

**Honesty. Integrity. Accountability.**  
**It's all in our hands.**



# **Standards of Conduct**



To all Employees,

The Health Care District of Palm Beach County is committed to compliance with applicable Federal and State laws, rules and regulations. In order to achieve our goal, we must earn and maintain the trust and credibility of our patients, residents, health plan members, physicians, vendors, and business associates every day. We earn our credibility by keeping our commitments, acting with honesty and integrity and remaining accountable for our actions.

The District has developed this Standards of Conduct booklet to express our commitment to and support for the values of our organization. Honesty, Integrity, and Accountability are more than just concepts at the District; they are the Standards we embrace and demonstrate in our daily work: in our relationships with our patients, residents, health plan members and business partners, and ultimately, in the quality services we provide.

These Standards codify the District's commitment to ethical and lawful conduct and are designed to guide us in upholding our high standards of fair and ethical practices. We encourage you to read these Standards thoroughly and make sure you understand them. We are all responsible for abiding by the Standards. In any case, where we believe illegal or unethical conduct may have occurred, we must report it to our supervisors, senior managers, Chief Compliance Officer and Privacy Officer or through the Compliance Hotline. All reports will be taken seriously and properly investigated. Appropriate disciplinary action will be taken if it is determined that anyone has violated District policies or Federal/State laws, rules or regulations.

We must all strive to preserve and strengthen the District's reputation for excellence and integrity. This pursuit of excellence begins with our firm commitment to the organization. Thank you for your enduring commitment to the District's values. Together we will ensure that our commitments and principles continue to be reflected in every aspect of our business activities. Honesty. Integrity. Accountability. It's all in our hands.



**Carlos Vidueira**  
Chair, Health Care District  
Board of Commissioners



**Darcy J. Davis**  
Chief Executive Officer



**Heather Bokor** VP,  
Chief Compliance,  
Privacy, & Risk Officer



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# Standards of Conduct

October 2023



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## Introduction

The Health Care District of Palm Beach County (“the District”) and its Affiliated entities (Lakeside Medical Center, Edward J. Healey Rehabilitation and Nursing Center, C. L. Brumback Primary Care Clinics and Dental Services, District Cares, School Health, Pharmacy, Aeromedical, and Trauma) are committed to full compliance with all applicable Federal and State health care program requirements; maintaining the highest ethical standards in the conduct of its business; and maintaining a work environment that promotes and ensures compliance with all applicable laws and regulations.

These Standards of Conduct reflect the District's mission and basic values of honesty, integrity, and accountability.

## Mission Statement

The mission of the Health Care District of Palm Beach County is to be the health care safety net for Palm Beach County.

We work to accomplish our mission through various programs and services, including:

- Saving lives and providing comprehensive trauma care through our integrated Trauma System
- Covering eligible, uninsured county residents who do not qualify for state or federal care with programs such as District Cares and Maternity Care
- Providing medical services for adults and children through our C. L. Brumback Primary Care Clinics
- Keeping children healthy by staffing registered nurses in our public schools
- Offering skilled nursing care at the Edward J. Healey Rehabilitation and Nursing Center
- Providing acute care in underserved areas through Lakeside Medical Center on the southern shores of Lake Okeechobee

## Core Values

The values of the District are demonstrated by:

- **Integrity:** Being committed to honesty, accountability, transparency, and ethical standards.
- **Excellence:** Achieving high quality outcomes through innovation, customer service, safety, and continuous improvement.
- **Leadership:** Providing progressive solutions to community health care needs in a cost-effective and efficient manner.
- **Teamwork:** Fostering cooperative and collaborative efforts in the delivery of comprehensive health care services.
- **Respect:** Valuing a culture of inclusion and diversity built on trust, respect, and compassion for all.

## **Management Obligations**

Managers of the District are expected to:

- Set the right ethical tone in work areas
- Answer questions and support employees who raise good faith concerns
- Seek guidance when clarification is needed
- Provide access to information, training, and resources needed to comply with all applicable Federal and State laws, regulations, and policies
- Create an environment where employees are free to report issues without fear of retaliation
- Stay abreast of any rules and regulations applicable to their department

## **Employee Obligations**

Employees are expected to:

- Become familiar with Federal and State laws and regulations that apply to their position and the delivery and reimbursement of services provided by the District and funded by Federal Health Care programs
- Adhere to Federal and State laws governing Federal Health Care Programs
- Seek guidance from either a supervisor, senior manager, or the Chief Compliance Officer and Privacy Officer if questions arise
- Present no claim for payment or approval that is inaccurate, false, fictitious, or fraudulent
- Report activity of any District employee, vendor, physician, contractor, etc. which you believe may violate Federal or State laws, rules, regulations, or the Standards of Conduct to the Chief Compliance and Privacy Officer
- Make no false or misleading reports
- Cooperate with training and investigation efforts

## **Purpose of the Standards of Conduct**

Our Standards of Conduct provide guidance to all workforce members including, board and committee members, employees, vendors, and contractors of the Health Care District of Palm Beach County. These standards apply to our relationships with patients, physicians, payers, subcontractors, independent contractors, vendors, consultants, and our employees.

