



# Our System of Caring



Butte County Behavioral Health  
Compliance Guide



## Dear Butte County Behavioral Health Staff and Business Partners,

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The Butte County Department of Behavioral Health (BCDBH) has a comprehensive, values-based Ethics and Compliance Program that is a vital part of the way we conduct ourselves in both business and clinical practice. Because the program's foundation rests on our Mission and Values, it is easily incorporated into our daily activities, and supports our system of caring for our clients, our communities, and our partners.

We strive to deliver healthcare compassionately and to act with absolute integrity in the way we do our work and the way we live our lives. This Code of Ethics, which reflects our system of caring, provides guidance to ensure our work is done in an ethical and legal manner. It emphasizes the shared common values and culture, which guide our actions. It also contains resources to help resolve any questions about appropriate conduct in the work place. Please review it thoroughly. Your adherence to its spirit, as well as its specific provisions, is absolutely critical to our future.

If you have questions regarding this Code or encounter any situation, which you believe violates provisions of this Code, you should immediately consult your supervisor, another member of management at your facility, BCDBH Personnel Manager, BCDBH Compliance Officer, or the BCDBH Compliance Hotline (1-866-637-4809).

There will be no retribution for asking questions or raising concerns about the Code, or for reporting possible improper conduct. No Code of Ethics, however, can substitute for each person's own internal sense of fairness, honesty, and integrity. In your daily life and work, if you encounter a situation, or are considering a course of action that does not feel right, please discuss the situation with any of the resources mentioned above.

We have a rich heritage, which is reflected in our Mission and Values Statement and in this Code of Ethics. We are equally committed to assuring our actions consistently reflect our words. In this spirit, we want this organization to be a community of shared values, and we expect all of our employees' actions to reflect the high standards set forth in this document. We ask you, and all our business partners, to assist our organization in supporting the values and principles that are critical to the continued success of our system of caring.

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## CORE VALUES

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The following core values are fundamental to our actions and reflect how we choose to conduct ourselves. Although our external environment may vary greatly, these values remain constant. Our commitment to these values will guide our actions and be consistently reflected in our relationships with one another, our clients, our community partners and providers.

**RESPECT:** *We will honor the value of all individuals and their experiences.*

**GRACE:** *We hold the trust of others through kindness and respect.*

**DIGNITY:** *We believe in an individualized approach to care that honors the person.*

**HOPE:** *Is a life-affirming component to self-determination, recovery and resiliency.*

**SELF-DETERMINATION AND GROWTH:** *As individuals, we have the right to determine how we live. Change is always possible.*

**DIVERSITY:** *Embracing and respecting diversity is vital to an individual's and community's success.*

**COLLABORATION:** *Working together through integrity and the collective wisdom of our partners, we become stronger.*

**EFFICIENCY AND ACCOUNTABILITY:** *We are stewards of the public trust.*

**EXCELLENCE IN PREVENTION, TREATMENT AND CARE:** *We will provide continuity in prevention, treatment and care with a minimum of delay and the best possible outcomes for the individuals and families we serve.*

## MISSION

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The strategic planning effort was grounded in the Department's mission:

To partner with individuals, families and the community for recovery from serious mental health and substance abuse issues and to promote wellness, resiliency, and hope.

## VISION

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For the Department's vision, we sought to develop a statement that appealed to our core values, yet was simple in serving as a guide and providing focus. Our vision is:

A continuum of care that promotes the behavioral health of the entire community.

## OUR CODE OF ETHICS

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### Compliance with Laws & Regulations

BCDBH strives to fully comply with all the rules and regulations governing the health care industry and Butte County Behavioral Health. We are committed to compliance with all federal, state, and local laws, regulations, MOUs and personnel codes. Further, we are committed to compliance with all license and certificate of need laws and regulations.

### Purpose of Our Code Of Ethics

Our Code of Ethics provides guidance to all BCDBH employees and business partners and assists us in carrying out our daily activities within appropriate ethical and legal standards. These obligations apply to our relationships with clients, family members, affiliated providers, third-party payers, sub-contractors, independent contractors, vendors, consultants, and one another.

The Code is a critical component of our overall Ethics and Compliance Program. We have developed the Code to ensure that we meet our ethical standards and comply with applicable laws and regulations.

The Code is intended to be a statement that is comprehensive and easily understood. In some instances, the Code deals fully with the subject covered. In many cases, however, the subject discussed has so much complexity that additional guidance is necessary for those directly involved with the particular area to have sufficient direction.

Though we promote the concept of management autonomy at local facilities in order to meet local needs, the policies set forth in this Code are mandatory and must be followed.

### Leadership Responsibilities

While all BCDBH employees and business partners are obligated to follow our Code, we expect our leaders to set the example, to be in every respect, a model. They must ensure that 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 BCDBH, which promotes the highest standards of ethics and compliance. This culture must encourage everyone in the organization to raise concerns when they arise. We must never sacrifice ethical and compliant behavior in the pursuit of business objectives.

