



# CODE OF CONDUCT



# LETTER FROM OUR PRESIDENT AND CHIEF EXECUTIVE OFFICER

Dear Team Member:

Welcome to Children's Hospital Los Angeles' Code of Conduct. Our Code provides us with our guiding principles and demonstrates our commitment to honesty, integrity and ethical behavior in all aspects of our work. We are dedicated to the health of the children we are entrusted to care for and to the support of their families, while ensuring we are protecting their privacy.

We are equally committed to providing our colleagues with a workplace that is free from discrimination, harassment and retaliation. We value the contributions of everyone across the organization and this Code helps all Team Members fulfill our mission.

The standards outlined in the following pages set the basic principles we must follow in order to earn and maintain the trust of our patients, colleagues, business partners and government regulators. You are encouraged to ask questions to gain clarity about compliance; applicable laws, statutes and regulations; and ethical standards as part of your commitment to our hospital.

If you have any questions about our Code or Corporate Compliance Program or think that an event has occurred that violates this Code, you are obligated to contact our Office of Compliance and Privacy at 323-361-2302 or at [compliance@chla.usc.edu](mailto:compliance@chla.usc.edu). You can also anonymously report issues through Children's Hospital Los Angeles' Compliance Helpline by calling 877-992-6675, faxing information to 323-361-5269, or submitting a report online at [www.mycompliancereport.com](http://www.mycompliancereport.com) (company ID: LAC). You will not experience any retaliation for asking questions or reporting any concerns to our Office of Compliance and Privacy.

Compliance is the responsibility of every Team Member at our hospital. Thank you for your support of every aspect of the efforts we make to fulfill our mission. Your role in helping us maintain compliance is essential to our continued success.

Warmest regards,

**Paul S. Viviano**  
President and Chief Executive Officer

## MISSION

*We create hope and build healthier futures.*

# TABLE OF CONTENTS

<b>LETTER FROM OUR PRESIDENT AND CHIEF EXECUTIVE OFFICER.....</b>	<b>1</b>
<b>MISSION.....</b>	<b>2</b>
<b>OUR COMMITMENT TO COMPLIANCE.....</b>	<b>4</b>
The Code of Conduct.....	5
CHLA's Compliance Program.....	6
Compliance-related policies.....	6
Special responsibilities of supervisors and managers.....	6
Discipline.....	6
<b>DUTY TO COMPLY AND REPORT.....</b>	<b>7</b>
Reporting obligations.....	8
Consequences for not reporting potential compliance issues.....	8
Non-retaliation and non-intimidation.....	9
Responding to potential compliance issues.....	9
Deficit Reduction Act of 2005 – The False Claims Acts.....	9
<b>OUR PLEDGE TO OUR PATIENTS.....</b>	<b>10</b>
High-quality patient care.....	11
Patient choice.....	11
Emergency treatment (EMTALA).....	11
Safeguarding patient information.....	11
Patient records.....	12
Human subject protection in research.....	12
Responsible conduct of research.....	12
Credentialing.....	12
Adverse event reporting.....	12
Marketing and advertising.....	12

<b>OUR PLEDGE TO GOVERNMENT REGULATORS.....</b>	<b>13</b>
Coding and billing.....	14
Cost reports.....	14
Anti-kickback and bribes.....	14
Not-for-profit tax-exempt status.....	15
Antitrust.....	15
Record retention.....	15
Response to governmental inquiries.....	15
Accreditation and surveys.....	15
<b>OUR PLEDGE TO OUR BUSINESS PARTNERS.....</b>	<b>16</b>
A shared responsibility.....	17
Supplier, vendor, subcontractor, attorney and consultant relationships.....	17
Referral of patients.....	17
Gifts and interactions with industry.....	17
<b>OUR PLEDGE TO OUR COLLEAGUES.....</b>	<b>18</b>
Conflicts of interest.....	19
Confidentiality of business data.....	19
Substance abuse and impairment in the workplace.....	19
Controlled substances.....	20
Non-discrimination and equal employment opportunity.....	20
Harassment.....	20
Leadership and professionalism.....	20
Health and safety.....	21
Environmental protection.....	21
Political contributions.....	21
Use of CHLA resources.....	21
Intellectual property.....	21
Screening of excluded individuals and entities.....	21
Media relations.....	21
Responsible use of social media.....	21
<b>REPORTING AND ACKNOWLEDGMENT.....</b>	<b>22</b>
Acknowledgment and certification of compliance with the code of conduct.....	23

# OUR COMMITMENT TO COMPLIANCE





# OUR COMMITMENT TO COMPLIANCE

## Code of Conduct

The Code of Conduct (“Code”) provides guidance for how we carry out the mission and values of Children’s Hospital Los Angeles.

Our Code is designed to assist you in performing your job within appropriate moral, ethical and legal standards. The Code is not intended to cover every situation. Rather, it is intended to help you make the right decision, ask the right questions or know how to respond properly when compliance-related issues arise.

The Code and the associated CHLA policies and procedures apply to everyone who has a relationship with our organization, including but not limited to Board of Directors members, Foundation Board of Trustees, employed and non-employed staff, vendors, volunteers, and consultants or contractors (“Team Members”). We also expect all individuals and organizations working on behalf of CHLA to adhere to the standards set out in the Code.

We are committed to these principles of conduct:

- Treat patients, staff and the public with dignity and respect
- Abide by applicable laws, rules, guidelines and procedures
- Behave honestly, fairly, truthfully and accurately in all communications
- Safeguard confidential patient, employee and other private information
- Protect trade secrets, competitive knowledge and other business information
- Maintain accurate and timely records
- Strive for mutual respect and trust in work relationships



- Ensure a safe and healthy work environment
- Avoid conflicts of interest
- Guard against theft and misuse of CHLA property and other assets
- When in doubt, please ask before acting



### Pulse check

We expect everyone affiliated with CHLA to perform their job duties and responsibilities in a law-abiding, honest and trustworthy manner.

Everyone at CHLA is responsible for maintaining an ethical environment. Your actions in the workplace must demonstrate your commitment to honesty, integrity and accountability every day. Your job performance will be evaluated, in part, based on your compliance with the Code and with CHLA’s compliance-related policies and procedures.

Certain CHLA policies are referenced in this Code. Other compliance and privacy policies can be reviewed and downloaded from Inside CHLA or on the Office of Compliance and Privacy web page, or obtained from your manager in hard-copy form.

