

MD Anderson's Standards of Conduct

Do the Right Thing



THE UNIVERSITY OF TEXAS
MD Anderson
~~Cancer~~ Center
Making Cancer History®



Max Weber, J.D., M.B.A.

Do the Right Thing.

It's a short phrase with a long history at MD Anderson.

Our mission is personal, complex, and dynamic. Patients and families seek us every day to help them on their cancer journeys. And layers of laws and regulations guide every step we take.

To help you navigate this ever-shifting path while putting our patients first, my team and I created this handbook.

Health care, especially for academic research institutions like ours, is a constantly moving, highly regulated industry at all levels. From our front desk specialists to our senior faculty leaders, we must be mindful of the rights of our patients, our colleagues, and our community.

And as employees of the State of Texas, even more is expected of us. We're required to be good stewards of state resources. We're called on to make sound, ethical decisions. We're asked to be on the lookout for those who wish to take our hard-earned knowledge for their personal gain. We're warned that the technologies designed to help us can hurt us if not properly protected.

In the midst of these difficult demands, we're driven to pursue our goals to Make Cancer History™ and stand by our core values of Caring, Integrity, and Discovery.

It's because of these demands that my team and I are here. Each of you is an expert in your field, pursuing your work to the best of your abilities. My focus is to give you an Institutional Compliance Program that partners with you and supports your efforts.

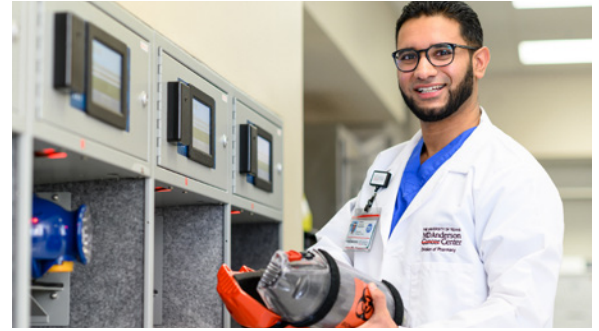
I'm inspired by your work to serve you in ways relevant to what you're trying to achieve. I'm humbled by your dedication to our patients to give you tools that best suit your needs. And I'm motivated to help you address the challenges you face while growing our knowledge and expertise.

I'd like you to think of this handbook as your trail guide to health care compliance in an evolving environment. But when you find you're off the trail, please speak up. We're here to help set your feet back on the path -- with compassion, understanding, and encouragement.

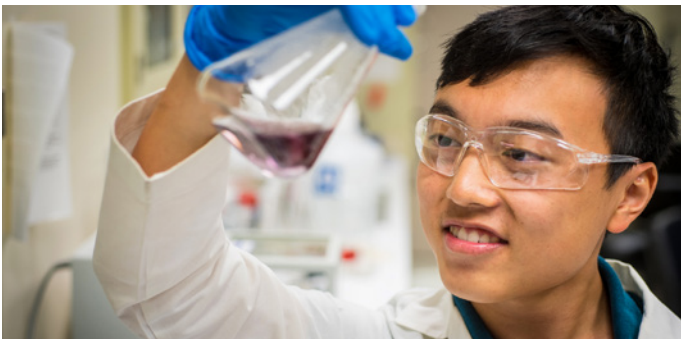
Together, we can Do the Right Thing every day.

All the best,
Max

Max Weber, J.D., M.B.A.
Vice President & Chief Compliance and Ethics Officer
Co-Chair, Executive Institutional Compliance Committee



Building a
Culture of Compliance
begins with you.



Mission

The mission of The University of Texas MD Anderson Cancer Center is to eliminate cancer in Texas, the nation and the world through outstanding programs that integrate patient care, research and prevention, and through education for undergraduate and graduate students, trainees, professionals, employees and the public.

Vision

We shall be the premier cancer center in the world, based on the excellence of our people, our research-driven patient care and our science.

Core Values

Caring

By our words and actions we demonstrate caring toward everyone.

- We are sensitive to the concerns of our patients, their loved ones and our colleagues.
- We are respectful and courteous to each other and practice humility.
- We promote and reward teamwork and inclusion.

Integrity

We work together with professionalism to merit the trust of our colleagues and those we serve in all that we do.

- We hold ourselves, and each other, accountable for our work – decisions and data – and for practicing our values and ethics.
- We advocate for our workforce, for those we serve and for our community.
- We communicate frequently, honestly, openly and responsibly.

Discovery

We embrace creativity and seek new knowledge.

- We encourage continuous learning, seeking out information and new ideas.
- We team with each other to identify and resolve problems.
- We seek personal growth and enable others to do so.

Safety

We provide a safe environment – physically and psychologically – for our patients, for our colleagues and for our community.

- We create a sense of security and empowerment and are committed to keeping one another free from harm.
- We embrace a framework and best practices for the highest quality of care and service.
- We inspire trust by modeling excellence in our work and acceptance of each person's contributions.

Stewardship

We protect and preserve our institutional reputation and the precious resources – people, time, financial and environmental – entrusted to us.

