



UC San Diego Health Sciences Standards of Conduct



TABLE OF CONTENTS

| | |
|---|----|
| ETHICAL VALUES | 3 |
| PURPOSE | 4 |
| ROLE OF THE COMPLIANCE PROGRAM | 4 |
| POLICIES AND PROCEDURES | 5 |
| REPORTING | 6 |
| NON-RETALIATION | 6 |
| CORRECTIVE ACTION / DISCIPLINE | 6 |
| EXCLUSION SCREENING..... | 7 |
| COMPLIANT WORKPLACE | 7 |
| DISRUPTIVE BEHAVIOR..... | 8 |
| SEXUAL VIOLENCE AND SEXUAL HARASSMENT | 9 |
| DISCRIMINATION, HARASSMENT, AND AFFIRMATIVE ACTION IN THE WORKPLACE | 9 |
| SUBSTANCE ABUSE..... | 9 |
| QUALITY OF CARE | 10 |
| MEDICALLY NECESSARY AND MEDICALLY APPROPRIATE SERVICES | 10 |
| EMTALA | 10 |
| CREDENTIALS AND PRIVILEGES..... | 11 |
| LICENSES AND RENEWALS..... | 11 |
| FACILITY REQUIRED ACCREDITATIONS, CERTIFICATIONS AND LICENSES | 11 |
| CONFLICT OF INTEREST | 12 |
| GIFTS | 13 |
| INCENTIVES OR GIFTS TO PATIENTS AND OTHER PROVIDERS..... | 13 |
| VENDORS | 14 |
| FINANCIAL INCENTIVES, BRIBES AND KICKBACKS..... | 15 |
| FRAUD..... | 16 |
| FALSE CLAIMS ACT AND DEFICIT REDUCTION ACT..... | 16 |
| FAIR COMPETITION..... | 16 |
| CONFIDENTIALITY AND PRIVACY | 17 |
| SECURITY | 18 |
| SHARING INFORMATION | 18 |
| SOCIAL MEDIA GUIDELINES | 18 |
| MEDIA RELATIONS AND INQUIRIES | 19 |
| COMPLIANCE WITH ALL CODING, BILLING AND COST REPORTING PRACTICE | 19 |
| RESEARCH COMPLIANCE..... | 20 |
| GOVERNMENT INVESTIGATIONS AND GOVERNMENT INFORMATION REQUESTS | 21 |
| UC SAN DIEGO HEALTH AND HEALTH SCIENCES RESOURCES | 22 |

ETHICAL VALUES

The University of California (UC) San Diego Health and Health Sciences vision is to deliver outstanding patient care through a commitment to the community, groundbreaking research and inspired teaching. As members of the University of California community, we are committed to the highest ethical standards to advance the mission of teaching, research and public service. We recognize that we hold UC San Diego Health and Health Sciences in trust for the people of the State of California. Our policies, procedures, and standards provide guidance for application of the ethical values stated below in our daily life and work as members of this community.

As members of UC San Diego Health and Health Sciences, we are committed to:

- **Integrity:** We will conduct ourselves with integrity in our dealings with and on behalf of the University.
- **Excellence:** We will conscientiously strive for excellence in our work.
- **Accountability:** We will be accountable as individuals and as members of this community for our ethical conduct and for compliance with applicable laws and University policies and directives.
- **Respect:** We will respect the rights and dignity of others.

See Attachment A (page 23):

[University of California Statement of Ethical Values and Standards of Ethical Conduct](#)



PURPOSE

The UC San Diego Health and Health Sciences Standards of Conduct is a set of standards to ensure we are conducting ourselves in an ethical and compliant manner. The Standards of Conduct applies to everyone associated with UC San Diego Health and Health Sciences, including faculty members, full-time and part-time employees, physicians, medical staff, affiliated health care providers, students, volunteers, vendors, first-tier downstream related entities, business associates, allied health professionals, and independent contractors and subcontractors performing work on behalf of UC San Diego Health and Health Sciences. The Standards of Conduct provides an overview of established standards and expectations, rules and regulations, and resources to report potential noncompliance. We are all responsible for reading and understanding the Standards of Conduct, the policies and procedures, and the laws and regulations that apply to our positions.

Additional Resources:

[APM-015, University of California Faculty Code of Conduct](#)
[MSP-014, Medical Staff Code of Conduct – Policy on Disruptive Physicians MSP-MSP 024, Medical Staff Professionalism Policy](#)
[Medical Staff Governance Documents](#)

ROLE OF THE COMPLIANCE PROGRAM

The Office of Compliance and Privacy serves to administer the compliance and privacy program for UC San Diego Health and Health Sciences by ensuring compliance with federal and state health care laws and regulations and all UC Policies. We are all members of the UC San Diego Health and Health Sciences Compliance Program and we agree to promote a culture of compliance by detecting, deterring, resolving, and preventing potential violations and non-compliance.



POLICIES AND PROCEDURES

Policies and procedures are designed to outline rules and standards to carry out our everyday work. Policies set the rules and procedures to describe specific processes. We recognize we must be knowledgeable and aware of the different policies and procedures relating to our positions. It is our responsibility to report a policy or procedure that we believe to be unclear, outdated, or in conflict with federal and state health care laws and regulations, and UC San Diego Health and Health Sciences' intentions (see ways to report on page 6). It is unacceptable to ignore policies and procedures we may not agree with. Below are the various policies applicable to UC San Diego Health and Health Sciences.

- **UC Office of the President, Presidential Policies:** Presidential Policies address all operations of the University of California to assure adherence to the Statement of Ethical Values and Standards of Ethical Conduct. Presidential Policies ensure compliance with applicable federal and state laws and regulations, Board of Regents Bylaws, and Standing Orders. These policies endure from one presidential administration to the next.
- **UC San Diego Health Policies (UCSDHPs):** UCSDHPs are specific to UC San Diego Health and Health Sciences operations and apply to all UC San Diego Health and Health Sciences facilities.
- **Departmental Policies & Procedures (DPPs):** DPPs, also known as Standard Operating Procedures (SOPs), are processes that are set up by and specific to a department. DPPs follow the standards outlined by UCSDHPs and UC Office of the President, Presidential Policies.
- **Medical Staff Policies (MSPs):** MSPs are policies developed, established and enforced by the Medical Staff Administration and govern the activities of the medical staff.
- **Academic Personnel Manual (APM):** APMs pertain to the employment relationship between an academic appointee and the University of California. APMs are developed, implemented, and managed by Academic Personnel and Programs.
- **Policy and Procedure Manual (PPM):** PPMs are the primary reference guide for operating policies and procedures and apply to academic, administrative, research, and service units. PPMs contain information on implementing APMs.

