



Getting to the heart of...

Corporate Responsibility

**Daughters of Charity Health System
Corporate Responsibility Program
Annual Training
2009**



Daughters of Charity
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The heart of Corporate Responsibility Training Overview



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This course covers:

- The Meaning of Corporate Responsibility
- Recent Enforcement Activity
- Preventing Health Care Fraud and Abuse
- Patient Privacy and Security of Patient Information
- The Corporate Responsibility Program and Resources



Accountability



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The heart of Corporate Responsibility



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The Meaning of Corporate Responsibility

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“Accountability is at the heart of our Corporate Responsibility Program...accountability for ethical decisions in the work place...accountability for treating others with respect and compassion...and accountability for actions that always keep our patients, in mind and in heart, as our focus.

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Annual Corporate Responsibility training reminds us of our individual accountability to uphold the Vincentian Values and Standards of Conduct in our daily work. It is only then that we succeed collectively, as an organization, in meeting our Mission to serve the sick and the poor.”



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Robert Issai
President and Chief Executive Officer
Daughters of Charity Health System



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Corporate Responsibility means

Being accountable in our jobs and

- **Complying with the Law**

Going beyond what the law requires by

- **Upholding the Vincentian Values**
- **Following our Standards of Conduct**

Promoting ethics and integrity in all our work as we are

- **Carrying out our Mission**



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Our Founders



Saint Vincent de Paul



Saint Elizabeth Ann Seton



Saint Louise de Marillac

Our Mission

In the spirit of our founders, St. Vincent de Paul, St. Louise de Marillac, and St. Elizabeth Ann Seton, the Daughters of Charity Health System is committed to serving the sick and the poor.

With Jesus Christ as our model, we advance and strengthen the healing mission of the Catholic Church by providing comprehensive, excellent healthcare that is compassionate and attentive to the whole person: body, mind and spirit.

We promote healthy families, responsible stewardship of the environment, and a just society through value-based relationships and community-based collaboration.



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Compliance is the law

- We must follow the legal, regulatory, licensing, and accreditation requirements that govern our health ministries and our work.
- Our health ministries are governed by thousands of federal, state, city, and county laws and regulations, accreditation standards, and licensing requirements.
- Below are some examples:

The Centers for Medicare and Medicaid Services (CMS) regulate billing

The Office of Civil Rights (OCR) enforces patient privacy

The Occupational Safety and Health Administration (OSHA) regulates employee safety

The California Department of Public Health (CDPH) governs the licensing of hospitals