- We prioritize the health and well-being of each other.
- We act responsibly to safeguard the institution's finances.
- We ensure the proper care and use of time, data, materials, equipment and property afforded to us.

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Institutional Code of Conduct

MD Anderson is committed to full compliance with all applicable laws, rules and guidelines. To such end, we are all required to conduct ourselves in accordance with the ten principles of our Institutional Code of Conduct.

Know and follow the rules

Know and follow the letter and the spirit of applicable laws, rules and guidelines, as well as UT System and MD Anderson rules, policies, procedures and compliance plans.

Think and act ethically

Follow our ethical standards and those of your professional organizations. Before you say or do something, ask yourself: How would this look to our patients and our community? Would this harm our reputation?

Keep it confidential

Handle all MD Anderson information, especially patient information, in ways that meet applicable laws, rules, guidelines and document retention schedules. Treat our information the same way you treat yours.

Commit to research integrity

Perform all research efforts in ways consistent with applicable legal, ethical and professional requirements, as well as MD Anderson rules, policies and procedures.

Avoid gifts

In general, you can't accept or give gifts, favors, benefits, services or items of value — especially in return for preferential treatment or patient referrals.

Bill accurately

When you document and bill for the care you've provided, be accurate, be thorough, be honest — and be timely.

Focus on Making Cancer History®

Don't use any MD Anderson resources, including your time and your colleagues' time, in a wasteful manner, for personal benefit, to harm someone, for political activity or for illegal activity.

Be true to our mission: Avoid outside influences

Don't engage in activities or enter into contracts that could or could seem to interfere with your MD Anderson work, make you disclose confidential MD Anderson information or affect your independent judgment.

Be a good colleague

Act with honesty and good faith in all matters. Don't engage in discriminatory, harassing, retaliatory, inappropriate, intimidating or disruptive behaviors.

When in doubt, point it out

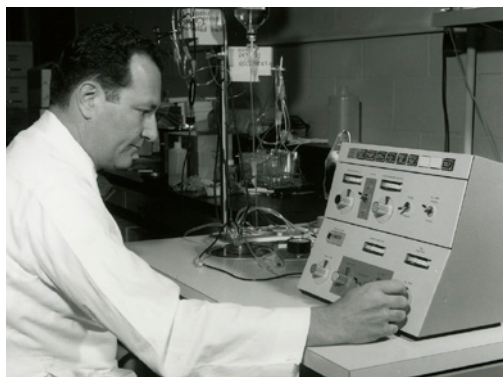
If you think or discover that someone isn't following our Code of Conduct, promptly notify the chief compliance and ethics officer or Institutional Compliance. And always cooperate fully with all inquiries and investigations related to reported issues.

Violations of our Institutional Code of Conduct, including failure to report a breach of the Institutional Code of Conduct, may be grounds for corrective action up to and including termination of employment. For information on how to report a violation of our Institutional Code of Conduct, see the Your Rights and Responsibilities section.

Other Standards and Codes of Conduct

In addition to our Institutional Code of Conduct, other Institutional Policies, standards or codes may apply to you and your activities.

- [MD Anderson's Institutional Code of Ethics](#)
- [MD Anderson's Faculty Standards of Conduct Policy \(#ACA0043\)](#)
- [MD Anderson's Principles for Scientific Research Policy \(#RES3535\)](#)
- [The Board of Regents for The University of Texas System, Regents' Rules and Regulations – Rule 30103: Standards of Conduct](#)
- [The University of Texas System Policies and Standards – UTS134: Code of Ethics for Financial Officers and Employees](#)
- [Texas Standards of Conduct and Conflict of Interest Provisions \(Texas Government Code § 572.051\)](#)



For information regarding additional standards or codes of conduct, see "Professional Standards" in the Resources section.

Institutional Compliance Program

Our mission

MD Anderson's Institutional Compliance Program supports MD Anderson's mission, vision and core values, and helps the institution fulfill its responsibilities to the people of Texas in an environment based upon ethical behavior and compliance with applicable laws, rules and guidelines.

To that end, the program team will:

- Provide you with the most accurate, concise, and up-to-date information and advice to ensure you're aware of your responsibilities with respect to sustaining such an environment;
- Foster an environment of open communication by offering you multiple opportunities to engage with the program team and educating you about your obligations to report compliance concerns;
- Protect you from retaliation if you, in good faith, report suspected wrongdoing, participate in/with an institutional investigation pertaining to alleged wrongdoing, or assist appropriate authorities in investigating possible wrongdoing; and
- Continually assess the effectiveness and quality of our program to ensure all MD Anderson business is conducted with integrity and in compliance with the law.

Our team

The program team comprises professionals in the health care compliance space who work together to address general compliance issues as well as issues related to research compliance, billing and reimbursement compliance, privacy compliance, data governance compliance, ethics and conflicts of interest, and corporate compliance. In addition, the team responds to reported compliance concerns and those identified through ongoing monitoring and auditing activities.

