billing matters that seem suspicious.
Labor and Employee Relations Matters
It is our policy to fully comply with all applicable wage and hour laws and other statutes regulating the employer-employee relationship and the workplace environment. If you have any questions about the laws governing labor and employee relations’ matters, please contact the Human Resources Department.

Employee Background Checks
IRMC considers the care and safety of its patients to be its highest goal. In order to maintain the quality and safety of patient care, IRMC conducts background checks, to include the HHS-OIG List of Excluded Individuals/Entities (LEIE), on applicants considered for employment and reserves the right to recheck the background of current associates. In addition, all agency and temporary staff, together with physicians considered for staff privileges will be checked against the LEIE and a background check will also be conducted either by IRMC and/or the employing entity.

Environmental Health and Safety
It is essential that everyone at IRMC who deals with hazardous materials and infectious waste comply with environmental laws and regulations and understand and follow the environmental safety procedures explained in our programs and existing manuals.

Occupational Health and Safety
IRMC believes that all associates should work in a safe environment. State governments and the Federal government have instituted laws regarding occupational safety and job related hazards. Strict attention should be given to these laws so that we may continue to safely provide the highest level of service to our community.

Pharmaceuticals, Prescription Drugs, Controlled Substances
Many of IRMC’s associates have responsibility for and access to
prescription drugs, controlled substances, and other regulated pharmaceuticals. IRMC is legally responsible for the proper distribution and handling of these pharmaceutical products. Specific laws forbid the distribution of any drug, in any amount or for any reason, to an unauthorized individual or entity.

It is IRMC’s policy that associates be diligent and vigilant in carrying out their obligations in regards to prescription drugs in accordance with all applicable laws, regulations and internal policies. Any violation of law or internal policy involving prescription drugs, controlled substances or other pharmaceuticals may result in disciplinary action up to and including termination of employment.

III. POLITICAL PARTICIPATION

Participation in the political process is one of every American citizen’s most basic rights. Federal laws, however, limit the nature and extent of political participation on the part of organizations.

While IRMC encourages its associates to participate in the political process, no IRMC resources or facilities are to be utilized in support of any candidate or position. In addition, individuals who chose to run for political office are expected to do so on their personal time.

Lobbying
IRMC will not contribute money, property or services to political parties or candidates. However, associates, as individuals, may make political contributions at their own expense or participate in political campaigns on their own time. No employee may attempt to influence legislation on behalf of IRMC without the prior approval of the Corporate Compliance Officer.
IV. DOING BUSINESS WITH THE GOVERNMENT

Medicare and Medicaid Requirements
IRMC is a participant in Medicare and Medicaid programs, both of which are governed by complicated laws and regulations. These laws are strict and much more extensive than those of non-governmental commercial contracts. Violations of these laws and regulations can result in criminal sanctions being imposed, not only on the associates actively involved, but also on the organizations where they work. It is essential, therefore, that there is strict compliance with all Medicare and Medicaid laws and regulations.

Fraud, Waste and Abuse
Fraud, waste, and abuse in the health care industry are serious national problems. As employees in the health care industry, we play a significant role in identifying potential incidents of fraud, waste, or abuse, and reporting suspected inappropriate activity immediately. It is important to understand that the differences between fraud, waste, and abuse.

Fraud is knowingly and willingly executing, or attempting to execute, a scheme to defraud any health care benefit program; or to obtain, by means of false or fraudulent pretenses, representations, or promises, any of the money or property owned by, or under the custody or control of, any health care benefit program.

Waste is the over utilization of services, or other practices that, directly or indirectly, result in unnecessary costs. Waste is generally not considered criminal actions, but rather the misuse of resources.

Abuse includes actions that may, directly or indirectly, result in unnecessary costs. Abuse involves payment for items or services when there is not legal entitlement to that payment, and can
occur even if the provider has not knowingly and/or intentionally misrepresented facts to obtain payment. Essentially, the difference between fraud and abuse is intent.

V. EMPLOYEE LOYALTY AND CONFLICTS OF INTEREST

IRMC expects its associates to serve the organization with undivided loyalty, and requires that its interests be placed ahead of any individual business or commercial interests. Associates should avoid situations in which a conflict of interest, or the appearance of a conflict, could arise.

If an employee is considering an outside venture or position that might conflict with the interests of IRMC, the potential conflict must be submitted and approved by Human Resources and reviewed by the Corporate Compliance Officer.

