

Office of Origin: Office of Healthcare Compliance and Privacy

## I. PURPOSE

To provide excellent medical services in an ethical manner and in compliance with the law. This Code of Conduct and Principles of Compliance is an essential element of our UCSF Ethics and Compliance program. Created at the direction of the UC Board of Regents, it is intended to guide the conduct of each member of the UCSF Medical Center and UCSF Benioff Children's Hospital Workforce so that we can fulfill our Mission in accordance with our ethical and legal obligations.

## II. REFERENCES

[UCSF Code of Conduct](#)

[UCSF Campus Administrative Policy 050-16 Communication with Government Officials and Agencies](#)

[UCSF Campus Administrative Policy 050-19 Records Management and Retention](#)

[UCSF Campus Administrative Policy 150-10: Conflict of Interest](#)

[UCSF Campus Administrative Policy 150-11: Substance Abuse in the Workplace](#)

[UCSF Campus Administrative Policy 150-23: Reporting Improper Governmental Activities and Protection Against Retaliation \(Whistleblower Policy & Whistleblower Protection Policy\)](#)

[UCSF Campus Administrative Policy 150-30: UCSF Industry Relations Policy](#)

[UCSF Campus Administrative Policy 200-32: Workforce Sanctions for Patient Privacy Violations](#)

[UCSF Campus Administrative Policy 650-16: Information Security and Confidentiality](#)

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

[UC Policy on Sexual Harassment and Sexual Violence](#)

[University of California Nondiscrimination and Affirmative Action Policy Regarding Academic and Staff Employment](#)

[BFB-G-39: Conflict of Interest Policy and Compendium of Specialized University Policies, Guidelines, and Regulations Related to Conflict of Interest](#)

## III. DEFINITIONS

**Workforce:** All employees, contractors, vendors, volunteers, faculty, and medical staff members who provide services at or on behalf of UCSF Medical Center.

## IV. POLICY

- A. UCSF Medical Center is committed to creating a culture that encourages and assists the UCSF Medical Center Workforce to operate in compliance with applicable laws, regulations, and policies.
- B. Everyone is accountable for compliance. UCSF Medical Center requires all Workforce members to carry out their responsibilities in accordance with this Code of Conduct and to appropriately report actual or potential violations.
- C. To encourage compliance and facilitate understanding of this policy, UCSF Medical Center managers must review this policy at least annually and are responsible for ensuring their staff do

so as well.

- D. Failure to comply with the Code of Conduct or knowingly making a false statement or report regarding a compliance violation may result in disciplinary action, up to and including dismissal.

## V. PROCEDURES

- A. General Principles of Compliance All Workforce members shall:

1. Adhere to the Mission, Vision, and Values of UCSF Medical Center.
2. Provide quality health care services in compliance with applicable federal, state, and local laws and regulations, and UCSF Medical Center policies.
3. Commit to conducting themselves with integrity, taking personal responsibility for their actions.
4. Comply with all applicable laws and regulations and with all UC and UCSF policies, including this Code of Conduct. Failure to understand obligations or ignorance of relevant policies and procedures is not an excuse for non-compliance.
5. Be honest in dealings with others and accurately represent themselves to other Workforce members, patients, government agencies, and any other third party.
6. Address all circumstances that may raise questions regarding UCSF Medical Center's commitment to compliance.
7. Treat all proprietary and patient information in a confidential manner.
8. Avoid engaging in activities that conflict with or adversely affect the interest of UCSF Medical Center or its mission.
9. Not accept gifts of more than nominal value from people with whom the Medical Center does, or seeks to do, business.
10. Use UCSF Medical Center's assets for the purpose of conducting UCSF Medical Center business.
11. Respect copyrights, patents and trademarks owned by others.
12. Cooperate with the requests of governmental entities in the performance of their official duties, consistent with the policies and procedures of UCSF Medical Center.
13. Not cause UCSF Medical Center to employ or contract with individuals or organizations that are excluded from participation in federally funded health care programs or debarred from government programs or contracting.
14. Provide an environment that is free from sexual harassment and violence.
15. Provide equal opportunity in all aspects of employment without discrimination on the basis of race, color, national origin, religion, sex, gender, gender expression, gender identity, pregnancy, physical or mental disability, medical condition (cancer-related or genetic characteristics), genetic information (including family medical history), ancestry, marital status, age, sexual orientation, citizenship, or service in the uniformed services in accordance with the University of California Nondiscrimination and Affirmative Action Policy Regarding Academic and Staff Employment.