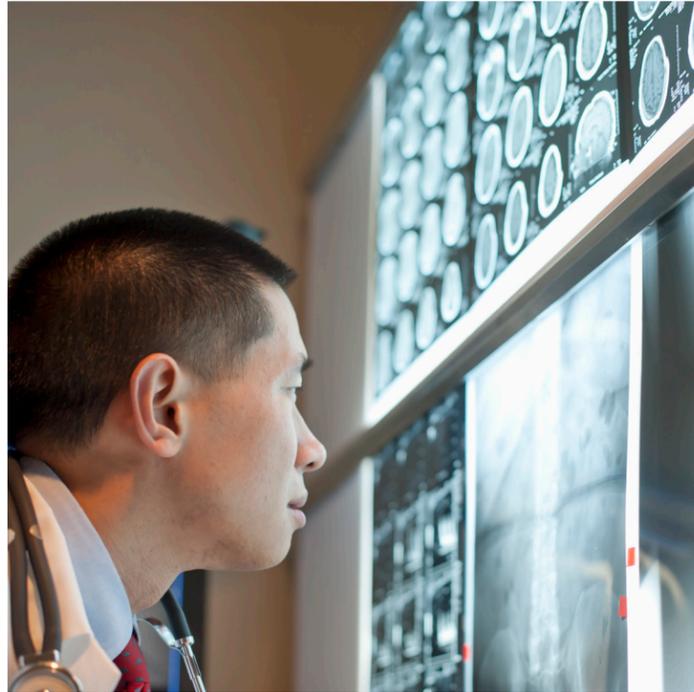
Please contact the Office of Compliance and Privacy whenever you have questions about any compliance-related issues. CHLA’s Human Resources staff can also provide guidance on workplace issues arising from the Code of Conduct and/or CHLA’s policies and procedures.



### Pulse check

You have a duty to know, understand and comply with the requirements of all CHLA policies, regardless of whether they are referenced in this Code.

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## CHLA's Compliance Program

CHLA's Compliance Program demonstrates our commitment to the highest standards of ethics and compliance.

- The CHLA Board of Directors is responsible for guiding the Compliance Program. The Chief Compliance Officer regularly reports to the Audit Committee of the Board and the full Board on a periodic basis to ensure that the Directors are fully informed on compliance issues and that transparency exists in the program at all times.
- CHLA has implemented various policies and procedures to help provide guidance to Team Members about our obligations under various federal and state laws, regulations and statutes.
- The Chief Compliance Officer leads the Office of Compliance and Privacy and reports to the General Counsel and CEO of CHLA.
- CHLA has a Corporate Compliance Committee consisting of members of executive management and led by the Chief Compliance Officer. This Committee provides direction, oversight and guidance to the Compliance Program.

- The Office of Compliance and Privacy carries out the day-to-day implementation of the Compliance Program. The staff of the Office are composed of a team of compliance and privacy professionals who are experienced in areas of coding, billing, auditing, privacy and research.
- The Office of Compliance and Privacy provides new employee and annual Compliance Training to all CHLA Team Members. In addition, the Office may offer other compliance-related training to identified departments on an ad-hoc basis. The training provides information about compliance issues, expectations and the operation of the Compliance Program.
- The Office of Compliance and Privacy maintains a Compliance Helpline, which is one means by which all employees and other individuals associated with CHLA may make reports of potential compliance issues. Reports to the Helpline may be made anonymously either by phone or online to protect the anonymity of complainants and to protect whistleblowers from retaliation. Reports of compliance issues may also be made directly to the Chief Compliance Officer or his/her designee in person, in writing or by telephone. All reports received by the Office of Compliance and Privacy are investigated and resolved to the fullest extent possible.
- The Office of Compliance and Privacy conducts periodic risk assessments by reviewing the operations of CHLA, internal and external audits of CHLA, other self-evaluations, industry developments, the work plans of the Office of the Inspector General of the U.S. Department of Health and Human Services (OIG), guidance issued by government agencies and other relevant resources. The risk assessment is used as the basis for the development of the Office of Compliance and Privacy's Annual Work Plan.
- The Office of Compliance and Privacy conducts regular audits and monitoring to ensure compliance with its internal policies and processes, along with applicable federal and state laws, regulations, or statutes. Where necessary, the Office will work with appropriate business units to ensure that appropriate controls are implemented that will minimize or mitigate risk to CHLA.

- All compliance-related problems identified as a result of reports or identified in the course of self-evaluations or audits shall be corrected promptly and thoroughly. Such corrective actions may include, but are not limited to, implementation of policies and/or systems as necessary to reduce the potential for recurrence, training and education, additional audits or other monitoring, reporting the problem to the appropriate government agency and refunding overpayments.

Please contact the Office of Compliance and Privacy at 323-361-2302 whenever you have questions about any compliance-related issue, or at [compliance@chla.usc.edu](mailto:compliance@chla.usc.edu). You can also anonymously report issues through CHLA's Compliance Helpline by calling 877-992-6675, faxing information to 323-361-5269, or by submitting a report online at [www.mycompliancereport.com](http://www.mycompliancereport.com) (company ID: LAC).

For more information about CHLA's Compliance Program, visit the Office of Compliance and Privacy's web page on [Inside CHLA](#).



## Compliance-related policies

CHLA has a number of policies that support the operation of our Compliance Program. These policies cover several topics that include, but are not limited to, privacy, coding, billing, identifying risk areas and responding to compliance issues promptly as identified in the course of audits, internal reviews and Compliance Helpline inquiries.

If you have questions about any of the policies, please contact your supervisor or manager, the Office of Compliance and Privacy at 323-361-2302, or the Chief Compliance Officer.

## Special responsibilities of supervisors and managers

CHLA's supervisors and managers have a special responsibility to set the right ethical tone. Supervisors and managers must:

- Make sure that their work areas reflect CHLA's commitment to compliance and quality health care
- Create a work environment in which concerns can be raised and openly discussed without fear of retaliation
- Promote honesty and integrity and model those values for others

## Discipline

CHLA Team Members who violate the Code or related policies and procedures may be subject to disciplinary action. The discipline imposed will be determined on a case-by-case basis and will depend upon the nature, severity and frequency of the violation.

Possible disciplinary actions include:

- Verbal warning
- Written warning
- Suspension
- Termination of employment



### Pulse check

The disciplinary policy will be firmly and fairly enforced with respect to all persons affiliated with CHLA.

# DUTY TO COMPLY AND REPORT





# DUTY TO COMPLY AND REPORT

## Reporting obligations

It is the duty of every Director, Trustee, employee and all other individuals affiliated with CHLA to comply fully with all governing laws, regulations, CHLA policies and procedures, and the Code. CHLA expects all Team Members to offer their complete cooperation with any investigation by CHLA and/or governing authorities.

