

HENRY FORD HEALTH SYSTEM CODE OF CONDUCT

Together, We Can



BUSINESS INTEGRITY SERVICES



CODE OF CONDUCT



Henry Ford Hospital and Health Network

Henry Ford Hospital

Henry Ford Medical Group

Henry Ford Behavioral Services

Henry Ford Wyandotte Hospital

Henry Ford Macomb Hospitals

Henry Ford West Bloomfield Hospital

Community Care Services

Corporate Services

Health Alliance Plan

As Henry Ford Health System employees, we must:

- Support and practice the HFHS vision, “Transforming lives and communities through health and wellness – one person at a time.”
- Refrain from outside activities or personal interests that result, or appear to result, in a conflict of interest and maintain the highest standards of business ethics.
- Know, understand and comply with laws, regulations and professional organization requirements that apply to our job.
- Comply with all HFHS policies and procedures designed to ensure proper and legal employment practices and appropriate standards of the workplace environment.
- Comply with all HFHS policies and procedures designed to ensure proper recording, retention, transmission, confidentiality and security of all clinical and business information.
- Preserve and protect institutional assets by making prudent and effective use of resources and accurately reporting their use.
- Promptly report to management any observed conduct that violates this code of conduct, a law, regulation, professional organization requirement or HFHS policy or procedure by employees, students, volunteers, contractors or agents.

HENRY FORD HEALTH SYSTEM MISSION, VISION AND VALUES

Mission

To improve people’s lives through excellence in the science and art of health care and healing

Vision

Transforming lives and communities through health and wellness – one person at a time

Values

Each Patient First

Respect for People

High Performance

Learning and Continuous Improvement

A Social Conscience

*As HFHS employees, we must support and practice the HFHS vision,
“Transforming lives and communities through health and wellness - one
person at a time*

Each patient is an individual with unique health care needs. We must provide the best possible care focused on these needs and recognize that effective quality medical care requires a cooperative effort with the patient (or designated representative). This principle is carried out by:

- Providing the quality of care and comfort we want for our families and ourselves.
- Treating patients, their families and guests and each other with respect and dignity.
- Courteously and sincerely smiling and greeting each patient and family member, using their name whenever known.
- Using appropriate vocabulary whenever communicating with patients and families, directly, electronically, or by telephone or in writing.
- Satisfying each patient's needs, providing genuine care and comfort, concentrating, in turn, on each patient's welfare, and fulfilling even unexpressed wishes and needs.
- Providing personal service, identifying patient preferences and tailoring service to those preferences.
- Contributing to a proper atmosphere for patients and visitors through careful attention to personal appearance and the appearance of our facilities.
- Working in partnership with coworkers, physicians, patients, family members, outside agencies, etc. as a team to collectively satisfy all patient needs.
- Receiving complaints and concerns non-defensively and communicating these to the appropriate person, doing our best to make sure that the patient or family member receives a timely response.
- Providing all patients a level of care based only on their diagnosis, treatment needs, care planning and other aspects of patient care.
- Examining and stabilizing patients who request emergency service without regard to ability to pay and only transferring the patient when the medical advantages outweigh the risks as determined by the physician or upon patient request.
- Basing all admissions on patient need, our ability to provide care at the admitting facility, and our contractual obligations to the patient's health plan.
- Encouraging patients to participate in their own care, inquire about their medical care plan and provide advanced directives. We will provide appropriate information to patients so they can consent to treatment on an informed basis and we will honor their decisions.
- Planning discharges in the best interest of the patient and developing these in collaboration with the patient/family/caregiver and the multidisciplinary health care team.



As HFHS employees, we must refrain from outside activities or personal interests that result in or appear to result in a conflict of interest and we must maintain the highest standards of business ethics.

CONFLICT OF INTEREST:

We must refrain from participating in outside activities or having financial interests that influence or appear to influence our ability to make objective decisions for patient care and HFHS. We must never use our official position or influence to gain an improper advantage, economic or non-economic, for ourselves or our family members, vendors, patients, customers or associates. (Note: unless otherwise stated, for this Code, “family members” include parents, spouses, children, siblings, and domestic partners).

