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Adopted 02/2012  
Revised 07/2023
Dear El Paso Children’s Hospital Team Member:

Welcome and thank you for choosing to be a committed member of this team and upholding the vision and mission of El Paso Children’s Hospital. Anyone who works here will tell you what makes our hospital special; we care for children 24/7 and we do it better than anyone!

Our hospital is a place where patients and families know they will receive not only the highest level of care, but also love and hope from a team who truly lives out the El Paso Children’s Hospital HEART values each day. I witness actions and hear stories of our team pulling together to help patients and their families through their personal tragedy’s and triumphs. It is this culture that sets us on a path of unstoppable momentum and excellence.

El Paso Children’s Hospital’s vision is to enhance the lives of children from the greater El Paso area and surrounding region, by providing a place of hope and healing through unmatched excellence in pediatric patient care, research, and education. Our mission is to provide compassionate, coordinated, family-centered care for children with a dedicated commitment to excellent patient outcomes, inclusive leadership, and innovative pediatric research and education. Clearly we are expecting the best in quality and service from our team members, physicians, leadership, and board of directors.

The following code of conduct is meant as a set of guidelines to ensure that high quality service occurs. Our expectation is that our patients receive the best care possible every time… every day; that our employees treat our families and visitors with respect and compassion, every time…every day; that our leaders make decisions that are in the best interest of the children, every time…every day; and that our board expects the best from its leadership, its staff, and its physicians, every time…every day. It is imperative that as a team member of El Paso Children’s Hospital, you are keenly aware of what is happening around you at every moment. Our expectation is that you are an advocate for our patients and families constantly and are vigilant in your daily work to make sure our mission and our vision are consistently upheld.

I urge you to review our Code of Conduct thoroughly and understand it to the best of your abilities. If at any point in time, anything strikes you as unusual or inconsistent with this Code of Conduct, you are encouraged to speak with your department manager or supervisor as soon as possible. You are also encouraged to reach out to any member of the management team, or the Compliance/Privacy Officer directly. If you are uncomfortable with utilizing any of these resources, please do not hesitate to contact our compliance hotline, which is always available at: 1-855-299-9314.

Thank you for joining our team and committing your talents to providing the best service and highest quality of care to the children that seek services from El Paso Children’s Hospital. Welcome aboard!

Sincerely,

Cindy Ann Stout, DNP, RN, NEA, BC
President and CEO

Adopted 02/2012
Revised 07/2023
Purpose of Our Code of Conduct

• This Code of Conduct (the “Code”) applies to all employees, contractors, Medical Staff members, agents, affiliated students, volunteers, officers, the Board of Directors, and anyone who has a business relationship with El Paso Children’s Hospital (“EPCH”).
• This Code provides guidance and outlines the standards for individuals to conduct EPCH business in an ethical and legal manner.
• This Code is a critical component of our overall Compliance Program and it was developed to ensure we meet our ethical standards and comply with applicable laws and regulations.
• Comprehensive Compliance Policies and Procedures have been developed to provide additional guidance and are accessible on our Intranet site, and can be furnished upon request. These policies expand upon and supplement many of the principles articulated in this Code.
• It is your job to report an incident, through your chain of command, if you feel that the Code has been violated.
• We absolutely prohibit retaliation against an individual or entity for the good faith reporting of a violation.

Our Vision, Mission and HEART Values

VISION
To enhance the lives of children from the greater El Paso area and surrounding region by providing a place of hope and healing through unmatched excellence in pediatric patient care, research, and education.

MISSION
To provide compassionate, coordinated, family-centered care for children with a dedicated commitment to excellent patient outcomes, inclusive leadership, and innovative pediatric research and education.

CORE HEART VALUES
These core values reflect our passion for quality care and how we serve patients, families, employees and our community.
• HEALING ENVIRONMENT
  We create a unique and nurturing environment by fostering teamwork and shared decision-making through the practice of family-centered care, including age-appropriate comfort measures.
• EXCELLENCE
  We strive for excellence in quality, service, and leadership. We continuously learn and work to improve our skills, programs, and services.
• ACCOUNTABILITY
  We are accountable to fulfill our mission of serving children and their families. Every role makes a difference.
• RESPECT & DIGNITY
  We honor and value the individuality, diversity, and contributions of our patients, families, and each other.
• TRANSPARENCY
  We communicate by sharing and receiving information that is timely, instructive, and empowering.

Adopted 02/2012
Revised 07/2023
HEART BEHAVIORAL STANDARDS

El Paso Children’s Hospital strives to provide a place of hope and healing through unmatched excellence in pediatric patient care to our patients and families. The family at El Paso Children’s Hospital will make the stay and the child’s health care experience the best possible.