You have a responsibility to share your concerns by reporting to the Office of Compliance and Privacy or through the Compliance Helpline any actual or suspected violations of the Code, CHLA policies and procedures and/or federal or state law. You also have a responsibility to report any other compliance-related issues, including but not limited to, conflicts of interest, patient privacy, patient security, fraud or other misconduct of any type relating to CHLA's operations.

## Consequences for not reporting potential compliance issues

Failure to comply with the laws and/or to report suspected violations of state or federal law may have serious consequences for CHLA and for any affiliated individuals. The individual(s) may be terminated from employment (or from his/her contractual arrangement with CHLA) or be subject to other disciplinary measures, depending on the nature of the violation.

Ensuring compliance with the applicable laws, rules, regulations and industry standards that govern the operations of CHLA requires teamwork. For this effort to be successful, everyone who is employed or affiliated with CHLA shall work together.

### Pulse check

Even if an employee expresses criticism or raises an uncomfortable question, supervisors and managers should welcome the communication, always remembering that openness is essential to a healthy work environment.

### Pulse check

We need your help to continue to act with honesty and integrity.

### FAQ

#### How do I report a compliance-related concern?

You can call the Compliance Helpline at 877-992-6675 or report online at [www.mycompliancereport.com](http://www.mycompliancereport.com) (company ID: LAC). You can also report the matter directly to the Office of Compliance and Privacy at 323-361-2302 or to your supervisor or another manager.

### FAQ

#### Can I be retaliated against for participating in an investigation as a witness?

No. CHLA does not permit or tolerate retaliation against anyone for good faith and honest participation in an internal or external investigation. Everyone affiliated with CHLA is expected to cooperate with all investigations.

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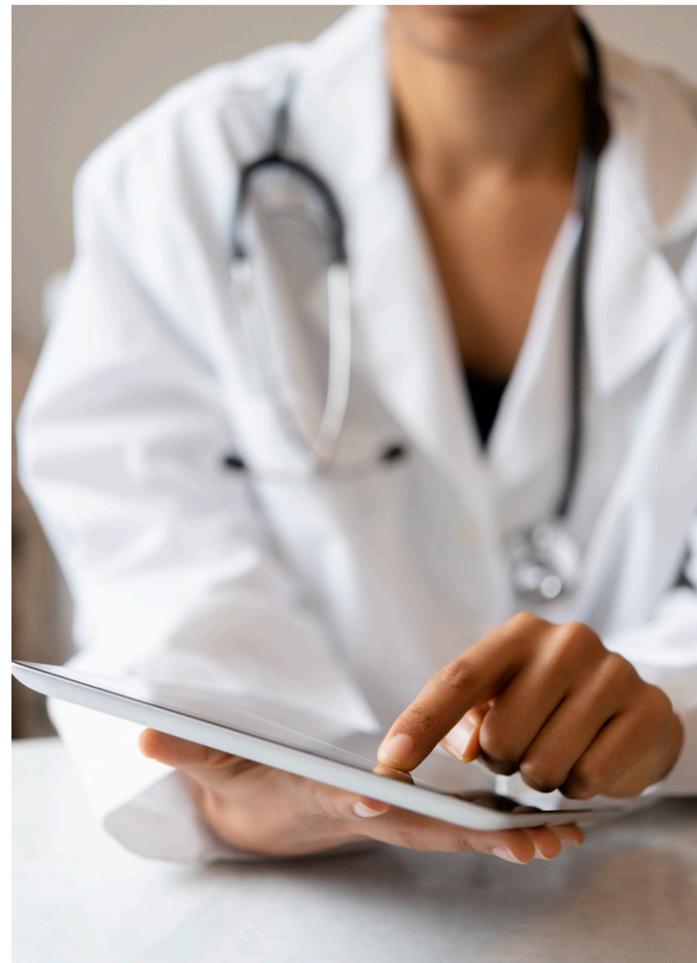
### Non-retaliation and non-intimidation

CHLA does not permit retaliation or intimidation against any Team Member who discloses a compliance concern. CHLA will investigate and take appropriate action with respect to all suspected acts of retaliation or intimidation. Any individual who is found to have retaliated against or intimidated a Team Member for reporting a potential compliance concern will be subject to immediate discipline, up to and including termination of employment.



#### Pulse check

Retaliation is not tolerated at CHLA. We encourage individuals to report potential compliance problems or violations of law in good faith.



### Responding to potential compliance issues

CHLA is committed to investigating all reported concerns promptly, thoroughly and confidentially, to the extent possible and appropriate. The Chief Compliance Officer directs the investigation of compliance concerns. Where an internal investigation substantiates a reported violation, we initiate corrective actions or other changes that need to be made in order to remedy the problem.

These actions can include:

- Making prompt repayment of any government funds to which we are not entitled
- Notifying the appropriate government agency
- Instituting disciplinary action
- Recommending systemic changes to prevent a reoccurrence of the problem

### Deficit Reduction Act of 2005 – The False Claims Acts

Under the Deficit Reduction Act of 2005, any employer who receives more than \$5 million per year in Medicaid payments is required to provide information to its employees about:

- The Federal and California State False Claims Acts
- The rights of employees to be protected as whistleblowers
- The employer's policies and procedures for preventing fraud, waste and abuse

The Acts also impose liability on individuals who knowingly submit a false record in order to obtain payment from the government to which he or she is not entitled to and then uses false statements or records in order to retain the money.

The Acts permit private parties to bring actions to recover money on behalf of the United States and to share in a percentage of the proceeds obtained by the government. Persons who bring these actions are protected against retaliation.

Examples of false claims include:

- Billing for a higher level of services than was actually performed or provided
- Billing for services that were not medically necessary
- Billing multiple codes instead of one to increase reimbursement
- Submitting a claim under one patient's name when services were provided to another patient
- Altering claim forms or medical records
- Billing for services provided by an unlicensed provider
- Failing to repay overpayments within 60 days after identification



#### Pulse check

The federal and state False Claims Acts impose liability on any person who submits a claim to the federal government that he or she knows to be false.



# OUR PLEDGE TO OUR PATIENTS





# OUR PLEDGE TO OUR PATIENTS

## High-quality patient care

CHLA's No. 1 priority is the delivery of the highest quality of care possible. Our main concern is for the well-being, comfort and dignity of our patients. We do not make a distinction in the availability of the services or the care we provide based on age, gender, disability, race, color, religion, national origin, actual or perceived sexual orientation, or gender identity, or based on the source of payment for the patient's services or the patient's ability to pay.

