Doing the Right Thing Right

Providence Code of Conduct
A lesson that we all learn early in life is to "do the right thing." It sounds simple, but we have seen the results of not doing the right thing played out in the media too often and increasingly with larger organizations.

Providence Health & Services has thrived around our commitment to doing the right thing. The Sisters of Providence set our ministry on a clear path from its earliest days as they provided medical care, education and housing to all who sought their help, especially the poor and vulnerable.

Maintaining the integrity of the heritage and tradition of our ministry is the responsibility of each person of Providence. Our Integrity and Compliance Program helps to ensure that we are following our ethical commitments, as well as the laws, rules and regulations that govern our business conduct, and helps to discourage, prevent and identify violations.

This Code of Conduct will help you to fully understand the expectations we have and the critical importance of being honest and fair in all our business interactions with patients, payers and vendors. It also details how to report a violation or concern about potential illegal or inappropriate actions that have occurred.

Please review this Code of Conduct thoroughly and discuss any questions you may have about these standards with your supervisor. Every person of Providence is expected to take an active part in maintaining the integrity and compliance of our ministry. Thank you for your participation and your commitment to this process.

John Koster, MD,
Providence Health & Services President/CEO
The Providence Commitment:
Mission and Core Values

MISSION

As people of Providence,
We reveal God’s love for all,
Especially the poor and the vulnerable,
Through our compassionate service

CORE VALUES

RESPECT
All people have been created in the image of God. Genesis 1:27
We welcome the uniqueness and honor the dignity of every person.
We communicate openly and we act with integrity.
We develop the talents and abilities of one another.

COMPASSION
Jesus taught and healed with compassion for all. Matthew 4:24
We reach out to people in need and give comfort as Jesus did.
We nurture the spiritual, physical, and emotional well-being of one another
and those we serve.
We embrace those who are suffering.

JUSTICE
This is what the Lord requires of you: act with justice, love with kindness and walk humbly with your God. Micah 6:8
We believe everyone has a right to the basic goods of the earth.
We strive to remove the causes of oppression.
We join with others to work for the common good and advance for social justice.

EXCELLENCE
Much will be expected of those who are entrusted with much. Luke 12:48
We set the highest standards for ourselves and for our ministry.
We strive to transform conditions for a better tomorrow while serving the needs of today.
We celebrate and encourage the contributions of one another.

STEWARDSHIP
The earth is the Lord’s and all that is in it. Psalm 24:1
We believe that everything entrusted to us is for the common good.
We strive to care wisely for our people, our resources and our earth.
We seek simplicity in our lives and in our work.
Our Mission and core values provide guidance and inspiration as we make sound, ethical choices to deliver quality care and meet our organizational goals. The Providence commitment to integrity is a vital part of who we are as a Catholic health care and education ministry.

The Providence Code of Conduct provides us with a set of standards that guides our decision-making and our commitment to “doing the right thing right.” This means conducting our business within appropriate ethical, legal and regulatory standards, and complying with Providence’s policies and standards. As we do this in our daily work, doing the right thing right means we:

- dedicate ourselves to Providence’s Mission and core values
- uphold ethical principles in the workplace
- work to insure Providence is in full compliance with all applicable laws, regulations, policies and standards governing our business practices
- report concerns about improper, inappropriate or illegal actions promptly, in good faith and without fear of retaliation

In addition to the Code of Conduct, there are system, region, facility, service line and institution policies, procedures and standards that may apply to your work. Copies of these can be obtained through your supervisor, manager or the intranet.

Health care practitioners who are granted privileges at Providence facilities are governed by medical staff by-laws and must follow them. These by-laws provide a process for resolving ethical and compliance issues related to the practice of medicine at Providence.

The Providence Code of Conduct asks you to reflect on our Mission and core values as you apply ethical and legal standards to your work. The Code of Conduct helps you answer these questions:

- Are my actions and decisions consistent with Providence’s Mission and core values?
- Am I supporting the spirit, as well as the letter, of laws, regulations, policies or standards?
- Can I explain my actions or decisions without embarrassment to family, friends, co-workers, students or patients?
Would my behavior harm Providence’s reputation in the community or as a ministry focused on health care, education and those in need?

