

ROPER ST. FRANCIS HEALTHCARE

OUR CODE OF CONDUCT

The Right Thing to Do



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Introduction & Application

Introduction

Our Code of Conduct does not cover every situation. Instead, it provides guidelines that are detailed in the organization's policies and procedures. Compliance is Roper St. Francis Healthcare's commitment to comply with all laws and regulations relating to its operations. Our Compliance Program was created to ensure that the organization is following all law, regulations, and policies that relate to our operations while carrying out our mission. The Compliance Program is directed by a Compliance Officer who oversees compliance throughout all levels of the system and ensures that any compliance problems reported are investigated and resolved. Our Board of Directors has created an Audit and Compliance Committee whose main responsibilities are to **1)** implement, maintain, and improve the Compliance Program and Code of Conduct; **2)** make sure the system upholds the standards of this Code; and **3)** make sure that people can report perceived or actual compliance violations without fear of retribution or retaliation.

Roper St. Francis Healthcare was formed to serve the citizens of our communities by providing high quality healthcare services that reflect our values. Employees are our greatest assets, and they are the best example to the communities we serve of the values the organization has endorsed. It is very important that all employees of the organization be familiar with and commit to the mission and values which are part of **Our Code of Conduct**.

It is a commitment by RSFH to fulfill its mission by having employees who are qualified, patient-oriented individuals who will **do the right thing** in all situations. **Our Code of Conduct** will help the organization focus on **The Right Thing to Do** as we fulfill our mission.

Application

Many individuals and organizations that are not employed by the system work closely with us. These include board members, medical staff, volunteers, vendors, and independent contractors. All of these individuals and organizations are expected to honor and abide by all applicable portions of **Our Code of Conduct** and other corporate policies while working in any system facility or conducting business with, or on behalf of, the system. It is acceptable to the system for these parties to have their own codes of conduct that they may follow, so long as their codes do not materially conflict with **Our Code of Conduct**. This edition of **Our Code of Conduct** supersedes all prior editions.



Mission & Values

Founding Members

We are members of a unified healthcare system who share the heritage of our founders:

The Medical Society of South Carolina

The Sisters of Bon Secours as the successors to the Sisters of Charity of Our Lady of Mercy

The Carolinas HealthCare System

We have served the people of the Carolinas and more specifically those in Charleston and the Lowcountry, for more than 200 years.

Mission & Values

Our mission is ***“Healing all people with compassion, faith, and excellence”***.

We commit ourselves to accomplish this mission throughout the hospitals, medical offices, and other facilities of Roper St. Francis Healthcare. Roper St. Francis Healthcare’s values form a fundamental part of the Ethical Standards provided by its founding members as a guide to carrying out its mission. These values are:

Integrity: We strive to be honest and forthright upholding the highest ethical standards.

Compassion: We care about the sick and those for whom medical care is out of reach or unaffordable.

Stewardship: We strive to meet community needs and exercise great care of the resources entrusted to us.

Healing all People with Compassion, Faith and Excellence



Respect: We recognize the worth, quality, diversity and importance of each other and of those we serve.

Quality: We work together to deliver excellent care to our patients and seek to be the best in all we do.

Innovation: We strive to be on the cutting edge of new and beneficial ways to care for our patients, prevent illness and deliver all our services.

Justice: We treat each other, our patients and others with whom we work with fairness and advocate for equitable public health policies.

Growth: We work to broaden the range of our services to give added strength to Roper St. Francis Healthcare by establishing and maintaining strategic relationships with physicians and other community based organizations.

Patient Care

Roper St. Francis Healthcare is dedicated to providing the highest quality of personalized care, products and services in a considerate and compassionate manner. We are committed to maintaining the highest ethical standards as we work together to deliver quality care to patients and their families.

Patients will be provided with information regarding their rights and responsibilities. We will endeavor to protect these rights throughout the patient's care and treatment.

Patients have the right to considerate and respectful care that meets their unique healthcare, spiritual, emotional and cultural needs.

Patients have the right to receive information they need to make decisions about their care and treatment.

In accordance with the Lewis Blackman Act, patients have a right to contact their attending physician as well as know who is providing their care and when that care is rendered by a student.

Patients have an equal right to treatment without regard to race, color, creed, religion, nationality and payment source.