Whenever we are involved in any situation that is or might appear to be a conflict of interest, we must disclose it to HFHS management. This includes disclosures in response to routine annual disclosure requests, as occurs annually for trustees and selected employees, and, in addition, disclosure of any new situation that is or might appear to be a conflict of interest. If a conflict exists, HFHS will work with employees to resolve it. If the conflict cannot be resolved, HFHS will take appropriate action, such as ending a vendor relationship or terminating employment, depending on the circumstances and nature of the conflict. Advice on handling potential conflicts of interest may be obtained by contacting the Business Integrity office.

GUIDELINES FOR SPECIFIC TYPES OF BUSINESS CONDUCT AND CONFLICT OF INTEREST:

Business Entertainment: We may accept occasional invitations from vendors to off-site social activities provided that we are accompanied by the vendor and it is clear to all concerned that acceptance facilitates the business purposes of the relationship and in no way influences our decision-making on behalf of HFHS.

Donations: Donations, gifts or bequests to HFHS are encouraged. They must be freely given, intended to further the mission of the System, not intended to personally benefit an individual employee and not linked to a contractual obligation or other HFHS business activity. All donations should be coordinated through the Philanthropy Department.

Expert Testimony: We are prohibited from serving as an expert witness if our testimony conflicts or could appear to conflict with the best interest of HFHS, or if payment for such services could in any way appear to influence our decision-making on behalf of HFHS. Expert testimony must be performed outside of work hours, not use any HFHS resources, and should be approved by your manager or department chair.



Gifts: We must not accept anything of value from a vendor if it could in any way appear to influence our decision-making on behalf of HFHS. When onsite, our vendor relations policy prohibits us from accepting any gift. Off-site, on occasion, we may accept gifts of nominal value (\$100 or less), if acceptance will not influence the decisions we make regarding that vendor. Acceptance of such gifts must be disclosed on our annual disclosure statement and they must not be brought on-site. We are encouraged to seek advice from our supervisor whenever guidance is needed.

Loans: We may not accept loans from vendors of either a personal or business nature unless the vendor is a commercial lender and the loan is based on prevailing market terms.

Outside Employment and Consulting: We and our family members are prohibited from employment and consulting relationships (including speeches, presentations, written articles etc.) with a vendor if this could appear to influence our decision-making on behalf of HFHS. If we wish to participate in an employment or consulting relationship that does not influence our decision-making on behalf of HFHS, this: (1) Should be approved by your manager or department chair; (2) must be conducted outside of work hours and not conflict with our HFHS job responsibilities or the best interests of HFHS; (3) must not use HFHS resources or be conducted on HFHS property; and (4) must not utilize the services of any subordinate. (Note: Compensation for participation in marketing activities on behalf of Industry is prohibited; this includes what is most commonly referred to as industry-sponsored “Speaker’s Bureaus.”)

Physician Relationships: We must structure all business arrangements with physicians to ensure compliance with legal requirements. Such arrangements must be in writing, at market value, and approved by the HFHS Legal Department.

Prizes or Awards: If we receive a prize or award from a vendor, we must disclose this by requesting and submitting a completed conflict of interest disclosure form and abide by any decisions made as to the ultimate disposition of the prize or award.

Discounts from Vendors: Discounted purchases of goods or services from a vendor for personal use are not permitted unless part of an HFHS sponsored program.

Referrals: We must never compensate anyone in any way for patient referrals nor can we accept compensation for referrals we make.

Serving on Boards: If we sit on the board of directors or advisory board of an organization we must abstain from decisions that impact or appear to impact the relationship between the organization and HFHS. If attendance at outside board activities is during HFHS time, compensation should not be offered or accepted. Any involvement on the board of an organization must be disclosed to HFHS.

Sponsorships: Vendor sponsorship of a function that benefits HFHS is allowed as long as it could not appear to create a conflict, is freely given, and is not linked to any contractual obligation of HFHS. Such sponsorships must be referred to the Office of Philanthropy or Corporate Accounting for specific guidelines and procedures. Vendor sponsorship of an outside function which personally benefits any employee or family member is prohibited.

Vendor Funded Travel: All vendor sponsored travel must be disclosed and fulfill a bona fide education or consultative purpose and directly benefit HFHS.