The Standards of Conduct establish the general policies and procedures all employees must follow as a condition of employment. In health care, with its many complexities, the Chief Compliance and Privacy Officer may need to provide further guidance and direction to those directly involved in a particular area.

## **Compliance Program**

The District is committed to maintaining an organizational and accountability structure to assure compliance with governmental laws, rules and regulations, organizational policy and procedures. The Compliance Program supports the District's ethical standards, Standards of Conduct, and a zero tolerance for fraud, waste, and abuse.

The Compliance Program demonstrates the commitment of the District and the Board of Commissioners to meet the highest standards of compliance. The overall accountability for the District's Compliance Program rests with the Board of Commissioners.

The Chief Compliance and Privacy Officer serves as the focal point for compliance activities within the District and reports directly to the Quality, Patient Safety, and Compliance Committee of the Board of Commissioners. The Chief Compliance and Privacy Officer has direct access to the Chief Executive Officer and Board of Commissioners.

## **Quality of Care**

Our goal is to provide high quality, cost-effective health care to all of our patients. To that end, we are committed to the delivery of safe, effective, efficient, compassionate, and satisfying patient care. Every workforce member must at all times remain committed to the District's obligations to promote the delivery of high quality care to patients, residents, and health plan members. The mission of the District is to be the health care safety net for Palm Beach County and our vision is meeting changes in health care to keep our community healthy. We shall uphold sound standards of professional practice in all District facilities and programs.

The District maintains a comprehensive program to promote the quality objectives of the organization. In promoting high quality care, District facilities are focused on the attentiveness and dedication of service to patients; the utilization of evolving technology to ensure quality and patient safety; and creating an overall culture that makes patient safety paramount. As a general principle, the District aspires to a standard of excellence for all caregivers within its facilities, including the entire facility team, which is committed to the delivery of safe, effective, efficient, compassionate and satisfying care and services. We shall treat our patients, residents, and members with respect and dignity and provide care that is both necessary and appropriate. We make no distinction in the availability of services; the admission, transfer, or discharge of patients; or in the care we provide based on age, gender, disability, race, color, religion, or national origin or any other characteristic protected by law.

There are increasingly numerous measures that relate in some way to the quality of patient care. These include, for example, the Conditions of Participation of the Centers for Medicare and Medicaid Services (CMS) and the standards and surveys of The Joint Commission, the Florida Agency for Health Care Administration (AHCA), and the U. S. Department of Health and Human Services Health Resources and Services Administration (HRSA). The District is attentive to all of these standards and seeks to establish systems that reflect the best practices required or intended by these various standard-setting efforts. This commitment to quality of care and patient safety is an obligation of every District workforce member. Accordingly, it is a fundamental principle of being part of the District that each person dedicates himself or herself to achieving the goals described here. In addition, in any circumstance where a District workforce member has a question about whether the quality or patient safety commitments set forth herein are being fully met, that individual is obligated to raise this concern through appropriate channels until it is

satisfactorily addressed and resolved. Such channels include those established at the facility and beyond, including the Compliance Hotline. In addition to the facility and District channels, the District workforce is provided resources and guidance as to how to solicit intervention or review by external quality partners including the Joint Commission, state survey agencies, or state quality improvement organizations.

## **Patient / Resident / Member Rights**

We make no distinction in the availability of services; the admission, transfer, or discharge of patients; or in the care we provide based on age, gender, disability, race, color, religion, sex, sexual orientation, gender identity, or national origin. We recognize and respect the diverse backgrounds and cultures of our patients and make every effort to equip our caregivers with the knowledge and resources to respect each patient's cultural needs.

Each patient, resident, and health plan member has access to a written statement of his or her rights along with a Notice of Privacy Practices. These statements include their rights to:

- Make decisions regarding their medical care
- Refuse or accept treatment
- Make informed decisions
- Maintain their health information

## **Physicians**

### **Interactions with Physicians**

There are both Federal and State laws and regulations which govern the relationship between health care providers and physicians who refer patients to their facilities. The applicable laws and regulations include, but are not limited to, the Stark Law and the Anti-Kickback Statute. It is important that employees who interact with physicians, particularly those responsible for making payments to physicians for services rendered, providing space or services to physicians, recruiting physicians to the community, and arranging for physicians to serve in leadership positions are aware of the requirements of the laws, regulations, and policies that address these relationships.

Relationships must be appropriately structured and diligently administered to ensure that any and all arrangements comply with the law. An arrangement with a physician must be structured to ensure compliance with legal requirements, our policies and procedures, and with any operational guidance that has been issued. Arrangements must be in writing, approved by Legal Counsel, and reviewed by the Compliance Department. Failure to meet all requirements of these laws and regulations can result in serious consequences for the organization. It is important to remember the following:

- We do not accept payments for referrals we make. No District employee or anyone acting on behalf of the organization is permitted to solicit or receive anything of value, directly or indirectly, in exchange for the referrals of patients. Similarly, when making patient referrals to another health care provider, we do not take into account the volume or value of referrals that the provider has made (or may make to us).