Patients have the right to be involved in the decision-making process and to accept or refuse medical care to the extent permitted by law and to be informed of the medical consequences.

Patients have the right to information about Advance Directives and/ or a Health Care Power of Attorney. Patients have the right to have their Advance Directive respected and followed.

Patients have the right to information about our privacy practices and how their health information can be used. Patients have the right to confidentiality, privacy and security.

Patients have the right to express any concerns about their care. Patients have the right to know how their concerns will be resolved.

Patients are entitled to a complete disclosure of all charges related to their care and treatment.

Patients have the right to the education and training required to meet their ongoing medical healthcare needs.

QUESTIONS TO ASK YOURSELF

- Do I inform the patient when students or other new members are added to their established medical team?
- Do I always treat patients with respect and dignity?
- Am I careful not to let my personal feelings or circumstances interfere with patient care?
- Do I respect the privacy of our patients?

Confidentiality

Consistent with HIPAA (Health Insurance Portability and Accountability Act), members of our workforce (employees, physicians, students, volunteers, etc) will protect the confidentiality and security of patient information.

Written consent of the patient is required for the use and release of medical record information.

Employees will be constantly alert to avoid disclosure of confidential patient and company information.

We will maintain the trust and confidentiality of our patients, families or fellow employees place in us when using or disclosing written or computer records.

We will not assist others in acquiring confidential information about patients, families or fellow employees.

In accordance with the Federal Trade Commission, we will comply with the Roper St. Francis Healthcare identity theft program

All personnel inquiries will be referred to Human Resources. All legal contacts will be sent to the Legal Services Department

In accordance with HIPAA's requirement for minimum necessary, only teammates with an approved business reason will access and disclosure protected health information; and access shall be kept to the minimum amount necessary to perform one's assigned job duties.

QUESTIONS TO ASK YOURSELF

- Do I limit access to the patient's medical record to those involved in the patient's care?
- Do I obtain or verify written consent prior to releasing information?
- Do I avoid discussion of patient information in public areas, on mobile phones, and in electronic mail messages?
- Do I respect the privacy of my fellow employees?
- Do I keep my computer password confidential?
- Am I careful not to leave patient files, reports or other information in areas that could be viewed by the public or by someone who does not have a business need to see it? Do I keep my computer password confidential?

Conflicts of Interest

A conflict of interest occurs when a relationship, influence or activity impairs, or even gives the appearance of impairing, one's ability to make objective and fair decisions in the performance of his/her job. Such situations are not always easy to avoid. When we do face a conflict of interest, it is important that we act with great care and promptly and fully disclose it to your supervisor and the Compliance Department.

We will not engage in, directly or indirectly, any conduct which is disloyal, disruptive, competitive, or damaging to the organization.

We will not disclose the organization's policies, programs, techniques, or confidential information to any other individual or company without appropriate authorization.

We will not conduct business through the improper use of business courtesies, gifts or relationships. It is against the law, and System policy, to give or receive any "remuneration" either in return for or to induce: (a) a patient referral or (b) the purchase or lease of a service or item. Remuneration is defined as anything of economic value, including kickbacks, bribes and rebates (whether in cash or in-kind). Even the opportunity to earn money may be considered remuneration.

We will not solicit or expect gifts from an existing or potential vendor that might compromise, or appear to compromise, the objective assessment of the vendor's products or services. In the course of normal business relationships it is permissible to accept (but not request) non-cash items of nominal value.

We will not solicit or use our position within the System to obtain a special discount or other favorable treatment (e.g. free gift) for yourself or others not extended by the vendor to all System employees.

We will not solicit nor expect any gifts from patients. Cash gifts of any amount may never be accepted. Non-cash gifts of a small value may be accepted (cookies, flowers).

We will disclose any financial interest we or our immediate family have in any firm which does business with the organization or which competes with the company.

We will avoid situations that could create, or give the appearance of, a conflict of interest.

QUESTIONS TO ASK YOURSELF

- Do I serve as a director, officer, consultant, or in another key role with a company doing business or competing with our system?
- Do I avoid hiring or contracting with a family member or friends to provide goods and/or services to the system?
- Do I refrain from using system data or property for personal gain?
- Do I attempt to influence company decisions so that I receive financial benefit?
- Do I ask my supervisor if I'm not sure whether to accept an offer of a gift?