- We treat all our patients equally with compassion, understanding and respect.
- We provide only care that is medically necessary and appropriate.
- All clinical decisions are based upon identified health care needs regardless of how CHLA compensates or shares financial risk with any individual or entity.

### Pulse check

Our commitment to quality of care and patient safety is an obligation of every person affiliated with CHLA.

## Patient choice

All patient care at CHLA is administered in accordance with the Patient's Bill of Rights. Every patient is provided with a statement of these rights and with a Notice of Privacy Practices. These patient rights include:

- The right to make decisions regarding medical care
- The right to refuse or accept treatment
- The right to informed decision-making
- Rights related to how the patient's health information is used and maintained by CHLA

We are responsible for informing patients about their proposed plan of care, including the risks, benefits and alternatives available to them. We respect patients' rights to make informed decisions about treatment, as well as to establish and follow advance directives. Patients are free to choose their service providers, including but not limited to physicians and ancillary services providers such as home health, home infusion and durable medical equipment suppliers.

### Pulse check

We listen to and follow the choices made by our patients with respect to their clinical care, as required by law.

## Emergency treatment (EMTALA)

We follow the Emergency Medical Treatment and Active Labor Act (EMTALA) in providing an emergency medical screening examination and necessary stabilization to all persons who present themselves for emergency care, regardless of their ability to pay or any other discriminatory factor. Patients with emergency medical conditions are transferred to another facility at the patient's request or if the patient's medical needs cannot be met at CHLA because we do not have the capacity or capability to do so. Patients must consent to any transfer, and all transfers are accomplished in strict compliance with state and federal EMTALA regulatory and statutory requirements.

### FAQ

**May I delay the examination or treatment of an ER patient in a life-threatening situation to obtain financial and demographic information about the patient?**

No. Appropriate screening and emergency care must be provided in a timely manner and cannot be delayed while information is obtained from the patient.

## Safeguarding patient information

We demonstrate our respect for our patients by protecting the confidentiality of all personal information they share with us for the purpose of receiving quality medical care. This information, known as "Protected Health Information" or "PHI," can include but is not limited to:

- Names
- Addresses
- Phone numbers
- Social Security numbers
- Medical diagnoses
- Other personal information

Federal and state laws, as well as quality of care standards, require us to safeguard patient information. CHLA Team Members may use and disclose PHI for treatment, payment and health care operations. When using or disclosing PHI, we should make reasonable efforts to limit the PHI to the minimum necessary to accomplish the intended purpose.

For example, it is inappropriate to:

- Discuss patients' cases in a public area where the conversation may be overheard by others
- Permit access to a patient's record by individuals who are not involved in legitimate activities relating to the patient

If you become aware of an unauthorized use or disclosure of patient information, immediately report the potential violation to your supervisor or the Office of Compliance and Privacy. CHLA does not tolerate retaliation against any person who makes a good-faith report of a privacy violation.

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CHLA Team Members should only use or disclose PHI per a valid authorization, or otherwise permitted by applicable regulations or policies.

If you are unsure of the rules governing the release of patient-related data, please ask to be sure you understand such rules and procedures.

Any Team Member who engages in unauthorized use, access or disclosure of patient information may be subject to disciplinary action leading up to and including termination of employment. Individuals may also be subject to civil or criminal penalties.



### Patient records

We make every effort to ensure that entries we make into patient records are complete and accurately reflect the item or service that was provided to the patient. Patients have the right to request an amendment to their medical record in accordance with applicable regulations and policies.

### Human subject protection in research

We conduct research according to the highest ethical standards and in full compliance with federal and state laws and regulations. We are committed to fostering a research environment that prioritizes the welfare of study participants.

The CHLA Human Subjects Protection Program (HSPP), which includes the CHLA Institutional Review Board (IRB), is responsible for the review and oversight of human subjects research. The HSPP and IRB are guided by the ethical principles of the Nuremberg Code, the Belmont Report and the Report of the National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research.

The HSPP also provides ongoing education and training resources to the research community on ethical and regulatory best practices, and is also available to our research participants should they have any questions about their potential or ongoing participation in our studies.

If you have any questions about the conduct of research with patients, you may contact the Human Subject Protection Program at 323-361-2265.

If you wish to report a compliance-related concern about any research being conducted at CHLA, you can call the CHLA Compliance Helpline 24 hours a day, seven days a week at 877-992-6675 or visit [www.mycompliancereport.com](http://www.mycompliancereport.com) (company ID: LAC).

### FAQ

#### What is an IRB?

The IRB is a committee of people from various backgrounds, including CHLA employees and community members, who are responsible for protecting the rights and welfare of patients who participate in research studies.

### Responsible conduct of research

Truth, integrity and credibility are critical and distinctive principles of CHLA and The Saban Research Institute (TSRI). Through awareness and application of established professional norms and ethical principles in the performance of all activities related to scientific research, CHLA and TSRI promote a culture of honesty, accuracy, efficiency and objectivity.

These principles are essential for the progress of scientific research and to preserve the trust of the public in the research community. CHLA has set standards through policies and procedures for its researchers in order to preserve the values associated with responsible conduct of research. These standards also aim to prevent research misconduct and provide a framework for efficiently and fairly handling allegations or other indications of research misconduct.

### FAQ

#### What should I do if I observe or suspect research misconduct (e.g., fabrication, falsification or plagiarism in proposing, performing or reviewing research, or in reporting research results, etc.)?

You must report it immediately to the Research Compliance and Integrity Officer, the Office of Compliance and Privacy, the Compliance Helpline at 877-992-6675 or online at [www.mycompliancereport.com](http://www.mycompliancereport.com) (company ID: LAC). Any employee who reports such information in good faith will be protected against retaliation for making the report.

### Credentialing

One important aspect of our commitment to high-quality care is the proper credentialing of all health care providers associated with CHLA. We conduct credentialing reviews for hospital employees whose work requires licenses.

Credentialing reviews occur before the relationship between CHLA and an individual commences. We recertify those credentials at regular intervals in accordance with regulatory requirements. We also conduct background checks on individuals who work at CHLA, regardless of whether their position requires a license, to ensure that they are not excluded from participating in the federally funded health care programs.

### Pulse check

We ensure that our providers are appropriately credentialed and that they work within the parameters of their respective licenses.

### Adverse event reporting

California law requires us to report adverse events to the California Department of Public Health within strict statutory timeframes. All Team Members are required to report such incidents to designated CHLA administrators immediately upon learning of them. Failure to do so constitutes an unacceptable practice and is grounds for discipline.