VI. USE OF INFORMATION

Safeguarding the Privacy of Our Patients
Our business requires us to gather a great deal of personal information about our patients. We are committed to protecting the privacy and security of the information created as a record of the care and services provided to our patients. IRMC understands that while these records are required to provide patients with quality care, we have both an ethical and legal responsibility to protect our patients from the misuse of their information. IRMC expects its associates and business associates to comply with its responsibilities under the law. Associates who disclose, misuse or are careless with Protected Health Information (PHI) may be subject to disciplinary action up to and including termination of employment.
How We May Use and Disclose Medical Information
IRMC associates, healthcare professionals and physicians, and business associates, are permitted to use and disclose Protected Health Information (PHI) in the following ways:

**For Treatment:** Medical and healthcare personnel may utilize patient information in the treatment of the patient.

**For Payment:** Patient medical information may be used to bill appropriate third parties for the treatment and services the patient received while a patient.

**For Hospital Operations:** IRMC may use patient information for internal management purposes, such as Quality Assurance, Utilization Review, and Peer Review.

**For Appointment Reminders:** IRMC may disclose information related to a scheduled appointment or medical care.

**For Treatment Alternatives:** IRMC may release information in discussion of treatment alternatives with a patient and/or appropriate members of the patient’s family.

**For Individuals Involved in a Patient’s Care:** IRMC may release information regarding a patient to members of the patient’s family or friends previously identified as assisting a patient.

**As Required by Law:** IRMC will disclose patient information to other parties as required by law.

In addition, it is recognized that special situations may exist that require the release of a patient’s PHI. Questions regarding the appropriate release of information should be directed to the HIPAA Privacy Officer.
Information Owned by Others
Other organizations and individuals have confidential information they strive to protect, but sometimes disclose for a particular business purpose. If you have access to another party’s confidential information, you must prevent the misuse of their information. Never use, copy, or distribute their information, unless you are doing so in accordance with the terms of their agreement with our organization.

This is especially true when acquiring software from others. The terms and conditions of software license agreements such as provisions not to copy or distribute programs, must be strictly followed. Associates should never, under any circumstances, bring in or install personal copies of software from their home or personal computer for use on any computer equipment owned or operated by IRMC.

Record Retention/Destruction
IRMC is required by law to keep certain types of medical and business records for defined periods of time. Within your department, you will find a record retention and destruction schedule that you must strictly follow.

In addition, all records must be fully and accurately completed, and should never be falsified. Without accurate information, we can’t fulfill our obligations to our patients, co-workers and vendors; it is every employee’s responsibility to take great care in dealing with our records.

Contact with the Media
Contact the Public Relations Department before responding to any media inquiries or initiating contact with the media. Additionally, communications with media involving patient information must comply with federal and state privacy laws in order to fulfill our legal and ethical duty to protect patient privacy.
**Government Investigations**
IRMC has established guidelines on how and when to respond to government inquiries. Any information that an employee discloses without authorization jeopardizes the rights of our patients and puts our organization at risk. Therefore, we must follow prescribed procedures when responding to all government inquiries or investigations.

Associates who are approached by any federal or state law enforcement agency or official seeking information about our organization or any of its agents or associates should call the Corporate Compliance Officer before providing any information. In addition, (1) obtain the name and affiliation of the person asking for the information before supplying it; (2) maintain a written record of each and every document they are given access to; and (3) keep a detailed record of all telephone contacts made and any information requested and responses given.

**VII. HUMAN RESOURCES**

**Commitment to Fairness**
IRMC recognizes that its greatest strength lies in the talents and abilities of its employees. Although the tasks of our employees are different, we have established guidelines to ensure that each employee is treated with fairness and equality. IRMC provides equal opportunity for employment and advancement on the basis of ability and aptitude, without regard to race, color, creed, age, sex, handicaps or national origin; and compensates associates according to their performance, and provides equitable benefits within the framework of prevailing practices.
IRMC is committed to a work environment in which all individuals are treated with respect and dignity. Each employee has a right to work without fear of sexual harassment. Discrimination, harassment or bullying, of any kind, in or out of the workplace, is unacceptable and will not be tolerated.