To view any policies please visit the links below:

[UC Office of the President \(UCOP\), Presidential Policies](#)

[UC San Diego Health Policies \(UCSDHPs\)](#)

[Departmental Policies & Procedures \(DPPs\)](#)

[Medical Staff Policies \(MSPs\)](#)

[Academic Personnel Manual \(APM\)](#)

[Policy and Procedure Manual \(PPM\)](#)

WAYS TO REPORT

- **Supervisor or Manager:** Supervisors and managers are required to report an allegation reported in the course of performing their supervisory duties.
- **The Office of Compliance and Privacy:** The Office of Compliance and Privacy can assist with research compliance, billing and coding compliance, patient privacy compliance, fraud, waste, and abuse, and general compliance concerns. For assistance, please contact 858-657-7487 or hscomply@health.ucsd.edu.
- **Medical Staff Administration:** Medical Staff Administration can assist practitioners or Advanced Practice Professionals with reported concerns. For assistance, contact ucsd-medstaffadmin@health.ucsd.edu.
- **iReport:** You can submit any known or suspected violations via the event reporting system, iReport, at www.ireport.ucsd.edu.
- **UC San Diego Locally Designated Official:** Contact the UC San Diego Locally Designated Official to report any allegations of suspected improper governmental activities at LDO@ucsd.edu.
- **UC Whistleblower Hotline:** You can submit any known or suspected violations via the UC Whistleblower Hotline. The Hotline is available 24/7 and will maintain your confidentiality, to the extent possible. To submit a report, please call 1-800-403-4744.

REPORTING

As members of the UC San Diego Health and Health Sciences community, we are expected to report all known or suspected Standards of Conduct violations. Authorized workforce members will investigate reports of known or suspected violations in a timely manner. We agree to cooperate fully with any investigation undertaken.

NON-RETALIATION

UC San Diego Health and Health Sciences is prohibited from retaliating against an employee or applicant for employment who has made a good faith report, even if the allegation ultimately proves to be without merit. However, UC San Diego Health and Health Sciences will pursue disciplinary action against any member who is shown to have knowingly filed a false report. Confidentiality will be kept to the extent reasonably possible; however, there may come a point where confidentiality is no longer reasonable or may be required to be revealed by law.

CORRECTIVE ACTION / DISCIPLINE

If UC San Diego Health and Health Sciences determined that a violation has occurred, UC San Diego Health and Health Sciences reserves the right to take corrective or disciplinary action against any person who was involved in the violation, or who allowed it to occur or persist, due to their failure to exercise reasonable diligence. UC San Diego Health and Health Sciences may make an appropriate disclosure to governmental agencies including law enforcement authorities. Disciplinary actions for employees will be determined on a case-by-case basis and in accordance with the applicable UC Office of the President, Presidential Policies and UCSDHPs. Discipline for members of the medical staff will proceed according to the terms of MSP – 014 Medical Staff Code of Conduct - Policy on Disruptive Physicians.

Reporting Resources:

[UC Whistleblower Protection Policy](#)

[PPM 200 – 14, Protection of Whistleblowers from Retaliation](#)

[MSP – 014 Medical Staff Code of Conduct - Policy on Disruptive Physicians](#)

[UCSDHP 561.3, Event Reporting \(iReport\)](#)

EXCLUSION SCREENING

As members of UC San Diego Health and Health Sciences, we may not be excluded from participation in any federal health care program. Failure to disclose a criminal conviction or other suspension/exclusion or debarment from federal/state health care programs (OIG, SAM or Medi-Cal) may result in termination or disciplinary action.

Exclusion Screening Resources:

[UCSDHP 559.1, Background Screening](#)

[UCSDHP 28, Exclusion Screening](#)

COMPLIANT WORKPLACE

UC San Diego Health and Health Sciences prohibits discrimination in any work-related decision based on gender, gender identity, sexual orientation, race, disability, religion, veteran status, the source of payment for a patient's services or a patient's ability to pay. We are committed to providing equal employment opportunity and an academic and work environment where each individual is treated with fairness, dignity and respect. As employees of UC San Diego Health and Health Sciences, we agree to follow our UC diversity and inclusion standards and we will act as positive role models for our trainees, staff and visitors, and show due respect to subordinates and one another.

Additionally, we are committed to preserving a safe and healthy work environment. All members of UC San Diego Health and Health Sciences are expected to comply with all relevant policies and regulations involving the health and safety of all employees, patients and visitors by proactively managing safety issues and promoting an environment that minimizes the risk of human injury, illness or damage to the facility or environment. As members of UC San Diego Health and Health Sciences, we are committed to:

- Following our diversity statement.
- Acting as positive role models for trainees, staff and visitors.
- Showing due respect to everyone.
- Creating a safe, healthy, and inclusive work environment.
- Not engaging in discrimination against or harassment of any person employed by or seeking employment with the University of California.
- Supporting an inclusive campus environment that is safe, accessible, and offers respect to all individuals regardless of gender identity or gender expression.
- Identifying possible options for reasonably accommodating an employee's disability.
- A harassment and violence-free workplace.
- A drug-free workplace.
- No disruptive behavior.