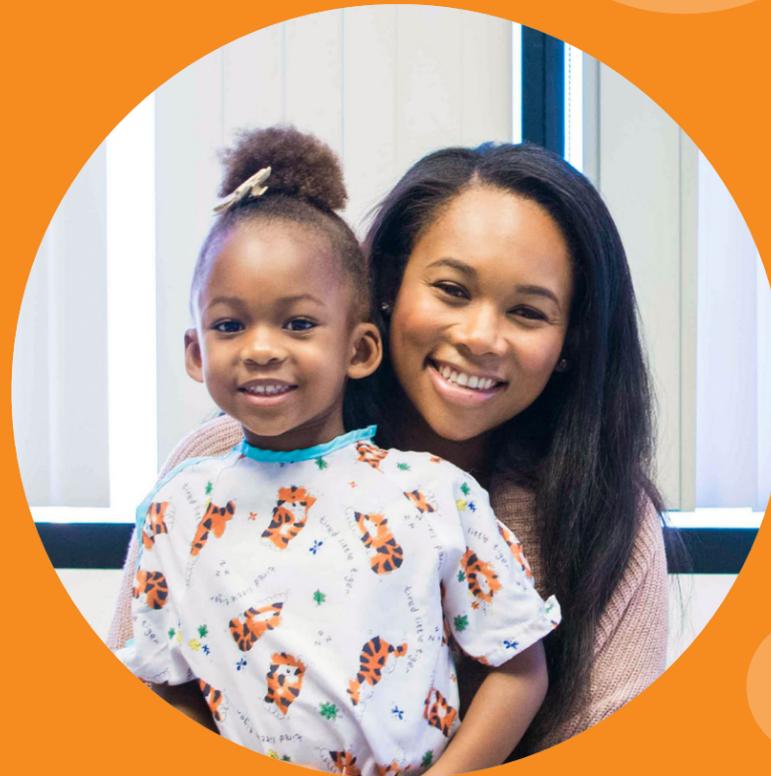
### Pulse check

We are committed to the full and prompt investigation of every adverse event and to the implementation of corrective or remedial action where appropriate.

### Marketing and advertising

We market CHLA services in a fair, trustful, ethical manner and adhere to the applicable federal and state regulatory standards. CHLA uses marketing and advertising to educate the public, report to our community, increase awareness of our services and recruit staff members.

# OUR PLEDGE TO GOVERNMENT REGULATORS





# OUR PLEDGE TO GOVERNMENT REGULATORS

## Coding and billing

One of the most important aspects of CHLA's commitment to compliance is our dedication to the preparation and submission of accurate claims for payment to all payors.

Remember:

- All claims for payment for any service provided by CHLA must be supported by complete documentation in the medical record, proper coding based on that record, and bills that accurately reflect the coding. We bill only for those goods and services actually provided and medically necessary.
- Accurate and timely documentation depends on the diligence and attention of clinicians who treat patients at our facilities. The expectation is for clinicians to document the patients' medical records in a timely manner.
- CHLA should always bill accurately for services rendered in accordance with the law and its agreements with third-party payors. When we receive a question from a patient or a third-party payor about an invoice or charge, we promptly address the question, if authorized to do so, or refer the matter to the person who is authorized to address it.

Under state and federal law, identified overpayments must be refunded to the payor within 60 days of identification. Failure to do so can result in fines and other penalties.

### Pulse check

We have a zero-tolerance policy with respect to billing for improper claims.



### FAQ

#### What should I do when I receive a question from a patient or a third-party payor about an invoice or a charge on a patient's bill?

You should promptly address the question or issue if it is within your job duties and responsibilities to do so. Unresolved disputes should be referred to your supervisor for resolution.

### Cost reports

CHLA receives reimbursement under federal and state health care programs. These programs require us to submit complete and accurate reports of our costs of operation and other information.

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.