- We do not pay for referrals. We accept patient referrals and admissions based solely on the patient's medical needs and our ability to render the needed services. We do not pay or offer to pay anyone, be it employees, physicians, or other persons or entities for patient referrals.

### **Non-Monetary Compensation to Physicians and Potential Referral Sources**

Any entertainment, gift, or token of appreciation involving physicians or other persons who are in a position to refer patients to the District or any of its affiliated entities can only be offered or accepted in accordance with District compliance policies which have been developed consistent with Federal laws, regulations, and rules regarding these practices. Employees must consult our policies and procedures prior to offering or accepting any business courtesy or token of appreciation to or from a potential referral source. See also "*Business Courtesies to Physicians and Immediate Family Members Procedure*" on the Compliance page on SharePoint.

## **Laws and Regulations**

### **EMTALA**

At Lakeside Medical Center ("the Hospital"), we follow the Emergency Medical Treatment and Active Labor Act (EMTALA) in providing an emergency screening examination and/or necessary stabilization to all patients, regardless of ability to pay. Provided we have the capacity and capability, any person presenting with an emergency medical condition, including active labor, will receive medical screening and necessary stabilizing treatment without delay to seek financial and demographic information. We do not admit, discharge, or transfer patients with emergency medical conditions simply based on their ability or inability to pay or any other discriminatory factor.

Patients with emergent medical conditions are only transferred to another facility at the patient's request or if the patient's medical needs cannot be met at the Hospital and appropriate care is knowingly available at another facility. Patients are only transferred in strict compliance with State and Federal EMTALA regulatory and statutory requirements.

### **HIPAA**

We collect information about a patient's medical condition, history, medication, and family illness to provide quality care. The Health Insurance Portability and Accountability Act (HIPAA) of 1996, also known as the Privacy Rule, provides Federal protection of personally identifiable health information held by covered entities and gives patients an array of rights with respect to that information. In following the HIPAA privacy regulations, we do not use, disclose, or discuss patient-specific information with others unless it is necessary to serve the patient, resident, and health plan member or is required by law. District employees should never use or disclose confidential information that violates the privacy rights of patients, residents, or health plan members. Should you have additional questions, contact the District's Chief Compliance and Privacy Officer at 561-804-5786.

### **False Claims Act and Deficit Reduction Act**

The Federal False Claims Act (FCA) and Deficit Reduction Act protect government programs including Medicare, Medicaid, and TRICARE from fraud and abuse. The government enacted the FCA to prohibit knowingly submitting false or fraudulent claims to Federally-funded government programs including Medicare. In addition, the Florida False Claims Act prohibits persons from knowingly causing or assisting

in causing the State government to pay claims that are false or fraudulent. It provides remedies including civil monetary penalties and treble damages when money is obtained from the State government by reason of a false or fraudulent claim. The District complies with these laws and maintains policies to detect, report and prevent waste, fraud, and abuse. The District encourages its employees, vendors, and contractors to report suspected improper conduct and provides protection for whistleblowers.

### **Stark Law / Anti-Kickback Statute**

All business arrangements with a physician or family member (extends beyond immediate family members) of a physician must be in writing and compliant with all applicable laws, rules, regulations, and District policies. All of these arrangements must be reviewed and approved in advance by the Compliance and Legal Departments.

The District does not offer or pay for referrals. We accept patient referrals and admissions based solely on the patient's medical needs and our ability to render the needed service(s). We do not pay or offer to pay anyone; e.g., physicians or other persons or entities for referring patients.

We also do not solicit or accept payments for referrals we make. No District employee or person acting on behalf of the District is permitted to solicit or receive anything of value, directly or indirectly, in cash or in kind, in exchange for the referral of patients. Also when making patient referrals, no employee or person acting on behalf of the District is allowed to receive any payment, in cash or in kind, directly or indirectly, for the patient referral.

### **Antitrust Laws**

Antitrust laws are designed to create a level playing field in the marketplace and to promote fair competition. These laws could be violated by discussing the District's business with a competitor, such as how prices are set, or disclosing the terms of vendor relationships. Employees need to be mindful, particularly at outside meetings, not to participate in discussions regarding prohibited subjects such as pricing, labor costs, etc. Contact the Compliance Department for further information.

The District will comply with all applicable laws and regulations, including Florida Statutes, Chapter 112, that ensures that public officials and employees: conduct themselves independently and impartially; not use their offices or positions for private gain other than remuneration provided by law; and to avoid conflicts between public duties and private interests.

No District employee:

- Shall solicit or accept anything of value - including a gift, loan, and reward, promise of future employment, favor, or service - that is based on any understanding that the vote, official action or judgment of the employee would be influenced by such gift. Sec.112.313(2), Florida Statutes.
- Acting as purchasing agent or acting in his/her official capacity shall, directly or indirectly, purchase, rent, or lease any realty, goods or services for the District from a business entity in which the employee, his/her spouse, or child is an officer, partner, director or proprietor, or in which the employee, his/her spouse, or child (or any combination of them) has a material interest. Nor shall a public employee, acting in a private capacity, rent, lease, or sell any realty, goods or services to his/her own agency. Sec. 112.313(3), Florida Statutes.