- B. Reporting Compliance Issues

1. The opportunity to ask questions and raise concerns is a cornerstone of a successful compliance program. UCSF Medical Center supports open discussion of ethical and legal questions and concerns regarding compliance issues.
2. Workforce members have a responsibility to monitor and report activity that they believe appears to violate applicable laws, rules, regulations, or this Code of Conduct. Unreported observations of possible violations could be misinterpreted as condoning the activity.
3. Reports may be made to a Supervisor, Manager, the Office of Healthcare Compliance and Privacy, or Legal Affairs. Reports also may be made to the UC Hotline, which permits anonymous reporting, at 1-800-403-4744.
4. Managers and Supervisors are responsible for providing guidance to their employees on a day-to-day basis on issues related to compliance. Managers and Supervisors are responsible for seeking appropriate guidance for issues that require clarification or reporting. The Office of Healthcare Compliance and Privacy, Legal Affairs, Human Resources, and Audit Services also can provide guidance.
5. UCSF Medical Center does not tolerate retaliation for good faith reporting of a potential compliance violation. Workforce members will not be penalized for good faith reporting of a violation.

#### C. General Obligations

1. All clinical, healthcare, and personal business should be conducted in a manner that will avoid actual or potential conflicts of interest.
  - a. Gifts and Other Inducements
    - i. UCSF Medical Center prohibits the acceptance of gifts or other gratuities for services rendered in the course of employment. Gifts of nominal value from patients and families, such as candy, cookies, or flowers, may be accepted if shared across the unit.
    - ii. It is inappropriate to accept gifts or invitations of more than nominal value from individuals or organizations doing business or seeking to do business with UCSF.
    - iii. Gifts, invitations, or other possible inducements should be reported to a supervisor, who may consult with the Office of Healthcare Compliance and Privacy or Legal Affairs if there is question about acceptance.
  - b. Arrangements with Vendors and Third Parties
    - i. Any agreement or arrangement made with vendors and third parties who do business or want to do business with UCSF Medical Center shall be consistent with UC and UCSF vendor and contracting policies.
    - ii. Vendors and third parties should receive fair and uniform treatment.
2. Personal Use of UCSF Medical Center Assets
  - a. UCSF Medical Center assets are to be used primarily for the purpose of conducting UCSF Medical Center business. Applicable assets include, but are not limited to, information systems, computers, databases, electronic mail, Internet access, voice mail, telephones or pagers, which are the property of UCSF Medical Center.
3. Copyrights, Patents, and Trademarks

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- a. Workforce members will not copy or otherwise infringe on copyrights, patents and/or trademarks owned by other individuals or organizations. This prohibition includes copying computer software or downloading software onto a computer that is not licensed for the software.
4. Confidentiality of Proprietary Information
    - a. Ideas and intellectual property are assets of UCSF Medical Center and are important to our organizational success. Workforce members shall exercise reasonable care to ensure these intellectual property rights are carefully maintained and managed to protect their value.
    - b. Workforce members shall only share proprietary or confidential information with those who need to know the information to perform the responsibilities of their job. Examples of confidential information include personnel data, financial data, clinical research information, strategic plans, marketing strategies, process, techniques, and any information with a copyright.
  5. Occupational and Environmental Safety Regulations
    - a. Workforce members shall strictly adhere to laws, regulations and UCSF Medical Center policies regarding occupational and environmental health and safety. These include state law regarding the disposal of medical waste, federal regulation of potential exposure to blood borne pathogens, federal laws and regulations concerning radiation safety, and other regulations and UCSF policies.
  6. Political Activities
    - a. UCSF funds or resources may not be used to contribute to political campaigns or for gifts or payments to any political party or organization, unless it is expressly permitted by federal and state law and approved by the UCSF Campus Counsel.
    - b. Of course, any individual may participate in the political process as a private citizen on their own behalf.
    - c. If a Workforce member is contacted by legislators, the Press, or other third parties regarding UCSF Medical Center's position on public issues, the individual should be referred to the UCSF News Office at (415) 502-6397.
  7. Creation of Records
    - a. UCSF Medical Center generates and retains those papers, records and electronic data required by law to be created and maintained for its business operations, and to meet obligations to patients, staff, physicians and the government.
    - b. Workforce members responsible for the preparation and retention of official records shall ensure that they are accurately prepared and maintained in a manner and location prescribed by law and UCSF policy.
    - c. Records should be complete, accurate and not intentionally misleading.
    - d. Records must be maintained, retained, or destroyed only in accordance with UC and UCSF record retention policies. If a government investigation or litigation is in process, no records related to the subject of the investigation or litigation may be destroyed, even if the record retention policy would ordinarily call for their destruction, unless Legal Affairs advises that the documents need not be kept for the investigation or litigation.