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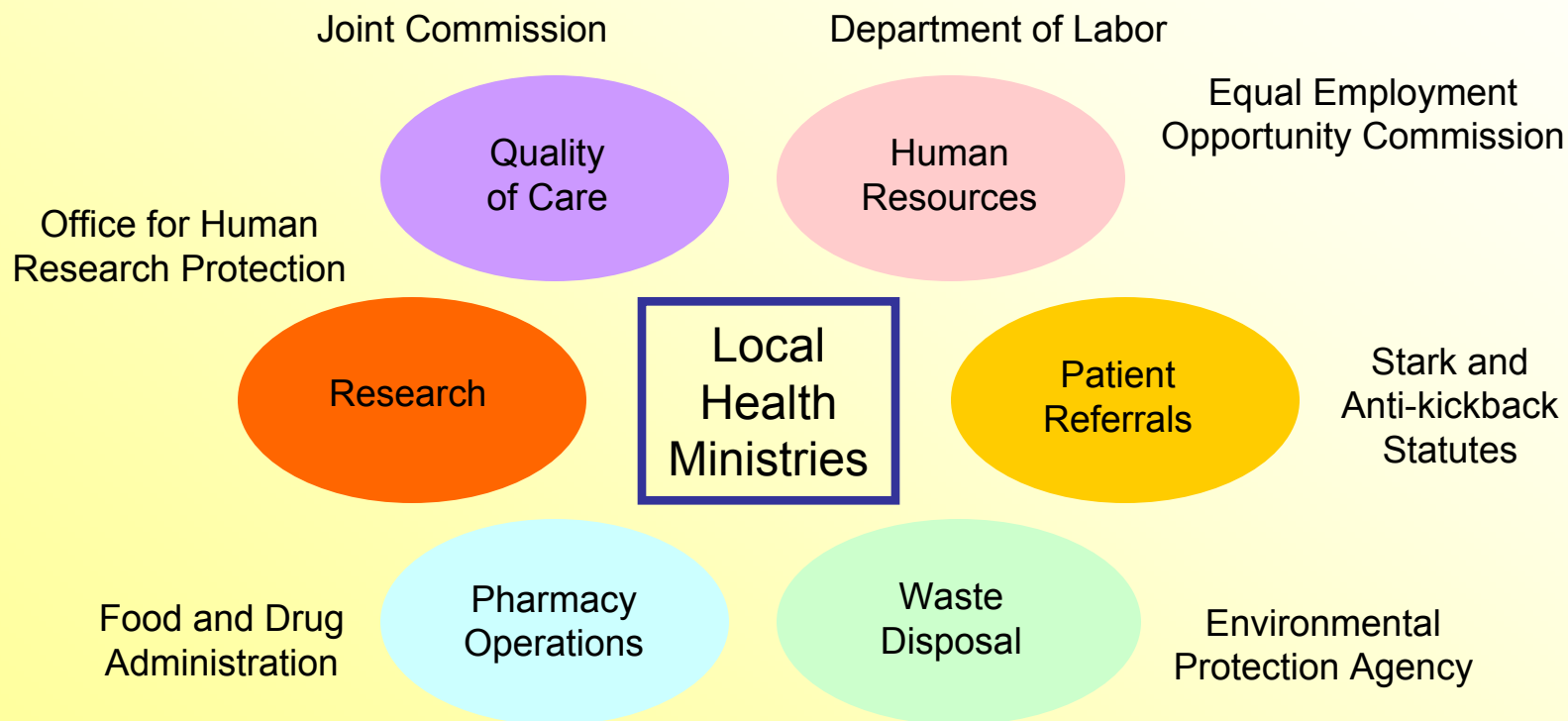


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Compliance touches all aspects of health care delivery.
Below are more examples of how our health care operations are regulated.





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Integrity and Ethics mean

Going beyond what is required by law and being honest, fair, and respectful in the work place, as individuals and as an organization, by following the ***Vincentian Values*** and our ***Standards of Conduct***.



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Vincentian Values

- ***Respect***
Recognizing our own value and the value of others
- ***Compassionate Service***
Providing excellent care with gentleness and kindness
- ***Simplicity***
Acting with integrity, clarity and honesty
- ***Advocacy for the Poor***
Supporting those who lack resources for a healthy life and full human development
- ***Inventiveness to Infinity***
Being continuously resourceful and creative



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Standards of Conduct

The 7 standards relate to:

1. Quality of Care
2. Law and Regulations
3. Human Resources
4. Business and Ethical Practices
5. Confidentiality
6. Conflicts of Interest
7. Responsible Stewardship

***Know the standards.
Report violations.***



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Standard of Conduct 1: Quality of Care

- A central concern of DCHS in meeting patient needs is serving the whole person in his or her spiritual, intellectual, emotional and physical dimensions.
- DCHS is committed to providing competent and compassionate care, to respect and safeguard the dignity of the patient, and to allow patient access to all medical and ethical information necessary to make decisions about their care.





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Standard of Conduct 2: Law and Regulations

- DCHS will operate in accordance with all laws and regulations.
- These laws and regulations apply to areas such as patient referrals, employment, physician relationships, billing and payment practices, discount arrangements, lobbying, political contributions, the environment, health and safety, and dealings with payers and regulatory agencies.