- Or his/her spouse or minor child shall accept any compensation, payment, or thing of value which, with the exercise of reasonable care, is known or should be known to influence the official action of such employee. Sec. 112.313(4), Florida Statutes.
- Shall corruptly use or attempt to use his/her official position or any property or resource within his/her trust, or perform his/her official duties, to obtain a special privilege, benefit or exemption for himself/herself or others. Sec. 112.313(6), Florida Statutes.
- Shall disclose or use information not available to the general public and gained by reason of his/her public position for his/her personal gain or benefit or the gain or benefit of others. Sec. 112.313(8), Florida Statutes.

## **Fraud, Waste and Abuse**

We have an obligation under the law to conform to the requirements of the Medicare, Medicaid, and other governmental programs (“Programs”). Fraud, waste, and abuse committed against these Programs will not be tolerated by the District and may be prosecuted under various provisions of the United States Criminal Code, which could result in the imposition of restitution, fines, and in some instances, imprisonment. In addition, there is also a range of administrative sanctions (such as exclusion from participation in Medicare, Medicaid, and other government programs) and civil monetary penalties that may be imposed.

While not an exhaustive list, the following are examples of fraud, waste, or abuse:

- Forging or changing patient-billing related items, such as making false claims, or billing for services or supplies not rendered, not medically necessary, or not documented
- Misrepresenting or otherwise falsifying a diagnosis or procedure code in order to obtain payment or payment at a higher rate of reimbursement permitted for the actual diagnosis or service provided
- Alteration or forgery of checks
- Any misuse or theft of funds
- Any irregularity in the handling or reporting of financial transactions
- Any irregularities of giving or receiving payment in connection with business transactions and the giving or obtaining of contracts
- Falsifying or altering any record or report, such as an employment application, payroll or time record, expense account, medical record or patient record
- Falsely reporting costs
- The District is committed to conducting routine audits, monitoring, and reviews along with implementing a system of internal controls to prevent and detect fraud, waste, and abuse. Please do not ignore these types of activities. If you know or suspect activity of this nature, report it immediately. If you are uncertain if any activity is fraudulent, abusive, or wasteful, contact the Chief Compliance and Privacy Officer for guidance.

## **Accreditation and Surveys**

In preparation, during or after surveys, District employees are expected to deal with all accrediting agencies, such as The Joint Commission, HRSA, and Accreditation Association for Ambulatory Health Care, in a direct, open, and honest manner. When government agencies and other accrediting bodies conduct surveys, we must respond with openness and accurate information. In preparation for or during surveys and inspections, employees must never conceal, destroy, or alter documents, lie or make misleading statements to agency representatives. Employees must never attempt to cause another employee to fail to provide accurate information or obstruct, mislead, or delay the communication of information or records relating to a possible violation of any applicable law or regulation.

## **Compliance with Regulatory and Health Plan Requirements**

The District will comply with all Federal, State, and local laws and regulations that apply to our business, as well as the terms of all contracts with Federal or State agencies covering our health plans. We will not pursue any business initiative or opportunity that requires us to act illegally or in violation of our contractual obligations.

Employees are expected to know the basic laws, regulations, and contract requirements that apply to his or her job. Employees are also expected to know and follow District policies and procedures and compliance-related processes and systems. Suspected violations of health plan contracts or District policy must be promptly reported to a supervisor, senior manager or the Chief Compliance and Privacy Officer.

## **Contract Performance Standards**

The District's health plan contracts include a number of specific performance standards related to network adequacy, permissible forms of marketing activities, quality of care, and responsiveness to member rights including enrollee concerns or complaints. Meeting these standards is consistent with the District's commitment to integrity and responsiveness to addressing the health needs of health plan populations and failure to do so may subject the District to financial or other penalties. The District has developed a system of internal controls to promote and monitor compliance with these standards.

## **Environmental Compliance**

The District is committed to providing a safe and secure environment for patients, residents, family members, employees, providers, visitors, and customers. We comply with established safety and infection control laws and regulations, which are intended to prevent job-related hazards. We are consistent with ergonomic standards and maintain a safe work environment.

We are respectful of the environment and conserve natural resources. We exercise our policies and procedures with regard to the environment and use District buildings, property, laboratory processes, and medical products in accordance with Federal, State, and accreditation standards. We comply with permit requirements that allow for the safe discharge of pollutants into the air, sewage systems, water, or land. We comply with all laws and regulations governing the handling, storage, use, and disposal of hazardous materials, other pollutants and infectious wastes.

## **Business and Financial Information**

### **Cost Reports**

The District is required by Federal and State laws and regulations to submit reports regarding our operating costs and statistics. We will comply with all laws and regulations relating to all cost reports including the methodologies to claim reimbursement for the cost of services provided to Federal Program beneficiaries. All issues related to the preparation, submission, and settlement of cost reports must be performed or coordinated with the District's Finance Department.