In order to foster an environment that strives toward safety and quality care, associates should use teamwork and effective collaboration to aid in creating a culture of safety and quality for our patients and our staff. IRMC expects its associates, agents and others who act on our behalf to behave in an acceptable manner. Acceptable behavior includes but is not limited to:

- Effective teamwork and collaboration
- Open communication
- Civility
- Encouragement
- Mutual respect
- Honesty
- Cooperation

Unacceptable or disruptive behavior will not be tolerated. Disruptive behavior is conducted by an individual that intimidates others to the extent quality and safety is compromised. Such conduct may be verbal or non-verbal and may involve the use of rude language, may be threatening, and may even involve physical contact. Additionally, behavior that interferes with the ability of others to effectively carry out their duties or that undermines a patient or their family member’s confidence in us can also be considered disruptive.
Examples of disruptive behavior may include but are not limited to:

- Profane or inappropriate conduct
- Demeaning behavior
- Sexual comments or innuendos
- Inappropriate touching, sexual or otherwise
- Racial or ethnic jokes
- Outbursts of anger
- Throwing objects
- Criticism of staff and others acting on our behalf in front of patients, patient family members, other staff or others who act on our behalf

Associates engaged in inappropriate or disruptive behavior may be subject to disciplinary action up to and including termination of employment.

**Drug Free Workplace**

The use of illegal drugs and abuse of controlled substances in the workplace is prohibited. As a condition of employment, any involvement in the unlawful use, sale, manufacture, distribution or possession of controlled substances, illicit drugs and/or unauthorized use of alcohol in the workplace or working under the influence of such substances is prohibited. We encourage employees with alcohol or drug dependencies to seek treatment and/or rehabilitation through the Employee Assistance Program.

**VIII. COMPLIANCE WITH THE CODE**

**Questions Regarding the Code of Conduct**
The Corporate Compliance Officer is responsible for the implementation and ongoing operation of IRMC’s Corporate
Compliance Program, as well as making sure each employee abides by this Code of Conduct. Associates with questions about this Code should contact the Corporate Compliance Officer in person, in writing, or by calling the IRMComply Compliance Line at 1-888-224-9859.

**Reporting Violations**
IRMC expects all associates to report suspect or questionable conduct to the Corporate Compliance Officer or person designated by the Compliance Officer to handle such matters. Reports can be made anonymously by calling the IRMComply Compliance Line. Because failure to report misconduct can be viewed as misconduct itself, we must strongly encourage the immediate reporting of any action that is questionable. Failure to do so may result in disciplinary action against those who fail to report. Any manager or supervisor who receives a report of a potential Code violation must likewise immediately contact the Compliance Officer. There will be no retribution for those who report misconduct in good faith. “Good Faith” is defined as telling the truth, to the best of one’s knowledge. In addition, the identity of the individual making the report will be kept confidential, to the extent possible.

**Investigation of Violations**
All reported violations of the Code of Conduct, hospital policies or applicable laws will be investigated in a timely manner. Associates are required to cooperate in the investigation of an alleged violation and may be subject to disciplinary action up to and including termination of employment for not cooperating in any such investigation.

**Discipline for Violations**
Disciplinary actions may be taken for involvement in actions that violate the Code of Conduct, hospital policies, or prevailing laws; for failure to report any violation or to cooperate in an investigation; for failure to detect, or purposefully overlook violations of others; or for
retaliation against anyone who reports possible or actual violations. Disciplinary action may include termination, although principles of fairness will apply, including the availability of appeal processes established in our policies.

IX. INDIVIDUAL JUDGMENT

Associates are often faced with making critical decisions based on activities in the workplace. Remember to always use good judgment and common sense. Ask yourself the following questions when you are unsure of what to do:

- Is it inconsistent with our mission and values?
- Is it illegal?
- Is it unethical?
- Could it harm patients?
- Could it harm our co-workers, colleagues, or physicians?
- Could it harm government programs?
- Could it harm our financial health?
- Would our organization be compromised or embarrassed if it became public knowledge?
- Would we be uncomfortable reading about it in the newspaper?
- Is it inconsistent with our policies or our Code of Conduct?

If you are still unsure what decision to make or what action to take, talk to your supervisor or consult with the Corporate Compliance Officer.
X. ACKNOWLEDGMENT AND CERTIFICATION OF COMPLIANCE

IRMC requires that all associates be provided with their own copy of this Code of Conduct and that they read and sign an acknowledgment form, which states that they have received, read, and understand it. From time to time, this Code will be updated, and associates will receive revised versions and be asked to sign new acknowledgment forms.
Our Mission
The mission of IRMC is to improve the health and well-being of our community.

Our Vision
To be the best community healthcare system in the country.

Our Values
Integrity, Compassion, Accountability, Respect, Excellence

IRMComply Compliance Hotline
1-888-224-9859

Prepared By:
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