Finance & Records

Our success and ability to serve the community depend on good financial practices and accurate patient records. We will meet or exceed all applicable accounting and regulatory standards. We will be careful in developing patient records, using the records' information, and respecting the privacy of the patients whose records we hold.

All records shall be prepared accurately, reliably, honestly and in accordance with established finance and accounting procedures. An employee must not enter false or misleading information into system records.

Entries of cost, financial or similar business information shall be made only to the regularly maintained books and records. No "off the books" transactions will be tolerated.

We maintain a system of administrative and accounting controls to:

- safeguard our assets;
 - check the accuracy and reliability of our accounting data;
 - promote operational efficiency; and
 - encourage compliance with laws and regulations.
-

All of us are responsible for proper accounting, and adherence to control procedures, to ensure that errors or irregularities are avoided or are identified and corrected in a timely manner.

We truthfully and accurately maintain all paper and electronic data, including medical records and financial reports, in accordance with applicable laws, regulations and policies.

We ensure that only authorized individuals can access medical and billing records.

All records will be stored in a safe and secure location for the period of time required by law or policy, whichever is longer.

Records will be organized in a manner which permits prompt retrieval. Old or unneeded records, either in electronic or paper forms, should be properly disposed of, or purged, in accordance with the applicable document retention schedules.

An employee should never destroy or alter any document in anticipation of, or in response to, a request for those documents by any government agency, court, or other authorized investigation.

QUESTIONS TO ASK YOURSELF

- Am I accurate in reporting financial information?
- Am I accurate in my timekeeping?
- Am I following proper accounting procedures and controls?
- Am I, as a supervisor or financial representative, challenging the level of documentation supporting payments and reimbursements that I am authorizing?
- Am I, as an employee, providing proper documentation to support my payment and reimbursement requests?
- Am I, as an employee, following facility policy on the email documentation requirements?

Billing

It is against the law for a health care provider to submit fraudulent or false claims for payment to programs that are funded by federal or state governments, such as Medicare or Medicaid. The Federal False Claims Act outlines penalties for individuals or entities who knowingly submit a false claim, or cause another individual or entity to submit a false claim, for payment or approval by the U.S. government or South Carolina government.

All services will be properly ordered and documented.

The system will not tolerate anyone misrepresenting the services, supplies, and equipment furnished in order to circumvent coverage limitations or to increase payments from third parties.

We are committed to timely, complete and accurate coding and billing, and bill only for services that we actually provide and believe to be medically necessary.

It is expected that if you work in a billing or coding area you will understand and comply with all billing-related policies and procedures established by the system.

Employees are required to report known or suspected false claims violations immediately. Reports may be made to supervisors, the Compliance Department, or the Helpline.

Employees who report suspected violations are protected by Roper St. Francis Healthcare policy from any type of retribution or retaliatory acts. Employees who choose to report a false claim to the federal or state government are entitled to whistleblower protections, including protection from retribution or retaliation by the employer.

Certain government regulations and many insurance payer contracts require that patients pay co-insurance, co-payments and deductibles.

Consequently, the practice of routinely writing off these patient financial responsibilities violates legal and contractual obligations and is therefore prohibited unless charity care guidelines are met.

The system's policy is to refund any overpayments made as a result of billing errors.

We offer discounts to uninsured patients as allowed by the federal government and administer such discounts consistently via a welldefined policy and procedure.

QUESTIONS TO ASK YOURSELF

- Does documentation support for billing the services rendered?
- Are all services provided to the patient reasonable and necessary according to the rules and regulations that govern the organization?
- Am I ever instructed to process a bill in a way that is contrary to my understanding of third party rules and regulations?
- Do I alter bills in any way to avoid third party edits or denials?
- Do I contact my supervisor or Compliance Department when I have billing questions or concerns?

Admissions, Treatments & Referrals

We admit or treat patients based on medical necessity and in accordance with their rights under the law. We accept patients appropriately referred to us and do not improperly induce referrals from physicians or other health professionals.

Roper St. Francis Healthcare will provide emergency medical care and treatment regardless of the patient's ability to pay.

We ensure that, if a patient has an emergency medical condition, we treat and/or admit the patient and only transfer the patient after he or she has been stabilized.

In non-emergent situations, patients are expected to financially resolve their obligations to the health system prior to or at the time services are provided.