Compliant Workplace Resources:

[Policy on University of California](#)

[Diversity Statement](#)

DISRUPTIVE BEHAVIOR

All staff and physicians are expected to demonstrate the UC San Diego Health Leading the Way Experience Intentions: Unifying, Connecting, Seeing, and Discovering. UC San Diego Health and Health Sciences has zero tolerance for disruptive, intimidating, or other inappropriate behavior. This includes personal characteristics or behavior which poses a realistic and specific threat to the quality and safety of patient care, the effectiveness of the multidisciplinary health care team communication and functioning, or the wellbeing of health care team members. Characteristics of staff or a physician exhibiting prohibited disruptive behavior in the workplace may include, but are not limited to:

- Profane, disrespectful or derogatory language including the use of racial, ethnic, and gender-related epithets, jokes or slurs;
- Yelling or screaming;
- Demeaning, rude or intimidating behavior, including use of threatening or offensive gestures and verbal threats;
- Baseless threats to get an employee fired or disciplined;
- Touching, striking, or pushing others;
- Sexual comments or innuendos;
- Throwing, hitting or slamming objects;
- Outbursts of rage or violent behavior;
- Retaliation against a person who has filed a complaint against the staff person or the physician for violation of these standards;
- Inappropriately criticizing and/or not supporting health care professionals and UCSDH staff in front of patients and/or their families, visitors, or other staff;
- Inappropriate use of health records, including chart notes;
- Difficulty working collaboratively with others;
- Repeated failure to respond to a reasonable request by any caregiver for orders, instructions or assistance with a patient;
- Repeated failure to respond to a reasonable request by any staff member for assistance with an issue;
- Repeated failure to respond to reasonable requests for assistance by patients and/or family members;
- Repeated failure to respond to calls or pages;
- Repeated failure to remain current with Health and unit/department communications, staff meetings and trainings (including, but not limited to: emails, alerts, minutes, attendance at staff meetings, required trainings, etc.);
- Inappropriate arguments with patients, family, staff, and physicians.

Disruptive Behavior Resources:

[MSP – 014 Medical Staff Code of Conduct - Policy on Disruptive Physicians](#)

SEXUAL VIOLENCE AND SEXUAL HARASSMENT

The University of California has zero tolerance for sexual violence, sexual harassment, retaliation, and other prohibited behavior. The University will respond promptly and effectively to reports of such conduct. This includes action to stop, prevent, correct, and when necessary, discipline, inappropriate behavior as defined in the UCOP Sexual Violence and Sexual Harassment Policy, in order to ensure an equitable and inclusive education and employment environment.

Sexual Violence and Sexual Harassment Resources:

[UCOP Sexual Violence and Sexual Harassment](#)

DISCRIMINATION, HARASSMENT, AND AFFIRMATIVE ACTION IN THE WORKPLACE

The University of California is committed to providing a workplace free of discrimination and harassment. The University prohibits discrimination against any person employed; seeking employment; or applying for or engaged in a paid or unpaid internship or training program leading to employment with the University of California. In addition, the University prohibits harassment of an employee, applicant, paid or unpaid intern, volunteer, person participating in a program leading to employment, or person providing services pursuant to a contract. The University undertakes affirmative action, consistent with its obligations as a federal contractor.

Discrimination, Harassment, and Affirmative Action in the Workplace Resources:

[UCOP Discrimination, Harassment, and Affirmative Action in the Workplace](#)

SUBSTANCE ABUSE

We are committed to a drug-free workplace. Drugs may include illegal drugs, controlled substances, alcohol, or misused prescription medication. Working under the influence of drugs or alcohol, poses an unacceptable safety risk. We perform our job duties free from the influence of any substance that could affect job performance. We therefore prohibit working under the influence of alcohol, illegal drugs or controlled substances; possessing, selling, using or distributing illegal drugs or controlled substances while working or on company property, except in the legal and appropriate provision of controlled substances at one of our patient care facilities.

Additional Compliant Workplace Resources:

[UC Policy on Reasonable Accommodation](#)

[UCSDHP 533.2, Disabled Access to Program and Services](#)

[UCSDHP 539, Workplace Violence Prevention Program](#)

[UCSDHP 811.1, Environment of Care Program](#)

[Medical Staff Professionalism Policy](#)

QUALITY OF CARE

As members of UC San Diego Health and Health Sciences, we pride ourselves in providing quality care in a professional, compassionate manner and we participate in quality of care oversight programs. We treat all patients and members of the UC San Diego Health and Health Sciences community with understanding, kindness, respect, care and dignity. We do not distinguish the care we provide based on gender, gender identity, sexual orientation, race, disability, religion, veteran status, the source of payment for a patient's services or a patient's ability to pay. Members of the UC San Diego Health and Health Sciences community are committed to following all applicable policies, regulations, and licensing/accreditation requirements relating to quality of care. At UC San Diego Health and Health Sciences, we are dedicated to delivering the highest quality and safest care for every patient, every time.

MEDICALLY NECESSARY AND MEDICALLY APPROPRIATE SERVICES

We provide quality health care in a manner that is appropriate, medically necessary, and efficient. UC San Diego Health and Health Sciences physicians, and other health care professionals authorized by law to order items or services, shall only order or provide services and items that are medically appropriate, as determined by the health care professional. Medical necessity dictates that we be sensible in the utilization of resources, and should not over utilize or underutilize services provided to patients. Medically necessary services are always appropriately documented to support medical necessity.

EMTALA

We comply with the Emergency Medical Treatment and Active Labor Act (EMTALA) and similar regulations relating to the admission, transfer, and discharge of patients. We ensure public access to patients who seek emergency care by providing medical screening examinations and stabilizing treatments, within the capabilities of UC San Diego Health and Health Sciences, regardless of health insurance status or ability to pay. We recognize that under EMTALA, all patients have emergency medical care rights.

Quality of Care Resource:
[UCSDHP 301.7, Transfer and Compliance with EMTALA](#)



CREDENTIALS AND PRIVILEGES

As members of UC San Diego Health and Health Sciences, we are committed to maintain all required credentials, licenses and certifications. UC San Diego Health and Health Sciences will evaluate medical provider's education, training, work history, licensure, regulatory compliance record, and malpractice history.

LICENSES AND RENEWALS

We stay up to date on our licenses and renewals. Some of us are in positions that require professional licenses, certifications, or other credentials. We maintain the current status of our credentials. It is each colleague's personal responsibility to be able to provide evidence of compliance with federal, state or local licensing requirements. This could include:

- Licensing
- Certification
- Registration
- Accreditation

Each facility must keep procedures to ensure documentation of compliance with the requirements for each position description.