## Guidelines

To assure that the commitment to full compliance with all federal and state laws, regulations, rules and guidelines that apply to BCDBH operations and services is shared by its employees and business partners, the following Code of Ethics has been established. Each employee and those with whom we have business relationships will be required to certify his or her acceptance of, as a condition of employment or contractual agreement, with BCDBH:

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BCDBH and its employees and business partners will abide by the letter and spirit of all applicable laws and regulations and will act in such a manner that their activities will reflect favorably upon BCDBH and community. Every employee is expected to report any activity he or she reasonably believes is in violation of the law, ethical standards or BCDBH's policies. There will be no retaliation or retribution directed toward any reporting employee.

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BCDBH and its employees and business partners will adhere to the rules and regulations put forth from applicable licensing or certification entities. In order to support ethical behavior, BCDBH and its business partners will report any misconduct to the appropriate licensing or certification board as appropriate.

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BCDBH and its employees and business partners will adhere to the highest ethical standards of conduct in all professional and business activities and will act in a manner that enhances BCDBH's standing as a vital and ethical contributor in the behavioral health profession and community. All licensed staff will comply with the ethics standards put forth by their respective licensing Boards.

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BCDBH and its employees and business partners will deal fairly and honestly with those who are affected by our actions and will treat them, as we would expect to be treated if the situation were reversed.

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BCDBH will undertake only those activities that will withstand public scrutiny and will not pursue any course of action that involves a violation of the law or these principles.

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BCDBH will promote relationships based on mutual trust and respect and will provide an environment in which individuals may question a practice without fear of adverse consequences.

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All BCDBH employees and business partners will be sensitive to situations that could raise questions of potential or apparent conflicts between personal interests and the interests of BCDBH. As part of the BCDBH community, each of us should consider ourselves as persons in positions of trust, and each of us should conduct ourselves accordingly.

8

BCDBH and its business partners are entrusted with many kinds of confidential, proprietary and private information. It is imperative that those who have access to this information do not make any unauthorized or impermissible disclosures of the information, either during or after employment or end of contractual agreement.

9

All BCDBH accounts, financial reports, expense reimbursements, time sheets, and other documents, including those submitted to government agencies, must be timely, accurate, clear and complete. All entries into BCDBH books and records, including department accounts and cost reports, must accurately reflect each transaction.

10

BCDBH will take great care to ensure that all billings to government and to private insurance payers reflect truth and accuracy and conform to all pertinent federal and state laws and regulations. We prohibit any employee or business partner from knowingly presenting or causing to be presented, claims for payment or approval, which are false, fictitious, or fraudulent.

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BCDBH will operate oversight systems designed to verify that claims are submitted only for services actually provided and that services are billed as provided. These systems will emphasize the critical nature of complete and accurate documentation of services provided. As part of our documentation effort, we will maintain current, timely and accurate medical records.

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BCDBH employees and its business partners are expected to comply fully with the records retention and destruction schedule for the department in which they work and with all federal and state requirements for this retention and destruction.

## OUR CLIENTS

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### Client Care & Rights

Part of our mission is to provide high quality, cost-effective behavioral healthcare to all of our clients, to the extent resources are available. We treat all clients with warmth, respect, and dignity and provide care that is necessary, appropriate and culturally competent. We make no distinction in the availability of services; the admission, transfer or discharge of clients; or in the care we provide based on age, gender, disability, race, color, religion, or national origin.

Each client is offered a written statement of client rights and a notice of privacy practices, and the Guide to Medi-Cal Mental Health Services. These materials include the rights of a client to make decisions regarding medical care and a client's rights related to his or her health information maintained by the facility and conform to all applicable state and federal laws, including but not limited to the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

We seek to involve clients in all aspects of their care, including giving consent for treatment and making healthcare decisions. As applicable, each client or client representative is provided with a clear explanation of care including, but not limited to, diagnosis, treatment plan, right to refuse or accept care, explanation of the risks, benefits, and alternatives associated with available treatment options.

Clients have the right to request transfers to other facilities and/or providers. In the promotion and protection of each client's rights, each client and his or her representatives are accorded appropriate confidentiality, privacy, security and protective services, and opportunity for resolution of complaints.

Clients are treated in a manner that preserves their dignity, autonomy, self-esteem, civil rights, and involvement in their own care. BCDBH facilities maintain processes to support client rights in a collaborative manner, which involves the facility managers and supervisors as well as clinic staff. These structures are based on policies and procedures, which make up the framework addressing both client care and organizational ethics issues. These structures include informing each client or, when appropriate, the client's representative of the client's rights in advance of furnishing or discontinuing care.

Clients and, when appropriate, their families are informed about the outcomes of care, including unanticipated outcomes. Additionally, clients are involved, as clinically appropriate, in resolving dilemmas about care decisions. Additionally, facilities maintain processes for prompt resolution of client grievances, which include informing clients of whom to contact regarding grievances and informing clients regarding the grievance resolution.

BCDBH facilities maintain an ongoing, proactive client safety effort for the identification of risk to client safety and the prevention, reporting and reduction of healthcare errors. BCDBH clinicians receive training about client rights in order to clearly understand their role in supporting them.