We will provide appropriate, quality care to meet a patient's needs, regardless of the setting in which that care is provided.

Discharge planning begins at the time of admission and continues throughout the treatment process. The patient, patient's family, loved ones, and the clinical team are all involved in the discharge planning process.

Patients are discharged with an aftercare or follow-up plan including interface with community organizations and support groups whenever needed. In cases where care is needed after discharge, the System, in accordance with federal laws and regulations, does not require patients to utilize Systemowned or operated services.

We will not make payments or provide noncash benefits to anyone for providing a referral or to induce a referral.

Physicians and other health professionals who are not employees of the system are free to refer patients to any person or entity they deem appropriate

QUESTIONS TO ASK YOURSELF

- **Am I aware of any arrangements where individuals are paid for referrals?**
- **Do I know about any urgent or emergent patients who were not treated because they could not pay for services that were medically necessary?**
- **Did I provide the same level of care to all patients?**
- **Am I aware of any situations where a patient was not given adequate choice with regards to home care?**

Media Inquiries & Advertising

We respect our patients' right to privacy and do not discuss hospital business with others or with the news media. We are truthful in all advertising about our health system and services.

All requests for information, photography or filming from the news media should be directed to our Corporate Communications Department as follows:

Media Relations Manager

(843) 720-8456

Director of Corporate Communications

(843) 958-1272

We will not answer questions or release any information about our patients or proprietary information about our organization unless contacted by the Corporate Communications Department.

The Corporate Communications Department will be responsible for responding to media inquiries and will request assistance from employees as appropriate and necessary. Only designated personnel will serve as health system spokespersons.

We will always respect our patients' right to privacy and will not release any information without patient permission and/or appropriate legal department review/approval. We recognize that the unapproved release of information may be illegal as well as unfair to our patients and could damage the system's reputation or interests.

We may use marketing and advertising activities to educate the public, provide information to the communities we serve, increase awareness of our services, and recruit colleagues.

All advertising claims will be supported by facts. We will not make negative claims about our competitors in our efforts to promote the system.

QUESTIONS TO ASK YOURSELF

- Am I careful not to answer questions or discuss information about our patients and system proprietary information with the news media?
- Do I direct all media requests to the Corporate Communications Department or administrative supervisor on duty?
- Do I verify the accuracy of information before providing it to others for use in marketing and media relations?

Safeguarding Property & Technology

We will utilize Roper St. Francis Healthcare's assets only for authorized business purposes. Our goal is to protect the property of the organization from theft, disappearance, or misuse and to protect the safety of our employees and patients.

We will properly use system equipment and assets and maintain them in proper working condition.

We will receive proper training and instruction on the use of all equipment involved in the performance of our job.

We will establish and maintain proper controls to protect assets against improper use or disposition.

We do not allow property to be used to carry out illegal acts.

We will properly use system equipment and assets and maintain them in proper working condition.

We will receive proper training and instruction on the use of all equipment involved in the performance of our job.

We will establish and maintain proper controls to protect assets against improper use or disposition.

We do not allow property to be used to carry out illegal acts.

We will not use equipment for community activities unless approved by our supervisor.

We will not violate copyright or licensing laws pertaining to software, videos, or printed materials.

We will not make copies of our organization's software for personal use, nor will we install unapproved software on the organization's computer system.

We cooperate with and assist in all measures needed to provide security of property and technology.

QUESTIONS TO ASK YOURSELF

- Am I careful not to use or share non-public information for my own personal use?
- Do I respect the intellectual property rights of others?
- Do I refrain from making copies of software for personal or professional use?
- Do I use system copiers, computers or medical supplies for personal use?

Safety: Your Health & Environment

The system seeks to provide a healthy and safe environment for all patients, visitors and employees.

Roper St. Francis Healthcare is committed to taking reasonable steps to assure compliance with all federal and state laws, regulations and policies.

All reasonable steps will be taken to assure that we comply with all standards pertaining to scientific and clinical research.

The illegal use, sale, or transfer of drugs is not permitted. We will not possess or drink alcoholic beverages in the work place except at System authorized social events. We will not possess, purchase, or drink alcoholic beverages while operating company vehicles or report to work impaired by alcohol, illicit drugs, or medications.

