



# Corporate Compliance and Standards of Conduct

March 2024

## Approval Signatures:

*Signature on File*

*3/26/24*

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Gulf Bend Center Board of Trustees Chair

\_\_\_\_\_  
Date

*Signature on File*

*3/26/24*

\_\_\_\_\_  
Executive Director

\_\_\_\_\_  
Date

# Gulf Bend Center

## The Compliance Program

**Mission Statement:** To improve the quality of life in our community for individuals and their families by providing excellent and trusted care for wellness.

**Our Vision statement:** To be recognized as the best resource of quality services in our community.

Gulf Bend Center is committed to compliance with all applicable laws, rules, and regulations at all levels of the organization. Gulf Bend Center's Board of Trustees has adopted a formal Compliance Program to ensure that we conduct our business with integrity and in accordance with applicable laws and our policies and procedures, as well as to provide a safe environment for raising concerns and questions. The Center's Compliance Program outlines what we do as an organization to comply with legal and ethical requirements and is based on the elements of an effective compliance program identified by the U.S. Sentencing Commission and the U.S. Department of Health and Human Services Commission. As such, Gulf Bend's compliance program includes:

- Setting integrity standards by developing and publishing written policies, procedures, and our Standards of Conduct;
- Communicating these standards and procedures through awareness, education, and training programs;
- Providing a process for reporting potential violations of laws, policies, procedures, or our Standards of Conduct;
- Conducting ongoing auditing and monitoring activities;
- Identifying, investigating, and responding to potential compliance problems;
- Performing routine sanctions (background) checking to ensure we are not conducting our business/services with individuals and entities ineligible to participate in federal healthcare programs;
- Taking corrective action to address identified compliance problems;
- Enforcing integrity standards and disciplining non-compliant actions in accordance with the Center's Corrective Action Procedures;
- Maintaining an organizational structure that supports the furtherance of the Compliance Program, including the appointment of a Compliance Officer and the establishment of a Compliance Committee (Integrity, Quality and Compliance Committee – IQC) to advise and assist the Corporate Compliance Officer.

Gulf Bend Center's Policies and Procedures provide additional guidance to help us perform our jobs. The Center's Policies and Procedures are located on the Center's network. If you need assistance finding a specific policy and procedure, contact your supervisor/manager or the Compliance/QM Department.

## ETHICAL DECISION MAKING “DOING THE RIGHT THING”

Integrity and sound judgement are your best guides in determining if your personal actions meet the expected standards for ethical and lawful behavior. If you find yourself in a situation where you are unsure, ask yourself these questions:

- Is my action consistent with Gulf Bend Center practices, policies, and procedures and legal or regulatory requirements?
- Could my action give the appearance (to others) of impropriety or wrongdoing?
- Will the action bring discredit to any staff, or to Gulf Bend Center, if disclosed fully to the public?
- Can I defend my action to my supervisor, other staff and to the general public?
- Does my action meet my personal code of behavior?



# **Policies, Standards and Guidelines**

Gulf Bend Center (GBC) has developed and implemented policies and procedures for all employees and contractors to use as guidelines for ethical standards for decision making that comply with all applicable federal, state, and local laws and regulations. These standards and policies are reviewed and updated as needed for compliance. GBC staff will endeavor to protect the health, safety, rights, and welfare of those who seek our services as well as the community at large.

Management and supervisory staff are responsible for communicating the requirements of the Corporate Compliance Program and these Standards of Conduct to those who report to them by emphasizing its importance, taking appropriate measures to detect and correct any violations and prevent recurrence, and imposing consistent and appropriate corrective action, if warranted. They shall inform their staff of any issues relevant to their respective department and of the various options for reporting a compliance concern. Leadership personnel are expected to create and maintain an open environment where staff are encouraged and comfortable raising compliance concerns or asking questions without fear of retaliation or intimidation. Adherence to these Standards of Conduct and support of Gulf Bend Center's Compliance Program are components of the staff evaluation process for all employees and management staff.

