

## **BROOME COUNTY MENTAL HEALTH DEPARTMENT CODE OF CONDUCT**

The Broome County Mental Health Department Code of Conduct (Code) is for employees of the BCMHD and is intended to augment Section 408, Code of Ethics, of the Broome County Employee Handbook. This Code is intended to provide guidance in those areas that particular to the operations of the BCMHD.

*The Code* is not meant to answer every question that might come up for you at BCMHD, its clinics, or other providers with whom we have business agreements. The *Code* does provide guidelines and direction in responding to circumstances and issues that may arise in our daily work. In addition *The Code* also contains a series of frequently asked questions with answers that have been developed with the input of staff. We encourage you to use this resource if you have questions.

**Assets:** all assets of the department shall be used solely for the benefit and purpose of the BCMHD and the individuals we serve. Personal use of corporate assets is not allowed, unless disclosed to, and approved by the Mental Health Clinic Compliance Committee. Department assets include, but are not limited to; financial data, equipment, furniture, vehicles, office supplies, credit cards, employee time and computer supplies.

**Billing:** Claims are submitted for services rendered only when said services are reasonable and medically necessary. Medicaid and Medicare billing occurs according to federal and state regulatory requirements. Other billing occurs according to procedures developed by the particular payer sources. The following describes some of the conduct issues that are particular to billing third party payers and that the Mental Health Clinic Compliance Program will focus on:

- Fiscal staff are oriented to billing and coding regulations upon hire. Retraining occurs as necessary. Fiscal staff, however, has an obligation to ask questions and to continuously educate themselves on billing rules and regulations.
- Clinical staff are oriented and trained as to their clinical medical records responsibilities. Although retraining occurs on a regular basis through clinical supervision and more formal trainings, clinical staff have an obligation to ask questions and continuously educate themselves on documentation requirements and regulations regarding service delivery.
- Billing and clinical staff have an obligation to work together to make sure that services are authorized prior to being rendered. The authorization process provides initial confirmation of the medical necessity of the services being provided. Both staff have an obligation to understand the authorization process, to complete their part of the work timely, and to notify their supervisors if there is a problem.
- Frequency of services are determined by clinical judgment and documented in a current treatment plan. It is the responsibility of the clinical staff and their

supervisors to ensure that treatment plans are current, that they have formulated the plan with the individual receiving the services, and that the plan represents medically necessary services that are covered by the individual's insurance.

- Services are provided by clinical staff according to the treatment plan and the state and federal Medicaid and Medicare rules and OMH regulations. Clinical staff are responsible for making sure that all information conveyed to billing regarding services delivered is accurate.
- Although Medicaid currently will not pay for two services on the same day, there may be special circumstances in which multiple services are necessary to attend to or avert a crisis. BCMHD requires that decisions on multiple services be made with the best interests of the individual in mind, and not the billing rules.
- Medicaid, Medicare and other payers have credentialing standards that describe by service type the minimum credentials of the provider that they will reimburse. Clinical staff are required to understand and follow these requirements so that services can be appropriately billed to the individual's insurance. Any exceptions to this will require the approval of the Director of Clinical Services.
- The BCMHD has a sliding fee scale available for those who are not eligible for Medicaid, or other insurance. BCMHD is obliged by contract to collect the payments for services provided to these individuals. Billing and clinical staff are obliged to work together to make sure that the Financial Assessment is completed accurately, that any changes to financial status are conveyed to billing, and that clinical staff understand and support BCMHD's efforts to collect.
- BCMHD has an obligation to collect from third party payers before using any County or state funds to cover services. Clinical and billing staff are obligated to work together to make sure that information needed for billing is accurate, that questions by billing staff are answered timely, and that information needed to process denials, work pended claims, and identify and refunds and overpayments is delivered timely to the billing department.

**Boundaries:** All BCMHD staff are required to maintain clear and explicit boundaries with individuals who are currently or have received services from the Department. See Appendix for additional guidance in this area.

**Bribes, gifts and gratuities:** No person associated with the BCMHD shall accept bribes, gifts, or gratuities intended to persuade business decisions, solicit an unfair advantage, or reward special attention or service.

**Cash:** No person with access to cash accounts shall steal or otherwise misappropriate funds of the BCMHD. All internal control procedures shall be adhered to at all times.

**Client Bill of Rights:** All persons associated with the BCMHD shall adhere to the standards defined in the Client Bill of Rights.

**Competition (Antitrust):** The BCMHD shall not participate in any venture with other organizations that collaborate on information and/or services intended to eliminate fair competition or to engage in price fixing in direct violation of antitrust laws.

**Confidential Information:** The BCMHD maintains policies and procedures governing its responsibility to comply with the HIPAA Privacy and Security Rules. These include policy and procedures on Confidentiality and Releasing of Information, Access to Records, and Storage and Retention of Records. The BCMHD will only disclose protected health information to authorized persons or entities and according to applicable federal and NYS law. All employees, volunteers, and business associates within BCMHD shall respect the confidential nature of client information, and shall refrain from disclosing or discussing issues inappropriately. Information obtained through employment or association with BCMHD must not be used to benefit other employees or organizations.

**Conflict of Interest:** All employees shall disclose any potential conflict of interest and refrain from any activity that represents an unfair business advantage by virtue of their business interest or employment with BCMHD. Employees may hold a second job in addition to employment with the BCMHD, as long as it does not affect the employee's performance or represent a conflict of interest. See also the Broome County Code of Ethics, Private Employment. Questions should go to the Director of Clinical Services of the BCMHD.

**Contributions:** No person associated with the BCMHD shall use force, coercion or implied retaliation over another person to solicit contributions. No person or persons, employee or otherwise, may solicit any funds from a client or representative of the client.