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Standard of Conduct 3: Human Resources

DCHS strives to cultivate a work environment where associates are highly regarded; where they are treated honestly and respectfully; where their health and safety are protected; where they are motivated to reach their potential; where they are given the opportunity for personal and career learning and advancement; where they are provided with opportunities to participate in decisions that affect their working conditions; where they are provided with the tools necessary to do their jobs well; where there are safe and adequate procedures for resolving conflicts; and where associates are recognized and rewarded for their achievements, without prejudice or discrimination.





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Standard of Conduct 4: Business and Ethical Practices

- DCHS is committed to ethical business conduct and integrity, including the *Ethical and Religious Directives for Catholic Health Care Services*.
- DCHS must be represented accurately and honestly and must not do anything that purposely defrauds anyone, including other companies or the government, of money, property, or services.
- Record keeping and billing for services provided to patients must be accurate, timely, and lawful.
- All reasonable steps must be taken to preserve and protect the Health Ministry's assets by making prudent and effective use of its resources, and properly and accurately reporting its financial condition.





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Standard of Conduct 5: Confidentiality

- In keeping with various laws, regulations, professional ethical guidelines and the *Ethical and Religious Directives for Catholic Health Care Services*, DCHS must maintain the confidentiality of medical records and other patient health information.
- DCHS is also expected to keep confidential information about associates and the proprietary business practices of the organization.





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Standard of Conduct 6: Conflicts of Interest

- You are expected to act in a manner that is in the best interest of DCHS and the patients we serve.
- Positions may not be used to profit personally or to assist others in profiting in any way at the expense of the organization.
- In any situation where outside interests conflict with those of the organization, those conflicts must be disclosed in accordance with organizational policy.





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Standard of Conduct 7: Responsible Stewardship

Preserve and protect the organization's assets by making prudent and effective use of its resources.



Seton Medical Center



O'Connor Hospital



Saint Louise Regional Hospital



St. Francis Medical Center



St. Vincent Medical Center



Seton Coastside



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At the heart of Corporate Responsibility...





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Recent Enforcement Activity



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Recent Enforcement Activity



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- In Fiscal Year 2008, the federal government recovered over **\$1 Billion** from health fraud and false claims.
 - ▶ The largest recoveries came from pharmaceutical companies.



- Over 400 Corporate Integrity Agreements are currently in place.

- In this section are just a few examples of recent enforcement activity.
 - ▶ These cases are examples of what can happen without a meaningful compliance program.

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■ Understanding a Corporate Integrity Agreement

- ▶ An agreement between the violating organization and the Office of Inspector General (OIG), usually 3 to 5 years in length.
- ▶ It dictates, in detail, how the organization's compliance program will be run.
- ▶ It requires notices in writing when the organization makes changes to the compliance program.
- ▶ It requires the organization to pay for an outside auditor to consistently audit the organization and report findings back to the government.
- ▶ It includes harsh financial penalties if any of the terms of the agreement are violated.
- ▶ It is public information. All Corporate Integrity Agreements are posted on the OIG web site. (www.oig.hhs.gov/fraud.asp)

- In addition to repaying any money owed to the government, as well as possible financial penalties, the government may choose to impose a Corporate Integrity Agreement on the violating organization.



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Recent Enforcement Activity



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- Merck & Company must pay \$361.5 million.
 - ▶ Merck gave kickbacks (financial incentives) to physicians to induce them to prescribe their products, disguised as fees for training. Such kickbacks are illegal.
 - ▶ Merck provided deep discounts to hospitals that used its drugs, instead of competitor drugs, and did not report these discounts. Not reporting the discounts violated the Medicaid “best price” rule, which requires that Medicaid patients get the same price discounts as other payers.
- Merck entered into a Corporate Integrity Agreement with the OIG.



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Recent Enforcement Activity



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- Staten Island University Hospital (SIUH) must pay \$74 million.
 - ▶ SIUH billed Medicare and Medicaid for substance abuse and alcohol detoxification services provided to inpatients in unlicensed beds, for 6 years.
 - ▶ SIUH billed Medicare using incorrect codes for cancer treatments.
 - ▶ SIUH inflated the number of residents it employed, in Medicare cost reports, to increase Medicare reimbursement.
- SIUH entered into a Corporate Integrity Agreement with the OIG.