Our program: The seven elements

Consistent with its commitment to excellence, MD Anderson facilitates a comprehensive compliance program that continually monitors high-risk areas and ever-changing federal and state statutes, regulations and health care program requirements.

The program was developed in response to federal guidance and The University of Texas System (UT System) standards to promote and ensure compliance with state and federal requirements. It facilitates all [seven elements of an effective compliance program as identified by the U.S. Sentencing Commission and the U.S. Department of Health and Human Services Office of Inspector General](#), specifically:

Integrity

- Written policies and procedures;
- Compliance leadership and oversight;
- Training and education;
- Effective lines of communication with the compliance officer and disclosure program;
- Enforcing standards: consequences and incentives;
- Risk assessment, auditing, and monitoring; and
- Responding to detected offenses and developing corrective action initiatives.

Effecting the seven elements

The program consists of the Chief Compliance and Ethics Officer, the Deputy Chief Compliance Officer, the Executive Institutional Compliance Committee and other compliance committees, the Institutional Compliance team and MD Anderson's compliance plans.

The program provides a Compliance Hotline (800-789-4448) facilitated by a third-party vendor. Anyone may use the Compliance Hotline to report

compliance concerns confidentially and, if desired, anonymously.

To maintain MD Anderson's culture of compliance and achieve its mission, the team conducts regularly scheduled and specifically requested trainings on state and federal legal and regulatory matters, as well as institutional policies, for all workforce members.

The team also manages MD Anderson's [Handbook of Operating Procedures](#), which comprises all of MD Anderson's institutional policies and their attachments.

To learn more about MD Anderson's compliance plans and the Institutional Compliance Program, visit:

- The Institutional Compliance website at www.mdanderson.org/hop
- MD Anderson's Handbook of Operating Procedures at inside.mdanderson.org/institutionalpolices
- The Institutional Compliance site at inside.mdanderson.org/compliance



Training and Education

Conducting appropriate training and education is an essential element of an effective compliance program.

The Institutional Compliance team provides all workforce members with general and specialized educational courses on institutional compliance; applicable laws, regulations, rules and guidelines; and institutional policies.

Mandatory compliance education and training

New Employee Orientation Program (NEOP) provides education and institutional orientation to newly hired classified employees and administrative staff. Among other things, NEOP covers MD Anderson's history, mission, vision and core values; select institutional policies and procedures; safety issues; and quality and service expectations.

Faculty Compliance Orientation (NFCO) provides education to new, returning and promoted faculty members on institutional compliance; applicable laws, regulations, rules and guidelines; and institutional policies.

The Employee Education Event (EEE) is an annual mandatory, self-administered, computer-based training course that covers issues of critical importance to the achievement of MD Anderson's goals as they relate to patient care, treatment, service, accreditation, campus safety, data security and regulatory requirements.

Our Leadership Outreach program

provides new leaders, including department chairs, division heads and executives, with critical information on key compliance issues and reference materials regarding selected elements of the Institutional Compliance Program.

Our Billing Compliance Documentation Guidelines course

provides training to billing professionals, residents and fellows regarding general evaluation and management documentation guidelines, as well as documentation guidelines by specialty area (e.g., Radiology, Pathology, Surgery).

Our Effort Reporting course provides principal investigators (PIs) and effort coordinators information regarding compliance; applicable laws, regulations, rules and guidelines; and institutional policies on effort reporting requirements.

Other compliance training

Several specialized compliance courses are available in all areas of compliance.

You may view the full list of compliance courses on the [Institutional Compliance storefront](#) under Resources & Support > Education & Outreach.

To learn more, contact Institutional Compliance:

- 713-745-6636 (5-6636)
- Institutional_Compliance@mdanderson.org

Code of Conduct check: Know and follow the rules

Know and follow the letter and the spirit of applicable laws, rules and guidelines, as well as UT System and MD Anderson rules, policies, procedures and compliance plans.

Code of Conduct check: Think and act ethically

Follow our ethical standards and those of your professional organizations. Before you say or do something, ask yourself: How would this look to our patients and our community? Would this harm our reputation?

Contact Information

Location

7007 Bertner Ave.
Suite 1MC17.3226
Houston, TX 77030

Mailing Address

Unit 1640
The University of Texas
MD Anderson Cancer Center
P.O. Box 301407
Houston, TX 77230-1407

Numbers

Phone: 713-745-6636
Fax: 713-563-4324
Via the page operator: 713-792-7090
Compliance Hotline: 800-789-4448

Email

BillingReimbursemen@mdanderson.org
CorporateCompliance@mdanderson.org
Institutional_Compliance@mdanderson.org
InstCompEduOutreach@mdanderson.org
InstitutionalPolicies@mdanderson.org
Privacy@mdanderson.org
ResearchCompliance@mdanderson.org

Online

inside.mdanderson.org/compliance
www.mdanderson.org/hop



Privacy, Confidentiality & Security

At MD Anderson, we're committed to protecting the privacy of our patients and workforce members, as well as safeguarding state resources. The protection of private and confidential information is an institutional priority.