Who should I contact if I believe a violation has occurred?

What do I do if retaliation occurs when I raise a concern?

Who can help me if I still have questions?

How do I contact my local integrity, compliance and privacy representative?
THE SYSTEM INTEGRITY/COMPLIANCE PROGRAM

The System Integrity/Compliance Program promotes compliance with all applicable laws and regulations, this Code of Conduct and Providence policies and standards. This Integrity/Compliance Program applies to: (1) all organizations of which the system is the sole or majority member or shareholder and (2) Providence workforce members (employees, volunteers, trainees and other persons under direct control of a Providence entity). It also applies to the system board of directors and committee members, service area board of directors and committee members, Foundation board of directors and committee members, consultants and others when acting on behalf of the system.

The audit and compliance committee of the system board provides oversight and direction for the System Integrity/Compliance Program. The chief risk officer serves as Providence’s compliance officer.

System integrity and regional compliance offices are responsible for the day-to-day direction and implementation of the System Integrity/Compliance Program. This includes developing resources (policies, procedures, education programs and communication tools) and providing support (managing the Providence Integrity Line and other reporting mechanisms, conducting program assessments and providing advice) to facility compliance coordinators and others.

Providence’s human resources managers are also highly knowledgeable about many of the employment and workplace compliance risk areas described in this Code. If a concern relates to specific details of your work situation, your human resources manager is the appropriate contact. Providence integrity and compliance professionals work closely with human resources to investigate and resolve issues relating to employment and workplace situations.

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Reporting an Issue
Providence expects that integrity, compliance or legal concerns will be promptly reported. Each Providence workforce member has a responsibility to report any activity that appears to violate laws, rules, regulations, policies, standards, federal health care conditions of participation or this Code.

If you have a concern that you believe poses a serious compliance risk that can significantly impact licensure, reimbursement, accreditation or may lead
to a major legal claim, report these concerns either directly to the system integrity office or through your regional compliance office to system integrity as provided under Providence’s Early Reporting policy (P-321).

Other integrity, compliance and legal concerns are reported using the Providence four-step reporting process:

1. Discuss the issue or concern with your immediate supervisor.
2. Discuss the issue or concern with the department manager.
3. Contact the local or regional compliance and privacy coordinator or manager.
4. Call the 24/7 Providence Integrity Line at (888) 294-8455.

If you feel uncomfortable with steps 1, 2 or 3 for any reason, go to the next step and call the Providence Integrity Line.

The Providence Integrity Line is answered by a third-party company who sends all reports to a Providence compliance and privacy manager for investigation. Callers receive a tracking number to retrieve information about the status of their report.

If you report a concern anonymously, it is important that you clearly describe the situation, provide a facility location and give enough detail so that your concern can be properly investigated and resolved. We may be unable to investigate your concern if you do not provide us with enough factual information.

Confidentiality of Reports

We make every attempt to protect the confidentiality of information provided in connection with a reported concern, to the extent allowed by law, unless maintaining confidentiality could create a significant health or safety risk, or could significantly impair Providence’s ability to conduct a complete investigation.

Retaliation Will Not Be Tolerated

Providence prohibits any action directed against any Providence workforce member for reporting concerns in good faith or who assists in the investigation of a concern. A manager, supervisor, employee or other workforce member who engages in retaliation or harassment — directed at a person who raises a concern, is believed to have raised a concern or assists in an investigation — is subject to disciplinary action in accordance with Providence policy.
If you believe that retaliation or harassment is occurring, report it to your local or regional compliance manager, to human resources or to the Providence Integrity Line at (888) 294-8455.

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Corrective Action
Where an internal investigation substantiates a reported violation, it is Providence policy to initiate corrective action, including, as appropriate, refunding overpayments, notifying the appropriate government agencies, instituting disciplinary action and implementing other corrective actions to prevent a similar violation from occurring in the future.

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**Employee Responsibilities**

- Follow the Providence Code of Conduct.
- Perform your job duties in accordance with all federal and state laws or regulations that apply.
- Participate in Integrity/Compliance Program training and job-specific compliance education or departmental training as necessary for your job duties.
- Report all concerns or alleged violations promptly.
- Keep information obtained at Providence confidential.
- Whenever you are in doubt about something, ask questions.