Vendor Relationships: Relationships with vendors that could appear to influence our decision-making on behalf of HFHS are detrimental to our healthcare mission and are prohibited. The value of goods and services supplied by vendors must be judged by their utility, quality and pricing, not on the ability of the vendor to influence us in any other way. At HFHS, we:

- Restrict and monitor vendor access to our facilities, particularly to patient care areas.
- Educate vendor representatives as to the conduct expected of them while on our premises and certify them as qualified to visit these facilities.
- Establish strict guidelines as to what “donations” may be accepted from a vendor and by what process.
- Monitor relationships and interactions between employees who make purchasing decisions and the vendors from whom they purchase. We must not conduct business on behalf of HFHS with a family member, other relative, or with a company of which we are an officer, director, principal, employee or agent without first advising the Business Integrity Department so that appropriate advance approval can be sought and management plans put into place.

Waiving of Charges: To comply with private insurance and government regulations, we, as health care professionals, may not waive charges for services as a “professional courtesy.”

Nepotism: It is against HFHS policy for an employee to be placed under the direct supervision or being supervised by a relative, domestic partner or significant other.



As HFHS workforce members, we must know, understand and comply with all laws, regulations and professional organization requirement that apply to our jobs.

THE FALSE CLAIMS ACT

As a recipient of federal health care program funds, including Medicare and Medicaid, HFHS is required by law to include in its policies and provide to all workforce members, students, agents and contractors, detailed information regarding the federal False Claims Act and applicable state civil and criminal laws intended to prevent and detect fraud, waste and abuse in federal health care programs.

What is the False Claims Act?

The False Claims Act is a federal law that makes it a crime for any person or organization to knowingly make a false record or file a false claim regarding any federal health care program, which includes any plan or program that provides health benefits, whether directly, through insurance, or otherwise, which is funded directly, in whole or in part, by the United States Government or any State health care program. “Knowingly” includes having actual knowledge that a claim is false or acting with “reckless disregard” as to whether a claim is false. Examples of potential false claims include knowingly billing Medicare for services that were not provided, submitting inaccurate or misleading claims for actual services provided, or making false statements to obtain payment for services.

The False Claims Act contains provisions that allow individuals with original information concerning fraud involving government health care programs to file a lawsuit on behalf of the government and, if the lawsuit is successful, to receive a portion of recoveries received by the government.

State Laws

In most states it is a crime to obtain something (i.e., such as a Medicaid payment or benefit) based on false information. In addition to the federal law, Michigan has adopted similar laws allowing individuals to file a lawsuit in state court for false claims that were filed with the state for payment, such as the Medicaid program.

Penalties for Violating the False Claims Act

There are significant penalties for violating the federal False Claims Act. Financial penalties to an organization that submits a false claim can total as much as three times the amount of the claim, plus fines of \$5,000 - \$10,000 per claim. In addition to fines and penalties, the courts can impose criminal penalties against individuals and organizations for willful violations of the False Claims Act. The false claims law adopted in Michigan also carries significant fines and penalties of \$5,000 - \$10,000 per claim.

WHAT IS FRAUD AND ABUSE?

Fraud and Abuse laws generally prohibit the following:

- Submitting inaccurate or misleading claims for services provided
- Submitting claims for services not provided
- Submitting claims that don't meet payer requirements (e.g. coverage for services)
- Making false statements or representations to obtain payment for services or to gain participation in a program
- The offer or payment of money, goods or anything of value in return for the referral of patients to a health care provider
- Offering or giving something of value to patients to encourage them to use or purchase health care services

Protections Under the False Claims Act

The federal False Claims Act protects anyone who files a lawsuit under the Act from being fired, demoted, threatened or harassed by his or her employer as a result of filing a False Claims Act lawsuit. Similar protections are also provided to individuals under the state False Claims Act laws adopted in Michigan.

BILLING FOR SERVICES:

We take great care to ensure that all billings are for services that are medically necessary and supported in the medical record. Bills must accurately reflect the services provided and comply with all applicable federal and state laws and regulations. We must provide an explanation of charges with the bill and provide a means of answering patient questions and resolving differences.

RESEARCH:

Our research programs are conducted in compliance with all state, federal, sponsor and institutional regulations and policies. We must not:

- Use research funds in a manner inconsistent with the funding agency's guidelines.
- Inappropriately reveal private patient information in the conduct of research.
- Fail to disclose a conflict of interest and research misconduct as required by federal and institutional regulations.