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- St. Joseph's Hospital of Atlanta must pay \$26 million.
 - ▶ Hospital billed for short inpatient admissions, usually one day or less, when the service should have been billed as an outpatient "observation" or emergency room visit. This resulted in over-billing, since Medicare reimbursement is higher for inpatients.
- St. Joseph's Hospital entered into a Corporate Integrity Agreement with the OIG.



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- Amerigroup Corporation must pay \$225 million.
 - ▶ Avoided enrolling pregnant and other high-cost patients in the company's managed care program in Illinois, which was funded by Medicaid, and required open enrollment to all eligible Medicaid patients.
 - ▶ By excluding pregnant and other high cost patients illegally, Amerigroup was able to increase its profits.
- Amerigroup entered into a Corporate Integrity Agreement with the OIG.



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Recent Enforcement Activity



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- “That would never happen to us.” This tends to be the reaction when reading about enforcement actions against other health providers.
- But, did you know?

- ▶ Robert F Kennedy Medical Center (once part of DCHS, now closed)
 - ◆ In 2003, was fined \$2 million in penalties and entered into a Corporate Integrity Agreement with the OIG for over-billing due to pneumonia up-coding.
 - ◆ *The Corporate Integrity Agreement ended when the medical center closed.*
- ▶ Seton Medical Center, when part of Catholic Healthcare West (CHW)
 - ◆ In 2001, entered into a Corporate Integrity Agreement with the OIG for billing surgical procedures involving experimental cardiac devices, which were not approved to be billed.
 - ◆ CHW was fined \$10+ million in penalties.
 - ◆ *The Corporate Integrity Agreement with Seton Medical Center has since ended.*

The reality is that no organization is immune from compliance violations.

We can learn from our experiences and the experiences of others.

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Recent Enforcement Activity



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■ Learning from enforcement activity

- ▶ Take personal accountability and vigilance for
 - ◆ Knowing the compliance requirements of your work
 - ◆ Being complete, accurate, and timely in all your work
 - ◆ Asking questions or raising concerns when you have them
 - ◆ Checking and re-checking your work for accuracy
 - ◆ Always telling the truth, even when the truth is hard to hear
- ▶ Never
 - ◆ Falsify information in reports, audits, or investigations
 - ◆ Conceal, destroy, or alter records in an investigation



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Preventing Health Care Fraud and Abuse



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Health Care Fraud

- The U.S. government estimates that up to **\$200 billion** is lost each year due to health care fraud and abuse.
- Some organizations and individuals *purposefully* attempt to get paid through fraudulent means. However, due to systematic poor business practices in such areas as documentation, coding, or billing, some organizations submit incorrect bills *unintentionally*, as well. Below are examples.
 - ▶ Billing for services that were never provided
 - ▶ Billing for unlicensed or unapproved services
 - ▶ Ordering services that are not medically necessary
 - ▶ Falsifying documents in order to get paid
 - ▶ Double-billing the Government
 - ▶ Over-billing the Government
 - ◆ Due to incorrect codes, units, or patient type, as examples
 - ▶ Billing for services not adequately documented



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Preventing Healthcare Fraud and Abuse



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- Whether ***intentional*** or ***unintentional***
 - ▶ Over-billing the government can result in legal action against the organization, including large financial penalties.