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**Leadership Responsibilities**

- Support the Providence Commitment by upholding our Mission and core values.
- Model good ethical behavior and foster a culture of transparency by listening and being receptive to employee concerns about integrity and compliance-related issues.
- Ensure that written compliance policies and procedures specific to your department are developed and followed.
- Provide employees with initial and continuing integrity and compliance education and document that education.
- Monitor and ensure compliance with the Code of Conduct, Providence policies and standards, and federal and state laws and regulations.
- Take appropriate corrective or disciplinary action to resolve issues when necessary.
- Prevent retaliation against any employee who reports, supplies information about or assists in an investigation into an integrity or compliance concern.
PATIENT STANDARDS

Quality of Care and Patient Safety
At Providence, we define quality as the degree to which health services increase the likelihood of desired outcomes and are consistent with professional knowledge. We believe all health care should be:

- Safe as to avoid injuries to patients from the care that is intended to help them
- Timely to reduce waits and sometimes harmful delays for those who receive and provide care
- Effective in that we match care to science to provide appropriate care
- Efficient to avoid waste in order to maximize value
- Equitable to ensure care does not vary in quality, regardless of patient characteristics
- Patient and family centered to honor the individual and respect choice

We are committed to providing the best care and service at every patient encounter. Quality and safety goals are outlined in our Quality Strategic Plan. This plan is centered on meeting or exceeding national standards for quality care and patient safety, which is essential to providing the best care every time.

Emergency Medical Treatment and Labor Act (EMTALA)
Providence complies with the Emergency Medical Treatment and Labor Act (EMTALA). We screen and provide stabilizing treatment to everyone who comes to a Providence hospital requesting examination or treatment for an emergency condition. We do not delay medical screening exams or stabilizing care in order to request patient financial information. We only transfer unstable emergency patients who request transfers or for whom we lack capability or capacity to provide appropriate treatment after providing the appropriate stabilizing care within our capability.

Patient Rights
We inform our patients, residents and clients of their rights. We expect the people of Providence to uphold and respect these rights.

Each Providence patient is provided with a written statement of patient rights and a notice of privacy practices. These statements include the rights of a patient to make decisions regarding their medical care, the right to refuse or accept treatment, the nature of the facility's Catholic sponsorship,
the right to informed decision-making and a patient’s rights related to his or her health information maintained by Providence facilities. These statements conform to all applicable state and federal laws, including but not limited to the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

Patient Information and Privacy

Providence treats the protected health information (PHI) of patients with special care. There are numerous federal and state laws that govern privacy and security of a patient’s information including the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

We collect PHI to provide quality care and will protect access to this information whether it is contained in a computer system, medical record or other documents. Consistent with HIPAA and applicable state law, we do not use, disclose or discuss patient-specific information with others unless it is necessary to serve the patient, it is required by law or the patient has consented to the release.

Providence workforce members will not use or disclose information that violates the privacy rights of our patients. Under Providence’s privacy policies, standards and procedures, no one has a right to any patient information other than that necessary to perform his or her job.

Questions to ask about whether you are protecting patient privacy:

- Do I have a need to know this information as part of my job?
- Can I get my job done without reviewing all of the patient’s information?
- Do I understand the policies that apply to this information?
- Do I avoid discussing this information in public?
- Do I protect this information from being viewed or seen by others?
- And finally, if I am unsure about accessing information, do I get guidance from my facility or regional privacy officer?

Theft, loss or inappropriate uses or disclosures of PHI shall be reported promptly to your local or regional privacy officer, the system privacy officer or the Providence Integrity Line at (888) 294-8455.

Consult your facility and regional privacy and security policies and standards for further information on how to safeguard protected health information. You may also contact your local or regional compliance and privacy coordinator, or the system privacy officer for help with questions.
Best Practices for Safeguarding Patient Information

- Do not leave patient information showing on computer screens.
- Do not leave charts open on desks or counters.
- Shred printed documents containing patient data when you are done with them or place in designated secure recycle bins.
- Use the minimum necessary information for payment and operations purposes.
- Avoid patient-related discussions in public areas.
- Avoid informal or casual discussions of patient situations which are not directly related to care.
- Do not leave voice or phone messages containing sensitive information.
- Avoid inadvertent disclosures and take special care in situations that are not private.
- Follow e-mail and fax policies for transmitting protected health information (PHI) only to those with a need to know.
- Double-check fax numbers to ensure a fax is directed to the correct recipient.
- Do not take patient data off-site, except as necessary and in accordance with Providence and department policies.
- Never leave patient data, whether stored on an electronic device or on paper, in a vehicle overnight.