COPYRIGHT AND PATENT:

We comply with all copyright and patent laws. We must not:

- Share software with more people than are allowed under the licensing agreement.
- Duplicate copyrighted materials without proper permission.

POLITICAL CONTRIBUTIONS AND LOBBYING:

We do not engage in activity that may jeopardize the tax-exempt status of the System, including a variety of lobbying and political activities. If we, as individuals, support a candidate for political office, a political party, an organization, or political action committee, support must be conducted on our own behalf, time and expense. HFHS may not contribute money, property, or services to any political candidate, party, organization, committee or individual. All HFHS contacts with government bodies and officials must be conducted in an honest and ethical manner, without an attempt to influence by the offer of any improper benefit. Requests or demands by a governmental representative for any improper benefit should be immediately reported to the Legal Department.

MARKETING: Our marketing materials must reflect only the services available and the level of licensure and accreditation held.



TAXES: As a nonprofit tax-exempt entity, HFHS has a legal and ethical obligation to act in compliance with applicable laws, engage in activities in furtherance of its charitable purpose, and ensure that its resources are used in a manner which furthers the public good rather than the private or personal interests of any individual. Consequently, HFHS and its employees must avoid compensation arrangements in excess of fair market value, accurately report payments to appropriate taxing authorities, and file all tax returns in a manner consistent with applicable laws.

As HFHS workforce members, we must comply with all HFHS policies and procedures designed to ensure proper and legal employment practice or appropriate standards of workplace environment

EMPLOYMENT POLICY AND PRACTICE

Diversity and Equal Opportunity Employment: HFHS respects and values the unique talents of all employees and is committed to creating an environment and culture that maximizes their personal growth and their contribution to serving the health care needs of our diverse communities. HFHS does not discriminate in the recruitment, hiring, promotion, termination or any other condition of employment or career development based on race, religion, national origin, sex, age, marital status, sexual orientation, height, weight, disability, citizenship or veteran status. Unlawful discrimination includes harassment of individuals based on any of these factors.

Sanctioned Individuals: HFHS screens for and does not employ individuals or entities ineligible to participate in federal health care programs.

License and Certification Renewals: If we are required by law to be licensed, certified or otherwise credentialed to perform our services, we must keep our licenses/ certifications current and report all status changes in license/certification as soon as possible following the change.

Employment of Family Members: Though employment of our family members is acceptable, relatives must not work together in a supervisor/subordinate relationship. (Note: for employment purposes, family member is defined as first cousin or closer, naturally, by law or by marriage.)



WORKPLACE ENVIRONMENT

Environmental Health and Safety: Keeping the workplace clean and safe helps everyone. We must learn the health and safety rules relating to our job and make sure we always follow them.

Alcohol and Drug Abuse: When we report to work and while at work or on HFHS property, we must remain free from the effects of alcohol and drugs that could adversely affect our ability to perform our job.

Harassment/Sexual Harassment: We must avoid behavior that might result in harassment of other employees, patients or visitors. Harassment includes but is not limited to: verbal abuse, suggestive comments, inappropriate gestures and physical contact.

Workplace Threats and Violence: HFHS intends to provide a safe and non-violent environment for its employees and customers. Threatening, harassing, intimidating, physically or verbally abusing or coercing HFHS employees, patients, guests, visitors or supervisory personnel is considered a serious offense. Employee conduct of this nature will be promptly investigated with immediate and appropriate corrective action taken, up to and including termination.

As HFHS workforce members, we must comply with all HFHS policies and procedures designed to ensure proper recording, retention, transmission, confidentiality and security of all clinical and business information

INFORMATION PRIVACY AND SECURITY

Protecting patient and other sensitive information is key to maintaining patient and co-worker trust. The Information Privacy & Security Program includes oversight for various sets of data including patient, member, employee, financial and business information. Workforce members are required to access, use and transmit sensitive information in accordance with HFHS policies & procedures and support a “culture of confidentiality”.

Patient Information: Patient Information: All patient information is confidential and must never be shared with anyone unless there is a legitimate need to know or the disclosure is authorized by the patient or permitted by applicable law.

Business Information: In addition, some of the sensitive information used daily to conduct HFHS business is confidential.

HFHS Strategies and Operations: Sensitive information about HFHS strategies and operations is a valuable asset. The sensitive information we use to perform our job must not be shared with others unless the individuals have a legitimate need to know and have agreed to maintain confidentiality. If our relationship with HFHS ends for any reason, we are still bound to maintain the confidentiality of sensitive information obtained during employment.