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False Claims Laws

- Government attorneys use these laws to prosecute fraud
- Punishment can be
 - ▶ **Financial**
 - ◆ Such as paying the Government thousands or even millions of dollars in fines and penalties
 - ▶ **Administrative**
 - ◆ Such as being excluded from participating in Government programs like Medicare and Medicaid
 - ▶ **Criminal**
 - ◆ Such as serving time in prison
- Below are just a few examples of the many federal and state laws that Government attorneys use to prosecute health fraud
 - ▶ Federal False Claims Act, California False Claims Act
 - ▶ Program Fraud Civil Remedies Act
 - ▶ California Penal Code, Business and Professions Code



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False Claims Laws define “Fraud” as

- “Knowingly”
 - ▶ Presenting a false or fraudulent claim for payment to the Government
 - ▶ Making or using a false record or statement for Government payment
- Conspiring to allow a false claim to be paid by the Government

“Knowingly” is defined as

- Anyone who has actual knowledge of the information or
 - Anyone who acts in deliberate ignorance of the truth or
 - Anyone who acts in reckless disregard of the truth
-
- False Claims Laws are how unintentional over-billing *can lead to charges against an organization*
 - ▶ *The government can take legal action when the organization acts in “deliberate ignorance” or “reckless disregard” of the truth*

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False Claims Laws

What happens to those who commit violations?

- First, they must **repay** the Government any money wrongfully taken
- Additionally, they may pay **penalties**
 - Up to 3 times the amount of damages
 - Up to \$10,000 in penalties per fraudulent claim
 - Repaying the Government any legal costs they incurred
 - Serving time in prison



Private Individuals or “Relators” in Health Fraud

- Private persons can bring (civil) legal action on behalf of the Government
- These are called Qui Tam or “whistleblower” actions
- The person who brings the action is the “Relator” (or “whistleblower”)
- If the Government recovers funds, the Relator can get 10 to 30%



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Relator Protections

- False claims laws legally protect Relators from retaliation.

Retaliation includes termination, demotion, harassment, threats, and other acts affecting employment.

- If the employer retaliates, the employee can take legal action.
- Employers / organizations are precluded from having any rule or policy that prevents individuals from reporting to the Government.
- Associates who report concerns internally are also protected from retaliation.



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Compliant Billing

■ The Rules

- ▶ Services can only be billed when they are medically necessary, approved to be billed, provided by qualified individuals, documented, coded correctly, and have not already been billed or paid.
- ▶ Compliant billing is achieved by complete, accurate, timely, and legible documentation by qualified individuals, with proper signatures, dates, and times, in the proper places.
- ▶ **When these rules are violated, there is potential for government repayment and penalties.**

■ For individuals who document in the medical record

- ▶ **Clear, timely, and thorough documentation are critical.**
- ▶ Only what is properly documented can be coded and billed.





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Preventing Healthcare Fraud and Abuse



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As part of the Corporate Responsibility program, DCHS has implemented measures for the prevention and detection of healthcare fraud and abuse.

- Corporate Responsibility Officers to oversee compliance
- Standards of Conduct and attestation to the standards
- Corporate Responsibility policies that address subjects such as
 - Compliant billing
 - Compliant physician compensation
 - Investigations
 - Disclosures to the Government
- Compliance training upon hire and annually
- Annual sanction screening of associates, medical staff, and vendors
- Quarterly audits of coding and billing by an external auditor
- Processes for reporting concerns, including anonymously
- Tracking resolution of identified concerns



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Patient Privacy and Security of Patient Information



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Patient Privacy and Patient Information

- Patients trust us with their care
- Patients trust us with very sensitive information
- Protecting patient information is part of our job and the law





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What is protected health information (PHI)?

- **Anything that can be used to identify the patient**

Name, address, social security number, medical record number, license number, phone number, and other personal information

- **Anything about the patient's past, present, or future medical conditions and treatment**

Symptoms, diagnosis, services, tests, outcomes –
ALL OF IT





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Patient Privacy Laws

- Give patients, and others authorized, rights to access their medical information
- Impose penalties on unauthorized individuals who access, use, or disclose PHI
- Impose penalties on organizations for violating patient privacy rights
- Require health care providers to inform patients of their privacy rights



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3 simple rules

1. Only access PHI to do your job
2. Only disclose PHI to do your job
3. Only access and disclose the minimum necessary PHI to do your job



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Patient Privacy and Security of Patient Information



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■ HIPAA / Privacy Laws

- ▶ Protect patient rights to privacy.
- ▶ Tell us what PHI we can legally access, use, and disclose: the minimum necessary to do our work.