Community Benefit

We provide services and programs for those who experience difficulty in accessing health care through our participation in a wide variety of community benefit programs. Community benefit includes charity care, the unpaid costs of government-sponsored health care programs, community health services, health professional education, subsidized health services and research, and other community benefit services.
LEGAL AND REGULATORY COMPLIANCE

Licensure, Certification and Excluded Individuals

Providence verifies the qualifications of health care professionals who treat our patients. Providence health care professionals follow all applicable licensing, credentialing and certification requirements.

Federal law prohibits Providence from employing or retaining anyone who has been excluded from participation in government programs. We regularly review published information to check for excluded individuals. When individuals have been excluded, they cannot be Providence employees, providers or vendors.

Providence will not employ, contract with or bill for services ordered, rendered or supervised by an individual or entity that is excluded, suspended, debarred or ineligible to participate in a federal health program, or who has been convicted of a criminal offense relating to the provision of health care items or services and has not been reinstated in a federal health care program.

Employees, physicians, providers and vendors are required to notify their manager and/or the Providence regional compliance manager if they receive notice that the Office of Inspector General or General Services Administration will be excluding them from participation in federal or state health care programs.

Participation in Federal and State Health Programs

The health services provided by Providence are governed by a variety of federal and state laws and regulations. These laws and regulations cover subjects such as false claims, illegal patient referrals, providing medically necessary services, violations of Medicare’s Conditions of Participation, submission of cost reports and other regulations. Providence is committed to full compliance with these laws and regulations.

Providence expects that those who create and file claims for payment to Medicare, Medicaid and other payers will file claims that are accurate, represent the services actually provided and state the conditions under which the patient received services. Billing for clinical trials will follow clinical trial billing protocols and are submitted in accordance with federal requirements.

For More Information
The following principles guide our compliance:

- Charges will be submitted only for services or supplies that are provided to the patient/resident/client and are accurately and completely documented in the medical record or other supporting documentation.
- Charges that accurately represent the level of service provided to the patient/resident/client will be billed.
- Only those services that are medically necessary and are supported by orders will be submitted for payment to Medicare, Medicaid and other payers.
- Under no circumstances will charges or codes be purposely selected to improperly increase the level of payment received.
- Cost reports shall be verified for accuracy.

Providence monitors billing, coding and cost reporting to detect errors and inaccuracies that could result in false claims for payment. If you believe that a false claim could be submitted, report your concern to a compliance officer or to the Providence Integrity Line.

Referrals
Federal and state Anti-Kickback Statutes and the federal Stark Law apply to relationships between hospitals and physicians. We structure our relationships with physicians to ensure compliance with these laws, with our policies and procedures and with any operational guidance that has been issued.

Key Principles

- **We do not pay for referrals.** We accept patient referrals and admissions solely on the patient’s medical needs and our ability to render the needed services. We do not pay or offer to pay anyone for the referral of patients. An example would be to offer discounted rent or free office space.

- **We do not accept payments for referrals we make.** No person acting on behalf of Providence may solicit or receive anything of value, directly or indirectly, in exchange for the referral of patients. When we make patient referrals to another health care provider, we do not take into account the volume or the value of referrals that the provider has made or may make to Providence.

If you have questions about a physician relationship, contact the system department of legal affairs directly or through your regional compliance office.
Research and Clinical Trials

Providence’s physicians and professional staff follow the highest ethical standards and comply with all laws, regulations, guidelines and ethical directives that govern human, animal, basic science and applied science research. We fully participate with other organizations responsible for protecting human subjects, investigators, sponsors and research participants. We actively promote excellence in all aspects of research.