### **Billing and Coding for Services**

The District maintains comprehensive policies and systems to facilitate accurate billing to government payers, commercial insurers, and patients. These policies conform to pertinent Federal and State laws and regulations. All District employees and contractors are prohibited from knowingly causing or submitting false or misleading claims for approval or payment. All medical records that support billings must be accurate and timely.

### **Documentation and Record Keeping**

All records and documents created by District employees should be honestly and accurately prepared. Examples include medical records (e.g., X-rays, provider notes, lab results, etc.), financial records, e-mails, hard copy correspondence, reports, and presentations. The following rules apply to all types of documentation:

- We never falsify facts or knowingly create false or misleading records
- We do not sign someone else's name to any document
- We never document as someone else
- We strive to only create records that are necessary and required to perform our duties
- We only give records and information to people who have a legal "need to know" or right to review
- We always secure documents and records, preserve patient confidentiality, and respect our patients' privacy rights

All employees must follow the District's policy on retention of records. Each of us is responsible for the integrity and accuracy of documents and records. Records must never be destroyed in an effort to hide or deny access to anyone with a legal right to view the record such as a patient, governmental authority, payor, or legal representative.

The District has established policies and procedures regarding the storage and destruction of records. All records shall be kept for the legally required minimum timeframe. Once that timeframe has expired, records will be destroyed in a timely and appropriate manner. For more details regarding the retention periods and the destruction procedures of records, consult the Records Department at 561-659-1270 ext. 295781.

## **Government Reporting**

All required filings and reports to Federal, State, and local government authorities must be made accurately and in a timely manner. False statements contained in a government filing or report could subject the District, and the responsible individual(s) to civil and/or criminal penalties. Employees responsible for creating or accumulating information for a report or filing that is submitted to a more senior manager for approval or signature are accountable for ensuring the accuracy of the information provided. They are also responsible for affirmatively disclosing any problems or concerns with the process or content of the report before it is submitted. Documentation and work papers used to prepare or support information contained in a government report or filing must be retained in accordance with District record retention policies.

## **Time Sheet Reporting**

Employees who submit time reports must do so in a complete, accurate, and timely manner. Employees must also ensure that hours worked and costs incurred are applied to the appropriate account for which the effort was required. The signature (manual or electronic) on a time report is a representation that the time accurately reflects the number of hours worked. The supervisor's signature on a time report or expense report is a representation that appropriate steps have been taken to verify the validity of the hours or expenses recorded. Omission or falsification of time records is grounds for dismissal.

## **Electronic Media**

All communication systems, including but not limited to computers, electronic mail, Intranet/Internet records/access, telephones and voice mail, are the property of the organization to be used primarily for business purposes in accordance with the District's electronic communications policies and standards. Users of computer and telephonic systems should presume no expectation of privacy in anything they create, store, send, or receive on District computer and telephone systems. The District reserves the right to monitor and/or access communication usage and content consistent with established District policies and procedures.

Employees may not use internal communication channels or access to the internet at work to post, store, transmit, download, or distribute any threatening materials: knowingly, recklessly, or maliciously false materials; obscene materials; or anything constituting or encouraging a criminal offense, giving rise to civil liability, or otherwise violating any laws. In addition, these channels of communication may not be used to send chain letters, personal broadcast messages or copyrighted documents that are not authorized for reproduction; nor are they to be used to conduct a job search or any other use that would violate District Equal Employment Opportunity policies. Employees who abuse our communication systems' policies or use these systems excessively for non-business purposes, may lose these privileges and be subject to disciplinary action in accordance with Human Resources' policies and procedures.

Employees must comply with the District's security policies governing the use of information systems. Only assigned user IDs and strong passwords shall be used. Employees will be required to periodically change their passwords according to District policy. Passwords must never be shared with or disclosed to anyone. The use of tools or techniques to break or exploit District information security measures is strictly prohibited. District information systems shall not be used to access inappropriate or prohibited websites. Great care should be taken when any employee receives an attachment or communication from an unknown or untrusted source to employ appropriate measures to prevent the spread of a virus or any other type of "cyber" attack that may compromise the integrity of electronic systems or data.

## **Financial Reporting**

All financial information must reflect actual transactions and conform to Generally Accepted Accounting Principles. All funds or assets must be properly recorded in the books and records of the District. The District maintains a system of internal accounting controls to provide reasonable assurances that all transactions are executed in accordance with senior management's authorization and are recorded in a proper manner so as to maintain accountability of the organization's assets.

## **Intellectual Property Rights and Obligations**

Any work product authored, invented, or otherwise developed including any patent, trademark, copyright, or trade secret by an employee during the scope of his or her employment with the District shall be considered the intellectual property of the District. The following factors will be considered in determining whether something is created during employment:

- The nature of the employee's work
- Whether the intellectual property developed is related to the District's business
- Whether the employee was directed to produce the intellectual property as part of his or her work duties
- Whether the employee utilized the District's property or resources to develop the intellectual property and
- Whether the employee created the intellectual property while being paid by the District

If any work product created is eligible for copyright, it will be considered "Work for Hire" under the United States Copyright Act, with the District identified as the author and owner of such work.