I WILL:

• Respect every child and family’s privacy and individuality.
• Be mindful of the patient’s diverse cultural beliefs and practices.
• Ask what language the patient and family prefer and how they would like for me to address them.
• Knock before entering the patient room and introduce myself, explain my role in the child’s healthcare, and explain what I will be doing.
• Ask the parent or Legally Authorized Representative (“LAR”) permission to examine the child.
• Strive to make the child comfortable and calm the child’s fears.
• Work with the child, parents (or LAR) and family members to determine the best healthcare plan for the child.
• Collaborate by giving and sharing information in a transparent manner.
• Listen to the patient and their family and respect their knowledge about the health of their child. I realize that they know their child best, and I will value their participation.
• Give respect and dignity.
• Make myself available to the child, the parents (or LAR), their family, and their guests.
• Strive to answer all call bells within 60 seconds and follow through on all requests.
• Provide an explanation before a procedure or intervention and avoid medical jargon; I will talk to them in a manner that is easy to understand.
• Listen to questions, concerns or suggestions.
• Offer solutions and alternative options to any request the child, parents, or LAR may have.
• Help the child, parents, LAR and family members find their way throughout the hospital.

GUIDING PRINCIPALS

• Be the pediatric hospital of choice for children and their families, physicians, and staff.
• Develop community and regional recognition for excellence in clinical care, pediatric research, and education of future pediatric specialists and staff.
• Achieve distinctive market position through demonstrated quality/outcomes management, innovative services, outstanding customer service, dedicated facilities and essential community relationships.
• Develop facilities that will meet changing future requirements.
• Invest community resources wisely to maximize the care for children while insuring the operational sustainability.

Adopted 02/2012
Revised 07/2023
COMMITMENT FROM LEADERSHIP
We address the areas that are important in following the Code of Conduct by making the following commitments:

• We are committed to providing high quality care, skilled, compassionate, and reliable service to our patients and to our community in a safe and healing environment.
• We are committed to protecting each patient’s right to privacy and the privacy of all of our team members in accordance with the applicable laws and regulations.
• We are committed to treating all patients and their family members with warmth, respect, and dignity while providing necessary, appropriate, high quality, and affordable care in a manner that protects the privacy of our patients and the confidentiality of their health information.
• We recognize that the greatest strength of our organization lies in the efforts and talents of our team members. We are committed to treating each other with respect, dignity and courtesy.
• We will follow all applicable laws and regulations, conduct our business ethically and honestly, and act in a manner that improves EPCH’s standing in the community.
• We will ensure that documentation, and the billing and coding functions are performed accurately. We will also ensure that there is documentation to support the services performed and the amounts charged. Communication among EPCH clinicians, coders, billers, and claims staff is necessary to ensure accurate and correct information, billing and reimbursement.
• We will avoid business relationships and actions that could interfere with, be perceived to interfere with, our business or clinical decisions.
• We will protect the property, equipment, and other resources of EPCH against loss, theft or misuse.
• We will consider the safety and security of patients, visitors, and team members in all of our activities.
LEADERSHIP RESPONSIBILITIES

While all EPCH colleagues are obligated to follow our Code, we expect our leaders (not limited to Managers, Directors and above) to set the example, to be in every respect, a model employee.

We expect everyone in the organization with supervisory responsibility to exercise that responsibility in a manner that is kind, sensitive, thoughtful, and respectful. We expect each supervisor to create an environment where all team members are encouraged to raise concerns and propose ideas.

We also expect that they will ensure those on their team have sufficient information to comply with laws, regulations, and policies, as well as the resources to resolve ethical dilemmas. They must help to create a culture within EPCH that promotes the highest standards of ethics and compliance. This culture must encourage everyone in the organization to share concerns when they arise. We must never sacrifice ethical and compliant behavior in the pursuit of business objectives.

Leaders at all levels of the organization should effectively incorporate ethics and compliance into all aspects of our organization. By doing so, such leadership assumes that those in our organization will lead by example and will confront problems directly and candidly. Leadership will be inclusive in making decisions as to who should participate in the decision-making process and will try to give the maximum responsibility to those who work with them. Leadership will emphasize effective team-building. In addition to these fundamental approaches to principled leadership, we expect those in our organization to understand and care about their colleagues at work.

ETHICAL DECISION MAKING

Making good decisions is essential to the success of EPCH. Every day we all make decisions for the organization. We may not realize it at the time, but these decisions impact our reputation and standing in the community and our relationships with business associates.

Always consider these questions when you make a decision for the organization:

1. Is it legal?
2. Is it consistent with company policy?
3. Is it consistent with our company’s values?
4. Would I be comfortable if it were made public?

If you answer yes to all of these questions, you are following the Code of Conduct and making good decisions for the organization.

