

HealthSource of Ohio's Code of Conduct

Personal Pledge

The Code of Conduct (COC) is applicable to HealthSource of Ohio (HSO) employees, contractors, clinical students/interns, agents, volunteers, officers, and members of the Governing Board (heretofore referred to as "personnel"). As a community health center, HSO is in a position of trust with respect to many external organizations and agencies, as well as its patients and the community at large. HSO personnel have a responsibility to HSO, the Government, other sources of funds, HSO's patients, and its community to conduct business and use such funds prudently, ethically, and for the purposes for which they are designated. Ethical conduct must be at the very foundation of HSO corporate and professional practices.



I. Honest and Ethical Conduct

Friendly, Accessible, Credible, Every day. HSO personnel shall comply with and perform services consistent with high ethical and professional standards as defined by our Brand Promise and Brand Character. Personnel shall treat patients, co-workers, and others in the community in a professional manner, with honesty, fairness, dignity and respect, every day. It is expected that all personnel will comply with the COC, adhere to standards of their professional ethics, and abide by HSO's policies and procedures as established by laws and regulations including those relevant to the Compliance Program. Management team members promote a commitment to ethical and legal behavior and ensure employees under their supervision are encouraged to promptly report instances of real or suspected violations without fear of retaliation. HSO personnel are required to raise concerns and to proactively report any potential conflict of interest.

II. Ethical and Qualified Personnel

HSO is committed to high quality and accessible care relying on the support of all personnel. Personnel are expected to provide accurate and complete credentials upon hire. Every personnel will be screened upon hire and monthly thereafter to check that they have not been excluded, debarred or are otherwise ineligible to participate with government health care programs. Clinicians must promptly report to Human Resources if they have been or will be excluded from government programs and shall not provide any function related to the provision, administration nor oversight of billable services for HSO.

III. The One Purpose Test

The "One Purpose Test" shall prevail, which means, that HSO personnel must ensure their actions and behaviors are motivated from the "best interest of the patient" and not for their own financial gain or promotion. Individuals shall accept and make patient referrals based solely on the patient's medical/clinical needs, HSO contract obligations, and their ability to render the needed services. Relationships with others shall be based entirely on sound business decisions. No one shall offer, solicit, pay, or accept anything of value in exchange for healthcare referrals or business.

A. Conflict of Interest

A "conflict of interest" arises when a HSO personnel's personal, social, financial, or political activity has the potential of interfering with loyalty and objectivity to perform duties for HSO. Conflicts must be avoided; even the appearance of a conflict of interest can be harmful to HSO and impact patient care. The Compliance Program and COC procedure describes common ways that conflicts of interest can arise. Proactive disclosure and consultation with the Compliance Office is expected.

B. HSO Business Opportunities

HSO personnel are expected to perform duties in good faith and to the best of their ability. Personnel may not use HSO property or proprietary information to obtain improper personal benefit (including political, lobbying, or personal business). Personnel may not use their position in HSO to unlawfully obtain favorable treatment or business from any government entity, physician, client, or vendor. Further, it is expected that those vendors that HSO does business with are lawful and ethical, and will be screened for exclusion, debarment, or ineligible status.

C. Gifts and Gratuities

Whereas business gifts and entertainment can build goodwill, they may interfere with objectivity and lead to their own type of "conflicts of interest" or other violations of the law. Violations of this nature may

have grave consequences for HSO, and the individuals involved, including civil and criminal penalties and could lead to exclusion from federal funding. HSO personnel are expected to fully disclose and ethically handle any conflict of interest that is unavoidable.

IV. Accurate Medical and Clinical Documentation

HSO's credibility is judged in many ways. Medical and clinical documentation not only shows that HSO follows regulatory and legal requirements, but also reflects the nature and quality of care provided to patients. Each clinician is responsible for ensuring the integrity and accuracy of the patients' medical records and shall document patient services in a timely manner. Documentation shall accurately support the treatment and procedural codes, and healthcare data provided during that patient encounter. No one may deliberately alter, falsify, or destroy information on any record, report, or document except as authorized by HSO policy or procedure.

V. Accurate Billing Practices

HSO assures that all billings to government and private insurance payers are accurate and conform to pertinent Federal, State, and County laws and regulations. No one may knowingly provide false, fictitious, or fraudulent claims for payment. HSO operates oversight systems designed to verify accuracy of charges to take appropriate steps to correct mistakes and/or make refunds if necessary.

VI. Financial Integrity

HSO's financial records serve as a basis for managing our business and are important to meeting our trusted obligations to clients, colleagues, suppliers, and others. All financial records must be full, fair, accurate, and timely. Financial records include cost reporting, revenue, personnel payroll and benefits, timesheets, vouchers, bills, and other regulatory data. Records shall reflect actual transactions and our financial performance. HSO is required by law to follow generally accepted accounting principles for tax and financial reporting.

VII. Confidential Information

It is everyone personnel's responsibility to maintain the confidentiality and integrity of medical, clinical, business, and personnel records. Information includes, but is not limited to, proprietary information, lists, contracts, financial information, personnel information, or patient personal and health information. All information must be stored securely and used only by authorized HSO personnel for business purposes. No one may use HSO confidential information without proper authorization.

VIII. Fair Employee and Patient Practices

HSO is committed to providing healthy, safe, and equal opportunity work and treatment environments where everyone is treated with fairness, dignity, and respect. HSO is committed to employ, promote, contract, and serve patients without regard to race, color, national origin, age, sex, religion, ethnicity, disability (including any person with HIV infection, whether asymptomatic or symptomatic, or AIDS), gender identification, sexual preference, or sexual orientation. HSO will make reasonable accommodation to known limitations or disabilities. HSO complies with all laws, regulations, and policies related to non-discrimination.

IX. We All Must Follow the Code of Conduct and Government Laws and Regulations

HSO personnel are expected to act in the best interest of patient care, upholding the privacy, confidentiality, and integrity of the information related to the treatment, payment, and operations of HSO's healthcare delivery systems. Personnel will be held accountable for knowing and following federal, state, and local laws, and regulations related to their HSO role. Personnel must not engage in any illegal conduct and are expected to comply with HSO policies and procedures. When/if a HSO personnel is uncertain of a meaning or application of the COC or any governing law or policy, it is their responsibility to seek guidance from their immediate supervisor or the Compliance Officer. The Compliance Program and Code of Conduct Policy outlines key health care laws and potential penalties for noncompliance. HSO personnel are expected to follow compliance reporting processes, to know the consequences for wrong-doing or failure to report, to cooperate with compliance investigations, and support a culture of quality improvement and non-retaliation. Personnel must review policies and regulations, complete all required professional and compliance trainings, and attest to abide by HSO's Compliance Program and Code of Conduct annually.



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