Patient information and privacy law

MD Anderson takes patient privacy seriously, and our core values of Caring, Integrity, Discovery, Safety and Stewardship drive our commitment to maintaining the confidentiality of protected health information (PHI).

All uses and disclosures of PHI must be made with respect and sensitivity for our patients and the law. The most sensitive aspects of a patient's life may be documented in their medical record; this understandably makes the privacy, confidentiality and security of their PHI a priority for them.

An unauthorized use or disclosure of PHI may result in identity theft, financial loss, discrimination, stigma, mental anguish, or other serious negative consequences. It's therefore critical that you understand your role in maintaining the confidentiality of PHI and complying with privacy laws.

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) is the most recognizable federal privacy law that regulates how hospitals and other covered entities use and disclose PHI.

What is protected health information (PHI)?

PHI is health information combined with identifying information that is created, stored or maintained by MD Anderson. Examples include weight with a medical record number (MRN), a diagnosis with a birth date, or a lab result with a phone number.

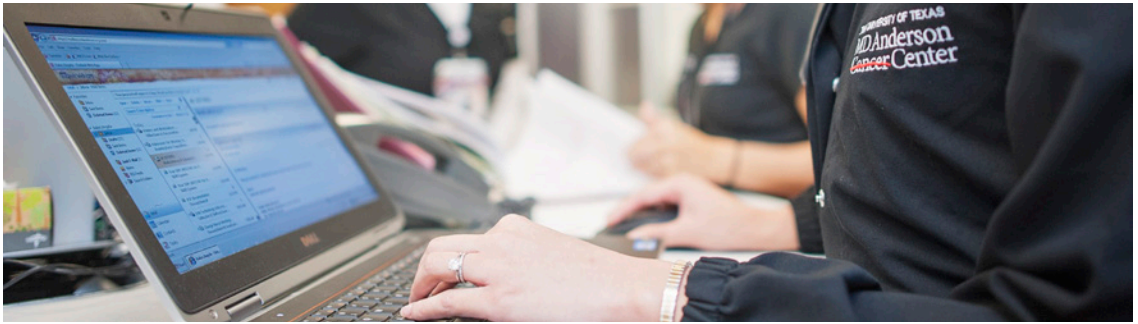
The combination of health information and identifying information creates PHI.

What is identifying information?

Identifying information includes 18 types of data, the most common being:

- Name and contact information;
- MRN and Social Security number (SSN);
- Financial account number(s), insurance, and billing or payment information;
- Treatment dates, birth date, death date;
- Voice recordings and identifiable photographs and images; and
- Any other information that can be used to identify a particular patient.

See MD Anderson's [Patient Privacy: De-Identification of Protected Health Information \(PHI\) Policy \(#ADM1180\)](#).



Other federal and state laws also play a significant role in protecting patients' information. This means unauthorized use or disclosure of PHI is a violation of federal and state laws as well as institutional policies. Consequences for violations of these federal and state laws may include jail time, monetary penalties and/or adverse regulatory action by oversight agencies. Workforce members whose actions result in the unauthorized use or disclosure of a patient's PHI may be subject to a formal privacy violation notice and corrective actions up to and including termination of employment.

Uses and disclosures of PHI

Privacy law requires that PHI be used or disclosed only when a patient has given their written authorization or when permitted by law, such as for treatment, payment, or health care operations.

Examples of unauthorized uses and disclosures of PHI include but are not limited to:

- accessing a co-worker's medical record to determine their diagnosis when there is no legitimate operational reason to do so;
- mailing or emailing PHI to the wrong address;
- disclosing more information than needed to an insurance company for reimbursement;
- posting patient photos on social media sites;
- using our electronic health record system (EHR) or any other MD Anderson information system to find a friend's contact information;
- disclosing a patient's PHI to media outlets or anyone else without the patient's authorization;

Searching for a patient without a professional need to do so is unauthorized use.

Viewing, discussing and even searching for information in medical records must be directly related to your job. Otherwise, it's considered a HIPAA violation, even if it's related to someone you know like a friend or family member.

- using PHI in our EHR or any other MD Anderson information system for research purposes without patient authorization or Institutional Review Board (IRB) approval; and
- accessing more PHI than needed to perform a task.

Email

Always exercise caution when emailing PHI. Be sure to review, understand and follow MD Anderson's [Information Security Office Policy for the Use and Protection of Information Resources \(#ADM0335\)](#) and the [Cybersecurity Operations Manual](#), both located on our intranet site.

Remember:

- Communicate with patients using MyChart, MD Anderson's secure messaging portal.
- Encrypt all external email communications containing PHI by typing [SEND SECURE] at the beginning of the subject line.
- Don't send PHI to your personal email account (Gmail, Yahoo, Hotmail).

Contact Information Services at 713-794-4636 (4-INFO) for general questions regarding email communication.

Privacy, Confidentiality & Security

Minimum Necessary Standard

When PHI is used or disclosed, ensure that you use or disclose the minimum or least amount of information necessary to achieve the intended purpose. This includes limiting not only the type, amount or scope of PHI, but also the number of people who access or view the PHI. Unless the disclosure is for treatment purposes, you must disclose the least amount of PHI required to accomplish the purpose of the disclosure.