If you see, hear or become aware of conduct that appears unethical, illegal, or that you believe violates EPCH policies or procedures, it is your responsibility to immediately report the behavior or situation.

Adopted 02/2012
Revised 07/2023
To obtain guidance on an ethics or compliance issue or to report a concern, individuals may choose from several options. We encourage the resolution of issues (including human resources-related issues, payroll, fair treatment and disciplinary issues), at a local level. It is good practice, when one is comfortable with it and think it appropriate under the circumstances, to raise concerns first with one’s supervisor. If this is uncomfortable or inappropriate, the individual may discuss the situation with Human Resources, the Compliance/Privacy Officer, or another member of management in the organization. Individuals are always free to contact the Compliance Hotline at 1-855-299-9314.

EPCH makes every effort to maintain, within the limits of the law, the confidentiality of the identity of any individual who reports concerns or possible misconduct. There is no retribution or discipline for anyone who reports a concern in good faith. Any colleague who deliberately makes a false accusation with the purpose of harming or retaliating against another colleague is subject to discipline.

PATIENTS AND PATIENT RIGHTS
We will not distinguish in the admission, transfer, or discharge of patients or in the care we provide, based on race, religion, age, gender, national origin, sexual orientation, disability, veteran status, genetic information, or any other classification prohibited by federal, state, local law or regulation. Our patients may have diverse backgrounds and cultures; therefore, we will make every effort to educate and train our caregivers to respect and provide for the particular needs of our patients. We will respect the patient’s right to and need for effective communication. We will respect the dignity, comfort, and privacy of each patient and will treat all patients with consideration, courtesy, and respect.

• We will provide each patient with information regarding his or her right to make decisions regarding medical care, his or her right to refuse or accept treatment, his or her right to informed decision-making, and his or her rights regarding to patient health information maintained by us.

• Patients have the right to request transfer to another facility. In such cases, we will provide the patient with an explanation of the benefits, risks, and alternatives regarding his or her request. We will transfer a patient from EPCH in accordance with all EPCH policies, procedures, applicable laws, and regulations.

• We will inform patients of their right to make advance directives, which are documents used to help a person express his or her wishes concerning medical care in case the person cannot speak for himself or herself in the future. We will honor patient advance directives according to all applicable EPCH policies and procedures, laws, and regulations. We understand that everyone needs to plan for healthcare in the future.

• We will provide appropriate protection involving confidentiality, privacy, and security (protective measures) for all patients. In addition, appropriate pastoral or spiritual care will be provided. We will also provide the opportunity for the timely resolution of complaints from patients and their families.

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Revised 07/2023
EMERGENCY TREATMENT (EMTALA)
We will follow the Emergency Medical Treatment and Active Labor Act ("EMTALA") in providing
emergency medical treatment to all patients, regardless of their ability to pay. Provided we
have the capacity and capability, anyone with an emergency medical condition will be treated
and admitted based on medical necessity. In an emergency situation or if the patient is in labor,
financial and demographic information will be obtained only after an appropriate medical
screening examination and necessary stabilizing treatment (including treatment for an unborn
child). We will not admit, discharge, or transfer patients in an emergency situation, or if the
patient is in labor, based simply on their ability or inability
to pay. We will transfer patients from EPCH only in accordance with EPCH policies and
procedures or as otherwise allowed by law or regulation.

CONFIDENTIALITY OF PATIENT INFORMATION
Use and Disclosure of Information

• We collect information about the patient’s medical condition, history, medication, and family
illnesses to provide quality care.
• We will take reasonable precautions to ensure the confidentiality of patient information.
• We will only release information to third parties if the individual has consented or if
permitted by law.
• We will follow the appropriate procedures for obtaining patient consent when using the
patient’s information for research purposes.
• We will not discuss or review confidential patient information in public areas.
• We will limit the disclosure and use of patient information to that which is necessary to
perform our job or duties.
• We never post patient information to include photographs or videos to a web site, social
media page or public forum; without a proper consent form signed and acknowledged by
the patient or patient guardian.

Protection of Information Stored and Transmitted via Computer Systems

• We will ensure proper security of the information stored and transmitted on our computer
systems.
• We will limit access to such information to those individuals who need it to perform their
jobs.
• We will implement systems to monitor inappropriate access to information stored on our
computer systems.
• We will ensure that employees, contractors, affiliated students, volunteers, officers, Medical
Staff members and other individuals are informed about our confidentiality and data
security policies and guidelines.
• We will report confidentiality violations to those who can properly assess and resolve the
issues. We will take appropriate disciplinary action when a violation has occurred.

Adopted 02/2012
Revised 07/2023
EMPLOYEE RESPONSIBILITIES
Quality of Care and Improvement Reporting

• We will continue to promote quality improvement activities throughout the organization to ensure that high quality care is delivered.