**Financial Reports:** Expense reports, reimbursement request, financial statements and cost reports shall be completed thoroughly and accurately. No individual shall willfully or purposely misrepresent any financial reports or reimbursements.

**Financing:** The BCMHD shall maintain a familiarity with the terms, conditions and covenants contained in any financing agreements and shall refrain from engaging in any activity in direct conflict or breach of these terms, conditions or contracts.

**Medicare/Medicaid Anti-Kickback:** No individual associated with the BCMHD shall engage in any unlawful acts of accepting payments or benefits in return for generating Medicare/Medicaid business activity for the county or for referring clients to private interests outside of the county.

**Non-discrimination:** All persons associated with the BCMHD shall adhere to state and federal laws prohibiting discrimination based on age, race, gender, color, marital status,

disability, sexual preference or national origin while conducting business activity of the department.

**Quality of Care:** The goal of the BCMHD in serving adults and children is to provide high quality services that meet generally accepted standards of care in the industry, are compliant with regulation and law, maximize wellness and promote recovery. BCMHD will recognize and respect a patient's right to participate in decisions involving his or her health care. All staff of the BCMHD are obliged to contribute to the overall quality of the services delivered. All staff have an obligation to report any concerns or questions about the quality of care being delivered at the BCMHD to their supervisor, clinic management, or the Corporate Compliance Officer.

**Research Grants:** Grant research will only be conducted with the expressed and written approval of the client or the designated representative of the client.

**Responding to Audits:** All BCMHD staff will refer all external requests and inquiries from government and other oversight agencies to the Corporate Compliance Officer. Staff will cooperate with all government audits and investigations and provide accurate and timely information to internal and external audits and investigations in accordance with legal requirements. No documents will be destroyed which have been requested as part of an investigation or audit.

**Tax Exemption:** The BCMHD shall not engage in any prohibited activity that violates or could result in a challenge of its tax exemption status.

## **FAQ's and Ethical Considerations**

### **If I report something suspicious, will I get in trouble if I was wrong about what I reported?**

As long as your concern is honest, the Mental Health Clinic Corporate Compliance Plan (MHCC Plan) prohibits you from being reprimanded or disciplined. Part of your responsibility as an employee of the BCMHD is to report suspected problems or concerns you have. In fact, you may be subject to discipline if you witness something but do not report it. The only exception is if you intentionally report something that you know is false or misleading in order to harm someone else.

### **Who should I talk to first about a concern?**

Since many of the laws and regulations that apply to us are complex, it would not be unusual for you to have questions or concerns. We encourage you to discuss the situation with your supervisor first. However, you may go directly to the Corporate Compliance Officer or a member of the MHCC Committee with your concern. You may also report it confidentially or anonymously through the hotline or other reporting means listed in the Corporate Compliance Plan.

### **What should I do if my supervisor asks me to do something that I think is illegal or violates the Code of Conduct?**

No matter who asks you to do something, if you know it is wrong you must refuse to do it and immediately report the request to a level of management above your supervisor or to the Compliance Officer. If you are concerned that it is wrong but do not know for sure, you may consult with Corporate Compliance Officer or another manager within the clinic.

### **What type of patient information should be kept confidential?**

All forms of patient information must be kept confidential whether it is written, spoken, recorded electronically or printed. Staff should be aware of their surroundings when discussing patient information. Patient information should not be discussed in public areas if the information can be overheard. Caution should be used when conducting conversations in semi-private rooms, waiting rooms, corridors, elevators and stairwells, cafeterias or restaurants and/or on public transportation. Printed patient information should not be left out for public view and must be disposed of properly by placing in the confidential "Shred It" bins and never placed in the trash can.

### **How do I know if I have sufficiently documented the service that I have given a client?**

The purpose of maintaining medical records is to preserve information relevant to the mental health care of our clients. Notes in the medical record should be completed at the time of the service or event or as soon as possible. All notes should be signed, dated,

and timed. Notes should describe the services provided and events that occur during the provision of health care in factual, objective, clear and concise manner. Often, specific requirements are needed. An example is that a family psychotherapy service must be directed exclusively to the needs of the identified client. The documentation must support this. These requirements are available in regulation, policies and procedures which are based upon generally accepted practice standards. Medical records are also a source document for client billing, thus detailed documentation is vital. If you have further questions regarding the documentation of services, contact your supervisor.

**There are so many changes in regulations and laws. How can I be sure that I know about the changes and am in compliance?**

While the number of changes in regulation seems overwhelming at times, we have a responsibility to understand and obey them. It is every supervisor's responsibility to assure that all of their supervisees know, understand and follow relevant laws and regulations. It is every employee's responsibility to attend any meetings and read any materials provided about complying with laws and to comply with them. If you have any questions concerning a law or regulation or whether it applies to you, you should talk with your supervisor and/or contact the Corporate Compliance Officer.

**May the department accept gifts such as a luncheon sent by a pharmaceutical rep or cookies given to us by a client?**

Gifts to an entire department may be accepted if they are consumable or perishable such as the lunch or the cookies. However, gifts to individuals should not be accepted without consulting first with your supervisor.

**There is a clinician in our department who sometimes requests clinical records when he is not involved in the client's treatment. Is he allowed to do this?**

No. Only the attending, covering or consulting clinician(s) may have access to a client's record. Clients are entitled to expect confidentiality of their protected health information.

**There is an employee in my department who reported to work this morning exhibiting unusual behavior; the employee was staggering, had slurred speech and there the smell of alcohol on his breath. What should I do?**

You should report the employee to your supervisor immediately. This is a quality of care and safety issue that must be dealt with immediately.

**I volunteer for the Animal Shelter. May I copy a fundraising leaflet using the office copier?**

Although the BCMHD encourages employees and affiliates to participate in volunteer activities, BCMHD equipment should not be used for non-business purposes.