### Client Information

We collect information about the client's behavioral health condition, history, medication, and family illnesses to provide quality care. We realize the sensitive nature of this information and are committed to maintaining its confidentiality. Consistent with HIPAA, we do not use, disclose or discuss client-specific information with others unless it is necessary to serve the client or required by law.

BCDBH employees must never use or disclose confidential information that violates the privacy rights of our clients. In accordance with our appropriate access and privacy policies and procedures, which reflect HIPAA requirements, no BCDBH employee, affiliated physician, or other healthcare partner has a right to any client information other than that necessary to perform his or her job. This includes BCDBH employees adherence to the Security of electronic health information.

Subject only to emergency exceptions, clients can expect their privacy will be protected and client specific information will be released only to persons authorized by law or by the client's written authorization.

## LEGAL & REGULATORY COMPLIANCE

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BCDBH provides varied behavioral health services in many locations across Butte County. These services are provided pursuant to appropriate federal, state, and local laws and regulations, and the conditions of participation for Federal healthcare programs. Such laws, regulations, and conditions of participation may include, but are not limited to, subjects such as certificates of need, licenses, permits, accreditation, access to treatment, consent to treatment, medical record-keeping, access to medical records and confidentiality, clients' rights, and Medicare and Medi-Cal program requirements. BCDBH is subject to numerous other laws in addition to these healthcare laws, regulations, and the conditions of participation.

We have developed policies and procedures to address many legal and regulatory requirements, including the prevention of healthcare fraud and false claims. Policy #145 BCDBH Compliance Program in particular outlines the department's commitment and procedures for this area. However, it is

impractical to develop policies and procedures that encompass the full body of all applicable laws and regulations. Obviously, those laws and regulations not covered in BCDBH policies and procedures must be followed. There is a range of expertise within the organization, including county counsel and numerous functional experts, who should be consulted for advice concerning human resources, legal, regulatory, and the conditions of participation requirements.

Anyone aware of violations or suspected violations of laws, regulations, the conditions of participation, or BCDBH policies and procedures must report them immediately to a supervisor or member of management, Personnel Manager, the BCDBH Compliance Officer, or Compliance Line (1-866-637-4809).

### Coding & Billing For Services

We have implemented policies, procedures and systems to facilitate accurate billing to government payers, commercial insurance payers, and clients. These policies, procedures, and systems conform to pertinent federal and state laws and regulations. We prohibit any employee or agent of BCDBH from knowingly presenting or causing to be presented claims for payment or approval, which are false, fictitious, or fraudulent. BCDBH has adopted a Documentation Manual in Outpatient and Substance Use Disorder services to provide further guidance and direction to assist employees in making sound clinical and ethical decisions regarding documentation of services rendered.

In support of accurate billing, medical records must provide reliable documentation of the services we render. It is important that all individuals who contribute to medical records provide accurate information and do not destroy any information considered part of the official medical record. Accurate and timely documentation also depends on the diligence and attention of employees who treat clients in our facilities. We expect our staff to provide us with complete and accurate information in a timely manner. All services are documented into our Electronic Health Record.

Any subcontractors engaged to perform services are expected to have the necessary skills, quality control processes, systems, and appropriate procedures to ensure all billings for government and commercial insurance programs are accurate and complete. BCDBH expects such entities to have their own ethics and compliance programs and code of ethics or may choose to adopt BCDBH's code as their own.

For billing questions employees may contact their supervisor, program manager, the Billing department, Quality Management, the Compliance Officer or Compliance Line (1-866-637-4809)

False Claims Act (FCA) – Federal & State → Broken into 2 main categories: Civil & Criminal

#### Civil

This portion of the act prohibits any individual/group/organization from knowingly submitting, or causing to be submitted, a false or fraudulent claim for payment to the US government. The civil penalty for each individual claim (each service billed) is three times the amount of that service/claim,

plus \$10,500-21,000 per claim. (31 U.S.C. Section 3729 (a)) The government does not have to prove intent to defraud for financial gain, only that the claims submitted were not valid. A claim can be considered not valid for a variety of reasons including lack of documentation (missing progress note), documentation does not support what was billed (fails to speak to service billed), lack of documented medical necessity. Additional areas of healthcare fraud include billing services individually that were actually a part of a bundled program ("unbundling" to increase financial revenue), failure to report overpayment, duplicate billings, or that billed services were outside the scope of practice of the person delivering them. A FCA lawsuit may be brought by the U.S. Government, or by a private citizen. A lawsuit brought by a private citizen is referred to as "Qui Tam" or "Whistleblower". In the case of a Qui Tam or Whistleblower lawsuit, the person who brought the lawsuit is eligible to receive a percentage of money recovered, typically 10 to 25 %.

### Criminal

This portion of the act differs from the civil in that it involves willful misrepresentation, in either documentation or verbal statement, for financial gain. Willful misrepresentation can take many forms including deliberately falsifying documentation for payment, deliberately covering up or hiding information about a false claim, lying to an investigator, or obstructing an ongoing investigation related to false claims action. If found guilty, there are both financial penalties and possible imprisonment for up to five years.