## **Workplace Conduct and Employment Practices**

### **Conflict of Interest**

Every employee who is in a position of influence or has control over the affairs, decisions, or assets of the District, has an explicit duty to protect the interest of the Health Care District when entering into any transaction or arrangement that may potentially benefit the private interest of that employee or a related party. A conflict of interest occurs when a person is in a position to derive personal benefit from actions or decisions made in their official capacity as an employee of the District. A conflict may exist even if the situation is not resolved in the favor of the employee or a related party, such as a family member. Further, the appearance of a conflict may be just as damaging to the employee and/or the District as an actual conflict.

The District recognizes the right of employees to engage in activities outside of their District employment. These activities are a concern to the District when they conflict with the employee's official duties and responsibilities at the District. A conflict of interest may occur if outside activities or personal interests influence or appear to influence the ability to make objective decisions in fulfilling the employee's job responsibilities.

A conflict of interest may also exist if the demands of any outside activities hinder or distract an employee from his or her job performance or cause the use of District resources for non-District purposes. Any questions an employee has as to whether an outside activity might be or appear to be a conflict of interest should be directed to his or her supervisor, Human Resources, or the Chief Compliance and Privacy Officer. A policy of full disclosure must be followed to assess and prevent potential conflicts of interest from arising.

The Health Care District will not allow employees to engage in secondary employment where a conflict of interest exists. Upon hire and annually thereafter, all employees will complete a Conflict of Interest Statement. If during the year a conflict or potential conflict of interest occurs, the employee should discuss it with his or her supervisor and complete an updated Conflict of Interest Statement. The Chief Compliance and Privacy Officer shall review all Conflict of Interest Statements annually and make recommendations regarding mitigation.

Examples of Conflict of Interest:

- An employee or family member owns a company or service that does or wants to do business with the District
- Outside employment or activities which use the equipment, personnel, or other resources of the District
- Acceptance of gifts, payments (in cash or in kind), or services from those seeking to do business with the District
- Outside activities (consulting, employment, management, or other contractual relationships) with a person or entity, or financial interests in an entity, that does business with or competes with the District, particularly when the employee may influence a District decision involving that business
- If an employee's spouse or other family member is engaged in a business similar in nature to the District or under contract with the District, or employed by an organization under contract with the District

### **Ineligible Persons**

It is the policy of the District not to contract with, employ, or bill for services rendered by an individual or entity that is excluded or ineligible to participate in Federal health care programs; suspended or debarred from Federal government contracts; or has been convicted of a criminal offense related to the provision of health care items or services. These individuals, companies, or groups are not eligible to do business with or be employed by the District.

The District verifies that individuals and entities employed by or doing business with the District are not excluded by the Office of the Inspector General (OIG) or General Service Administration (GSA). These checks are performed upon hiring or contracting and monthly thereafter.

### **Hiring of Former and Current Government and Fiscal Intermediary Employees**

The recruitment and/or employment of former or current U.S. government employees may be impacted by regulations concerning conflicts of interest. Hiring employees directly from a fiscal intermediary requires

certain regulatory notifications. Employees should consult with the Compliance, Legal, and Human Resources Departments regarding such recruitment and hiring.

### **License and Certification Renewals**

Employees and other individuals in positions that require professional licenses, certifications, or other credentials are responsible for the ongoing maintenance of their credentials and shall comply at all times with Federal and State requirements applicable to their respective disciplines. Additionally, if an employee becomes aware of someone whose license has been restricted or suspended in any manner, he or she has a duty to report that restriction or suspension to their supervisor, Human Resources, or the Chief Compliance and Privacy Officer. To ensure compliance, the District may require evidence of the individual's current license or active credentials. The District will not allow any employee, independent contractor, or privileged practitioner to work without a valid license or credentials required for their position.

### **Non-Retaliation**

The Health Care District is committed to protecting employees from retaliation or reprisal when they report allegations in "good faith" of a violation of law or regulation, unethical behavior, or other prohibited act that has or may occur. Good faith reporting involves a truthful and honest intent to act without taking an unfair advantage over another person. In other words, you believe that what you are reporting is true and correct to the best of your knowledge. Any employee who believes that he or she is being retaliated against by a superior or peer for making a good faith report should immediately notify the Chief Compliance and Privacy Officer and/or a Human Resources representative. If you have any questions regarding retaliation, contact the Compliance Department or refer to the "Non-Retaliation Policy" on the Compliance page on SharePoint. Anyone who intentionally makes a false report may be subject to disciplinary action.

### **No Solicitation**

It is District policy to limit the solicitation and distribution of literature to employees during working hours and in working areas by all persons and organizations. This policy applies to employees and non-employees while on any District premises. No employee should ever be compelled or made to feel compelled to participate in a District or District business unit fundraising endeavor to support charitable organizations such as the United Way. Parties with a legitimate contractual agreement with the District may be allowed to provide information where appropriate, for the purpose of delivery of health care, efficient business practices or to provide professional development. Such persons shall not engage in sales solicitation directed at employees, patients or visitors.