• We will work as a team to meet the physical, psychosocial, and cultural needs of our patients.

• We will protect the integrity of clinical decision-making without regard to financial matters.

• We will provide patients and family members with the information they need to make knowledgeable decisions.

• We will treat patients in a manner that preserves their dignity, autonomy, self-esteem, and civil rights and that promotes involvement in their own care.

• We will inform patients and family members about our charges and services.

• We expect all individuals to maintain integrity and quality in their job performance.

Standards of Care

• We will provide patient care that meets or exceeds current acceptable clinical, patient care, and safety standards.

• We will maintain complete records of patient information to ensure continuity of care and to meet the requirements set forth in EPCH policies and procedures, regulatory standards, and applicable laws and regulations.

• We will monitor the quality of care provided to ensure that clinical standards are being met, and policies and procedures are being followed.

• We expect everyone to report problems (deficiencies or errors) to those who can properly assess and resolve the issues.

• We will respond to patient questions, concerns, and needs in a timely manner.

• We will maintain appropriate licensure and credentialing standards in order to further the provision of clinical services by qualified individuals.

Adopted 02/2012
Revised 07/2023
RELATIONSHIPS WITH OUR HEALTHCARE PARTNERS

Affiliated Physicians

- The Medical Staff includes physicians who are employed or affiliated with Texas Tech University Health Sciences Center (“TTUHSC”), University Medical Center of El Paso (“UMC”) a, contracted physicians, as well as community physicians. We will encourage our Medical Staff to engage in and maintain respectful and supportive interactions with our workforce in a manner that follows the Code of Conduct. There are many aspects of this Code that pertain to ethical or legal obligations of physicians in hospitals. An expectation to abide by the ethical guide for physicians, i.e. Hippocratic Oath, is inherent in the medical profession. All physicians practicing at EPCH will prescribe items or services for the good of the patient in accordance with their professional ability and judgment and shall never do harm to anyone.

- We are committed to comply with applicable federal and state laws and regulations regarding fraud and abuse. These laws, while complex, relate primarily to relationships between EPCH and referral sources; including physicians. There are two federal laws that are of particular interest to hospitals doing business with physicians: the federal physician self-referral law (more commonly known as the Stark Law) and the federal Anti-Kickback Statute. Short descriptions of these two laws are provided below for your convenience.

  1. The Stark Law prohibits referrals for certain items and services covered by Medicare or Medicaid furnished by an organization with which the referring physician, or his or her immediate family member, has a financial relationship, unless a specific legal exception applies.

  2. The federal Anti-Kickback Statute prohibits individuals and organizations, like EPCH, from knowingly or willfully offering, paying, soliciting, or receiving, directly or indirectly, any form of remuneration in return for, or to induce, the referral of any patient or business that is covered by a federal healthcare program, such as Medicare or Medicaid. Remuneration includes kickbacks, bribes or rebates.

- We will not pay or offer to pay anyone - colleagues, physicians, or other persons - for referral of patients. We will accept patient referrals and admissions based solely on the patient’s clinical needs and our ability to render the needed services. Violation of this policy may have grave consequences for the organization and the individuals involved, including civil, criminal penalties, and possible exclusion from participation in federally funded healthcare programs.

- We will not accept payments for any patient referrals we make. We will not solicit or receive anything of value, directly or indirectly, in exchange for the referral of patients. Similarly, when making patient referrals to another healthcare provider, we will not take into account the volume or value of referrals that the provider has made (or may make) to us.
• We will require that all agreements with physicians and referral sources be reviewed and approved, through the appropriate process, prior to the execution of the agreement. We will also require proper documentation prior to payment for services by physicians or referral sources.

• EPCH employees must consult hospital policies and contact the Compliance/Privacy Officer prior to extending any gift, meal or entertainment to any potential referral source.

**Business Partner Agreements**

• We will expect our business partners to maintain strong confidentiality protections and limit the use of the information we provide them; as prescribed by law and regulation.

• We will ask our business partners to comply with our confidentiality agreement during and after the partnership.

• We will protect the confidentiality of the information provided to us by our business partners to the extent permitted by law.

**Business Associates**

• In the normal course of providing quality care for our patients, it is oftentimes necessary to share our patients’ protected health information with some of our business associates. If protected health information is to be shared, we will enter into a Business Associate Agreement with the appropriate individual or entity and the business associate will protect our patients’ protected health information. This will ensure our compliance with the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”) and its implementing regulations as well as all other applicable laws, rules, and regulations.