8. Cooperation with Governmental Authorities

- a. It is UCSF Medical Center policy to comply with the law and to respect the legal rights of patients and Workforce members.
- b. Workforce members shall cooperate with government investigations and will not make false or misleading statements to a government investigator.
- c. Workforce members shall not destroy or alter UCSF records in anticipation of a government request for a document or record.
- d. Workforce members shall promptly contact a supervisor, manager, Regulatory Affairs, Legal Affairs, or the Office of Healthcare Compliance and Privacy upon receipt of an inquiry, phone call, visit, subpoena, or other legal document from any governmental agency regarding UCSF Medical Center business, whether at home or in the workplace.

D. Compliance Related To Patient Care

1. General Principles

- a. UCSF Medical Center strives to treat all patients with fairness and equity by providing care that is both necessary and appropriate to their clinical needs, without discrimination on the basis of race, color, national origin, religion, sex, gender, gender expression, gender identity, pregnancy, physical or mental disability, medical condition (cancer-related or genetic characteristics), genetic information (including family medical history), ancestry, marital status, age, sexual orientation, citizenship, or service in the uniformed services .
- b. Patients and their families shall be involved as much as possible in the clinical decision-making process. Patients are informed about known health care alternatives available to them, the known risks associated with the care they select, and the consequences of refusing treatment. Workforce members shall recognize the rights of patients to make choices about their own care, including the right to forego life-sustaining treatment.
- c. UCSF Medical Center shall provide health education, health promotion and illness prevention programs as part of its efforts to improve the quality of life for its patients and communities.

2. Patient Information and Confidentiality

All reasonable efforts will be made to protect the privacy and security of private and confidential information concerning UCSF Medical Center patients in accordance with applicable legal and ethical standards.

3. Patient Admission and Discharge Process

- a. The assignment and referral of patients to inpatient care, outpatient care, therapists or other health care providers shall be based on quality care factors and, as appropriate, the needs and preferences of the individual patient. It is UCSF Medical Center policy to discharge or transfer patients only when it is medically appropriate and regardless of the patient's ability to pay.
- b. Referral post discharge is based on quality care factors and the needs and preferences of the individual patient and family. UCSF Medical Center recognizes the right of the patient and family to choose among available providers. Insurance coverage restrictions may require patients to pay for non-covered care that they choose.

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4. Laboratory Compliance
    - a. Claims for clinical and diagnostic laboratory testing services should be accurate and correctly identify the services ordered by the physician. UCSF Medical Center maintains compliance with CLIA (Clinical Laboratory Improvement Amendments) to ensure quality patient testing in the clinical laboratories.
  5. Medical Records Documentation
    - a. Medical Records documentation will meet the requirements of the applicable Medical Staff Bylaws and all applicable policies, laws, regulations, and accreditation standards. Where appropriate, medical record documentation will also reflect the standards or requirements of third party payors or their outside review agents.
  6. Cost Reports
    - a. We create, maintain, and submit cost reports that are accurate and are in accordance with the applicable laws and regulations. We will correct cost report preparation or submission errors in a timely manner.
  7. Coding and Billing
    - a. Coding, billing, and documentation shall be consistent with the standards in applicable UCSF policies, industry practices, regulatory guidelines, and accreditation standards. UCSF policies shall be consistent with federal and state requirements.
    - b. Workforce members involved in the coding, billing, and documentation of patient care services for the purpose of billing third parties shall comply with applicable laws, regulations, payor contracts, and UCSF specific policies and procedures for documentation, coding, and billing.
    - c. UCSF Medical Center shall only bill for services actually rendered and shall seek the amount to which it is entitled. Bills shall not misrepresent the type or level of service rendered or the clinical condition of the patient.
    - d. UCSF Medical Center collects all required co-payments and deductible amounts on patient bills, unless waived or discounted pursuant to other written policies.
    - e. All patients shall be consistently and uniformly charged, regardless of payor. Discounts shall be appropriately reported.
    - f. Billings and collections shall be reported in the appropriate accounts. Credit balances will be processed timely in accordance with applicable laws and regulations.
    - g. UCSF Medical Center does not bill for services rendered by other providers who have not properly authorized UCSF Medical Center to bill on their behalf.
    - h. Management is responsible for establishing and maintaining an effective internal control structure to minimize organizational risk for inappropriate billing and collection activities. Internal controls include, but are not limited to, effective training and educational programs and periodic auditing. Procedures to evaluate and monitor coding and billing must be implemented and reviewed on an ongoing basis.
    - i. UCSF Medical Center will not tolerate the actions of any Workforce member who knowingly makes, uses, or causes to be made a false record or statement to obtain excess payment, or to conceal or decrease an obligation to pay money to the government.