### **Relationships Among Employees, Patients, Residents and Members**

Employees must remember to keep relationships professional at all times with other employees, patients or members of our programs. We are prohibited from purchasing gifts for our patients, residents, and members as well as accepting gifts from them. If ever in doubt about a relationship, employees should consult with their supervisor, Human Resources, or the Chief Compliance and Privacy Officer. Refer to the "Gift Policy" on the Compliance page on SharePoint for more information on the subject.

### **Non-Discrimination**

Our employees have the right to work in an environment free from discrimination. The Health Care District does not discriminate against any person regardless of race, color, national origin, disability, age, sex

(including pregnancy and sex stereotyping), sexual orientation, gender identity and/or expression, religion, or creed, and/or any other legally protected classification. This applies to excluding or denying benefits, admission to, participation in, or receipt of the services and benefits under any of its programs and activities (operated directly by the District or through an approved contractor), and in staff and employee assignments. Any employees with knowledge or reasonable suspicions of discrimination should report their observations to Human Resources. If you have any questions regarding discrimination, contact the Compliance Department or refer to the “Non-Discrimination Policy” on the Compliance page on SharePoint for more information.

## **Harassment**

Each employee of the Health Care District and its Affiliates, District Clinic Holdings, dba C. L. Brumback Clinics and District Hospital Holdings dba Lakeside Medical Center has the right to work in an environment free of harassment and disruptive behavior, including behaviors that undermine a culture of safety. Harassment includes degrading or humiliating jokes, slurs, intimidation, or any conduct that creates a hostile work environment. Sexual harassment is also prohibited, including unwanted sexual advances and verbal or physical contact of a sexual nature that creates an intimidating, hostile, or offensive work environment.

## **Workplace Violence**

Workplace violence is any act or threat of physical violence, menacing, intimidation, or other threatening or disruptive behavior that occurs at or off the worksite and adversely impacts work-related activities. It may be intentional or unintentional and it may affect and involve employees, clients, residents, patients, physicians, contractors, suppliers, and visitors. If you observe or experience any form of workplace violence, you should report the incident to your supervisor, the Human Resource Department, a member of management, the Facility Administrator, or the Compliance Department.

## **Government Investigations and Search Warrants**

The District will cooperate fully with government investigations and other requests for information. If a government investigator contacts you regarding your work, or affiliation and/or knowledge of the District, do not feel pressured to talk to the investigator without first contacting the District’s Legal Counsel and the Chief Compliance and Privacy Officer. As an employee, you have the right to:

- Speak with the investigator or decline to speak to the investigator
- Request that the interview take place at a time and place that is convenient to you
- Have Legal Counsel present
- Terminate the interview at any time
- Refuse to answer any questions

If you do speak with the investigator, the District expects you to be truthful and to avoid speculation on your part in your responses. It is important to remember that interviews with government investigators may have a substantial legal effect that may impact your legal rights and those of the District. You should always be polite and request the following:

- The business cards of all investigators or to view their photo identification

- The reason for their visit
- Ask whether there is a subpoena or warrant for any requested documents or records

If you are presented with a subpoena, search warrant, or court order, it is expected that you immediately notify your supervisor, Legal Counsel, and the Compliance Department. District employees are expected to respond with openness and accurate information. Employees must never conceal, destroy or alter any documents.

## **Gifts and Entertainment**

Our services and business relationships are intended to promote the best interests of the District and its patients, residents, and health plan members. We cannot offer or accept anything of value in exchange for referrals or business. Employees are prohibited from accepting gifts, payments, fees for services, discounts, valuable privileges, or other favors, which would or might appear to influence them in the performance of their official duties. Gifts must never be offered, given to, solicited, or received from a referral source with the intent of inducing referrals or in a manner that could give the appearance of intending to induce referrals. A referral source is defined as an entity or individual that does or might in the future direct patients or other medically-related activities to the District.

These restrictions also apply any time we are in active negotiations or in a Request for Information/Request for Proposal (RFI/RFP) process with a potential vendor.

Whenever a gift is offered that is not allowed by policy, the gift should be graciously refused or returned to the donor, and reported to the Chief Compliance and Privacy Officer. If after explaining our gift policy, the donor refuses to take the gift back, or would be offended by your refusal, you should contact the Compliance Department immediately for further direction.

A gift is any item of value, including, but not limited to, marketing items (such as t-shirts, food, flowers, etc.) if the recipient is not expected to pay for the item. Cash, gift cards, traveler's checks, money orders, honorariums, or other cash equivalents received from patients, vendors, customers, physicians, or government officials are strictly prohibited. Perishable items (such as food, popcorn, etc.) may be accepted during special occasions (e.g., holiday season) as long as they are of reasonable value (not extravagant), appropriate for the occasion, and shared among the entire department staff.