**Information Security Confidentiality Agreements**

• We will require that any individual working on our premises or accessing our information systems remotely, via a virtual private network (“VPN”) connection, and who are accessing EPCH sensitive and/or patient information sign a Confidentiality Agreement prior to any access being granted.
RELATIONSHIP WITH MEMBERS OF THE WORKFORCE & VENDORS

Hospital Leader Conflicts of Interest
• We will maintain an environment of transparency, in part by ensuring that financial conflicts of interest are handled appropriately.
• We maintain an annual disclosure process that is designed to identify and address potential, actual, and apparent conflicts of interest with El Paso Children’s Hospital leaders, Board Members, Medical Staff members, vendors, and others who may do business with EPCH. We will ensure that the appropriate individuals or entities are aware of and complete this annual disclosure process.

Gifts, Gratuities, Favors, Discounts
• El Paso Children’s Hospital team members shall not accept anything with a retail value exceeding $50.00 annually, including donation of goods or services, from any supplier, vendor or organization doing or seeking to do business with EPCH.
• We will not solicit, obtain, or retain any item or service of personal benefit from a vendor, patient, or any organization doing or seeking business with EPCH that could influence, or be perceived to influence, our performance or decision-making abilities.
• We will not accept cash gifts of any amount from a supplier, vendor, patient, or any organization doing or seeking business with EPCH.

Research Activities
• We follow the highest ethical standards in full compliance with federal and state laws and regulations in any research, investigations, and/or clinical trials conducted by our physicians and professional staff.
• Our hospitals’ first priority is always to protect the patients and human subjects and respect their rights during research, investigations, and clinical trials.
• We will ensure that all research activities are approved through the Institutional Review Board (“IRB”) process and that all investigators have formally completed the investigator training prior to commencement of any study at EPCH.
• We will audit the accounts of all research study patients to ensure proper billing practices.

Adopted 02/2012
Revised 07/2023
LEGAL AND REGULATORY AUTHORITY

• We are committed to an environment in which compliance with rules, regulations, and sound business practices is woven into the corporate culture. We accept the responsibility to aggressively self-govern and monitor adherence to the requirements of laws and regulations as well as the Code of Conduct and EPCH policies and procedures.

• We provide varied healthcare services in the state of Texas. Accordingly, the services are provided pursuant to applicable federal, state, and local government laws. The areas addressed by the applicable laws and regulations may include, but are not limited to, licenses, permits, accreditation, access to treatment, consent to treatment, medical record keeping, access to medical records, confidentiality, patient rights, clinical research, advance directives, medical staff credentialing, and Centers for Medicare and Medicaid Services (“CMS”) program requirements. There are many individuals within our organization with the proper expertise who can be consulted for advice concerning legal, regulatory, and human resources requirements.

• We will issue and maintain financial and cost reports, accounting records, research reports, expense accounts, time sheets and other documents that accurately and clearly reflect El Paso Children’s Hospital’s transactions and financial performance.

• We will conduct our activities in compliance with all applicable laws and regulations and EPCH policies and procedures.

• We will report any behavior or situation that appears to be unethical or illegal or that appears to violate the Code of Conduct or EPCH policies and procedures to our supervisor or manager, department director, Human Resources, the Compliance/Privacy Officer, or the Compliance Anonymous Hotline.

• We will expect all employees, contractors, Medical Staff members, agents, affiliated students, volunteers, officers, the Board of Directors, and anyone who has a business relationship with EPCH to be familiar and comply with federal and state laws, including laws specific to healthcare fraud.

• Willful non-compliance with EPCH policies, applicable laws or regulations will expose the responsible individual to disciplinary action up to and including immediate termination. In the case of suspected or actual criminal behavior, we have the right notify the proper authorities.
REIMBURSEMENT FOR SERVICES PERFORMED

(Charges, Coding, Documentation, and Billing)
• We will ensure that documentation, charging, coding and billing are performed accurately. Communication among clinicians, coders, and billers is necessary to ensure accurate and correct information, billing, and reimbursement.

• We are committed to dealing with our third party payers in a way that demonstrates our commitment to contractual obligations and reflects our shared concern for quality healthcare, bringing efficiency, and cost effectiveness to healthcare. We will take great care to assure all billings to government payers, commercial insurance payers, and patients are true, accurate, and conform to all pertinent federal, state laws and regulations.

• We will not tolerate any individual knowingly presenting, or causing to be presented, claims for payment or approval that are false, fictitious, or fraudulent. Any employee who does so will be subject to disciplinary action up to and including immediate termination.

• We will follow current coding practices and policies, the practices outlined in the CMS provider manuals, or other payor program requirements to ensure both accurate billing and the submission of claims only for services that are actually rendered and that are medically necessary.

• We will maintain an accurate and updated charge master following correct coding and billing requirements for CMS and other third-party payors.

• We will maintain appropriate documentation to support the services performed and the amounts billed. We will bill for services according to the medical necessity guidelines provided by the various payers. We will only bill for eligible services that are rendered and documented.