## **Billing and Coding**

Gulf Bend Center is dedicated to fair and accurate billing that is in accordance with all Federal and State laws, regulations, policies, and procedures. GBC is committed to timely billing for services that are medically necessary, provided and documented in the customer's medical record. We assign diagnostic, procedural and billing/service codes that accurately reflect the services that were provided and return any overpayments to governmental health care programs in a timely manner. Gulf Bend Center prohibits staff from knowingly presenting or causing to be presented claims for payments that are false, fictitious, or fraudulent.

## **Information, Privacy, and Confidentiality**

Gulf Bend Center is committed to maintaining the confidentiality of all protected health and proprietary information according to existing laws and standards and internal Policies and Procedures. We are required to understand and comply with the Health Insurance Portability and Accountability Act (HIPAA) and all other Federal and State laws applicable to the privacy and confidentiality of protected health information (PHI). PHI refers to any information, whether oral or recorded in any form, which is created or received by Gulf Bend Center and relates to the past, present, or future health condition or payment for services of an individual we serve.

GBC protects confidential information in accordance with a signed authorization form signed by the customer or Legal Authorized representative. We access PHI only to complete assigned responsibilities within the Center and use minimum necessary information for routine uses and disclosures of PHI. Gulf Bend Center staff will ensure that PHI is not discussed in any public area and will not access information on co-workers, friends, or family members when it is not part of their assigned responsibilities. GBC will store, transport, and dispose of PHI in ways that protect the confidentiality of the information. We will immediately report any intentional or unintentional disclosures of protected health information and violations of privacy/confidentiality procedures.

## **Political Activities/Contributions**

Gulf Bend Center is committed to limiting political participation as required by law. GBC will not use funds to contribute to political campaigns or for gifts or payments to any political party or any of their affiliated organizations. Organization resources include financial and non-financial donations such as using work time and telephones to solicit for a political cause or candidate, or loaning Gulf Bend Center property for use in a political campaign. GBC will not use our position to further the political activity of any person or group.

## **Marketing**

Gulf Bend Center is committed to conducting marketing activities with truth, accuracy, and fairness, recognizing our responsibilities to our customers and the community. Gulf Bend Center markets only healthcare services which are available and within the scope of its licensure and accreditation as appropriate. All marketing information will be clear, correct, and non-deceptive.

## **Compliance Officer**

The Gulf Bend Center Board has authorized the Executive Director to designate a Compliance Officer who shall be responsible for communicating, coordinating, and monitoring the Center's compliance program. The Compliance Officer duties and responsibilities include the following:

- Develop, implement, and maintain the Center's formal, written Corporate Compliance Plan;
- Participate in employee new hire orientation and on-going training programs on compliance;
- Provide employees and others various methods of communication to report any compliance concerns through email, in person, or in writing.
- Ensure processes for compliance consolidate with and support Gulf Bend Center's Quality Management program and self-assessment activities;
- Develop, review, and maintain all compliance policies, procedures, standards of conduct and other compliance documents;
- Perform appropriate investigations, provide timely verbal and written feedback of investigation findings, and monitor progress toward corrective action plan requirements;
- Conduct investigations to resolve compliance issues and maintain all records and documentation of investigations.
- Identify areas that represent a high risk with respect to compliance issues, perform appropriate reviews, and recommend and or take appropriate action.

## **Compliance Committee – Integrity, Quality, and Compliance (IQC)**

The Gulf Bend Center Integrity, Quality, and Compliance (IQC) Committee includes a diverse group of Program Directors, management staff, and Executive staff that advise and assist the Corporate Compliance Officer to maintain an organizational structure that supports the Compliance Program. The Compliance Officer will serve as the chairperson of this committee. The committee's responsibilities include:

- Provide input regarding development of compliance standards and policies and procedures to promote compliance.
- Review compliance reports and make continuous improvement recommendations.
- Monitor the assessment of data for trends and patterns that affect the outcomes for services provided by GBC.
- Make appropriate recommendations for performance review activities, project management initiatives, and the compliance program.
- Monitor findings of internal and external reviews for identifying risk areas or deficiencies requiring preventative and corrective action.
- Maintain a system to report and evaluate complaints and issues for a response.
- Meet quarterly to review compliance.