We do not engage in research misconduct, which includes activities such as falsifying results, copying results from other studies without performing the clinical investigation or research, failing to identify and deal appropriately with investigator or institutional conflicts of interest, and proceeding without Institutional Review Board (IRB) approval or failing to follow the approved IRB protocols. Our first priority is to protect those patients who are enrolled as human subjects and to respect their rights during research, investigation and clinical trials.

All Providence facilities performing research must follow all applicable research requirements and guidelines, and maintain accuracy in written and oral communications regarding the research project. We will submit true, accurate and complete costs related to research grants.

Gifts and Entertainment

Accepting gifts and offers of entertainment creates a risk that our judgment and decisions can be influenced. In some cases, gifts and entertainment may be considered or appear to be improper payments for the purchase of referral or health care items or services under federal and state laws.

Providence’s reputation is based on its commitment to integrity in the delivery of quality patient care and other services. For this reason, Providence employees are expected to keep relationships with patients, their families, vendors and other third parties impartial, and avoid accepting gifts or any other item of value including:

- Meals
- Tickets to events
- Special favors or loans
- Discounts or free services
- Tips and gratuities
- Paid travel for spouses

Cash or cash equivalents, such as gift certificates or gift cards, may never be accepted. Any gift, regardless of value, may not be accepted if the circumstances surrounding the giving and receipt of the gift indicate the intent to influence.
You may accept gifts of nominal or little value, such as branded office items with a vendor’s logo or an occasional consumable gift, if shared among employees within your department or unit. Common examples might include a fruit basket or box of chocolates.

Infrequent meals of modest value (generally no more than $50) may be accepted by individual Providence employees in connection with education or business presentations or discussions. If entertainment is offered in conjunction with business discussions, both parties must be present and the offer should be infrequent, of modest value and in a setting conducive to discussing business.

Report and record all entertainment and any gift greater than nominal value according to your facility procedures.

**Questions to ask before accepting a gift:**

- Is this a personal gift?
- Is this a cash gift? A gift card? A gift certificate?
- Would I feel uncomfortable disclosing acceptance of this gift to other Providence employees? Patients? Friends or family members?
- Is this gift being offered to me because my job at Providence might influence a decision in favor of the donor?

If you answered “yes” to any of the above questions, the gift does not meet Providence’s ethical standards, this Code of Conduct or legal requirements. Facilities or service lines may have more restrictive gift standards. Employees will follow the more restrictive standard. Contact your local or regional compliance resource for questions on gifts. You may also direct anyone offering a gift to a Providence foundation.

**Conflicts of Interest**

Conflicts of interest occur when personal interests or activities influence or appear to influence our actions and decisions. They also occur when you allow another interest to be more important to your decisions than the interests of Providence and its patients.

As Providence workforce members, we avoid activities and relationships that may impair our independent judgment and unbiased decision-making. We do not use our positions for personal gain or advantage, or to assist others, including family members, from profiting in any way at the expense of Providence.
Conflicts of interest may arise from many sources including, but not limited to, financial interests of yourself or a family member; service, employment or consulting arrangements with a Providence competitor; the receipt of gifts from vendors; or use of Providence resources to benefit an outside interest or your own personal interests.

Providence's Conflicts of Interest policy and procedure provides additional guidance to directors, officers, senior managers and other key employees. These individuals are required to submit a Conflict of Interest Disclosure form annually to system integrity. Other workforce members are required to disclose — to their immediate supervisors, to their regional integrity and compliance manager or System Integrity — any real or potential conflicts of interest prior to making any decision or taking any action that is or may be affected by the conflict.

Potential conflicts of interest are reviewed and acted on as required. Contact system integrity or your regional compliance office if you have a question about a conflict of interest.

Lobbying and Political Activities

As a tax-exempt organization, Providence follows current legal and regulatory requirements for all lobbying and political activities. Providence will not participate or intervene in any political campaign for or against a candidate for public office. Providence employees may not engage in political activities on company time, but may do so on their own time. Employees with questions about lobbying or political activities are advised to contact the system department of legal affairs.

Antitrust

Antitrust laws preserve and protect competition in goods and services. Antitrust violations are serious and may result in criminal charges, substantial fines and imprisonment. Providence will not engage in conduct that is illegal under antitrust laws.