### Federal Whistleblower Protections → 31 USC Section 3730 (h)

Protects employees against discharge, demotion, suspension, threats, harassment, or discrimination by the employer because of lawful acts done by the employee in cooperating with the False Claims Act, including investigation for, initiation of, testimony for, or assistance in an action filed (or one in the process of being filed) under this section.

### California FCA

The California FCA has many similarities to the Federal Civil FCA. There is no requirement to prove intent to defraud for financial gain, only that the claim submitted is not valid. The determination that a claim is not valid is much the same as with the Federal civil FCA: missing documentation; documentation does not speak to service billed; lack of medical necessity; duplicate billings, outside scope of practice; etc. The State FCA carries similar financial penalties includes tripling the amount of each claim, with up to \$10,000 additional penalty for each claim. Like the Federal FCA, there can be a Qui Tam or Whistleblower lawsuit brought by an individual, and if money is recovered, the individual who initiated the lawsuit will be entitled to a percentage, typically between 15 to 33%.

### State Whistleblower Protections

California Statute (Government Code Section 12653) provides protection for employees by preventing employers from making, adopting, or enforcing any rules, regulations or policies that would prevent an employee from disclosing information to a government or law enforcement agency related to a false

claims action. The statute also states that no employer shall discharge, demote, suspend, threaten, harass, deny promotion to, or in any other manner discriminate against, an employee...because of lawful acts done by the employee, or others, in disclosing information to a government or law enforcement agency related to a false claims action. This includes participating in an investigation for, initiation of, testimony for, or assistance in, an action filed (or in the process of being filed) under the California False Claims Act.

### BCDBH Policy & Procedure Codes

The following BCDBH Policies and Procedures code numbers define our activities dedicated to the prevention of waste, fraud, and abuse.

062 Disallowing and Voiding Claims

072 Recognition of Disallowable Short Doyle / Medi-Cal Claims

145A BCDBH Compliance Program

147A Compliance Hotline

148A Auditing and Monitoring

150 Sanction Screening of Behavioral Health Employees

151 Medical Necessity

152A Anti-Kickback, Self-Referral Concerns and Conflict of Interest

153 Compliance as an Element of Performance

155 Beneficiary Verification of Services

159 Claims Submission Process

In addition to these policies, BCDBH has Documentation Manuals for both Outpatient and Substance abuse services. The BCDBH outpatient documentation guide is available on the Butte County Quality Management and Compliance Division website at: <http://www.buttecounty.net/behavioralhealth/QualityManagementDivision.aspx>. The Substance Use Department Manual is currently available in paper format and is provided to each SUD employee.

## Antitrust

Antitrust laws are designed to create a level playing field in the marketplace and to promote fair competition. These laws could be violated by discussing BCDBH business with a competitor, such as disclosing the terms of supplier relationships, allocating markets among competitors, or agreeing with a competitor to refuse to deal with a supplier. Our competitors are other health systems and facilities in markets where we operate.

We must manage our subcontractor and supplier relationships in a fair and reasonable manner, free from conflicts of interest and consistent with all applicable laws and good business practices. We promote competitive procurement to the maximum extent practicable. Our selection of subcontractors, suppliers, and vendors will be made on the basis of objective criteria including quality, technical excellence, price, delivery, adherence to schedules, service, and maintenance of adequate sources of supply.

Our purchasing decisions will be made on the supplier's ability to meet our needs, and not on personal relationships and friendships. We employ the highest ethical standards in business practices in source selection, negotiation, determination of contract awards, and the administration of all purchasing activities.

## Stark Regulations

To comply with federal Stark regulations, BCDBH prohibits physician referrals considered a designated health service (i.e. laboratory) to an entity in which they hold financial interest. Financial interest also includes physician's family members. This regulation applies to physicians only. Any questions regarding the parameters of the Stark law may be directed to the Compliance Officer or Compliance Line (1-866-637-4809).

## Health Insurance Portability and Accountability Act (HIPAA)/HITECH Health Information Technology for Economic and Clinical Health Act

"HIPAA" is an acronym for the Health Insurance Portability & Accountability Act of 1996 (August 21), Public Law 104-191, which amended the Internal Revenue Service Code of 1986. HITECH: Health Information Technology for Economic and Clinical Health Act, enacted as part of the American Recovery and Reinvestment Act of 2009, was to promote the meaningful use of health information technology. HIPAA is Also known as the Kennedy-Kassebaum Act, the Act includes a section, Title II, entitled Administrative Simplification, requiring:

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Improved efficiency in healthcare delivery by standardizing electronic data interchange, and protection of confidentiality and security of health data through setting and enforcing standards.

## 2

More specifically, HIPAA/HITECH called upon the Department of Health and Human Services (HHS) to publish new rules that will ensure:

1. Standardization of electronic patient health, administrative and financial data
2. Unique health identifiers for individuals, employers, health plans and health care providers
3. Security standards protecting the confidentiality and integrity of "individually identifiable health information," past, present or future.