# Education and Training

Compliance education and training programs shall be provided to employees and contractors associated with GBC, as appropriate to ensure material compliance with the Compliance Plan and applicable laws and regulations.

All employees who are providers of professional healthcare services are properly licensed and trained prior to delivering customer care. GBC verifies the credentials and qualifications of all individuals applying for employment and contract work and hires only qualified individuals with appropriate expertise, licensure, and experience. Targeted training will be provided to directors, managers, and other employees whose actions affect the accuracy of claims submitted for payment. All training materials will consider the skills, knowledge, and experience of the individual trainees.

It is the policy of GBC that failure to comply with training requirements could result in disciplinary action. All training records of employees regarding corporate compliance will be documented and maintained.

## Initial Training

The Corporate Compliance Officer and the Director of Human Resources are responsible for ensuring that all new staff are given Corporate Compliance initial training at the “New Employee Orientation” (NEO) training done monthly.

- The Compliance Plan and Standards of Conduct are reviewed and discussed to ensure understanding and expectations of all staff for compliance and reporting.
- Staff are required to acknowledge through our Relias or Datis platforms that they received the training and understood and agree to abide by the Compliance Plan and Standards of Conduct.

## Continuing Compliance Training

The Corporate Compliance training is done through our training modules in Relias, a platform that assigns and tracks training completion by role or by department. All training follows regulatory compliance for federal and state mandates. The training plans for staff are developed in coordination with the Program Director, Manager, Corporate Compliance Officer, Director of Human Resources, and the Staff Educator.

- New trainings can be added at any time to ensure compliance with any new program or regulation requirements.
- Directors and Management staff can utilize Relias Training as a resource to reinforce compliance and additional training as needed.
- Training can include in-person, webinars, bulletins, computer based, and other written materials.
- Training will be documented within the Datis, Relias, hard copy, or electronic format.

# Communication and Reporting

We all have a responsibility to report violations or suspected violations to any laws, acts, statutes, policies, and procedure to a manager, supervisor, Compliance Officer, or Human Resources Department. Managers and supervisors are further required to report allegations reported to them and to report any known or suspected violations to any laws, acts, statutes, or regulations that they discover in the performance of their supervisory duties. Reports can be made to the Corporate Compliance Officer or to another member of the Quality Management (Compliance) Department or Human Resources Department. Reports can be made face to face, in writing, by telephone (Hotline or other posted numbers) or can be made via the Compliance email address.

All Gulf Bend Center workforce have the obligation to report to their supervisors and/or the QM/Corporate Compliance Department any violations of federal/state laws, the Standards of Conduct, Policies and Procedures or any unethical practices of other Gulf Bend Center workforce. If a Gulf Bend Center workforce member has concerns about the improper actions of other Center workforce, they should contact either his or her supervisor, the QM/Compliance Department or Human Resources. Reports will be treated confidentially.

If you see it, hear it, or suspect it, **REPORT IT!** It is everyone's responsibility to report violations.

## **You may contact the QM/Compliance Department as follows:**

Compliance Hotline: 361-582-2303 or extension 303

QM Director - Compliance Officer - 361-582-2317

QM Specialist - Corporate Compliance - 361-582-2349

## **In writing or**

**Face to Face:** Gulf Bend Center  
Attention: QM/Compliance Department  
6502 Nursery Drive, Suite 100  
Victoria, Texas 77904

**E-MAIL:** [compliance@gulfbend.org](mailto:compliance@gulfbend.org)

Reporting may also be made to the Health and Human Services Office or Inspector General at 1-800-447-8477.

## **You may contact the Human Resources Department as follows:**

Director of Human Resources – 361-582-2368

You should never fear retaliation or retribution for making a report. Anyone who ever feels retaliated against for making a report should contact the Corporate Compliance Officer or Director of Human Resources immediately. Retaliatory behavior will not be tolerated at any level of the organization.

All reports are investigated and are confidential in accordance with the Center's Corporate Compliance Plan. Anonymous reports are accepted. Anonymity cannot be guaranteed.