• We will promptly report errors in claims or billings to our managers or the appropriate individual. We will promptly investigate and correct problems in a timely manner if errors in claims or billings are found.

• If we identify an overpayment, the retention of which could constitute a false claim, we will promptly report and return the overpayment amount.

• Our coders will have proper credentials and education in order to perform the duties of coding for services performed in El Paso Children’s Hospital.

• We will not routinely waive insurance copayments, coinsurances or deductibles.

GOVERNMENT RELATIONS AND POLITICAL ACTIVITIES

Adopted 02/2012
Revised 07/2023
• EPCH does not make contributions to candidates for any elective office or to any political organization. Furthermore, individuals may not make such contributions, whether in cash or otherwise, on behalf of EPCH.
• We allow individuals to support the legislative process through personal contributions or by volunteering their personal time to the candidate or organization of their choice.
• With respect to employees holding public office, whether elective or appointive, the potential for conflict of interest, or the appearance of a conflict, must be seriously considered.
• If you have any questions regarding political activities, please contact the Legal Department or Management.

FALSE CLAIMS ACT

• The False Claims Act applies to fraud involving federal and state health care programs like Medicare and Medicaid. Any person who knowingly presents, or causes to be presented, a false or fraudulent claim may be held liable. EPCH has a responsibility to ensure that we bill accurately for the care we provide. All claims or bills must be supported by complete and accurate documentation.
• Whistleblowers” are (private citizens) individuals who file suit (“Qui Tam”) on behalf of the State or Federal government to recover damages incurred by the state incurred by the government as a result of fraud, waste or abuse.
• Whistleblowers may be entitled to a significant portion of the proceeds from a successfully prosecuted claim.
• Whistleblowers are protected from retaliation because of their participation in filing or testifying in a claim.
• The protected false claims activities include investigating, initiating, testifying, or otherwise assisting in a civil action. An employee is entitled to bring an action in the appropriate district court for damages.
• EPCH as an employer will not interfere with employee disclosures.

For more information, visit:
Federal
https://oig.hhs.gov/fraud/
Texas
https://oig.hhs.gov/fraud/docs/falseclaimsact/Texas.pdf
New Mexico
https://oig.hhs.gov/fraud/docs/falseclaimsact/NewMexico.pdf

Regulation- Texas False Whistleblower Protections § 36.115
New Mexico Whistleblower Protections § 27-14-12

ACCREDITATION AND SURVEYS

Adopted 02/2012
Revised 07/2023
We will deal with all accrediting bodies in a direct, open and honest manner. We will not take any action in relationships with accrediting bodies that would mislead the accredditor or its survey teams, either directly or indirectly.

We are committed to being in full compliance with the standards established by The Joint Commission (“TJC”). This Code addresses our marketing, admission, transfer and discharge policies, as well as billing practices. The Code also addresses the relationship of EPCH and its team members to other healthcare providers, educational institutions, and payers. Furthermore, this Code emphasizes our policy to preserve and protect the integrity of clinical decision making regardless of how we compensate or share the financial risk with leaders, managers, clinical staff, and licensed independent practitioners.

The mission of TJC is to continuously improve the safety and quality of care provided to the public through the provision of healthcare accreditation and related services that support performance improvement in healthcare organizations.

TJC evaluates the quality and safety of care for more than 15,000 U.S. healthcare organizations, to including El Paso Children’s Hospital. We intend to maintain this accreditation.

**EPCH ENVIRONMENT**

**Protection of Property and Assets**

- We will protect the property, equipment and other resources of El Paso Children’s Hospital against loss, theft, or misuse.
- We will use EPCH funds to purchase property, equipment, supplies, and other assets that will help us to achieve our mission of providing high quality, low-cost healthcare.
- We will dispose of property that is no longer used or needed in accordance with our asset retirement procedures. The practice of selling, trading, transferring or scrapping of property without the appropriate approval is considered a misuse of assets.
- We accept responsibility for the safeguarding of EPCH property, equipment, supplies, services, and other assets. We will maintain internal controls within our areas of responsibility to ensure that these items are protected from theft or misuse.
- We will not install, share, or copy software programs or perform any other acts that would be in violation of the vendor’s software license agreements.
- We proactively protect our assets against theft through processes and procedures that provide for deterrence, detection, prevention, and prosecution of theft.
- We have a comprehensive records management process. We will follow EPCH policies and procedures regarding the creation, maintenance, retention, and disposal of our records. We will not destroy medical records that relate to any matter that is currently involved in litigation or for which litigation is anticipated.