In order to maintain good safety practices in all locations and circumstances:

- Supervisors will ensure that all employees are properly trained in health and safety practices and precautions.
- Employees have a responsibility to complete training and adhere to all health and safety practices such as:
 - Safety and security measures provided for the protection of the patients, visitors, and employees.
 - Management of Hazardous Materials including, but not limited to, hazard communication, infectious waste, and chemical/radiation exposure.
 - Emergency Management/Life Safety protocols
 - Mechanisms for reporting of violations, violence, accidents/incidents and exposures.



QUESTIONS TO ASK YOURSELF

- When I see an unsafe situation or violation, do I act responsibly to report or correct the situation?
- Am I knowledgeable of safety protocols set forth by the system and do I support these protocols?
- Do I report to work impaired by alcohol, illegal drugs, or prescription medication that may affect my job performance?
- Do I report employees or others who appear to be under the influence of alcohol or drugs?

Political & Regulatory

The system seeks to be a good corporate partner with the communities it serves. In our interactions with community organizations, political officeholders, and regulatory agency officials, we will individually and as an organization act in accordance with all legal and ethical standards.

We encourage you to participate, as a private citizen, in the political process and as an advocate for religious and charitable organizations, so long as that participation does not: **(a)** interfere with the satisfactory performance of your job duties; **(b)** bring discredit or embarrassment to the System; or **(c)** create a conflict of interest.

No system funds, equipment, facilities, or assets may be used to support a political party, candidate, holder of any government position or any community organization without appropriate senior management approval.

Dealing with governmental agencies or departments (such as DHEC, FDA, OSHA, EEOC, US Attorney's Office) should be handled in accordance with System policies under the direction of the Legal Services Department and Compliance Department.

Under the direction of Legal Services, the System will cooperate with requests for information from government auditors, investigators or other officials. Any written documents, such as search warrants or notification of investigation letters, or verbal contacts, should be brought to the attention of the Legal Services Department immediately.

An employee who is contacted by a government agent in connect with an investigation or request for documents should immediately:

- Write down the agent's and agency's names.
- Notify the supervisor who will contact the Administrator on Call, Corporate Compliance, and Legal Services.

- If the agent has a legal document (search warrant or subpoena), request a copy.
 - Maintain a written inventory of any documents taken by the agent.
 - Never destroy or alter any record requested by a government agency or court.
 - Never provide misleading or untruthful information to a government agent or persuade anyone else to do so.
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Relationships with competitors should be handled in a legitimate manner, avoiding actions which are anti-competitive or otherwise contrary to the law.

QUESTIONS TO ASK YOURSELF

- Do I ever express my political or religious views in the workplace in such a way that co-workers or subordinates may feel intimidated or harassed if they don't agree?
- Do I refrain from relationships with competitors that might be improper?
- Do I appropriately seek advice from my supervisor, Corporate Compliance, and/or Legal Services before dealing with government agencies?
- Do I immediately bring written or verbal requests for information to my supervisor or the Legal Services Department?
- Do I verify that I have contracting authority and seek advice from Legal Services before entering into contracts on behalf of the System?

Equal Employment for All & Workplace Behavior

We are committed to provide a work environment that respects the rights, dignity and cultural differences of its employees, patients and the communities we serve. Roper St. Francis Healthcare exercises its policies and procedures within the limits of state and federal laws without regard to race, age, religion, sex, national origin, veteran status, disability or handicap.

We will treat others in a prompt, caring and respectful manner, always following the Roper St. Francis Healthcare Standards of Behavior.

We will constantly improve our System to provide accessible, user-friendly, and responsive service.

We will adhere to the Human Resources Professional Standards of Appearance Policy 7500-04-02 and present ourselves professionally at all times.

We will adhere to the Human Resources Harassment, Discrimination and Retaliation Policy 7500-04-01 and the Human Resources Workplace Violence Policy 7500-04-19 to ensure that the working environment is free from violent, intimidating and/or disruptive behaviors.

Our organization has zero tolerance for workplace violence, harassment, discrimination or retaliation and will take appropriate action if an investigation confirms that this has occurred.

Questions or concerns regarding workplace behavior or equal employment opportunity, should be taken to an Employee Relations Representative in the Human Resources Department.

There will be no retaliation against any employee who brings forward truthful complaints to our organization or any regulatory agency concerning workplace violence/safety, discrimination, harassment, retaliation or any other issue.