FACILITY REQUIRED ACCREDITATIONS, CERTIFICATIONS AND LICENSES

As members of UC San Diego Health and Health Sciences, we are committed to meeting the standard of care and we participate in several quality of care oversight programs. Our facilities maintain the required accreditations, certifications and licenses, such as accreditation by The Joint Commission (TJC). We are expected to participate in survey readiness programs and cooperate with the accreditation process.



CONFLICT OF INTEREST

As members of UC San Diego Health and Health Sciences, we recognize that outside activities must not conflict with our university duties. We are familiar with and compliant with fraud, waste, and abuse laws including, but not limited to, the California Political Reform Act, the False Claims Act (31 U.S.C. §§ 3729-3733), the Physician Self-Referral Law (42 U.S.C. § 1395nn) and the Anti-Kickback Statute (42 U.S.C. § 1320a-7b[b]). We avoid actual conflicts of interest, conflicts of commitment, and the appearances of such conflicts. In compliance with applicable UC Office of the President, Presidential Policies and UCSDHPs, we recognize that it is our responsibility to disclose any activities or relationships, to prevent any actual, perceived, or potential conflicts of interest or conflicts of commitment. If there are any actual or perceived conflicts, UC San Diego Health and Health Sciences will take the appropriate steps to mitigate the appearance of and avoid any conflicts of interest or conflicts of commitment.

Conflict of Interest Resources:

[APM 025, Conflict of Commitment and Outside Activities of Faculty Members](#)

[APM 670, UC Health Sciences Compensation Plan](#)

[APM 671, Conflict of Commitment and Outside Activities Health Sciences Compensation](#)

[PPM 200-13, Conflict of Interest](#)

[UCOP Conflict of Interest \(COI\) Policy & Compendium of Specialized University](#)

[UCSDHP 750.2, Conflict of Interest Disclosure for Staff and Clinicians](#)

[Conflict of Interest \(COI\) Office](#)



GIFTS

In accordance with the values of UC San Diego Health and Health Sciences and our standards for ethical conduct and ethical business practices, we do not solicit or accept personal gifts, business courtesies or services from patients, visitors, vendors, potential employees, business associates or any other individual or organization. Under very limited circumstances, the suitability of offering or accepting gifts may depend on the specific situation. We recognize that accepting a personal gift, under limited circumstances, must be approved by the Chief Compliance and Privacy Officer. Noncompliance will be handled in accordance with UC policies. For a list of items not considered gifts and not reportable see, UCOP Guidelines on Acceptance of Personal Gifts and Gratuities by Employees under California’s Political Reform Act.

If a patient, patient’s family member or other individual wishes to present a gift of gratitude, they should be referred to UC San Diego Health Sciences Advancement. Noncompliance will be addressed in accordance with UC Office of the President, Presidential Policies, UCSDHPs and other applicable policies.

INCENTIVES OR GIFTS TO PATIENTS AND OTHER PROVIDERS

Members of UC San Diego Health and Health Sciences will not provide unlawful incentives to patients for health care services at UC San Diego Health and Health Sciences, or provide unlawful incentives to other health care providers to refer health care business to UC San Diego Health and Health Sciences. Incentives to patients or referral sources may result in penalties from government enforcement and the organization.

Incentives to referral sources: Incentives paid to persons who are capable of influencing referrals, known as “referral sources,” can be disguised as a legitimate business arrangement. We will refrain from offering or receiving anything from other health care providers if the arrangement has not been vetted by appropriate contracting offices to be an exchange of fair market value.

Incentives to patients: Illegal incentives to patients can include all of the same incentives offered to referral sources, such as free rent, free or discounted health care services, or cash gifts. The government allows exceptions when certain circumstances are met. We will adhere to programs in place that facilitate appropriate free or discounted services and will consult the Office of Compliance and Privacy for proposals of new programs.

Gift Resources:

[UCSDHP 750.6, No Personal Gifts](#)

[UCOP Guidelines on Acceptance of Personal Gifts and Gratuities by Employees](#)

[UC San Diego Health Sciences Advancement](#)

VENDORS

As members of UC San Diego Health and Health Sciences, we are committed to ensuring all relations adhere to professional industry standards. We will avoid contracting for goods or services with family members or friends of UC San Diego Health and Health Sciences. We will also obtain approval from the appropriate UC San Diego Health and Health Sciences committees prior to any subcontractors, suppliers, or vendors introducing or using a new product, pharmaceutical, supply, medical device or technology at UC San Diego Health and Health Sciences. A Business Associate Agreement (BAA) must be signed prior to any work being conducted with an organization creating or maintaining Protected Health Information (PHI) on behalf of UC San Diego Health and Health Sciences. Additionally, UC San Diego Health and Health Sciences does not participate in marketing outreach with vendors. See, State of California Education Code Section 92000 for more information.

Vendor Resources:

[UCSDHP 550.1, Vendor Policy and Guidelines](#)

[UCOP, Health Care Vendor Relations Policy](#)

[State of California Education Code Section 92000](#)



FINANCIAL INCENTIVES, BRIBES AND KICKBACKS

We follow all industry anti-bribery laws, such as those that regulate the relationship between hospitals and physicians or other referral sources who may refer patients to the facilities. The two primary federal laws are the Anti-Kickback Statute and the Stark Law but there are also international, state and local laws. Potential interactions with physicians or other referral sources covered by the Anti-Kickback Statute or Stark Law include:

- Making payments to physicians or other referral sources for services rendered;
- Providing space or services to physicians or other referralsources;
- Recruiting physicians to the community;
- Arranging for physicians or other referral sources to serve in leadership positions in facilities;
- Referring patients to a practice owned by a family member.

| RULES | APPLICATION OF RULES |
|---|--|
| We do not make referrals based on financial relationships | Never offer to pay or give something of value to anyone for patient referrals |
| We do not pay for referrals | Patient referrals are based on medical need and our ability to provide the service |
| We do not accept payments for referrals we make | When making referrals, we do not take into account the volume or value of referrals the other provider makes to us No quid-pro-quo arrangements |

Federal False Claims Act: The False Claims Act and other statutes prohibit knowingly or recklessly submitting false claims to the government, or causing others to submit false claims.