For example, the minimum necessary standard applies when leaving voicemail messages for patients. When leaving voicemail, provide only enough information for the call to be returned (e.g., workforce member name, contact information, brief reason for calling). Never leave specific health information, such as diagnoses or test results, in voicemail messages.

Friends and family involved in a patient's care

HIPAA permits health care providers to share information that is directly relevant to the involvement of a spouse, family members, friends or other persons identified by a patient in the patient's care or payment for health care as long as the patient doesn't object. When possible, ask the patient for permission before speaking about their care in front of another person.

For example, a nurse may speak with a patient's caregiver about the patient's post-surgical care. However, it's important to limit the information disclosed to that which is relevant to the caregiver's role.

Patient Rights

Privacy law establishes specific patient rights regarding their PHI, including the patient's right to:

- request a restriction on the use and disclosure of their PHI;
- request an amendment to PHI in their designated record set;

- request an alternative communication method or location;
- access and copy PHI in their designated record set;
- obtain an accounting of disclosures of their PHI; and
- obtain a copy of [MD Anderson's Notice of Privacy Practices](#).

Notification requirements: Discovery of a breach of PHI

It is critical that you immediately report any known or suspected breach of PHI to Institutional Compliance at 713-745-6636 or through the Compliance Hotline at 800-789-4448. You also may email Privacy@mdanderson.org.

Pursuant to federal and state law, MD Anderson is required to notify any individual whose PHI has been breached. Generally, any unauthorized access, use or disclosure that compromises the security or privacy of PHI would constitute a breach. Notice to the individual must be given without unreasonable delay, and in any case no later than 60 days from the discovery date of the breach.

Social Security numbers (SSNs)

Federal and state laws as well as UT System's [Information Resources Use and Security Policy \(UTS165\)](#) regulate acceptable uses and disclosures of SSNs. Protecting the confidentiality of SSNs is critical to preventing identity theft and fraud

As an MD Anderson workforce member, you are required to:

- reduce the use and collection of SSNs;
- inform individuals when SSNs are collected;
- reduce the public display of SSNs;
- control access to SSNs;
- protect SSNs with security safeguards; and
- establish accountability for protecting the confidentiality of SSNs.

Business associates

Federal law requires MD Anderson to obtain a Business Associate Agreement (BAA) with any person or entity who:

- creates, receives, maintains or transmits PHI on behalf of MD Anderson for institutional activities such as claims processing or administration; data analysis, processing or administration; utilization review; quality assurance; patient safety; billing; benefit management; practice management and re-pricing; or
- provides legal, actuarial, accounting, consulting, data aggregation, management, administrative, accreditation or financial services where the services involve the disclosure of PHI to the outside person or entity.

MD Anderson must obtain a BAA prior to contracting with a vendor or purchasing any services from an entity or person who qualifies as a "Business Associate."

If you need to obtain a BAA or have questions about whether a potential vendor or service is a "Business Associate," contact MD Anderson's Legal Services department at 713-745-6633.

Document retention

All information obtained, developed or produced by you as an MD Anderson workforce member should be maintained in compliance with MD Anderson's document retention schedule.

To learn more about document retention, see MD Anderson's [Records Management Policy \(#ADM0107\)](#).

For general questions about document retention, contact Records Management at 713-563-2267 or RecordsManagement@mdanderson.org.

MD Anderson's information

Much of the information obtained, developed or produced by you as an MD Anderson workforce member as well as information supplied by outside entities for the benefit of MD Anderson is considered confidential and/or proprietary. You should not disclose this information to anyone outside MD Anderson or use it for personal benefit or gain unless you have specific authorization to do so. See MD Anderson's [Data Classification Guidelines and Ratings](#), located on our intranet site.

It is a violation of MD Anderson policy to:

- share your user credentials (login ID and password) for any MD Anderson system, and
- breach the confidentiality of any data contained on any MD Anderson system.

Always take reasonable steps to prevent the unauthorized use or disclosure of copyrighted, trademarked, or licensed materials, and to safeguard MD Anderson information.

MD Anderson information, especially patient information, must only be stored in institutionally approved storage locations (MD Anderson on-premises servers and partitions; MD Anderson-approved cloud storage and services) or on institutionally managed and encrypted devices.

Facility information

Information related to MD Anderson's facilities, including files or documents that describe or identify the building or room name, location, type, purpose or any negotiated contract pricing in any format, are considered confidential. Such facility information must be protected from unauthorized access, use, disclosure and/or dissemination. Specific facility information may relate to:

- floor plans and design plans;
- schematic plans and site plans;
- building and/or room specifications; or
- any such image.

Privacy, Confidentiality & Security

Information collected from the public

In accordance with state law, all MD Anderson workforce members must include the following notice when collecting information from any individual in the public by means of a form (either electronic or paper):

- With few exceptions, the individual is entitled on request to be informed about the information MD Anderson collects about them.
- Under Sections 552.021 and 552.023 of the Texas Government Code, the individual is entitled to receive and review the information.
- Under Section 559.004 of the Texas Government Code, the individual is entitled to have MD Anderson correct information about them that is incorrect.