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8. EMTALA (a.k.a. “Patient Dumping”) The Emergency Medical Treatment and Active Labor Act
    - a. UCSF Medical Center facilities shall comply with all federal and state laws and regulations regarding evaluation, treatment and discharge (which includes transfer) of patients with emergency medical conditions, including those arising from mental illness or substance abuse and women in active labor. For more information, please refer to “UCSF Medical Center Administrative Policy 6.03.09, EMTALA Requirements for Emergency Medical Treatment”.
  9. Clinical Research
    - a. All Workforce members engaged in clinical research at UCSF Medical Center are expected to conduct their research with integrity and intellectual honesty at all times and with appropriate regard for human subjects.
    - b. Costs to perform clinical trials shall be charged to the appropriate funding source (e.g., clinical trial sponsor, third party payor, patient).
    - c. Researchers shall follow UCSF Medical Center policy and applicable laws on patient privacy and human subject protection when creating, using, or disclosing documentation regarding clinical trial subjects receiving care at UCSF Medical Center.
  - E. Business Practices
    1. Fair Dealings
      - a. UCSF Medical Center prohibits discrimination in any work related decision on the basis of race, color, national origin, religion, sex, gender, gender expression, gender identity, pregnancy, physical or mental disability, medical condition (cancer-related or genetic characteristics), genetic information (including family medical history), ancestry, marital status, age, sexual orientation, citizenship, or service in the uniformed services in accordance with the University of California Nondiscrimination and Affirmative Action Policy Regarding Academic and Staff Employment.
      - b. UCSF Medical Center will make reasonable accommodations to the known physical or mental limitations of otherwise qualified individuals with disabilities unless such accommodations impose an undue hardship on the business operations of UCSF Medical Center.
      - c. UCSF Medical Center is committed to providing equal employment opportunity and a work environment where each employee is treated with fairness, dignity, and respect.
      - d. UCSF Medical Center prohibits any form of sexual harassment or workplace violence.
    2. Tax Compliance
      - a. UCSF Medical Center is a non-profit entity organized for tax-exempt charitable purposes, and recognized by the Internal Revenue Service as a tax-exempt organization. This tax-exempt status imposes certain special obligations including restrictions on the use of enterprise assets for private purposes or for the personal benefit of private individuals, restrictions on employee compensation, and restrictions on political activities. Workforce members must avoid any activity that may adversely impact UCSF Medical Center’s tax-exempt status. If in doubt, consult a supervisor, the Chief Financial Officer, Legal Affairs, or the Office of Healthcare Compliance and Privacy.
    3. Antitrust Compliance

- a. UCSF Medical Center promotes fair competition and will comply with all applicable federal and state antitrust laws.
  - b. Antitrust laws are intended to promote competition and ensure patients have health care choices at prices that reflect an open market. Activities that may implicate the antitrust laws include: agreements by competitors regarding the price they will charge for their products or services, dividing up markets, bid “rigging” for contracts, agreeing to boycott competitors or suppliers. If a Workforce member is confronted with a business decision involving a risk of violation of these laws, seek advice from a supervisor, the Chief Financial Officer, Legal Affairs, or the Office Healthcare Compliance and Privacy.
4. Prohibition against Payments for Referrals
- a. UCSF Medical Center is committed to complying with the federal and state laws that prohibit payments or anything of value in exchange for referrals. UCSF Medical Center accepts patient referrals or admissions based on the patient’s clinical needs and UCSF Medical Center’s ability to render the needed services. UCSF Medical Center does not offer or pay any remuneration to another person for referring patients, nor should a Workforce member solicit or accept remuneration from other providers in exchange for patient referrals.
  - b. Medical Staff members should consult with legal counsel before entering into any transaction that might involve federal or state self-referral laws, commonly known as the Federal Stark Law or the California Speier law. These include arrangements with outside entities where a UCSF physician or family member has a financial relationship with the outside entity.
  - c. Joint ventures, equipment and supply purchases, space leases, and personal services agreements with physicians or other providers should be developed and reviewed by Hospital Administration or through a delegated process.
- F. Compliance Oversight
1. The Compliance Committee oversees implementation of the Ethics and Compliance Program at UCSF Medical Center.