Deficit Reduction Act: Contains a number of provisions intended to bolster Medicaid fraud and abuse enforcement, including the requirement to notify whistleblowers of their rights.

Anti-Kickback Statute: Prohibits offering or paying (or asking for or receiving) anything of value to induce the purchase, order, or recommendation of products eligible for payment by a federal healthcare program.

Stark Law: Prohibits a physician from referring business to an entity in which the physician or an immediate family member has a “financial relationship.” It also prohibits the entity from billing Medicare, other payers, or the individual for “designated health services” performed based on a prohibited referral.

FRAUD

It is also our responsibility to conduct business in the best interest of UC San Diego Health and Health Sciences and in accordance with the highest ethical standards. It is considered fraud to intentionally conceal, alter, falsify, or omit information for personal benefit or the benefit of others. We will avoid even the appearance of fraud in our business transactions. For example, we will never spend UC San Diego Health and Health Sciences funds without proper approval or enter into an agreement on behalf of UC San Diego Health and Health Sciences' unless authorized to do so. Some examples of fraud include:

- Presenting false medical information to obtain benefits
- Falsely reporting hours to earn more pay or to avoid discipline
- Requesting expense reimbursement from the company for personal items

FALSE CLAIMS ACT AND DEFICIT REDUCTION ACT

As members of UC San Diego Health and Health Sciences, we speak up if we see an error or potential false claim. The Federal False Claims Act and Deficit Reduction Act protect government programs including Medicare, Medicaid, and TRICARE from fraud and abuse. UC San Diego Health and Health Sciences follows these laws and has policies to detect, report, and prevent waste, fraud, and abuse. We also respect and provide protection for whistleblowers, including anonymous reporting options and non-retaliation policies. If we see an inaccurate medical record, we will fix it before it is submitted as a claim. If it has already been submitted, we will contact management, the Office of Compliance and Privacy, or the UC Whistleblower hotline.

FAIR COMPETITION

We compete fairly and being innovative means that we do not need to compete against others unfairly. We do not seek to gain an edge through unfair competition. We comply with all antitrust laws and never make agreements with competitors that create monopolies or stifle competition. We do not illegally obtain or use proprietary information from competitors, nor do we use deceptive means to gain such information.



CONFIDENTIALITY AND PRIVACY

Patients of UC San Diego Health and Health Sciences trust us to safeguard their medical, personal, and sensitive information. We comply with all established policies and statements involving patient information, including Protected Health Information (PHI). We only access, use, view and disclose patient information to authorized workforce members and users providing services related to patient treatment, payment and health care operations, with the patient's authorization and/or as permitted by law. We follow the minimum necessary standard by avoiding accessing, using, viewing or disclosing more patient information than is needed to perform our job duties.

As members of UC San Diego Health and Health Sciences, we comply with all federal and state laws and regulations protecting patient confidentiality and privacy including, but not limited to, the Health Insurance Portability and Accountability Act (HIPAA) and the Health Information Technology for Economic and Clinical Health Act (HITECH). We also comply with all University policies protecting patient confidentiality and privacy. We understand that complying with all laws, regulations and University policies is essential to preserving the trust of patients. If we believe a patient's information has been mishandled or that a law, regulation or policy involving patient confidentiality or privacy has been violated, we understand that we are required to notify the Office of Compliance and Privacy immediately.

In addition to patient confidentiality and privacy, we keep all employee records and UC San Diego Health and Health Sciences business records confidential and private. Personnel and business records are only accessed to perform our job duties, when permissible, and/or as required by law. When accessing personnel or business records, we only access, use, view or disclose the minimum information required to complete the task. We comply with all laws and established policies and statements involving employee and business records.

Confidentiality and Privacy Resources:

[UC HIPAA Guidance](#)

[Privacy Policies: UCSDHPs 1-25](#)

[UC Record Retention Schedule](#)



SECURITY

SHARING INFORMATION

As members of UC San Diego Health and Health Sciences, our mission is to protect the privacy and security of information resources. We must ensure the confidentiality, integrity and availability of the information to authorized users in a manner consistent with the UC San Diego Health and Health Sciences mission, in the most efficient and effective manner.

SOCIAL MEDIA GUIDELINES

As members of UC San Diego Health and Health Sciences, we are responsible for our use of social media platforms. We are committed to keeping information confidential and we never post patient information or photographs on personal social media platforms or anywhere online, even if the patient is not identified. When using social media platforms, we are respectful to UC San Diego Health and Health Sciences, our employees, our patients and family members and friends, our customers, partners and affiliates, and others, including our competitors.

Sharing Information and Social Media Resources:

[UCSDHP 210.1, Security of Information Resources](#)

[UCSDHP 523.1, Social Media Guidelines](#)



MEDIA RELATIONS AND INQUIRIES

If contacted by members of the news media, members of UC San Diego Health and Health Sciences must contact the UC San Diego Health Marketing and Communications department at the main phone number or webpage located in the blue box below. Media communications involving Protected Health Information (PHI) must comply with federal and state privacy laws. Requests from vendors for media outreach (including white papers) should be declined and/or referred to Media Relations.

| |
|---|
| <p style="text-align: center;">Media Relations Resources: <u>UC San Diego Health Marketing and Communications</u> Main Phone Line: 858-249-0456 <u>Media Relations Webpage</u></p> |
|---|

COMPLIANCE WITH ALL CODING, BILLING AND COST REPORTING PRACTICE

UC San Diego Health and Health Sciences conducts all coding, billing and cost reporting practices honestly, fairly, and with integrity for all, including, but not limited to, patients and private and government payers. As members of UC San Diego Health and Health Sciences, we agree to:

- Conduct all coding, billing, and cost reporting practices in compliance with all federal and state laws, and rules and regulations.
- Ensure all billing submitted is accurate, appropriately documented, and only reflects services and care rendered, and products delivered.
- Prepare and document cost reports, accounting records, and financial reports accurately.
- Allocate all bills and funds to the correct cost/revenue centers.
- Maintain documents and data that is verifiable and auditable in accordance with all applicable rules and regulations.
- Disclose current, complete and accurate cost and pricing data, when requested in accordance with federal or state law.
- Bill all private and government payers accurately and honestly, including, but not limited to, Medicare and Medicaid.
- Follow all documentation standards ensuring timely, accurate and legible documentation and authentication.
- Complete all documentation, coding, billing and accounting for patient care services in accordance with applicable federal, state, and payer regulations and policies, as well as UC Office of the President, Presidential Policies and UCSDHPs.
- Bill all Graduate Medical Education (GME) services appropriately as established by Centers for Medicare & Medicaid Services (CMS) and Accreditation Council for Graduate Medical Education (ACGME).

| |
|--|
| <p style="text-align: center;">Billing and Coding Resources: <u>UCSDHP 320.1, Timely Preparation and Authentication of Medical Records</u> <u>UCSDHP 325.2, Legal Medical Record</u> <u>UCSDHP 750.3, Charity Care</u> <u>UCSDHP 750.5, Uninsured Patient Discount</u> <u>UCSDHP 750.7, Professional Courtesy Discounts and Waivers</u></p> |
|--|

RESEARCH COMPLIANCE

In locations where we conduct research and clinical trials, we do so with the highest ethical and professional standards. We protect the rights and privacy of study subjects through compliance with ethical standards and all applicable federal and state regulations, UC Office of the President, Presidential Policies, UCSDHPs, human research procedures and approvals, and the requirements of all governmental and private research sponsors.

As members of UC San Diego Health and Health Sciences, we agree to:

- Conduct research and clinical trials with the highest ethical and professional standards and conform to the highest standards of honesty and integrity.
- Comply with all standards, rules and regulations enforced by the federal and state government, institutional committees and all applicable policies and procedures.
- Protect the rights and privacy of study subjects.
- Ensure approval is granted by the Institutional Review Board (IRB) for research involving human subjects and obtain legally effective informed consent from a research subject or a subject's authorized representative. In addition to IRB approval, the Health System should be aware and/or consulted in some circumstances prior to initiating research
- Advise all subjects involved in a research study on alternative treatments and make clear the risks and benefits of the proposed study.
- When designing and conducting a study that involves the use of Protected Health Information (PHI), we adhere to the conditions when PHI may be utilized for research purposes and access only the minimum information necessary to conduct the study.
- Follow Good Clinical Practice (GCP) standards for designing, conducting, recording and reporting research studies involving human research subjects to ensure the protection of their rights, safety and well-being. Individuals who have direct research participant contact should be GCP certified.
- Familiarize ourselves with relevant policies and procedures in order to sustain accuracy, integrity and credibility in our research studies.
- Prevent and report any form of research misconduct, including activities such as plagiarism, misrepresentation, falsification of data or insufficient documentation of subject participation in a research study.
- Bill all research subjects and activities accurately in compliance with the budgeting and billing requirements outlined by UC Office of the President, Presidential Policies and UCSDHPs.
- Adhere to best practices to protect information, including data encryption and storage in a secure environment.

Research Resources:

[Good Clinical Practice Training](#)

[UCSDHP 9, Research: Utilization of Protected Health Information \(PHI\)](#)

[UCSDHP 340.1, Informed Consent for Human Research Subjects](#)

[UCSDHP 342.2, Clinical Research Billing](#)

[UC San Diego Human Research Protections Program](#)

GOVERNMENT INVESTIGATIONS AND GOVERNMENT INFORMATION REQUESTS

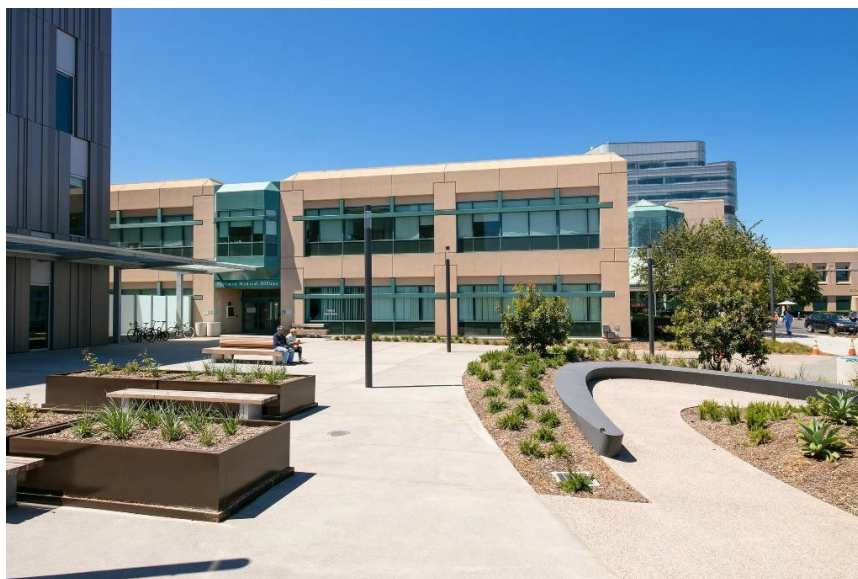
Representatives of the government and/or other external regulatory agencies may arrive unannounced at UC San Diego Health and Health Sciences facilities including the School of Medicine, Skaggs School of Pharmacy and Pharmaceutical Sciences, Clinical Practice Organization, UC San Diego Health medical center(s) and clinics, or at the home of present or former personnel, staff members or contractors.

We are expected to cooperate fully with government and regulatory investigations and audits. We have the legal right to consult a supervisor, Compliance Officer, Risk Management or UC General Counsel before answering questions. If approached, we will:

- Immediately notify the appropriate Health System director or Risk Management. If the director is not immediately available, contact the Risk Management Department, the Office of Compliance and Privacy, Audit & Management Advisory Services (Internal Audit), or campus legal counsel.
- Ask to see the government representative's identification and business card. Otherwise, ask for the person's name, business address, telephone number, and identification number so that a UC San Diego Health and Health Sciences representative can call the government representative's office to verify their authority.
- Consult with a supervisor before providing the investigator with documents pertaining to patients, personnel, students or other UC San Diego Health or Health Sciences business.
- Not destroy documents.
- Not lie or make misleading statements.