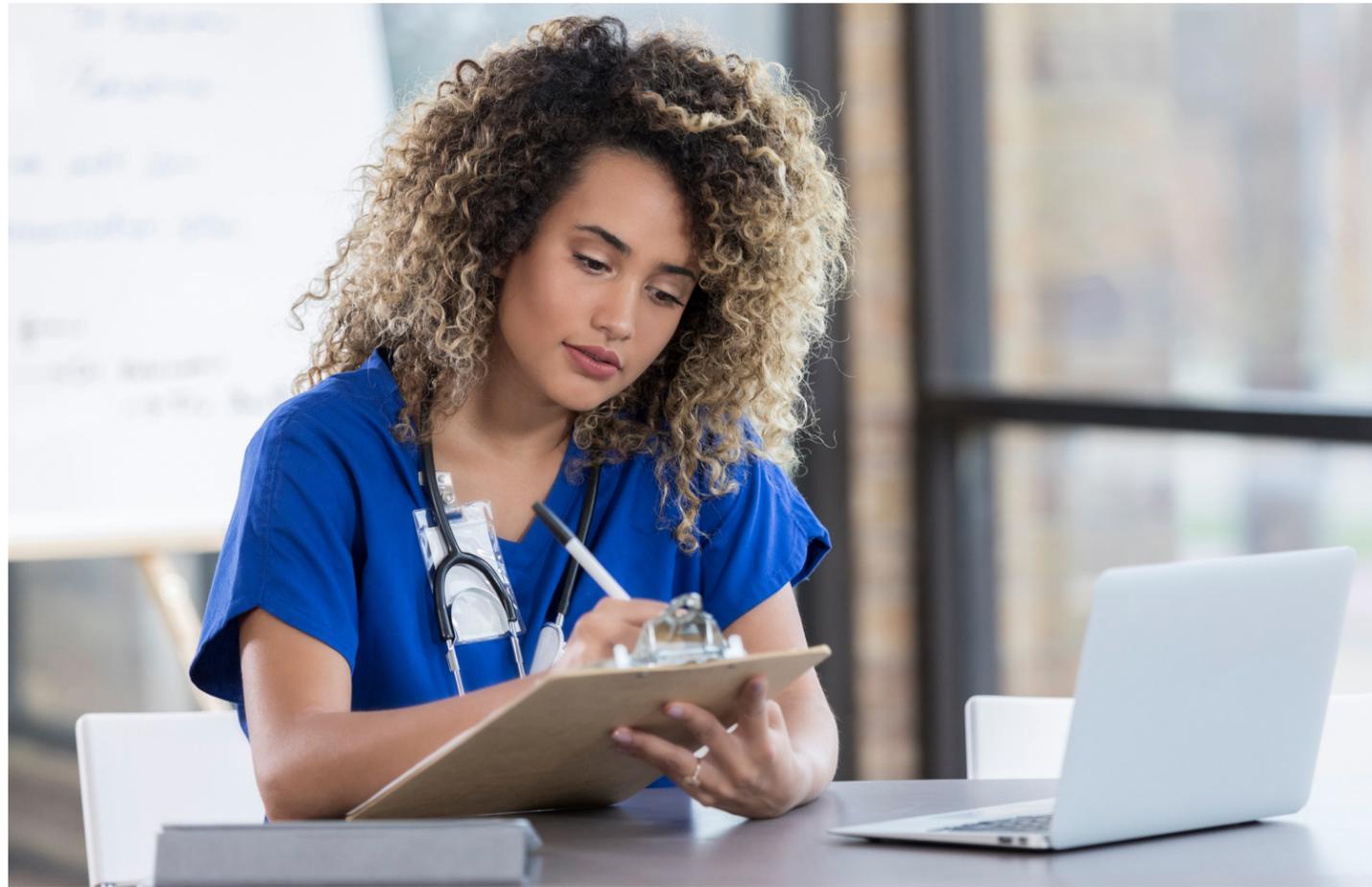
### Pulse check

We comply with all applicable legal, regulatory and program requirements in the preparation of our cost reports.

### Anti-kickback and bribes

CHLA strictly prohibits its employees and other service providers from offering, paying, asking for, or accepting money or other benefits in exchange for patient referrals, purchases, leases or orders in addition to arranging or recommending purchases, leases or orders.

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### Not-for-profit tax-exempt status

CHLA is a tax-exempt entity because of our charitable mission. We provide community benefits that include health care services, medical training, education, research and community outreach activities.

### Antitrust

CHLA and its employees have an obligation to comply with federal and state antitrust laws. These laws are designed to preserve and promote fair and honest market competition. Generally, these laws prohibit understandings or agreements with competitors that (i) artificially impact the price of services (i.e., reimbursement rates, payment methodologies) or the cost of supplies (i.e., including wages), or otherwise improperly reduce competition; or (ii) allocate patients, services, divide geographic markets, or territories.

The antitrust laws also prohibit other conduct and arrangements that effectively exclude a competitor, supplier or vendor from doing business in a relevant market.

Antitrust issues can be complex. CHLA employees are expected to seek advice from the Office of the General Counsel before (i) sharing with, or accepting from, a competitor information relating to pricing, reimbursement, salary or compensation, or other terms of doing business; (ii) agreeing to restrictions on CHLA's ability to offer particular services, conduct business in particular geographic areas, or conduct business with one or more third parties; (iii) engaging in business activities that are intended to exclude another party from doing business in a particular area; or (iv) otherwise engaging in conduct that may involve a risk or violation of the antitrust laws or other similar laws.

### Record retention

Accurate and complete records are crucial for the continuity of patient care, appropriate and proper billing, and compliance with regulatory, tax and financial reporting requirements. Everyone who enters information into a medical record, business record, or regulatory or financial report has a responsibility to do so in a truthful, accurate, legible and timely manner. Records must be retained by CHLA, as required by federal and state laws.

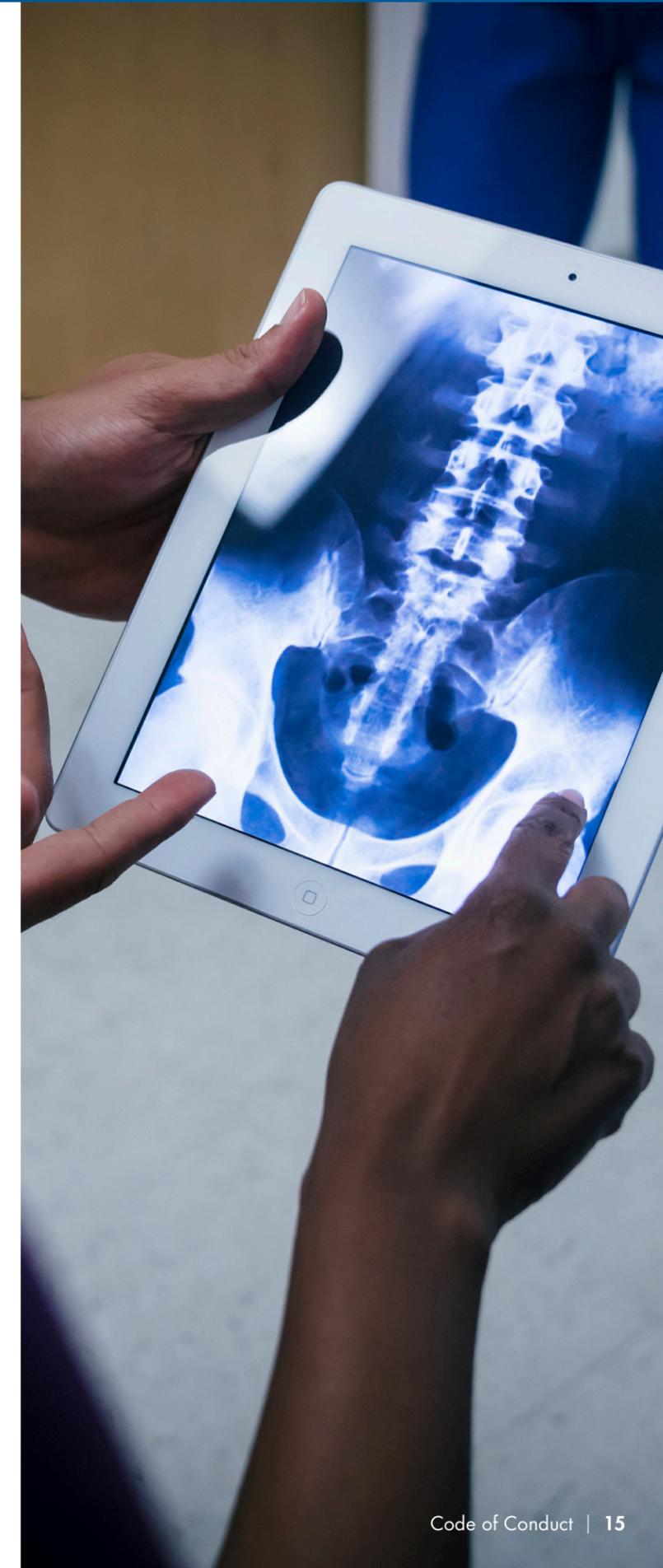
### Response to governmental inquiries

CHLA cooperates fully with government inquiries and investigations. We do not prevent persons affiliated with us from speaking with government officials. However, you should contact your supervisor and the Office of the General Counsel before doing so. When we receive a request for documents or a subpoena from a government agency, we refer it to the Office of the General Counsel, which will coordinate our response and ensure that it is appropriate and complete. We never destroy, alter or change CHLA records requested by or related to a government investigation.