QUESTIONS TO ASK YOURSELF

- Have I ever taken part in making jokes about a person's race or gender?
- Have I ever been inappropriate in touching or talking to another person?
- Do I respect differences in race, gender, or national origin and not let these impact my job performance or that of someone else?
- Do I know what to do if I witness harassment, discrimination, or disruptive behavior, and am I willing to do it?
- Do I show all individuals the same respect I expect to receive myself?
- Do I give directions and help patients, families, and visitors find their way around our facilities?

Training & Review

Our Code of Conduct: The Right Thing to Do

We have enjoyed a long tradition of high standards and good citizenship and service to the communities we serve. We have built this reputation through countless acts and decisions made by you and the teammates who served before you. Our reputation is one of our most precious assets which we must protect and extend every day.

In today's complex and changing world, we can sometimes run up against new or changing laws and regulations. Understanding that, we know that excellence includes becoming and staying knowledgeable about the rules that govern our business. To assist us in raising the level of excellence, training regarding ***Our Code of Conduct: The Right Thing to Do and the Compliance Helpline*** is required for all employees and applicable others that work closely with us. Training is directly connected to our Mission and Values and is sensitive to scheduling needs. Many of us will receive specialized training on subjects such as billing, coding, safety, clinical practice and environmental issues, and employment regulations that relate specifically to our jobs. In order to measure the effectiveness of ***Our Code of Conduct*** and its training program, annual employee surveys and compliance audits will be conducted on these and many other important subject areas.

Our training program will only be effective with your participation and input. Supervisors and managers are key to making sure all employees are scheduled and attend training and participate in any audits.

Remember, only we can ensure that ***Our Code of Conduct*** is followed to achieve the standards of excellence we seek to achieve.



Getting Help

Roper St. Francis Healthcare needs your help in order to follow the standards described in this booklet. We are responsible, as an organization and as individuals, to act in an ethical and legal manner. In certain instances, you may encounter situations or issues that may not be covered in ***Our Code of Conduct***. In these instances where you need additional guidance or direction on any ethics or compliance related issue, you should seek the advice of your supervisor or the various policies and procedures manuals of the system and its member organizations. If you are unable to seek, or you are uncomfortable when seeking guidance from these sources, you should seek assistance from the Human Resource, Legal Services or Corporate Compliance Departments.

Because the subjects of ethical behavior and compliance with laws and regulations are important, the system also has created the ***Compliance HelpLine***. The ***Compliance HelpLine*** is available to any employee who has a question or employees who observe violations of the standards of conduct described in this booklet or other violations of laws and regulations. The system wants to make it clear to you that you can raise these concerns without any fear that you will be disciplined or terminated for doing the right thing. We only ask that you tell the truth as you understand it or see it.

If we determine that someone purposely made up, exaggerated, or otherwise distorted a report of wrongdoing, whether to protect themselves or to hurt someone else, that person will not be protected under this policy. We maintain a “zero tolerance” policy toward violations of applicable laws and regulations or other wrongdoing. Anyone who violates applicable laws, regulations, policies, or this Code

may be disciplined. People may also be disciplined if they do not report a compliance violation. Disciplinary action may include termination or contract revocation.

The **Compliance Helpline** is not intended to replace the current procedures and processes in place throughout the system for communicating information and resolving operational conflicts or problems. For example, you should continue to utilize your facility's policies and mechanisms for resolving issues such as employee grievances and risk management issues.

The **Compliance Helpline** is run by an independent contractor and is available to all employees seven days a week, twenty-four hours a day. The toll-free number is (800) 597-3386. **Compliance Helpline** calls are all forwarded to **Compliance Helpline** within twenty-four hours. Emergencies are forwarded immediately. You may ask your questions or report suspected unethical or illegal acts without giving your name, if you so desire. An additional feature of the **Compliance Helpline** is a confidential Post Office Box that will be provided to any individual who calls the **Compliance Helpline** and prefers to make their report in writing. The system will investigate and respond to all **Compliance Helpline** inquiries. You will be able to follow-up on the status of your inquiry, if you wish. Again, no action will be taken against any employee who, in good faith, reports information to the **Compliance Helpline**.

COMPLIANCE HELPLINE

(800) 597-3386