Government Investigations Resources:

[UCSDHP 555.1, Employee Response to a Government and/or Other External Regulatory Agency Investigation and Survey](#)



UC SAN DIEGO HEALTH AND HEALTH SCIENCES RESOURCES

- University of California Office of the President (UCOP): www.ucop.edu
- Office of Compliance and Privacy: hscomply@health.ucsd.edu, 858-657-7487
- Medical Staff Leadership: ucsd-medstaffadmin@health.ucsd.edu
- Legal Department: <https://chancellor.ucsd.edu/about-the-office>
- Student Legal Services: 858-534-4374
- Risk Management: 619-543-2042
- Environmental Health and Safety: 858-657-7166; Emergency Management: ucsdhem@ucsd.edu
- Human Resources: 619-543-3200
- Marketing and Communications: 858-249-0456; Information Security: 619-543-HELP (x3-4357)
- Experience Transformation: experiencetransformation@ucsd.edu
- Police Department Non-Emergency Phone: 858-534-HELP (4357)
- Audit and Management Advisory Services (AMAS): (858) 534-3617, <https://blink.ucsd.edu/sponsor/amas/index.html>
- Advancement: <https://blink.ucsd.edu/sponsor/advancement/health/index.html>

WAYS TO REPORT

- **Supervisor or Manager:** Supervisors and managers are required to report an allegation reported in the course of performing their supervisory duties.
- **The Office of Compliance and Privacy:** The Office of Compliance and Privacy can assist with research compliance, billing and coding compliance, patient privacy compliance, fraud, waste, and abuse, and general compliance concerns. For assistance, please contact 858-657-7487 or hscomply@health.ucsd.edu.
- **Medical Staff Administration:** Medical Staff Administration can assist practitioners or Advanced Practice Professionals with reported concerns. For assistance, contact ucsd-medstaffadmin@health.ucsd.edu.
- **iReport:** You can submit any known or suspected violations via the event reporting system, iReport, at www.ireport.ucsd.edu.
- **UC San Diego Locally Designated Official:** Contact the UC San Diego Locally Designated Official to report any allegations of suspected improper governmental activities at LDO@ucsd.edu.
- **UC Whistleblower Hotline:** You can submit any known or suspected violations via the UC Whistleblower Hotline. The Hotline is available 24/7 and will maintain your confidentiality, to the extent possible. To submit a report, please call 1-800-403-4744.



University of California

Statement of Ethical Values

Members of the University of California community are committed to the highest ethical standards in furtherance of our mission of teaching, research and public service. We recognize that we hold the University in trust for the people of the State of California. Our policies, procedures, and standards provide guidance for application of the ethical values stated below in our daily life and work as members of this community.

We are committed to:

Integrity

We will conduct ourselves with integrity in our dealings with and on behalf of the University.

Excellence

We will conscientiously strive for excellence in our work.

Accountability

We will be accountable as individuals and as members of this community for our ethical conduct and for compliance with applicable laws and University policies and directives.

Respect

We will respect the rights and dignity of others.



University of California

Standards of Ethical Conduct

Purpose

Pursuit of the University of California mission of teaching, research and public service requires a shared commitment to the core values of the University as well as a commitment to the ethical conduct of all University activities. In that spirit, *the Standards of Ethical Conduct* are a statement of our belief in ethical, legal and professional behavior in all of our dealings inside and outside the University.

Applicability

The Standards of Ethical Conduct apply to all members of the University community, including The Regents, Officers of The Regents, faculty and other academic personnel, staff, students, volunteers, contractors, agents and others associated with the University. Organizationally, the *Standards* apply to campuses, the National Laboratories, the Office of the President, the Division of Agriculture and Natural Resources, campus organizations, foundations, alumni associations and support groups.

1. Fair Dealing

Members of the University community are expected to conduct themselves ethically, honestly and with integrity in all dealings. This means principles of fairness, good faith and respect consistent with laws, regulations and University policies govern our conduct with others both inside and outside the community. Each situation needs to be examined in accordance with the *Standards of Ethical Conduct*. No unlawful practice or a practice at odds with these standards can be justified on the basis of customary practice, expediency, or achieving a "higher" purpose.

2. Individual Responsibility and Accountability

Members of the University community are expected to exercise responsibility appropriate to their position and delegated authorities. They are responsible to each other, the University and the University's stakeholders both for their actions and their decisions not to act. Each individual is expected to conduct the business of the University in accordance with the *Core Values* and the *Standards of Ethical Conduct*, exercising sound judgment and serving the best interests of the institution and the community.

3. Respect for Others

The University is committed to the principle of treating each community member with respect and dignity. The University prohibits discrimination and harassment and provides equal opportunities for all community members and applicants regardless of race, color, national origin, religion, sex, gender identity, pregnancy, physical or mental disability, medical condition (cancer-related or genetic characteristics), ancestry, marital status, age, sexual orientation, citizenship, or status as a covered veteran. Further, romantic or sexual relationships between faculty responsible for academic supervision, evaluation or instruction and their students are prohibited. The University is committed to creating a safe and drug free workplace. Following is a list of the principal policies and reference materials available in support of this standard:

- *The Faculty Code of Conduct*
- *Academic Personnel Policy Manual*
- *The Faculty Handbook*
- *Personnel Policies for Staff Members*
- *Policies Applying to Campus Activities, Organizations and Students*
- *Policy on Sexual Harassment and Procedures for Responding to Reports of Sexual Harassment*
- *University policies on nondiscrimination and affirmative action*
- *Campus, laboratory and Office of the President Principles of Community*

The University's health sciences enterprises are committed to the ethical and compassionate treatment of patients and have established policies and statements of patient rights in support of this principle.