When we receive notice of an investigation or lawsuit, a request for documents, or a subpoena, we preserve all related records and cooperate with the Office of the General Counsel in making them ready for evaluation and/or production.

### Accreditation and surveys

In preparation for, during and after surveys, CHLA employees and affiliated persons deal with all accrediting bodies in a direct, open and honest manner. No action should ever be taken in a relationship with an accrediting body that would mislead the accrediting organization or its survey teams, either directly or indirectly.



# OUR PLEDGE TO OUR BUSINESS PARTNERS





## OUR PLEDGE TO OUR BUSINESS PARTNERS

### A shared responsibility

Our business partners—suppliers, contractors, physicians and others with whom we do business—are vital to our success. We always treat them with respect, professionalism and fairness. We examine the backgrounds of our business partners before aligning with them to ensure they demonstrate high standards of ethical business conduct.

### Supplier, vendor, subcontractor, attorney and consultant relationships

CHLA selects our suppliers, vendors, subcontractors, attorneys and consultants based on the quality, price, delivery and supply of their goods and services. We obtain these services only when there is a legitimate need for them.



#### Pulse check

Our patients and the communities we serve frequently associate our business partners' performance with CHLA.

### Referral of patients

We do not pay or offer to pay anyone—colleagues, physicians, other persons or entities—for the referral of patients. Similarly, we do not accept payments for referrals we make. When CHLA discharges patients and refers them to other providers, we ensure that the referrals are based on the patients' documented needs for the referred services and the ability of the referral providers to meet that need.



Our patients' freedom to choose their service providers must always be honored. Financial relationships with providers with whom CHLA has a referral relationship are reviewed to ensure compliance with the relevant laws.



#### Pulse check

We do not accept any form of compensation that is designed to influence the selection process.

### Gifts and interactions with industry

CHLA does not solicit, accept, make or offer to make any payment, or accept or provide any other thing of value to another person or company with the understanding or intention that such payment is to be used for an unlawful or improper purpose. CHLA does not offer or give gifts of any kind to government officials.

# OUR PLEDGE TO OUR COLLEAGUES





## OUR PLEDGE TO OUR COLLEAGUES

### Conflicts of interest

We have a duty to avoid conflicts of interest and a duty of loyalty to CHLA. Our business conduct must always put CHLA's interest ahead of our personal interests.

- We do not use our positions or confidential information obtained in the course of our work for personal gain.
- We make sure that any outside jobs or positions do not conflict with our work at CHLA.
- We disclose to our managers and the Office of Compliance and Privacy any potential conflicts of interest.

Examples of potential conflicts of interest include:



- Acting as a director, partner, consultant or employee of a firm that provides services, supplies or equipment to CHLA, or is a CHLA competitor
- Having a material financial interest (or a family member having a financial interest) in an organization that is either a competitor of or a vendor (or potential vendor) to CHLA

- Purchasing or leasing real estate that may increase in value based on knowledge that CHLA may have an interest in the property
- Hiring subordinates or CHLA vendors to perform personal work for yourself or your family
- Having your research funded by a company or evaluating a product owned, manufactured or distributed by a company in which you (or a family member) have a material ownership interest, or from which you (or a family member) have received significant compensation

Certain Team Members of CHLA must also file an annual Conflict of Interest Disclosure form. You will be notified if you are required to do so.

### Pulse check

We are obligated to avoid conduct that could create a conflict of interest.

### Confidentiality of business data

In addition to patient information, other information created by CHLA in the course of business, such as employee data, financial data, development plans, proprietary research data, marketing strategies, or information about pending or contemplated business deals, is confidential information that belongs to CHLA.

When you receive confidential information in the course of performing your job duties and responsibilities you must not use it for your own or your family's benefit and you may not disclose it to others for their personal use.

Information received by CHLA, under an obligation to maintain its confidentiality, is also confidential information that, if you receive such information, is to be utilized only

for the purpose for which it was provided and may not be disclosed in violation of the obligation to maintain its confidentiality.

### Pulse check

We always keep CHLA business information confidential and do not use it as a basis for personal gain.

### Substance abuse and impairment in the workplace

CHLA works diligently to maintain an alcohol- and drug-free environment in our facilities.

If we suspect that you are under the influence of drugs or alcohol, you will be required to submit to and undergo appropriate drug or alcohol testing. If you are found to be performing any activity for CHLA while impaired by or under the influence of alcohol or illegal drugs you will be subject to disciplinary action up to and including termination or your employment.

### Pulse check

We are expected to perform our job duties and responsibilities in a professional manner and free from the influence of alcohol, drugs or other substances that may impair our job performance or judgment.

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### Controlled substances

Pharmaceutical drugs may only be handled by properly authorized individuals who do so as a part of their job duties and responsibilities. You may not under any circumstances divert pharmaceuticals for personal use or sale. You are expected to protect the integrity of CHLA by safeguarding the drugs entrusted to you.

#### Pulse check

If you become aware of any potential lapses in security or an actual violation of law, policy or regulation relating to drugs, you are required to immediately inform your supervisor or the Director of Pharmacy.

### Non-discrimination and equal employment opportunity

CHLA promotes diversity throughout at all levels of our organization. We are committed to providing a work environment where everyone is treated with respect, dignity and fairness. We are an equal opportunity employer and do not discriminate on the basis of race, ethnicity, religion, religious creed, color, gender, sex, gender identity, gender expression, sexual orientation, sex stereotyping, transgender status, national origin, ancestry, citizenship status, genetic information, uniform service member status, marital status, pregnancy, childbirth or related medical conditions including childbearing capacity, age, medical condition, physical disability, mental disability and/or any other category protected by applicable local, state or federal law.

We comply with all laws, regulations and policies relating to equal employment opportunity in hiring, reductions in force, transfers, terminations, evaluations, recruiting, compensation, promotions and discipline. We make reasonable accommodations to the known physical and mental limitations of qualified individuals with disabilities.



#### Pulse check

We celebrate cultural and other differences because they contribute to the strength of CHLA.