**Safe and Healthy Work Environment**

Adopted 02/2012  
Revised 07/2023
• We are committed to providing a healthy and smoke-free atmosphere for our team members, patients, visitors, and the public. We will prohibit and will not tolerate smoking on our campus.
• We will employ and conduct business with qualified, reliable, honest, trustworthy, and non-violent individuals. Prior to extending any offers of employment or business relationships, we will perform background screenings in accordance with EPCH policies and procedures and individual authorizations.
• We are committed to providing an environment that is free from alcohol and illegal drugs and will take reasonable measures to ensure that alcohol and drug use does not jeopardize the safety and health of our team members, patients, visitors, or the public.
• We will provide equal employment and advancement opportunities to all applicants and employees.
• We will not discriminate in any of our employment practices on the basis of race, color, religion, gender, age, national origin, disability, veteran status, genetic information or any other classification protected by federal, state, or local law.

Workplace Conduct

• We recognize that the greatest strength of our organization lies in the efforts and talents of our team members. We will treat each other with respect, dignity and courtesy.
• We will provide equal employment and advancement opportunities to all applicants and employees.
• We will not discriminate in any of our employment practices on the basis of race, color, religion, gender, age, national origin, disability, veteran status or any other classification as required by law.
• We will comply with all applicable laws, regulations, and policies and procedures that govern employment matters.
• We will not tolerate any type of unlawful workplace harassment.
• We will not tolerate violent acts or threats of violence. We model a ZERO tolerance for workplace violence.
• We will promptly report any unethical or illegal activities or violations of EPCH policies or procedures or the Code of Conduct to the appropriate individual or entity.
• We absolutely prohibit retaliation against any individual for the good faith reporting of a perceived or suspected unethical or illegal behavior or violation of EPCH policies or procedures or the Code of Conduct, or for participation in an investigation of an alleged violation.
• We will set high standards of performance and conduct and hold individuals accountable for their actions.

Marketing Practices

Adopted 02/2012
Revised 07/2023
• We may use marketing and advertising activities to educate the public, provide information to the community, increase awareness of our services, and recruit colleagues. We will strive to present only truthful, fully informative, and non-deceptive information in these materials and announcements.

• In preparation of bids and proposals related to the marketing of EPCH services to external customers, we will disclose all current, accurate, and complete pricing data available. This is based upon the known facts in instances where facts exist or upon sincere and honest judgment in the absence of facts. It is never acceptable to underestimate cost or to overstate benefits in order to obtain business contracts. Finally, in the performance of a contract, we will take care to prevent any non-approved deviation from the written contract specifications and to ensure that all products or services meet written contractual agreements.

• We will strive to fairly and accurately represent EPCH and its capabilities by avoiding false or misleading advertising. We reject high-pressure manipulation, misleading marketing or sales tactics. We will ensure that all marketing materials reflect the services and products available and the current level of licensure and accreditation and comply with applicable laws and regulations regarding advertising and non-discrimination. We expect that all verbal and written communications will be true, fair, and accurate.

• A momentary advantage gained through even slight misrepresentation or exaggeration can compromise and endanger the future success of EPCH.

Procurement of Goods and Services

• We will strictly adhere to the applicable EPCH policies and procedures in the procurement of supply items and services for the organization.

• We will conduct our procurement activities for EPCH with integrity and in a professional manner that complies with the spirit and intent of our mission, with the principles of sound business practice, and with all applicable laws and regulations.

• We recognize that obtaining bids and prices quotes may not always be practical. For example, a vendor (or physician) may be a sole source provider if services provided are so unique or specialized that such services are not readily available from another source. Outside of such extenuating circumstances, bids and quotes should follow the approved procurement process.

ELEMENTS OF THE COMPLIANCE PROGRAM

Adopted 02/2012
Revised 07/2023
• We have established compliance standards and procedures to be followed by all team members.
• The Compliance/Privacy Officer will oversee all compliance activities.
• We will ensure that background checks are performed on all employees and agents and ensure that our healthcare providers have not been sanctioned by, excluded by, or otherwise ineligible to participate in a federal healthcare program.
• We will educate and train our team members on compliance policies and procedures on an annual basis and as needed throughout the year.
• We will maintain various monitoring and audit programs in order to achieve compliance with standards or guidelines established by the federal government for effective compliance programs.
• Sometimes, an investigation indicates a deficiency in an EPCH process. When this occurs, the Compliance Office will strive to improve the EPCH process and prevent further similar deficiencies.

Personal Obligation to Report Potential Violations

We are committed to ethical and legal conduct that is compliant with all relevant laws and regulations and to correcting wrongdoing wherever it may occur in the organization. Each colleague has an individual responsibility for reporting any activity by any colleague, physician, subcontractor, or vendor that appears to violate applicable laws, rules, regulations, accreditation standards, and standards of medical practice, Federal healthcare conditions of participation, or this Code.