To learn more about protecting MD Anderson's information, see MD Anderson's [Intellectual Property Policy \(#ADM0345\)](#) and the Texas Public Information Act located in Chapter 552 of the Texas Government Code.



Question: I'm a nurse at MD Anderson. A patient asked me for her lab results. May I text her the results?

Answer: No. You should communicate with patients only through MyChart, which is secure. A phone call to the patient also would be appropriate.

Question: I'm a patient services coordinator and I noticed that my neighbor is scheduled to have a medical procedure. May I tell her other friends so that we can support her in her time of need?

Answer: No. Although this seems like a supportive gesture, it's important to respect your neighbor's privacy. You should not mention to your neighbor or other friends that you're aware of her condition. In addition, if you're not directly involved in her care, you shouldn't access her medical record at all. It's a violation of federal law and MD Anderson policy to access a patient's information, including searching for their name, without a legitimate medical or business need to do so.

Question: Am I allowed to disclose a patient's room number to someone who asks for the patient by name?

Answer: Generally, yes. You may disclose a patient's location and general condition (e.g., "stable") to those who ask for a patient by name – unless the patient has a "confidential patient type" flag placed on their account. Information about confidential patients should not be disclosed to anyone but the patient over the phone.

Question: I carry an MD Anderson laptop between my office and my home, and I also take it with me on business trips. I use the laptop to store PHI related to my work, so I try and keep an eye on it at all times. Is there anything more I need to do to safeguard the information contained on/in the laptop?

Answer: Yes. Always ensure the physical security of the laptop and never leave it unattended. You also should minimize any data stored on the laptop, both for security and for business continuity in case your laptop is stolen or its hard drive fails. Ensure that your laptop screen is not visible to others when displaying confidential information. Finally, if you're traveling abroad, contact Information Services at 713-794-4636 to determine whether your destination country requires you to secure an International Travel Bundle; you can't take your institutionally issued laptop to all international destinations. If you ever lose a device that contains PHI or suspect that any information has been breached, please contact Institutional Compliance immediately at 713-745-6636.

Question: Two employees are talking in the elevator. They start discussing a patient and seem to be talking about confidential information. What should I do?

Answer: Politely tell them that you are uncomfortable with their conversation because patient information is confidential. You can help protect patient privacy and confidentiality by following MD Anderson's [Confidentiality Policy \(#ADM0264\)](#). Our core values of Caring and Integrity depend upon every workforce member doing their part to protect patient privacy.

Policies and Procedures

- [Business Associate Agreement Policy \(#ADM0342\)](#)
- [Confidentiality Policy \(#ADM0264\)](#)
- [Corrective Action Policy \(#ADM0256\)](#)
- [Disposal of Confidential and/or Sensitive Information Policy \(#ADM0389\)](#)
- [Information Security Office Policy for the Use and Protection of Information Resources \(#ADM0335\)](#) (available internally only)
- [News Media, Interviews, and Press Releases Policy \(#ADM0414\)](#)
- [Non-Retaliation Policy \(#ADM0254\)](#)
- [Patient Privacy: Authorization for the Use and Disclosure of Protected Health Information Policy \(#ADM0396\)](#)
- [Patient Privacy: Breach Notification Policy \(#ADM1033\)](#)
- [Patient Privacy: De-Identification of Protected Health Information \(PHI\) Policy \(#ADM1180\)](#)
- [Patient Privacy: Disclosures of a Patient's Protected Health Information to Individuals Involved in the Patient's Care Policy \(#ADM1032\)](#)
- [Patient Privacy: Fundraising Policy \(#ADM0162\)](#)
- [Patient Privacy: Joint Notice of Privacy Practices Policy \(#ADM0395\)](#)
- [Patient Privacy: Marketing Policy \(#ADM0353\)](#)
- [Patient Privacy: Right to Access Protected Health Information in the Designated Record Set Policy \(#ADM0391\)](#)
- [Patient Privacy: Right to Receive Accounting of Disclosures Policy \(#ADM0392\)](#)
- [Patient Privacy: Right to Request Amendment of PHI Policy \(#ADM0390\)](#)
- [Patient Privacy: Right to Request Privacy Protections and Other Restrictions on the Disclosure of Protected Health Information Policy \(#ADM0393\)](#)
- [Patient Privacy: Safeguarding Paper PHI Policy \(#ADM1176\)](#)
- [Patient Privacy: Uses and Disclosures of Protected Health Information Policy \(#ADM0401\)](#)
- [Policy Regarding Use of Institutional Images \(#ADM1050\)](#)
- [Social Media Policy \(#ADM1112\)](#)

For all policies relevant to privacy, confidentiality and security, see MD Anderson's Handbook of Operating Procedures at inside.mdanderson.org/institutional/policies.