## **Reporting Compliance Concerns**

Employees are expected to report any suspected or known violations of law, regulation, and District policies including those described in the Standards of Conduct and other supporting policies and procedures. Examples include, but are not limited to, incidents of fraud, waste or abuse, harassment, etc. Issues or incidents can be reported to your supervisor, Human Resources, the Chief Compliance and Privacy Officer, or the Compliance Hotline. Remember, the District is committed to protecting employees from retaliation or reprisal for making a "good faith" report. It is also important to: provide as much relevant information as possible regarding the issue or incident reported; cooperate with any compliance investigation; and only disclose information to those who have a need to know. Indiscriminately disclosing information regarding confidential compliance investigations may inhibit or corrupt the investigation, and as a result, may subject you to disciplinary action up to and including termination. For additional

information on reporting compliance concerns, refer to “Internal Reporting of Potential Compliance Issues Policy” on the Compliance page on SharePoint.

## **Corrective Action**

When an internal investigation determines a violation occurred, the Compliance Department will initiate appropriate corrective action. Possible corrective actions include, but are not limited to, refunds of any overpayment(s) received, employee disciplinary action up to and including termination, and reporting the incident to the appropriate Federal or State authorities.

## **Disciplinary Action**

Failure to comply with the Standards of Conduct, District policies, and procedures or any applicable laws and/or regulations may result in disciplinary action up to and including termination of employment and/or criminal or civil sanctions including fines, imprisonment, and exclusion from participation in government programs. Violations of laws and/or regulations may also result in the imposition of penalties on the District up to and including exclusion from contracting with Federal and State agencies. Similar corrective actions may be applied in those instances in which an individual and/or the District fail to report suspected or identified noncompliance.

## **Auditing and Monitoring**

The District is committed to the aggressive monitoring of compliance with its policies and applicable laws and regulations. In addition to its ongoing monitoring efforts, the District will ensure that compliance audits are conducted of areas and activities with the greatest risk identified by a formal risk assessment and or investigation. These audits may be scheduled or unannounced and may be expanded based in the initial findings.

## **Compliance Hotline 1-866-633-7233**

The Compliance Hotline is managed by an independent third party. All callers have the option of remaining anonymous and are issued a report number so they can follow up on actions taken. The Compliance Hotline operators do not have caller identification and are unable to trace calls. When a call is made, the caller is encouraged to provide enough details to investigate the caller’s concerns, including the business unit and department. A caller’s anonymity will be protected to the full extent allowed by law. Information regarding each call will be forwarded to the Compliance department in order to facilitate investigation and corrective action.

All reports should be made in good faith. There will be no retaliation for expressing concerns or passing along information about situations that seem questionable to you as long as they are made in good faith.

## **Compliance Support**

The Health Care District’s Compliance Program promotes open identification, discussion, reporting and resolution of compliance issues without fear of retaliation. The Health Care District’s Compliance Department is led by the Chief Compliance and Privacy Officer.

For more information on the District’s Compliance Program and policies, visit SharePoint.

Issues can be reported several ways - by email (visit the Compliance Department site on SharePoint), phone, fax, mail, interoffice mail, or in person:

Health Care District of Palm Beach County Compliance Department  
1515 N. Flagler Drive, Suite 101  
West Palm Beach, FL 33401-3429  
Attn.: Chief Compliance and Privacy Officer  
Phone: 561-804-5786

**Additional Resources**

Compliance Hotline ..... 1-866-633-7233

HIPAA Privacy ..... Phone: 561-804-5600 ext. 295893  
[Privacy@hcdpbc.org](mailto:Privacy@hcdpbc.org)

Human Resources ..... 561-804-5982

Legal Department ..... 561-804-5955

## **Acknowledgement of Receipt and Understanding of the Standards of Conduct**

I acknowledge that I have received and reviewed these Standards of Conduct. I agree to comply with the Standards of Conduct and all related policies and procedures. I also acknowledge that the Standards of Conduct are only a statement of principles of individual and business conduct, and do not constitute an employment contract.

I will promptly report any identified or potential violation of which I become aware to my supervisor, Human Resources, the Chief Compliance and Privacy Officer or another member of the Compliance Department. I understand that any violation of the Standards of Conduct or any Compliance Policy or Procedure is grounds for disciplinary action, up to and including termination. Because the information and policies described in the standards, policies and procedures are subject to change as needed, I acknowledge that revisions to the policies and procedures may occur without prior notice. Any such changes will be communicated as soon as possible after the change is instituted. I also understand that the revised information may supersede, modify or eliminate existing policies.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

Department: \_\_\_\_\_

Location:  Health Care District (West Palm Beach)

Edward J. Healey Rehabilitation and Nursing Center

Lakeside Medical Center

C. L. Brumback Primary Care Clinics and Dental Services

Trauma Hawk Aeromedical Hangar Facility

School Health Program

Other (specify):



Published by the Compliance Department  
Health Care District of Palm Beach County  
1515 N. Flagler Drive, Suite 101  
West Palm Beach, FL 33401-3429  
561-804-5600 ext.295524