HIPAA/HITECH is designed to standardize the way all healthcare organizations electronically exchange client data and to protect clients from unauthorized disclosure of their medical records. HIPAA/HITECH regulations require healthcare organizations to formalize a plan that complies with auditability, security, privacy and transaction exchange standards.

## Confidentiality

California also has to abide by the Lanterman-Petris Act, Confidentiality of Medical Information Act, and Code of Federal Regulations 42 part 2. BCDBH has both privacy and security policies to ensure adherence to the strict rules and regulations regarding privacy and security of protected health information. These policies and procedures include:

100 How to Manage a Breach of Security (computer related data)

113A Computer Security Procedures for Terminated Employees

127A Electronic Security Analysis

128B Client Access to Protected Health Information

129C Amendment of Protected Health Information

133B Privacy and Security Incident Response

136A HIPAA Privacy and Security Policies and Procedures

138A Client Communication by Alternative Means

139B Minimum Necessary

140B Use and Disclosure of Protected Health Information for which an authorization is Required

141 Use and Disclosure - Business Associates Agreements

142A	Accounting of Disclosures
143A	Client Requests to Restrict Use or Disclosure of Protected Health Information
175A	Verification of Identity and Authority
184A	Transmitting Protected Health Information Via E-Mail
185A	Transmitting Protected Health Information Via Fax
198	Notice of Privacy Practices
203	Security of Client Charts and Protected Health Information
206	HIPAA Privacy Administration
286	Security Roles
287	Security and Privacy Training
288	Workforce Security
290	Mobile Device and Media Security
291	Security Roles Assignment
293	Physical Security

## BUSINESS INFORMATION & INFORMATION SYSTEMS

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### Cost Reports

We are required by federal and state laws and regulations to submit certain reports of our operating costs and statistics. We comply with federal and state laws, regulations, and guidelines relating to all cost reports. These laws, regulations, and guidelines define what costs are allowable and outline the appropriate methodologies to claim reimbursement for the cost of services provided to program beneficiaries.

Several BCDBH policies address cost report compliance and articulate our commitment to:

- Adhere to State Cost Report and Billing manuals
- Maintain awareness and understanding of relevant federal, state and County laws, regulations and guidelines

- Maintain a standardized workpaper package to provide consistency in the preparation, organization, presentation, and review of cost reports
- Apply a uniform cost report review process
- Identify and exclude non-allowable costs
- Adhere to documentation standards
- Several BCDBH policies address cost report compliance and articulate our commitment

All issues related to the preparation, submission and settlement of cost reports must be performed by or coordinated with our Fiscal Department.

### Accuracy, Retention, & Disposal of Documents & Records

Each BCDBH employee is responsible for the integrity and accuracy of our organization's documents and records, not only to comply with regulatory and legal requirements but also to ensure records are available to support our business practices and actions. No one may alter or falsify information on any record or document. Records must never be destroyed in an effort to deny governmental authorities information, which may be relevant to a government investigation.

Medical and business documents and records are retained in accordance with the law and our record retention policy, which includes comprehensive retention schedules. Medical and business documents include paper documents such as letters and memos, computer-based information such as e-mail or computer files on disk or tape, and any other medium that contains information about BCDBH or its business activities. It is important to retain and destroy records only according to our policy. BCDBH employees must not tamper with records. Additionally, no one may remove or destroy records prior to the specified date without first obtaining permission as outlined in the BCDBH records management policy.

### Information Security & Confidentiality

Although BCDBH employees may use confidential information to perform their jobs, it must not be shared with others unless the individuals and/or entities have a legitimate need to know the information in order to perform their specific job duties or carry out a contractual business relationship. In addition, these individuals and/or entities must have agreed to maintain the confidentiality of the information. Confidential information includes: personnel data maintained by BCDBH; client lists and clinical information; client financial information; passwords; research data; and proprietary computer software.

In order to maintain the confidentiality and integrity of client and confidential information, such information should be sent through the Internet only in accordance with information security policies and standards.

We exercise due care and due diligence in maintaining the confidentiality, availability and integrity of information assets BCDBH owns or of which it is the custodian. Because so much of our clinical and business information is generated and contained within our computer systems, it is essential that each BCDBH employee protect our computer systems and the information contained in them by not sharing passwords and by reviewing and adhering to our information security policies and guidance.

If an individual's employment or contractual relationship with BCDBH ends for any reason, the individual is still bound to maintain the confidentiality of information viewed, received or used during the employment or contractual business relationship with BCDBH. This provision does not restrict the right of an employee to disclose, if he or she wishes, information about his or her own compensation, benefits, or terms and conditions of employment.

### Financial Reporting & Records

We have established and maintain a high standard of accuracy and completeness in documenting, maintaining, and reporting financial information. This information serves as a basis for managing our business and is important in meeting our obligations to clients, employees, community, suppliers, and others. It is also necessary for compliance with tax and financial reporting requirements.

All financial information must reflect actual transactions and conform to generally accepted accounting principles. All funds or assets must be properly recorded in the books and records of BCDBH. BCDBH maintains a system of internal controls to provide reasonable assurances that all transactions are executed in accordance with management's authorization and are recorded in a proper manner so as to maintain accountability of BCDBH assets.