Antitrust issues are complex. If you have any questions or concerns about whether a practice may be questionable, contact the system department of legal affairs.
Contact by Government Investigators

Providence is committed to appropriately responding to and not interfering with any lawful government inquiry, audit or investigation. If you are contacted by a government investigator with a request for information, please follow these steps:

1. If contacted in person, politely ask the investigator(s) for identification and note the name, title and office location. If contacted by telephone, ask for and note the name, title, office location and a return phone number for the caller.

2. Contact your supervisor and the regional compliance manager as soon as possible.

A government investigator may ask you to participate in an interview. You are free to do so, but are under no obligation to do so. If you do grant an interview to a government investigator, you should be aware that anything you say can be used against you in a criminal prosecution or in a civil enforcement proceeding. This is true regardless of whether the officer gives you any so-called Miranda warnings. You may also request that legal counsel be present before you talk with any investigator.

If the investigating officer asks you to participate in an interview, and you would like to do so but would like corporate counsel to be present at the interview, we will make counsel available for that purpose — free of charge to you. Contact the system department of legal affairs.
WORKPLACE ENVIRONMENT STANDARDS

Protecting Employee Information

During the hiring process and course of employment, Providence collects, uses and discloses personal information about employees to administer the employment relationship; to recruit, retain and develop employees; to manage Providence business operations; and to comply with legal and regulatory requirements. To protect our employees' personal information and right to privacy, Providence will:

- take measures to safeguard employees' personal information.
- protect the confidentiality of employees' personal information when dealing with third parties.
- restrict access to such information to the employee and those with a legitimate business or legal need.

Discrimination, Harassment and Workplace Violence

Providence is committed to maintaining a workplace free of discrimination, unlawful harassment, violence and other abusive conduct.

Harassment includes unsolicited remarks, gestures or physical contact; displays or circulation of written materials or pictures derogatory to any protected group (i.e., based on gender, race, ethnicity, religion, sexual orientation, disability, etc.); and basing personnel decisions on an employee's response to sexually-oriented requests. This list is not all-inclusive.

No form of harassment or workplace violence will be tolerated. Any such conduct will result in disciplinary action, up to and including dismissal.

Our employees will promptly report any incident of discrimination, unlawful harassment, workplace violence or other abusive conduct to his or her supervisor, human resources or to the Providence Integrity Line.
Health & Safety

Providence facilities comply with government regulations. Our policies and practices also promote the protection of workplace health and safety. We share a responsibility in understanding how these policies and practices apply to our job responsibilities and we seek advice when we have a question or concern.

We have an obligation to report any serious workplace injury or any situation presenting a danger of injury, so timely, corrective action may be taken to resolve the issue. Employees should report injuries according to local facility policies.

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Stewardship of Providence Resources

Providence is committed to effective stewardship of its resources in support of its patient care and other organizational goals. Our assets should only be used for legitimate business purposes. Incidental and minor personal use of computers is permitted provided such use is not for personal financial benefit or gain, and does not interfere with your job or the ability of others to do their jobs. If you have a question about use of Providence resources, contact your supervisor for guidance.
Security, Confidential Information and Electronic Media Use

In addition to safeguarding a patient’s protected health information (PHI), Providence employees have a responsibility to protect all confidential information. Confidential information is any information about patients, employees, students, residents or business operations that is not available to the public. It also includes information that is intended for internal Providence use only.

This information is so valuable that loss of this kind of data could harm our patients and our ability to do business. Data losses also have a negative impact on Providence’s reputation in the community.

Any confidential information removed from a work location increases our risk of a breach. Unless it is part of your job, confidential information should never be removed from a Providence work location without authorization from your manager. If you are authorized to remove such information, it must only be on an encrypted device such as a Providence laptop, PDA or thumb drive. Loading or sending Providence data onto a non-Providence device or non-encrypted device, such as a home computer, thumb drive or PDA, is not a best practice and is not authorized.