4. Compliance with Applicable Laws and Regulations

Institutions of higher education are subject to many of the same laws and regulations as other enterprises, as well as those particular to public entities. There are also additional requirements unique to higher education. Members of the University community are expected to become familiar with the laws and regulations bearing on their areas of responsibility. Many but not all legal requirements are embodied in University policies. Failure to comply can have serious adverse consequences both for individuals and for the University, in terms of reputation, finances and the health and safety of the community. University business is to be conducted in conformance with legal requirements, including contractual commitments undertaken by individuals authorized to bind the University to such commitments.

The Office of the General Counsel has responsibility for interpretation of legal requirements.

5. Compliance with Applicable University Policies, Procedures and Other Forms of Guidance

University policies and procedures are designed to inform our everyday responsibilities, to set minimum standards and to give University community members notice of expectations. Members of the University community are expected to transact all University business in conformance with policies and procedures and accordingly have an obligation to become familiar with those that bear on their areas of responsibility. Each member is expected to seek clarification on a policy or other University directive he or she finds to be unclear, outdated or at odds with University objectives. It is not acceptable to ignore or disobey policies if one is not in agreement with them, or to avoid compliance by deliberately seeking loopholes.

In some cases, University employees are also governed by ethical codes or standards of their professions or disciplines – some examples are attorneys, auditors, physicians and counseling staff. It is expected that those employees will comply with applicable professional standards in addition to laws and regulations.

6. Conflicts of Interest or Commitment

Employee members of the University community are expected to devote primary professional allegiance to the University and to the mission of teaching, research and public service. Outside employment must not interfere with University duties. Outside professional activities, personal financial interests, or acceptance of benefits

from third parties can create actual or perceived conflicts between the University's mission and an individual's private interests. University community members who have certain professional or financial interests are expected to disclose them in compliance with applicable conflict of interest/conflict of commitment policies. In all matters, community members are expected to take appropriate steps, including consultation if issues are unclear, to avoid both conflicts of interest and the appearance of such conflicts.

7. Ethical Conduct of Research

All members of the University community engaged in research are expected to conduct their research with integrity and intellectual honesty at all times and with appropriate regard for human and animal subjects. To protect the rights of human subjects, all research involving human subjects is to be reviewed by institutional review boards. Similarly, to protect the welfare of animal subjects, all research involving animal subjects is to be reviewed by institutional animal care and use committees. The University prohibits research misconduct. Members of the University community engaged in research are not to: fabricate data or results; change or knowingly omit data or results to misrepresent results in the research record; or intentionally misappropriate the ideas, writings, research, or findings of others. All those engaged in research are expected to pursue the advancement of knowledge while meeting the highest standards of honesty, accuracy, and objectivity. They are also expected to demonstrate accountability for sponsors' funds and to comply with specific terms and conditions of contracts and grants.

8. Records: Confidentiality/Privacy and Access

The University is the custodian of many types of information, including that which is confidential, proprietary and private. Individuals who have access to such information are expected to be familiar and to comply with applicable laws, University policies, directives and agreements pertaining to access, use, protection and disclosure of such information. Computer security and privacy are also subject to law and University policy.

Information on the University's principles of privacy or on specific privacy laws may be obtained from the respective campus or laboratory information privacy office.

The public right to information access and the individual's right to privacy are both governed by state and federal law, as well as by University policies and procedures. The legal provisions and the policies are based upon the principle that access to

information concerning the conduct of the people's business is a fundamental and necessary right of every person, as is the right of individuals to privacy.

9. Internal Controls

Internal controls are the processes employed to help ensure that the University's business is carried out in accordance with these *Standards*, University policies and procedures, applicable laws and regulations and sound business practices. They help to promote efficient operations, accurate financial reporting, protection of assets and responsible fiscal management. All members of the University community are responsible for internal controls. Each business unit or department head is specifically responsible for ensuring that internal controls are established, properly documented and maintained for activities within their jurisdiction. Any individual entrusted with funds, including principal investigators, is responsible for ensuring that adequate internal controls exist over the use and accountability of such funds. The University has adopted the principles of internal controls published by the Committee of Sponsoring Organizations (COSO) of the Treadway Commission.

10. Use of University Resources

University resources may only be used for activities on behalf of the University. They may not be used for private gain or personal purposes except in limited circumstances permitted by existing policy where incidental personal use does not conflict with and is reasonable in relation to University duties (e.g. telephones). Members of the University community are expected to treat University property with care and to adhere to laws, policies and procedures for the acquisition, use, maintenance, record keeping and disposal of University property. For purposes of applying this policy, *University resources* is defined to include but not be limited to the following, whether owned by or under the management of the University (for example, property of the federal government at the National Laboratories):

- Cash, and other assets whether tangible or intangible; real or personal property;
- Receivables and other rights or claims against third parties;
- Intellectual property rights;
- Effort of University personnel and of any non-University entity billing the University for effort;
- Facilities and the rights to use University facilities;
- The University's name;

- University records, including student and patient records; and
- The University information technology infrastructure.

11. Financial Reporting

All University accounting and financial records, tax reports, expense reports, time sheets and effort reports, and other documents including those submitted to government agencies must be accurate, clear and complete. All published financial reports will make full, fair, accurate, timely and understandable disclosures as required under generally accepted accounting principles for government entities, bond covenant agreements and other requirements. Certain individuals with responsibility for the preparation of financial statements and disclosures, or elements thereof, may be required to make attestations in support of the *Standards*.

12. Reporting Violations and Protection from Retaliation

Members of the University community are strongly encouraged to report all known or suspected improper governmental activities (IGAs) under the provisions of the *Policy on Reporting and Investigating Allegations of Suspected Improper Governmental Activities* (Whistleblower Policy). Managers and persons in supervisory roles are required to report allegations presented to them and to report suspected IGAs that come to their attention in the ordinary course of performing their supervisory duties. Reporting parties, including managers and supervisors, will be protected from retaliation for making such a report under the *Policy for Protection of Whistleblowers from Retaliation and Guidelines for Reviewing Retaliation Complaints* (Whistleblower Retaliation Policy).

Adopted by The Regents of the University of California, May, 2005.