We diligently seek to comply with all applicable auditing, accounting and financial disclosure laws. Finance staff receives training and guidance regarding auditing, accounting and financial disclosure relevant to their job responsibilities. Anyone having concerns regarding questionable accounting or auditing matters should report such matters to the Assistant Director of Administration and Finance or by calling the BCDBH Compliance Line (1-866-637-4809).

## WORKPLACE CONDUCT & EMPLOYMENT PRACTICES

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### Fair Treatment of Employees

Our employees provide us with a wide complement of talents, which contribute greatly to our success. We are committed to providing an equal opportunity work environment where everyone is treated with fairness, dignity, and respect. We comply with all laws, regulations, MOU's, and policies related to non-discrimination in all of our personnel actions. Such actions include hiring, staff reductions, transfers, terminations, evaluations, recruiting, compensation, corrective action, discipline, and promotions.

No one shall discriminate against any individual with regard to race, color, religion, sex, national origin, age, disability, or sexual orientation. We make reasonable accommodations to the known physical and mental limitations of otherwise qualified individuals with disabilities.

### Conflict of Interest

A conflict of interest may occur if a BCDBH employee's outside activities, personal financial interests, or other personal interests influence or appear to influence his or her ability to make objective decisions in the course of the employee's job responsibilities. A conflict of interest may also exist if the demands of any outside activities hinder or distract an employee from the performance of his or her job or cause the individual to use BCDBH resources for other than BCDBH purposes. In some instances, social media behavior can be detrimental to the reputation of BCDBH and can pose a conflict of interest that will be addressed by human resources or management. Conflicts of interest on social media may result in employee discipline.

BCDBH employees are obligated to ensure they remain free of conflicts of interest in the performance of their responsibilities at BCDBH. If employees have any question about whether an outside activity or personal interest might constitute a conflict of interest, they must obtain the approval of their supervisor before pursuing the activity or obtaining or retaining the interest. Any time a supervisor is not certain that the activity could pose a conflict of interest, consultation with Senior Leadership shall be sought. Senior leadership shall seek assistance with human resources and/or Compliance Officer as needed when decisions regarding outside employment or activities can potentially be viewed as a conflict of interest. Policy and Procedure #152A can be a good resource for BCDBH employees or supervisors when concerns arise. Outside employment by BCDBH employees must be approved by the BCDBH Personnel department prior to beginning a new position.

### Harassment & Workplace Violence

Each BCDBH employee has the right to work in an environment free of harassment (including bullying) and disruptive behavior. We do not tolerate harassment by anyone based on the diverse characteristics or cultural backgrounds of those who work with us. Degrading or humiliating jokes, slurs, intimidation, threats, gossip, including "clique" like behaviors, or other harassing conduct is not acceptable in our workplace.

Sexual harassment is prohibited. This prohibition includes unwelcome sexual advances or requests for sexual favors in conjunction with employment decisions. Moreover, verbal or physical conduct of a sexual nature that interferes with an individual's work performance or creates an intimidating, hostile, or offensive work environment has no place at BCDBH.

Harassment also includes incidents of workplace violence. Employees who observe or experience any form of harassment or violence should report the incident to their supervisor, the Personnel department, a member of management, Compliance Officer or the Compliance Line (1-866-637-4809).

## Health & Safety

All BCDBH facilities will comply with all government regulations and rules, BCDBH policies, and required facility practices that promote the protection of workplace health and safety. Our policies have been developed to protect our employees from potential workplace hazards. Employees must become familiar with and understand how these policies apply to their specific job responsibilities and seek advice from their supervisor or the Safety Officer whenever they have a question or concern. It is important that each employee immediately advise his or her supervisor or the Safety Officer of any serious workplace injury or any situation presenting a danger of injury so timely corrective action may be taken to resolve the issue.

## License & Certification Renewals

The OIG expects, at a minimum, that healthcare organizations will screen their employees and business partners against the List of Excluded Individuals and Entities (LEIE) to ensure that none is under exclusion by the federal government. It is also the responsibility of the organization to verify the credentials of anyone employed or engaged by the organization to deliver healthcare services. Working with employees, vendors, or contractors that have been sanctioned may result in liability for an organization, and any claims or cost reports emanating from those sources might be viewed as false.

BCDBH is committed to maintaining high quality care and service as well as integrity in its financial and business operations. Therefore, BCDBH will conduct appropriate screening of key providers, employees, independent contractors, and business partners to ensure that they have not been sanctioned by a federal or state law enforcement, regulatory, or licensing agency.

## Use of BCDBH Resources

It is the responsibility of each BCDBH employees to preserve our organization's assets including time, materials, supplies, equipment, and information. Assets are to be maintained for business related purposes only. As a general rule, the personal use of any BCDBH assets without the prior approval of your supervisor is prohibited. Any use of BCDBH resources for personal financial gain unrelated to BCDBH business is prohibited.

## ENVIRONMENTAL COMPLIANCE

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It is our policy to comply with all environmental laws and regulations as they relate to our operations. We will comply with all environmental laws and operate each of our facilities with the necessary permits, approvals, and controls.