Code of Conduct check: Keep it confidential

Handle all MD Anderson information, especially patient information, in ways that meet applicable laws, rules, guidelines and document retention schedules. Treat our information the same way you treat yours.

Research Compliance

Research is key to achieving our mission and is driven by our core values of Discovery, Integrity, Safety, and Stewardship.

In pursuit of our mission, we are committed to facilitating a Research Compliance Program that works in concert with our research endeavors. One of the goals of the program is to ensure that all our research is conducted according to the highest ethical standards and in compliance with all applicable laws, rules, guidelines and institutional policies.

To that end, it's imperative that workforce members who are engaged in the design, conduct, or reporting of research:

- understand the principles and laws that govern research;
- maintain a working knowledge of MD Anderson's research-related policies and procedures; and
- comply with applicable laws, MD Anderson policies and procedures, and other governing regulations and documents.

Research Integrity

Each of us must take steps to promote and protect honesty, fairness, transparency, accuracy and completeness in all we do to further our research mission. To ensure the integrity of our research:

- use only institutionally approved and provided platforms to create, maintain, manage, track changes to and store auditable records of all research documentation;
- create accurate, adequate and complete records of all experimental protocols, materials, data and findings throughout the design, conduct and reporting of research; document such records in English; and maintain raw data (original unaltered information resulting from original observations and activities);
- protect research documentation from inappropriate access, destruction or disclosure; and
- acknowledge the people, resources and funding sources that helped to facilitate each research effort.

All authors of research reports of any type must have had a bona fide role in the conception, design, execution or analysis of the research; accept responsibility for the integrity of the work reported; and be able to endorse the validity of the work (*e.g.*, the accuracy, authenticity, originality and completeness of the research, and honesty of presentation).

Discovery

Research Compliance

Research Record Keeping

Every research team member is responsible for maintaining research records including laboratory notebooks and data, both physical and electronic, in such a way that the records are:

- created and used for MD Anderson purposes only;
- easily accessible by the principal investigator (PI) of the grant, the grant administrator and other individuals as appropriate;
- organized;
- backed up on institutionally approved information resources, not on a personal computer or non-institutionally approved platform;
- stored securely; and
- reviewed and verified on a routine basis by a mentor, research team leader or PI of the grant.

Use of Images in Publications and Presentations

We must maintain the integrity of research by protecting digital images from inappropriate manipulation, and ensuring images and descriptions thereof are a clear and accurate representation of research results in grant applications, progress reports, and publications.

Image processing in conducting and reporting research supported by or regulated by the U.S. Food and Drug Administration (FDA) must comply with 21 C.F.R. Part 11 requirements for electronic records that are created, modified, maintained, archived, retrieved or transmitted under FDA record keeping requirements.

Intellectual Property

We demonstrate good stewardship through the proper use of funding sources and protection of intellectual property generated from such sources.

Intellectual property includes, but is not limited to:

- Invention
- Scientific or technological development
- Discovery
- Research data
- Creation
- Works of authorship
- Know-how
- Computer software
- Trade secret
- Technology

You must disclose all intellectual property upon creation and in all events prior to a public disclosure. Public disclosure should not be made unless and until authorized by MD Anderson.

What is inappropriate image manipulation?

Inappropriate image manipulation includes:

- adjusting only one area but no other areas of an image;
- selectively enhancing, erasing or altering images, including their backgrounds, in a way that may misrepresent information in the original image;
- duplicating (cutting-and-pasting) objects into an image from other parts of the same image or a different image;
- re-using images without express statements identifying and justifying the re-use in figure legends and in the publication;
- cropping images in a way that changes the context or interpretation of the original unprocessed image; or
- irreversibly compressing an image for file size reduction resulting in partial data loss.

All of the above actions are prohibited by federal law and MD Anderson policies.

Research Misconduct

Each of us has an affirmative duty to ensure our research efforts are free from fabrication, falsification and plagiarism, and to ensure research funds are not misused or misappropriated.

MD Anderson's Research Integrity Officer handles research misconduct allegations and reports findings involving Public Health Service (PHS) funds to the Office of Research Integrity (ORI).

Research misconduct can result in corrective actions, up to and including termination of employment, that are determined by the President of MD Anderson. The ORI may impose additional penalties such as debarment from eligibility for federal funds for grants and contracts, prohibition from service on PHS advisory or peer review committees, submission of a correction, or retraction of a published article.

Research records are the property of the Board of Regents and remain the property of MD Anderson when any research team member, including principal investigators (PIs) and other research leaders, voluntarily or involuntarily separate from the institution.

Animal Research

MD Anderson's Institutional Animal Care and Use Committee (IACUC) is responsible for the review

and approval of all research involving animals at MD Anderson.

It is imperative that workforce members engaged in research involving the use of animals:

- understand the principles and laws that guide and govern the use of animals in research;
- complete required IACUC training through the American Association for Laboratory Animal Science (AALAS) Learning Library portal and as specified in the [IACUC SOP 3.09 Animal Care and Use Training Program](#);
- are familiar with the requirements described in the Department of Veterinary Medicine & Surgery Customer Handbook and the Guide for the Care and Use of Laboratory Animals; and
- conduct animal research in compliance with MD Anderson's policies and procedures; federal and state laws, rules, and guidelines; and ethical principles.