DEVICES AND ELECTRONIC MEDIA

All electronic media, issued by HFHS, such as laptops/computers, tablets, flash drives, telephones, voicemails, internet access and electronic mail (“e-mail”) are provided to workforce members solely to facilitate appropriate business communications. In addition, personal devices used for HFHS business purposes, should only be used in accordance with System policies ensuring the security of electronic media. The content is the property of HFHS and HFHS maintains the right to monitor and retrieve all such communications.

ELECTRONIC THREATS AND SCAMS

Threats and attacks are launched against the HFHS network on a daily basis. The Information Technology department works diligently to protect our electronic perimeter but some scams involving electronic mail may make it to your inbox. One consistent trend targets email communications because it can reach the maximum amount of users who may be unaware of the danger. In light of that, we wanted to make you aware of these authentic-looking emails that attempt to get victims to reveal their personal information which is typically used to distribute viruses or for purposes of identity fraud. If you receive such an email, never provide your UserID or Password, for our Information Technology department will not request your credentials via email. Immediately FORWARD the email to SPAM@hfhs.org for proper containment.

CODE B ALERT PROGRAM

The Code B Alert stands for Code BREACH Alert and helps to insure a proper response to data breaches as required by HFHS policies. All workforce members are alerted when there is a media reportable data breach or other data breach that could pose significant risk to HFHS or patients. Code B alerts may include communication to patients, FAQs about the breach, and instructions for forwarding patient inquiries to a toll-free call center. Every Code B Alert requires immediate attention by the entire health system, and should be shared with all workforce members through department meetings or huddles.

E-Mail Distribution: HFHS leaders encourage the flow of information to its workforce through electronic means, but seeks to minimize the use of mass, unsolicited emails to all or most employees. System-wide emails must be approved and sent by the HFHS Public Relations, Information Technology, Human Resources, Security or Purchasing Department.

Web Policy: HFHS leaders recognize the value of web technology, but do not allow the creation of websites or services either in or outside the Henry Ford networks, without the review and approval of the Web Services, Marketing and Information Technology Department. Online and electronic content, images, video and other like collateral material used on any of the HFHS web properties are the exclusive property of HFHS and cannot be used on other properties without the express written consent of Web Services, Marketing, or Information Technology Departments.

As HFHS workforce members, we must preserve and protect institutional assets by making prudent and effective use of resources and accurately reporting their use

EMPLOYMENT POLICY AND PRACTICE

Work Ethic: While at work, we must be personally accountable and responsible for the work we do, realizing that compensated time spent non-productively wastes HFHS resources.

Theft and Waste: We must protect HFHS equipment and supplies from theft and waste. We are in violation of System policy if we steal or misuse money, information, equipment, or supplies, or falsify time sheets. We must spend HFHS assets as carefully as we would our own. Any employee who steals or misuses HFHS property, regardless of value, can be discharged and/or be subject to criminal prosecution.

Internal Controls: HFHS has established control standards and procedures to ensure that assets are protected and properly used and that financial records and reports are accurate and reliable. We all share responsibility for maintaining and complying with internal controls.

Financial Reporting: All financial reports, cost reports, accounting records, research reports, audits, expense accounts, time sheets and other documents must be accurate and clearly represent the relevant facts. Improper or fraudulent accounting, documentation or financial reporting is contrary to the policy of HFHS and may be in violation of applicable laws. All transactions conducted in the name of HFHS are subject to established authorization and recording procedures.

Travel and Entertainment: Travel and entertainment expenses should be consistent with job responsibility and HFHS needs and resources. We must comply with all HFHS and business unit policies relating to travel and entertainment.

Advertising: HFHS does not allow the creation of marketing or advertising campaigns including media purchase and placement of advertising by staff outside the HFHS Marketing Department. All marketing content, images, audio and video or like material used by HFHS are the exclusive property of HFHS. Content cannot be used or duplicated without the express written consent of the HFHS Marketing Department.

Corporate Identity: The HFHS trademark is the equity of the System and is what distinguishes the HFHS name in the mind of the consumer. The HFHS trademark is a corporate asset, registered with the Patent and Trademark Office. The HFHS logo must always be presented consistently, and its integrity must always be maintained in accordance with the HFHS Corporate Identity Standard Guidelines.