## VI. RESPONSIBILITY

Questions about the implementation of this policy should be directed to the Office of Healthcare Compliance and Privacy. <https://ohcp.ucsf.edu/>. Violations of law or this Code of Conduct may be reported confidentially to the Office of Healthcare Compliance and Privacy or anonymously through the UC Hotline at 1-800-403-4744.

## VII. HISTORY OF POLICY

Issued August 1998

Revised November 2000 for ownership change information only.

Reviewed in April and May 2002 with no recommended changes

Reviewed in March 2003 with no recommended changes

Reviewed April 2003 by UCSF Office of Legal Affairs and/or M.C. Risk Management

Approved April 2003 by Executive Medical Board and Governance Advisory Council



Reviewed February 2004 by Cindy Lima, Medical Center Administration

Reviewed February 2004 by Policy Steering Committee

Reviewed August 2007 by Harry Cordon, Compliance Officer, David Odato, Executive Director for Patient and Staff Services, Joan Spicer, Director, UCSF Home Health Care, and Policy Steering Committee

Approved August 2007 by Executive Medical Board, Governance Advisory Council and Chancellor J. Michael Bishop

Reviewed and Revised by August 2014 by Compliance Office, Human Resources and Office of Legal Affairs

Reviewed and Approved December 2014 by Policy Steering Committee

Revised January 2019 by Vanessa Ridley, Chief UCSF Health Compliance Officer

Reviewed and Approved January 2019 by Policy Steering Committee

Revised February 2022 by Vanessa Ridley, Chief UCSF Health Compliance Officer

Reviewed and Approved with no changes March 2022 by Policy Steering Committee

## **VIII. APPENDIX**

A. Appendix A: Code of Conduct and Principles of Compliance - Individual Acknowledgment

B. Appendix B: Frequently Asked Questions

*This guideline is intended for use by UCSF Medical Center staff and personnel and no representations or warranties are made for outside use. Not for outside production or publication without permission. Direct inquiries to the Office of Origin or Medical Center Administration at (415) 353-2733.*

**APPENDIX A**

**CODE OF CONDUCT AND PRINCIPLES OF COMPLIANCE  
INDIVIDUAL ACKNOWLEDGMENT**

I acknowledge receipt of this Code of Conduct and Principles of Compliance.

I understand that it is my responsibility to read this Code and to understand my obligations and that not doing so is not an excuse for non-compliance. If I have any questions about my obligations, I will discuss them with my supervisor, call the Office of Healthcare Compliance and Privacy, or call the UC Hotline at 1-800-403-4744.

I understand that violation of any sections of the Code of Conduct is grounds for disciplinary action, which may include termination.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department and Location

**APPENDIX B: FREQUENTLY ASKED QUESTIONS**

*Q: Will my call to the UC Hotline be recorded or traced?*

A: Calls to our UC Compliance Hotline are not recorded. Callers are asked if they would like to remain anonymous or identify themselves. Non-anonymous reporting typically makes it easier to investigate the report or to provide follow-up.

*Q: What types of issues should I report to the UC Hotline?*

A: Report any suspected violations of the law, this Code of Conduct, or inappropriate governmental activities. However, the UC Hotline is not designed to circumvent our normal channels of communication. You are encouraged to speak first with your supervisor or manager about your concerns. If that makes you uncomfortable, call the UC Compliance Hotline or the Compliance Officer.

*Q: May we accept gifts from our patients or their families?*

A: You may accept gifts of nominal value such as candy, cookies or flowers given to you by patients or their families. These should be shared with unit staff whenever possible.

*Q: May I accept the invitation of a vendor who offers to take me to a football game and dinner?*

A: No. This is a substantial gift and may give the appearance of undue influence. However, lunch as part of a day long educational presentation may be permissible. If in doubt, discuss the invitation with your supervisor.

*Q: Our local Senator is very active with health care initiatives and I would like to support his campaign. If I pay to attend a fund raising dinner for the Senator, will the hospital reimburse the cost of my ticket?*

A: No. By law, we are not permitted to contribute to political campaigns. However, you may attend as a private citizen, purchasing your own ticket.

*Q: May I use my UCSF electronic mail or telephone for personal use?*

A: UCSF Medical Center assets include, but are not limited to, information systems, computers, databases, electronic mail, Internet access, voice mail, telephones or pagers. These assets are to be used primarily for the purpose of conducting UCSF Medical Center business. Occasional personal use of the communication systems is permitted, as long as it does not interfere with business use. However, you should keep in mind that personal communications using UCSF Medical Center equipment may not be confidential.