We will diligently employ the proper procedures with respect to handling and disposal of hazardous and bio-hazardous waste, including but not limited to medical waste. In helping BCDBH comply with these laws and regulations, we must understand how job duties may impact the environment, adhere to all requirements for the proper handling of hazardous materials, and immediately alert your supervisor to any situation regarding the discharge of a hazardous substance, improper disposal of medical waste, or any situation which may be potentially damaging to the environment.

## BUSINESS COURTESIES

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### Receiving Business Courtesies

There may be times when an employee wishes to extend to a current or potential business associate (other than someone who may be in a position to make a client referral) an invitation to attend a social event (*e.g.*, reception, meal, sporting event, or theatrical event), to further or develop a business relationship. The purpose of the entertainment must never be to induce any favorable business action. During these events, topics of a business nature must be discussed and the host must be present. These events must not include expenses paid for any travel costs (other than in a vehicle owned privately or by the host entity) or overnight lodging. The cost associated with such an event must be reasonable and appropriate. BCDBH will under no circumstances sanction participation in any business entertainment that might be considered lavish.

Also, BCDBH facilities may routinely sponsor events with a legitimate business purpose (*e.g.*, physician education, board meetings or retreats). Provided that such events are for business purposes, reasonable and appropriate meals and entertainment may be offered. In addition, transportation and lodging can be paid for. However, all elements of such events, including these courtesy elements, must be consistent with the County policy on such events.

It is critical to avoid the appearance of impropriety when giving gifts to individuals who do business or are seeking to do business with BCDBH. We will never use gifts or other incentives to improperly influence relationships or business outcomes.

### Extending Business Courtesies

Any entertainment or gift involving physicians or other persons who are in a position to refer clients to our healthcare facilities must be undertaken in accordance with BCDBH policies, which have been developed consistent with federal laws, regulations, and rules regarding these practices. BCDBH employees must consult BCDBH policies prior to extending any business courtesy to a potential referral source.

## GOVERNMENT RELATIONS & POLITICAL ACTIVITIES

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BCDBH's political participation is limited by law. All County officers and employees are covered by the prohibitions of state law contained in Government Code sections 3201 through 3209 concerning political activities, and the Butte County Charter and Personnel Rules. In addition, a limited number of County officers and employees who are paid with federal grant money or loans, or whose principal employment is in connection with an activity or program which is financed in whole, or in part, by grants or loans made by the US or a federal agency, are also subject to the political restrictions of the Federal Hatch Act.

If you have questions regarding acceptable political activities, please contact the Compliance Officer or Compliance Line (1-866-637-4809).

## BCDBH ETHICS & COMPLIANCE PROGRAM

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### Program Structure

It is the policy of Butte County Department of Behavioral Health (BCDBH) to comply with federal and state laws and regulations, and to promote and enforce adherence to this policy. One of the means BCDBH will use to promote and gain adherence to this policy is the development and maintenance of a Compliance Program.

This policy establishes a Compliance Program, standards, and policies and procedures, which promote adherence to state and federal laws and regulations.

The Compliance Program is designed, and will be implemented and enforced in order to promote BCDBH's understanding of, and adherence to, state and federal statutes and regulations that are applicable to BCDBH business, as well as to detect, respond to, and prevent violations of those requirements. The Program's design incorporates the seven elements that represent industry standard for scope of a compliance program:

1. Standards and procedures
2. High level of oversight and delegation of authority
3. Employee training
4. Communication
5. Auditing & monitoring
6. Enforcement & discipline
7. Corrective actions & prevention

### Setting Standards

The Compliance Program addresses the following goals and objectives:

1

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Maintenance of a working environment that promotes ethical values, exemplary behavior and compliance with the letter and spirit of all applicable laws.

2

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Encourages employees, affiliated professionals and contractors to demonstrate the highest ethical standards in performing their daily tasks.

3

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Establishes a Code of Ethics.

4

Has a disclosure system (Hotline) that requires BCDBH to respond to reports by employees or others of a suspected violation of law or the principles of the Program.

5

Identification of those situations in which the laws, rules and standards of state and/or federal programs or other applicable laws may have not been followed, and facilitation of the correction of any such practices.

6

Implementation of procedures to assure future compliance with all laws and regulations of the Medicare and Medicaid programs and all other applicable laws.

7

Training and communication that assures employees, affiliated professionals and contractors understand and comply with all state and federal laws and regulations, and will endeavor to reduce the likelihood that violations will occur through appropriate screening of potential employees and agents of BCDBH.

8

Assurance that documents are retained and kept secure, as required by state and federal regulation, for the appropriate length of time.

9

Establishes disciplinary policies that are prompt, effective and consistent, and will discipline employees based on the severity of the violation, and not on the basis of their position or tenure with BCDBH.

10

Assurance that government inspections proceed in a smooth and professional manner, and that all requests and concerns are addressed promptly and appropriately.