As HFHS workforce members, we must promptly report to management any observed conduct that violates this code of conduct, a law, regulation, professional organization requirement or HFHS policy or procedure

Compliance to the Code of Conduct is the responsibility of all workforce members. The trust of the entire community, HFHS patients and other customers depends on our honesty and integrity. Any HFHS employee who fails to follow the standards of the Code of Conduct or other legal requirements, or engages in unethical business practices, must be reported. Once reported, appropriate investigation, enforcement and remedial action must occur.

HFHS maintains an open environment, in which employees at every level of the organization should believe that their good faith report of possible non-compliance will be taken seriously, that HFHS will not tolerate retaliation, and that if an investigation confirms impropriety, it will be appropriately addressed. HFHS encourages all employees to promptly notify management of any known or suspected fraud and abuse, other violations of the law, or non-compliance with work-related conduct standards by employees, students, volunteers, contractors or agents.

We are encouraged to voice concerns regarding observed business practices to our immediate supervisor. When this avenue is not appropriate, or if action is not taken in a timely way, there are other options, including talking with another member of management, contacting your Chief Compliance Officer, the Information Privacy & Security Office at (313-874-9561 or PrivacySecurity@hfhs.org or visit MyComplianceReport.com (use access ID: HFH).

Local Officers: Each business unit has appointed Compliance Officers, and Information Privacy and Security leads. They are available to all workforce members, and stand ready to receive and act on all reports for their respective areas. An updated list of the officers names and telephone numbers can always be found on the HFHS intranet site, henry.hfhs.org.

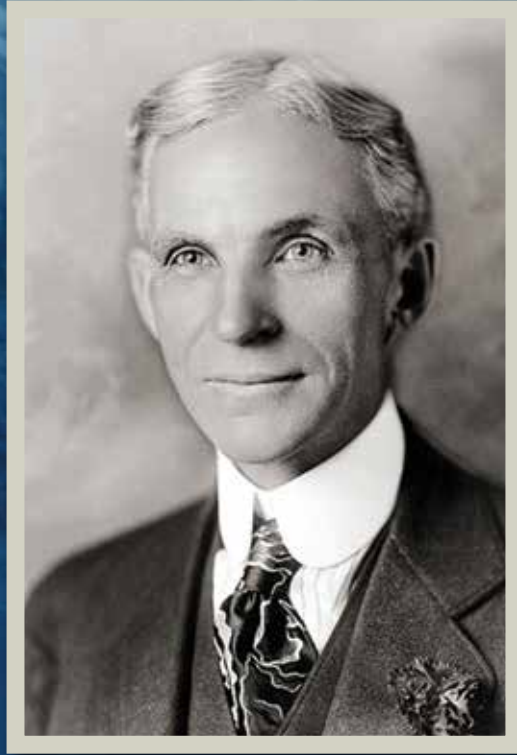
Compliance Hotline: Though it is hoped that all workforce members feel comfortable reporting concerns directly to management as their first choice in solving problems, the hotline provides a reporting line to a third party and an option to report concerns without being identified. Every call received is appreciated and taken very seriously. Each concern expressed is thoroughly investigated and if a problem is found, it is corrected. The caller always receives a timely report of the outcome of their call. The Compliance Hotline can be accessed 24 hours/day, 365 days/year by telephone at 1-888-434-3044 or online at www.MyComplianceReport.com (use access ID: HFH).

In all cases, persons who observe problems and report these in good faith are protected from retaliation.

FINAL POINTS TO REMEMBER

- Violation of the Code of Conduct and related policies may lead to corrective action, up to and including termination and criminal prosecution.
- Each of us has a sense of what is right and wrong that guides our daily life. If we experience anything that doesn't seem to be included in or prohibited by the Code but is "not right," we must report any suspected violation of this code of conduct.
- Our Henry Ford Health System Code of Conduct, like all such sets of standards, cannot cover all possible relevant topics and, from time to time, must be revised. Please call the Corporate Compliance Office at 313-874-6994 with any ideas as to how our Code can be more complete or effective. The most up-to-date version of the Code can always be viewed on the HFHS intranet site, directly or through a link from the HAP intranet site.





*“Quality means doing it right
when no one is looking.”*

– Henry Ford



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