Employees agree to follow Providence’s Acceptable Use of IT Assets policy and other security policies and standards. If you have a security-related concern, talk with your manager.
Security Best Practices

- Keep your computer and voice mail passwords private and secure.
- Lock your PC when unattended using Ctrl-Alt-Delete | K or other key combinations that will lock your PC.
- Install a privacy guard or use automatic time-out to prevent others from seeing your computer screen.
- Never download confidential information onto a home or non-Providence PC or PDA.
- Store portable devices and electronic media in a secure location and use a sign-in/sign-out procedure.
- Maintain physical control of laptops and other devices containing confidential information at all times when outside of a secure facility — Providence facilities and your home are considered secure facilities.
- Encrypt confidential data so that it is not accessible if your laptop is lost or stolen.
- Use secure e-mail when sending confidential information.

Providence employees and other workforce members are to report all known or suspected security incidents within 48 hours of occurrence. Incidents may be reported to Enterprise Security and to the Providence Integrity Line at (888) 294-8455.

Records Accuracy and Retention
We prepare and maintain accurate and complete documents and records. We do this to comply with regulatory and legal requirements, and to support our business practices and actions. Records include, for example, financial records, claims made for payment, patient records, employee time sheets and expense-related forms and other types of records, whether in paper or electronic formats.

We do not alter or falsify records, and do not destroy records to deny governmental authorities information that may be relevant to a government investigation.

We comply with Providence’s Record Retention policy to support the appropriate retention, protection, maintenance and disposition of all records, regardless of their format or media.

If you have questions about records retention, contact system integrity or the department of legal affairs.
GLOSSARY OF TERMS

COMPLIANCE:
Acting in accordance with accepted standards and policies, including laws, rules and regulations.

CONFIDENTIALITY:
Keeping information private that should not be shared with anyone else. Example: medical information about a patient or financial information about a doctor or hospital.

CONFLICT OF INTEREST:
A situation in which someone in a position of trust has competing professional or personal interests. Such competing interests can make it difficult to fulfill his or her duties impartially. Even if there is no evidence of improper actions, a conflict of interest can create an appearance of impropriety that can undermine confidence in the ability of that person to act properly in his/her position. Example: a purchasing department employee ordering supplies from his brother’s business.

ETHICAL BEHAVIOR:
Doing what is right; acting on the basis of Providence’s Mission and core values such as being honest and truthful in your communications and actions.

FALSE CLAIM:
An inaccurate claim submitted for payment to an insurance payer such as Medicare, Medicaid or a third party. Example: charging for services or items that were not provided or falsifying certification records, training records, cost reports or research results under a government grant.

FRAUD & ABUSE:
Fraud is the intentional deception or misrepresentation (in other words, lying) to receive money or some other benefit. Example: charging for three x-rays when you know only one x-ray was performed. Abuse is engaging in a practice or activity that is not part of generally accepted, sound industry standards that may result in unnecessary costs or in the receipt of an improper payment. Abuse is less serious than fraud.

INTEGRITY:
Honesty in words and actions.

MEDICAID:
State-governed health care insurance generally provided to those who meet low-income guidelines. This is called “MediCal” in California.

MEDICARE:
Federally funded and governed health care insurance provided to people over 65 years old and to other younger persons that meet disability guidelines.

NON-RETALIATION:
A policy that protects person(s) who report alleged violations of policies, regulations or laws — to their supervisor, manager or an integrity and compliance resource — from negative or adverse actions as a result of having reported a violation.
REFERRAL:

For this Code of Conduct, the act of sending a patient to a doctor, hospital or other health care provider or requesting health care services on behalf of the patient.

REGULATIONS

Rules enacted by a government agency that must be followed by those businesses providing the services covered by the rules.

STANDARDS AND POLICIES:

Requirements for expected behaviors or actions by Providence workforce members.

WORKFORCE MEMBERS:

Officers, employees, volunteers, agents, contractors and vendors.

FOR MORE INFORMATION

ALASKA
Regional Compliance and Privacy Office
(907) 261-3008

CALIFORNIA
Regional Compliance and Privacy Office
(818) 847-3158

OREGON
Regional Compliance and Privacy Office
(503) 574-9123

Regional Compliance and Privacy Office
(425) 687-4002

SYSTEM INTEGRITY
System Integrity/Compliance Staff and System Privacy Officer
(206) 464-3354

SYSTEM DEPARTMENT OF LAWYER STAFF
(206) 464-3034

INFORMATION SECURITY
(503) 216-8452

INFORMATION LINE
(888) 294-8455 (toll free)