### Training & Communication

Comprehensive training and education has been developed to ensure that employees throughout the organization are aware of the standards that apply to them. Code of Ethics training is conducted at the time an individual joins the organization and annually for all employees. Specific training in areas of billing, documentation, cost reports, etc. required for specific job classifications includes elements of compliance. BCDBH policies outline the training requirements.

All ethics and compliance training is required to be recorded in the BCDBH Electronic learning system, Relias learning. Through this system, we will track employee compliance with their training requirements and report such information as necessary.

### Resources for Guidance & Reporting Concerns

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 (*e.g.*, payroll, fair treatment and disciplinary issues), at a local level. Employees should use established problem solving procedure at their facility to resolve issues and concerns. It is an expected 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 the BCDBH Personnel Manager, BCDBH Compliance Officer, a BCDBH Compliance Committee member or another member of management. Individuals are always free to contact the Compliance Line at 1-866-637-4809.

BCDBH 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 employee who deliberately makes a false accusation with the purpose of harming or retaliating against another employee is subject to discipline.

### Personal Obligation to Report

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 employee has an individual responsibility for reporting any activity by any employee, physician, subcontractor, or vendor that appears to violate applicable laws, rules, regulations, accreditation standards, standards of medical practice, Federal healthcare conditions of participation, or this Code.

If a matter that poses serious compliance risk to BCDBH or that involves a serious issue of medical necessity, clinical outcomes or client safety is reported locally, and if the reporting individual doubts that the issue has been given sufficient or appropriate attention, the individual should report the matter to higher levels of management or the Compliance Line until satisfied that the full importance of the matter has been recognized.

### Internal Investigations of Reports

We are committed to investigating all reported concerns promptly and confidentially to the extent possible. The BCDBH Compliance Officer coordinates any findings from department investigations and immediately recommends corrective action or changes that need to be made to the Compliance Committee and/or Behavioral Health Director. We expect all employees to cooperate with investigation efforts.

## Corrective Action

Where an internal investigation substantiates a reported violation, it is the policy of BCDBH to initiate corrective action, including, as appropriate, making prompt restitution of any overpayment amounts, notifying the appropriate governmental agency, instituting whatever disciplinary action is necessary, and implementing systemic changes to prevent a similar violation from occurring in the future at any BCDBH facility.

## Discipline

All violators of the Code could be subject to disciplinary action depending upon the severity of the violation. Most small infractions will be met with education and training whenever possible. The type of disciplinary action utilized will depend on the nature, severity and frequency of the violation and may result in any of the following disciplinary actions consistent with union MOU's:

- Verbal warning
- Written warning
- Written reprimand
- Suspension
- Termination

## Measuring Program Effectiveness

We are committed to assessing the effectiveness of our Ethics and Compliance Program through various efforts. Much of this effort is provided by the Compliance Office, which routinely conducts internal audits of issues that have regulatory or compliance implications. The Compliance Committee routinely undertakes monitoring efforts in support of policies and compliance in general and through discussion at executive team meetings. Facilities conduct self-monitoring, and the Compliance Officer conducts reviews of BCDBH programs as needed or via inquiries and investigations designed to assess facility implementation of the Code, policies and procedures, Compliance Hotline and related investigations, and monitoring efforts. These compliance process reviews permit the Compliance Officer to identify and share best practices.

Most of these methods of assessment result in reports of findings by the reviewers and corrective action plans implemented. Through these reviews, we are continuously assessing the effectiveness of the Program and finding ways to improve it.

## Acknowledgment Process

BCDBH requires all employees to sign an acknowledgment confirming they have received the Code, understand it represents mandatory policies of BCDBH and agree to abide by it. New employees are required to sign this acknowledgment as a condition of employment. Each BCDBH employee is also required to participate annual acknowledgement of the System of Caring Guide as personal commitment to abide by BCDBH's compliance program, as well as complete annual training on Compliance, and Privacy and Security in our Relias Training system. In addition, all employees are required to acknowledge all policy and procedure updates or changes via assignment in the Relias Learning system, and must abide by all policies and procedures that are written by program, fiscal, administration, compliance, quality management or other departments at BCDBH. New employees must receive compliance training, which includes overview of the Code of Ethics and Code of Conduct, within 30 days of hire at BCDBH or at a contracted provider.

## Resources

For billing questions, contact the Billing Department:

BILLING

(530) 891-2765 -OR- (530) 879-3820

For Information Systems/Technology questions, contact the IT Department:

IS/IT

(530) 891-2980

For questions regarding BCDBH Policies and Procedures, contact your supervisor, program manager or the Compliance Officer:

COMPLIANCE

(866) 637-4809 x6570

To get help with an ethics or compliance concern, or to report a potential violation of our Code of Ethics, contact your supervisor, Compliance Committee member, Compliance Officer or the Compliance Line:

REPORT

(866) 637-4809

*Guide update: December 2017*

## Acknowledgment

I certify that I have received the BCDBH Compliance Guide and Code of Ethics titled "Our System of Caring". I understand it represents mandatory practices and policies of the organization, and I agree to abide by them.

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Signature

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Printed Name (as listed in personnel records)

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Facility

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Date