### Harassment

CHLA strives to provide a workplace that is free from harassment and disruptive behavior. Degrading jokes, slurs, intimidation or other harassing conduct are unacceptable.

Sexual harassment can be particularly harmful to the work environment and is prohibited. This prohibition includes unwelcome sexual advances or requests for sexual favors in conjunction with your employment. Verbal or physical harassment, abuse or any other behavior that creates an intimidating, hostile or offensive work environment also has no place at CHLA. If you engage in this conduct, you will be subject to discipline leading up to termination of employment.

All individuals associated with CHLA must treat others with respect, courtesy and dignity and must conduct themselves in an appropriate, professional and cooperative manner.

If you observe or experience any form of harassment or violence, you must report it to your supervisor, the Human Resources Department, a member of management, the Office of Compliance and Privacy, or the Compliance HelpLine at 877-992-6675, or visit [www.mycompliancereport.com](http://www.mycompliancereport.com) (company ID: LAC).

#### Pulse check

We do not tolerate harassment of any kind, especially harassment based on diverse characteristics or the cultural backgrounds of those who work with us.

### Leadership and professionalism

CHLA is committed to the highest standards of excellence in the practice of medicine and strongly believes that collaboration, communication and collegiality are essential for the provision of safe and competent patient care. Appropriate professional and cooperative behavior means any reasonable conduct intended to advocate for patients, to recommend improvement in patient care, and to participate in the operations, leadership or activities of the staff, including the Medical Staff. Behaviors that undermine a culture of safety include but are not limited to:

- The use of profanity in the workplace
- The refusal to speak or respond to others
- Inappropriate physical contact
- Sexual, religious, racial or other unlawful harassment
- Throwing objects
- Destruction of CHLA property

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Violations of the Code of Conduct by any staff member affiliated with or employed by CHLA will be addressed in accordance with our policies. Violations by practitioners credentialed by a medical board, physician trainees and medical students will be addressed by the procedures provided in the bylaws, rules and regulations of the Medical Staff, and the relevant CHLA policies. Issues relating to non-credentialed employees will be addressed by the procedures set forth in the Disciplinary Counseling Procedures policy.

Anyone who observes or is subjected to inappropriate conduct by any staff member should notify their supervisor, Human Resources, the Office of Compliance and Privacy, or the Compliance Helpline at 877-992-6675, or visit [www.mycompliancereport.com](http://www.mycompliancereport.com) (company ID: LAC). Employees who make such reports in good faith cannot be retaliated against for making the report.

### Health and safety

CHLA is committed to providing a workplace that is safe, healthy, smoke-free and in compliance with all applicable laws and regulations.

It is important that you immediately advise your supervisor of any workplace injury or any circumstance presenting a danger of injury so that timely corrective action can be taken to resolve the problem.



### Pulse check

You are expected to know the safety issues and policies that affect your job and to follow those policies at all time.



### Environmental protection

CHLA expects everyone to help preserve the environment by disposing all waste and other materials and storing all chemicals and substances in accordance with applicable laws and regulations. It is important to file all necessary environmental reports accurately and promptly and to cooperate fully with all governmental authorities in the event of an environmental incident.

### Political contributions

We do not use CHLA revenues directly or indirectly for political activities or in support of political campaigns. We do not reimburse personal expenses related to any political activities, including money spent in support of any political candidate. You may not solicit political contributions from your colleagues at CHLA. We do not take positions on political elections or campaigns.

### Use of CHLA resources

Each of us is responsible for preserving CHLA assets, including time, materials, supplies, equipment and information. All communication systems, including but not limited to telephone, computers, electronic mail, intranet, internet and voicemail, are the property of CHLA and are to be used primarily for business purposes in accordance with our policies.

### Intellectual property

CHLA is committed to adhering to all applicable intellectual property laws. We will respect the intellectual property and copyright laws regarding books, trade journals and other applicable resources. All software used in connection with business must be properly licensed and used in accordance with that license.

### Screening of excluded individuals and entities

CHLA will not knowingly employ, appoint, elect, contract with or bill for any individual or entity that has been listed as debarred, excluded or otherwise ineligible for participation in federal or state health care programs. We routinely search the lists of excluded and ineligible persons, including those maintained by the U.S. Department of Health and Human Services Office of Inspector General and the General Services Administration, as well as state exclusion lists.

You are required to report to us if you become excluded, debarred or ineligible to participate in federal or state health care programs or have been convicted of a criminal offense related to the provision of health care items or services.

### Media relations

All requests from reporters or the general public for information should be referred to the Marketing Communications Department at [media@chla.usc.edu](mailto:media@chla.usc.edu). CHLA Team Members should never release information to the media or the general public without the permission and guidance of the Marketing Communications Department.

### Responsible use of social media

Protected health information and confidential business information (such as CHLA business plans) must not be posted on Facebook, Twitter or any other social media site, unless specific advance written permission is obtained from the Marketing Communications Department.

# REPORTING AND ACKNOWLEDGMENT





Face-to-Face

Request an appointment to meet face to face with the Office of Compliance & Privacy at 323-361-2302



Fax

323-361-5269



Email

compliance@chla.usc.edu



Online

www.MyComplianceReport.com



Anonymous

External Hotline: 877-992-6675



Mail

c/o Office of Compliance and Privacy  
4650 Sunset Blvd., #143  
Los Angeles, CA 90027

## ACKNOWLEDGMENT AND CERTIFICATION OF COMPLIANCE WITH THE CODE OF CONDUCT

This is to acknowledge that I have received and reviewed CHLA's Code of Conduct. I agree to comply with the standards referenced in the Code and all related policies and procedures. I acknowledge that the Code is a statement of principles for individual and business conduct and does not constitute an employment contract. I further acknowledge that it is my responsibility to understand and follow compliance standards and to adhere to the ethical principles outlined in the Code of Conduct.

I will promptly report any potential violation of which I become aware of to my supervisor and/or the Office of Compliance and Privacy. I understand that CHLA maintains a policy of non-retaliation provided that the report is made in good faith. I understand that any violation of the Code of Conduct or any compliance policy or procedure is grounds for disciplinary action, up to and including termination of employment.

I further certify that I am not excluded on the List of Excluded Individuals/Entities maintained by the United States Department of Health and Human Services Office of Inspector General (OIG); the System for Award Management (SAM) list of debarred individuals maintained by the General Services Administration (GSA); or any state exclusionary list. I agree to notify CHLA's Office of Compliance and Privacy immediately if I become aware of my impending or actual exclusion or debarment from any of these lists.

\_\_\_\_\_  
**Name:**

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

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