# Monitoring, Reviewing, and Investigating

Gulf Bend Center is committed to ethical standards of business and professional ethics and integrity. Gulf Bend Center will provide customer care and conduct business while following all applicable laws and regulations, including Stark Laws, Anti-Kickback Statute, HIPAA, and the False Claims Act (See below for list of Laws/statutes and explanation of each) in preventing, detecting, reporting, and correcting incidents of fraud, waste, and abuse in government health care programs. The Corporate Compliance plan includes internal monitoring and reviewing of its policies and procedures. The Compliance Officer, Quality Management department, and Program Directors and management staff are all committed to continuous monitoring of regulatory compliance and focusing on areas where the greatest risk of noncompliance may exist.

All Boards members, employees, and contractors will promptly report to Center management any possible violation of these standards of conduct or any regulation, law or Center policy and procedure. Any deficiency, violation or error reported will be addressed by the appropriate person who can assess the problem, take appropriate action, and follow the problem to resolution. Knowledge of safety or quality of care concerns is expected to be immediately reported internally to an immediate supervisor/manager/director.

All reported compliance issues or concerns will be acted upon in a fair and truthful manner. Any retaliation or other negative action against any person who in good faith reports a suspected violation will not be tolerated.

GBC will cooperate with and properly respond to all governmental inquiries and investigations. Any employee approached by any federal or state law enforcement or regulatory agency (e.g., Medicare, Medicaid) official seeking information about any aspect of the Center shall immediately notify their supervisor who in turn must notify the Executive Director's office.

## Major Healthcare Laws and Regulations

GBC will not hire or contract with any individual or entity who is excluded, suspended, debarred or otherwise ineligible to participate in the federal health care programs (Medicare, Medicaid) or has been convicted of a criminal offense related to the provision of health care items or services and has not been reinstated in the federal healthcare program after a period of exclusion, suspension debarment or ineligibility. All employees and contractors must adhere to all Federal and State Abuse laws, as they apply to GBC including but not limited to the following statutes:

### **Federal False Claims Act (FCA)**

The Federal False Claims Act is a federal law designed to prevent and detect fraud, waste, and abuse in federal healthcare programs, including Medicaid and Medicare. The False Claim Act makes it a crime for any person or organization to knowingly make a false record or file a false claim regarding any federal health care program, which includes any plan or program that provides health benefits, whether directly, through insurance or otherwise, which is funded directly, in whole or in part, by the United States Government or any state healthcare system. In addition to the federal law, Texas has adopted similar laws under the Texas False Claims Act. Examples of false claims include submitting

claims for services never performed or items never furnished. Billing for unnecessary services. Upcoding. Double billing for services or items. Submitting a claim for provider services which fall below the quality-of-care standards. Making false statements to obtain payment for services. Falsifying records. Using false records or statements to avoid paying the Government. Falsifying time records used to bill Medicaid. Otherwise causing a false claim to be submitted.

*Reference: TEXAS MEDICAID FRAUD PREVENTION ACT (FPL)*

### **Whistleblower Protection Under the False Claims Act**

In order to encourage individuals to come forward and report misconduct involving false claims, the False Claims Act contains a “Qui Tam” or whistleblower provision.

The Government, or an individual citizen acting on behalf of the Government, can bring action under the False Claims Act. An individual citizen, referred to as a whistleblower or “Realtor,” who has actual knowledge of allegedly false claims may file a lawsuit on behalf of the U. S. Government. If the lawsuit is successful, and provided certain legal requirements are met, the whistleblower may receive an award ranging from 15% to 30% of the amount received.

### **Stark Law**

The Stark Law is a set of United States federal laws that prohibit physician self-referral, specifically a referral by a physician of a Medicare or Medicaid patient to an entity providing designated health services (“DHS”) if the physician (or an immediate family member) has a financial relationship with that entity.

Physician self-referral is the practice of a physician referring a patient to a medical facility in which the physician has a financial interest, be it ownership, investment, or a structured compensation arrangement. Critics argue that this practice is an inherent conflict of interest, because the physician benefits from the physician's own referral. They suggest that such arrangements may encourage overutilization of services, in turn driving up health care costs. In addition, they believe that it would create a captive referral system, which limits competition by other providers.