An individual should report to higher levels of management, and/or call the Compliance hotline. If a matter poses a serious compliance risk to the organization, involves a serious issue of medical necessity, or patient safety. If a matter poses concern regarding the safety or quality of care provided to a patient in the hospital is identified and was reported locally but thought to be unresolved, an additional avenue for reporting is available through notification to The Joint Commission. There will be no retaliatory disciplinary action taken against an employee who reports concerns to The Joint Commission.

EPCH COMPLIANCE PROGRAM

Purpose

We have implemented a formal Compliance Program designed to prevent, detect and mitigate violations of federal or state law or EPCH policies and procedures in the conduct of our operations by individuals or entities. The effectiveness of the Compliance Program depends on everyone’s willingness to bring issues to the attention of his or her supervisor or the Compliance/Privacy Officer. All actual or suspected compliance issues must be reported immediately.

Key Responsibilities for All Individuals
• Seek advice from your supervisor, manager, Human Resources, or the Compliance Office if you have any questions regarding your responsibilities related to your job or this Code.

• Display high ethical standards in all of your clinical and business decisions.

• Represent EPCH in a fair and honest manner.

• Do not misuse El Paso Children’s Hospital equipment or property and take all necessary precautions to safeguard it.

• Do not use your position at EPCH to support political appointees or candidates for office or to receive a personal benefit.

• Do not use EPCH funds for improper or illegal activities.

• Promote open lines of communication between clinicians, coders and billers to maintain correct billing and reimbursement for services provided.

• Do not conduct personal business while on EPCH premises.

• Maintain a safe and healthy work environment.

• Do not accept cash or gifts from vendors.

• Take care to ensure the confidentiality of patient and associate information.

• Follow the Code of Conduct and all EPCH policies and procedures.

• Follow federal, state, and local laws.

• Promptly report any unethical or illegal activities or any violations of EPCH policies or procedures or this Code to the appropriate individual or entity.

Compliance Hotline
1-855-299-9314

Adopted 02/2012
Revised 07/2023
We encourage good faith reporting and understand there are times you may want to remain anonymous. The Compliance Hotline is available **24-hours a day, 7-days a week**. The hotline contact information is available to the public on the facility’s public intranet site, as well as signage displayed throughout the hospital. For employees, an online reporting tool is accessible on the facility’s intranet site.

Please consider the questions listed below when deciding whether to report a potential violation.

1. Do I have a reasonable understanding of the facts available to me?

2. Do I believe the action is in violation of the standards as outlined in the Code of Conduct?

3. Do I believe the action is in violation of any known law, rule, regulation, policy or procedure?

If you suspect healthcare fraud is occurring and feel that the Compliance Hotline investigation is not satisfactory, or you do not feel comfortable with reporting the allegation through any internal method, you have the right to contact the U.S. Department of Health and Human Services, Office of the Inspector General (“HHS-OIG”) or the Texas Health and Human Services Commission, Office of Inspector General (“HHSC-OIG”). For your convenience, the applicable contact information is provided below.

**HHS-OIG Hotline Reporting**

Phone: 1-800-447-8477 (1-800-HHS-TIPS)
TTY: 1-800-377-4950
Fax: 1-800-223-8164
Online: [https://oig.hhs.gov/fraud/report-fraud/](https://oig.hhs.gov/fraud/report-fraud/)
Mail: U.S. Department of Health and Human Services
Office of Inspector General
ATTN: OIG HOTLINE OPERATIONS
P.O. Box 23489
Washington, DC 20026

Examples of healthcare fraud include:

- Billing for services not rendered or goods not provided.
• Falsifying certificates of medical necessity and billing for services not medically necessary.

• Billing separately for services that should be a single service.

• Falsifying treatment plans or medical records to maximize payments.

• Failing to report overpayments, credit balances or duplicate billing.

• Unlawfully giving healthcare providers, such as physicians, inducements in exchange for referrals for service.

• Physician billing for services provided by interns, residents, and fellows in a teaching hospital.

**Compliance Investigation and Resolution**

The Compliance Office will ensure the prompt and thorough investigation of all suspected violations and will coordinate appropriate follow-up action and resolution as indicated. All investigations will be conducted following established procedures for confidentiality.

**Statement of Non-Retaliation**

We feel very strongly about protecting your rights to report a potential violation. We will not tolerate retaliation against an individual who, in good faith, reports fraud, abuse, wrongdoing, noncompliance with EPCH policies or procedures, this Code, unethical, or illegal activities.

If we discover that any individual is being retaliated against, for bringing a suspected violation to our attention or for participating in an investigation, we will take appropriate action as per EPCH policy.

**Any individual who commits or allows any form of retaliation may be subject to disciplinary action, up to, and including immediate termination.**