■ HIPAA / Security Laws

- ▶ Protect electronic PHI and systems with PHI.
- ▶ Requires organizations and individuals to take proactive measures to secure PHI they work with in their jobs.

Patient Privacy + Patient Information Security
= HIPAA Compliance

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Electronic PHI can be found in

- Email
- Faxes
- Personal computers
- Networks
- Laptops
- Personal digital assistants (PDAs)
- Biomedical devices
- Films
- Cell phones

Electronic PHI is vulnerable to

- Unauthorized viewing or access
- Accidental disclosure
- Hackers
- Theft





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It is **your accountability** to protect any PHI you work with.

■ Use physical measures

- Keep PHI away from public areas, to the extent possible
- Store PHI in locked rooms, locked cabinets, locked drawers, etc.
- Equipment with PHI should be adequately secured and protected from theft or destruction

■ Use technical precautions

- Ensure only authorized individuals access PHI and systems with PHI
- Choose hard passwords (that people will not guess) and change often
- Do not share your user IDs or passwords
- Confirm correct email address, prior to sending emails
- Confirm correct fax number, use a cover sheet with approved confidentiality statement, and make sure intended person is there to receive fax



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- New California Privacy and Security Regulations
 - ▶ Effective January 1, 2009
 - ▶ **All patient privacy and security breaches must be reported within 5 days** of detection to
 - ◆ The California Department of Public Health
 - ◆ The affected patient/s
 - ▶ Definition of “breach”
 - ◆ Unlawful or unauthorized access
 - ◆ Unlawful or unauthorized disclosure
 - ◆ Unlawful or unauthorized use
 - ▶ Establishes a new state enforcement agency called the Office of Health Information Integrity
 - ▶ Greatly increases penalties for patient privacy violations



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- New California Privacy and Security Regulations (Continued)

► Now “**snooping**” in other people’s medical information is an illegal and reportable offense

◆ Even when nobody is hurt by the breach



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PHI Safety and Integrity

DCHS has implemented measures for privacy and information security as part of the Corporate Responsibility program

- HIPAA Privacy and Security Officials at each LHM
- The “Confidentiality” standard in the Standards of Conduct
- HIPAA / privacy and security training upon hire
- Annual retraining on privacy and security of patient information
- HIPAA privacy policies, found on Local Health Ministry intranet sites
- HIPAA security policies, found on the DCHS intranet site, under IT
- Audits / reviews of IT systems with PHI, including access
- Processes for reporting concerns, including anonymously
- Investigation of breaches, including who inappropriately accessed PHI
- Resolution of identified concerns



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- Contacts for HIPAA, patient privacy, and information security questions, concerns, or to report breaches

(Contact the LHM where the patient received services)

- ▶ **O'Connor Hospital**

- ◆ Pam Woods, HIPAA Privacy Officer
- ◆ Kathy Harlan, HIPAA Security Officer

- ▶ **Saint Louise Regional Hospital**

- ◆ Maria Pineda-Biol, HIPAA Privacy Officer
- ◆ Audrey Mauduit, HIPAA Security Officer

- ▶ **Seton Medical Center / Seton Coastside**

- ◆ Dolly McDonald, HIPAA Privacy & Security Officer

- ▶ **St. Francis Medical Center**

- ◆ Henri Wynne, HIPAA Privacy & Security Officer

- ▶ **St. Vincent Medical Center**

- ◆ Robert Jacoby, HIPAA Privacy & Security Officer



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Corporate Responsibility Program and Resources



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Corporate Responsibility Program

- Established to provide support and resources for responsible decisions in the work place.
- Based on guidance from the Department of Health and Human Services (DHHS) Office of Inspector General (OIG), and has 7 elements.