### **Anti-Kickback Statute**

The Anti-Kickback Statute is a federal law that provides criminal penalties for individuals or entities that knowingly and willfully offer, pay, solicit, or receive remuneration in order to induce or reward the referral of business reimbursable under any federal health care program. The types of remuneration prohibited, without limitation, include kickbacks, bribes, and rebates, whether made directly or indirectly, overtly, or covertly, in cash or in kind. Prohibited conduct includes not only the payment of remuneration intended to induce or reward the purchasing, leasing, or ordering of, any good, facility, service, or item reimbursable by any federal health care program. The Anti-Kickback Statute is violated even if inducing or rewarding the referral of business is only one of several reasons for remuneration. That is, the referral of business does not need to be the sole reason for the remuneration to violate the Anti-Kickback Statute.

*Reference: Texas Statutes – Texas Illegal Remuneration Statute  
(Occupations Code, Title 3 Health Professions Generally Chapter 102 Solicitation of Patients, A)*

## **Exclusion Statute**

Office of Inspector General (OIG) is legally required to exclude from participation in all Federal health care programs individuals and entities convicted of the following types of criminal offenses: (1) Medicare or Medicaid fraud and any offenses related to the delivery of items or services under Medicare or Medicaid. (2) patient abuse or neglect; (3) felony convictions for other health-care related fraud, theft, or other financial misconduct; and (4) felony convictions for unlawful manufacture, distribution, prescription, or dispensing of controlled substances. OIG has discretion to exclude individuals and entities on several other grounds for misdemeanor convictions.

## **Civil Monetary Penalties Law**

The Office of Inspector General may seek civil monetary penalties and sometimes exclusion for a wide variety of conduct and is authorized to seek different amounts of penalties and assessments based on the type of violation at issue. Penalties range from \$10,000 to \$50,000 per violation.

## **Health Insurance Portability and Accountability Act (HIPAA)**

The Federal Health Insurance Portability and Accountability Act (HIPAA), also known as the Privacy Rule, creates protections for personal health information held by covered entities and gives patients a number of rights with respect to that information. We also comply with all Texas laws related to patient privacy and confidentiality. In following these privacy laws and regulations, we do not use, disclose, or discuss patient-specific information with others unless it is necessary to serve the patient or is required by law. Workforce members may never use or disclose confidential information that violates the privacy rights of patients.

# **STANDARDS OF CONDUCT**

The purpose of these Standards of Conduct is to provide guidelines relating to the Center's belief in how we should ethically, legally, and professionally conduct our behavior in all of our dealings inside and outside the organization. The Standards of Conduct are not intended to fully describe all of the laws that apply to the workforce or to detail the Center's policies and procedures. These standards were established so that all Gulf Bend Center workforce members will know and understand expectations of behavior.

The standards outlined in this document govern our professional and business relationships with those that we serve. They include, but are not limited to, customers, their families, friends and loved ones, members of our communities, physicians and other providers, third-party payers, government regulators, vendors, contractors, consultants, co-workers, and colleagues.

We are all expected to conduct business in accordance with GBC's Values and with these Standards of Conduct. We must all exercise sound judgment and make decisions based on the best interests of GBC and of those that we serve. We must not allow ourselves to compromise our compliance with these Standards of Conduct in any way regardless of our position. Board members, employees, students, volunteers, and contractors of GBC are all accountable for complying with these Standards of Conduct. We are responsible for what we do as well as for what we fail to do.

As a member of GBC's workforce, you will be required to participate in education and training related to GBC's compliance program and these Standards of Conduct. Failure to participate in and complete the requisite compliance training will result in disciplinary action.

## **Conflicts of Interest**

Gulf Bend Center is committed to acting in good faith in all aspects of work. All workforce members are expected to exhibit professional loyalty to Gulf Bend Center and to avoid situations in which personal interests, activities or relationships create or appear to create a conflict of interest. A conflict of interest may exist whenever an employee or a related party (such as a family member, friend, or business associate) receives a personal benefit from any decision or action taken by the employee on behalf of Gulf Bend Center. The Center's workforce is expected to use good judgement, adhere to high ethical standards, and avoid situations that create an actual or perceived conflict between their personal interests and those of the organization.

Additionally, we will report actual or perceived conflicts of interest to a supervisor, Compliance Officer, or Human Resources Director. GBC Board members, employees, or contractors are not to use their position for personal gain. Examples of conflicts of interest but not limited to are acceptance of outside employment that may conflict with the interest of GBC, provide, solicit, or receive kickbacks, bribes, rebates, gifts, entertainment, or anything else of value to influence the referral of customers or services.

We will not offer, accept, or provide gifts or services from those doing business or seeking to do business with GBC that violates our policies and procedures. Acceptable items may include unsolicited advertising/promotional materials such as a pen, cup/mug, calendar, etc. If you have questions about accepting gifts, check with your supervisor and the Corporate Compliance Officer/Department.

## **Workplace Environment**

Gulf Bend Center is committed to creating a workplace where employees are treated with respect, fairness, and dignity regardless of position or status. GBC maintains a workplace that protects the health and safety of our customers and employees. Our work environment will be free from harassment, discrimination, and intimidation. We do not tolerate verbal or physical harassment (including sexual harassment). GBC is determined to maintain open lines of communication so that the views of everyone may be considered and opinions given proper respect. We ensure that our workforce is hired, trained, promoted, and compensated based on individual competence and potential for advancement without regard for race, ethnicity, religion, sex, national origin, age, or disability, as well as any other classifications as required by law. Our work environment will be free of the manufacturing, sale, possession, distribution or use of illegal drugs, alcohol, or tobacco.

## **Customer Relationships**

Gulf Bend Center is committed to respecting integrity and promoting the welfare of the customer, whether served individually or in a group setting. Staff will not enter into a relationship with customers or their families outside the scope of professional practice and services, which includes any social media or electronic devices. GBC staff will respect personal boundaries and not engage in any intimate touch or sexual relationship with a customer. Staff must not bring personal issues of themselves or co-workers into the professional relationship with a customer. GBC staff will be aware of the intimacy of

the therapeutic relationship, maintain respect for the customer and avoid engaging in activities that seek to meet our personal needs at the expense of the customer. We will immediately report any allegations of intimate or sexual contact between a customer and a staff member in accordance with the Center procedures and state laws.

### **Documentation and Record Keeping**

Gulf Bend Center produces a large number of records and documents each and every day. All documentation should be accurate and factual. Examples include medical records, financial records, and electronic mail. GBC will always strive to preserve customer security, confidentiality and respect the customer's right to privacy. Staff are not allowed to sign someone else's name on any document or to document as someone else. All medical records and other proprietary records will be retained per the compliance of applicable laws and regulations.

### **Quality of Care/Services**

Gulf Bend Center is committed to providing quality care and services to the individuals served and their families. Gulf Bend Center recognizes its ethical and moral obligation to the customers and communities we serve. We will respect the human dignity and rights of each individual we serve by responding to all customer questions, concerns and needs in a timely and sensitive manner. GBC respects the rights of customers to be involved in all aspects of their care and obtain informed consent for treatment. We will ensure all admitted customers are provided with a verbal and written explanation of their "Rights" as customers of Gulf Bend Center. We will encourage each employee to continually evaluate existing methods of delivering services and report any suggestion to their immediate supervisor or quality management department.

### **Use of Center Assets and Resources**

Gulf Bend Center is committed to protecting property and information against loss, theft, destruction, and misuse. Gulf Bend Center resources and property will not be used (including supplies, equipment, vehicles, gas cards, debit cards, facilities, or personnel) in conducting any non-business activities or for personal use. GBC equipment, social media or other technology will not be used to communicate privileged and confidential information to unauthorized recipients or to send offensive, discriminatory, or harassing messages. The creation of unauthorized copies of computer software licensed to Gulf Bend Center or use personal software on Gulf Bend Center computer equipment is prohibited.