1. **Written standards**; including our Standards of Conduct and Corporate Responsibility policies posted on the DCHS intranet site.
2. **Designating accountabilities**; including Corporate Responsibility Officers and committees.
3. **Education**; upon hire, annually, and in high risk areas.
4. **Processes for reporting concerns**; including the Values Line.
5. **Enforcement of standards**; that may include disciplinary action.
6. **Monitoring and auditing**; including areas recommended by the OIG.
7. **Responding to concerns and findings**; with appropriate actions.



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- Does it mean we expect to be perfect?
 - **No**
- Does it mean we must proactively examine our operations, through monitoring and auditing, to identify risks and concerns?
 - **Yes**
- Does it mean we rely on associates, medical staff, and patients to raise concerns?
 - **Yes**
- Does it mean we must act timely to address risks?
 - **Yes**



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Open Communications and Ways to Raise Concerns

- An important value of the Corporate Responsibility Program is providing a safe and open environment for raising concerns
- If you observe violations of law or our Standards of Conduct, you may report them in these ways
 - House Supervisor
 - Department Manager
 - Corporate Responsibility Officer
 - Local Administration
 - System Office Administration
 - Values Line, 24/7, at **1-800-371-2176** or **www.dchsValuesLine.org**



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Corporate Responsibility Officers (CROs) and Contacts

System Office

- **Robert Cook**, CRO, Daughters of Charity Health System

Local Health Ministries

- **Pamela Brotherton-Sedano**, CRO, O'Connor Hospital
- **Kathy Harlan, Corp. Comp. Coord.**, O'Connor Hospital
- **Marsha Chan**, CRO, St. Francis Medical Center
- **Denise Kent**, CRO, Seton Medical Center / Seton Coastside
- **Chelva Kumar**, CRO, Saint Louise Regional Hospital
- **Jean Rico**, CRO, St. Vincent Medical Center

Caritas Business Services

- **Tina Cordero**, CRO

Other compliance resources

- Corporate Responsibility Committee, CHAN Auditor, Legal Counsel, Board of Directors.



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The **Values Line** is a toll-free number and web site, available 24/7, from home or work, where concerns can be reported anonymously.

- Phone calls and web reports are received by an outside company (Global Compliance).
- Phone calls are not recorded or traced. Web reports are not traced.
- You can choose to identify yourself or remain anonymous.
- You will be asked to provide information regarding your concerns.
- Provide as much information as you can for a thorough investigation.
- You will receive a case number, personal identification number, and follow-up date. Keep it in a safe place.
- To get a response, you must check back, by using the above information.
- All reports are routed for evaluation and investigation.
- All concerns are taken seriously.
- There will be no retaliation for reporting concerns.

1-800-371-2176

www.dchsValuesLine.org



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Corporate Responsibility promotes

- Accountability
- Standards to guide our conduct in our ministry and our Mission
- Awareness of ethical conduct through education
- Examining our actions and practices
- Correcting our vulnerabilities
- Consequences for unethical behavior
- A safe and open environment to raise concerns





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For more information about Corporate Responsibility, the following resources are available to you.

- Your Corporate Responsibility Officer (CRO)
- Robert Cook, CRO, DCHS
- Sharmila Chandran, Director of Compliance, DCHS
- The Corporate Responsibility web site on the intranet:
 - Go to the DCHS home page on the intranet: **<http://dchsnet>**
 - Select “**System Office**” from the tabs at the top
 - Then, under “Team Web Sites” on the left side of the screen, select “**Corporate Responsibility**”



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"It is our decisions and actions that speak to who we are as individuals and as an organization. The Corporate Responsibility program is in place to support ethical decision making in the work place, as we carry out our Mission."

Individual accountability gets to the heart of our Corporate Responsibility program. Each of us must hold ourselves accountable for doing our work in a manner that upholds the Vincentian Values and our Standards of Conduct.

I ask that you take personal accountability for Corporate Responsibility as you go forward in your daily work. Thank you for your time."



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Robert Cook

VP, Risk Management
Corporate Responsibility Officer
Daughters of Charity Health System



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**This concludes the presentation
portion of the training.**

**The Questions and Attestation are
to be completed, as directed.**



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The End. Thank you.



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