What is research misconduct?

Research misconduct is fabrication, falsification or plagiarism in proposing, performing or reviewing research, or in reporting research results.

- **Fabrication:** making up data or results and recording or reporting them as if they were true.
- **Falsification:** manipulating research materials, equipment, or processes, or changing or omitting data or results.
- **Plagiarism:** appropriating (claiming or publishing) someone else's ideas, processes, results, or words without giving appropriate credit.

The destruction, absence of or failure to provide research records that adequately document the relevant research is evidence of research misconduct.

Who owns intellectual property?

The University of Texas System Board of Regents (Board of Regents) owns any intellectual property that:

- is created by workforce members during employment with MD Anderson, or
- results from activities performed on MD Anderson time, or with the support of state funds, or from using the resources and facilities owned by MD Anderson.

Research Compliance

All workforce members who participate in animal research are responsible for knowing the following:

- IACUC approval is required before animal research activity is permitted. IACUC oversight of animal research is mandatory.
- The safety, health and well-being of animals must be ensured during the course of conducting research.
- It is a violation of federal law and MD Anderson policies and procedures if you:
 - conduct animal research without IACUC approval or contrary to IACUC procedures;
 - transfer animals to a location and/or using a procedure not approved by the IACUC;
 - do not adhere to an IACUC-approved protocol; or
 - implement any change to an IACUC-approved protocol without IACUC approval.

Human Subjects Research

Human subjects research includes:

- research that involves a living individual about whom an investigator conducting research obtains data through intervention or interaction with the individual;
- research that involves identifiable private information;
- research that involves the use or disclosure of protected health information (PHI);
- an experiment that involves one or more human subjects in which a drug is administered, dispensed to, or used; and
- a clinical investigation or research that involves one or more human subjects to determine the safety or effectiveness of a device.

The U.S. Department of Health and Human Services (HHS) exercises authority over human subjects research, and MD Anderson has signed an assurance statement committing our institution to compliance with applicable regulations.

Any research that involves FDA-regulated products, such as drugs or devices, must comply with FDA regulations regarding clinical trials, Institutional Review Board (IRB) review and approval, management plans for investigator financial interests, requirements for electronic records and signatures, and Good Clinical Practice guidelines.

PIs who lead or are involved in human subjects research are responsible for the conduct of their research and must:

- ensure the study is carried out according to the written protocol approved by the IRB;
- be appropriately qualified to conduct research and be trained in human subjects research;
- ensure that all delegated research personnel are appropriately trained and supervised;
- promptly report any new information, modifications and unanticipated problems to the IRB; and
- ensure the rights and welfare of human subjects are protected, including privacy and confidentiality of data.

All researchers who carry out human subjects research are responsible for conducting their work in an ethical manner, completing mandatory human subjects protection training, and knowing the following:

- IRB approval and protocol activation are required before human subjects research activity is permitted; IRB oversight is mandatory.
- It is a violation of both federal law and MD Anderson policy if you:
 - conduct human subjects research without IRB approval;

- do not adhere to an IRB-approved protocol; or
- implement any change to an IRB approved protocol without IRB approval.
- All researchers are responsible for ensuring that individuals who are eligible to participate in human subjects research clearly understand everything that will happen to them, how their information will be used, and their financial responsibilities, before they agree to participate and before protocol-specific procedures commence.
- Individuals are free to choose whether or not to participate in human subjects research and must not be pressured to participate in such research.
- Informed consent for high-risk clinical trials (those involving drugs, chemotherapy, immunotherapy, radiation therapy, surgery, investigational devices or any invasive procedures) must be obtained by a physician licensed in the State of Texas.

Sponsored Projects

The PI of an award for a sponsored project has overall responsibility for that particular project and is expected to understand and fulfill their role and compliance responsibilities for:

- financial and scientific management of the research project by ensuring:
 - fiducial oversight through management and use of funds, including subawards,
 - the research is conducted in the spirit of the grant, and
 - documentation supports effort and costs;
- the design, scientific/technical conduct, administration, and reporting of the project; and
- adherence to the terms and conditions of award, federal and state regulations, and applicable institutional policies and procedures.

Expenditure and Management of Federal Research Funds

The expenditure and management of federal research funds are governed by cost principles set forth in federal regulation, in 45 C.F.R. Part 75 Appendix IX. Charging any costs directly or indirectly to the federal government, including personnel and non-personnel costs, must be done in compliance with these cost principles.

Any person who authorizes or is responsible for authorizing the expenditure of federal research funds is responsible for understanding the cost principles contained in 45 C.F.R. Part 75 Appendix IX, and for ensuring that any cost charged to a federal sponsor is allowable, allocable, and reasonable.

All costs must be handled consistently across the institution, *i.e.*, a particular cost may not be charged as a direct cost by one department and as an indirect cost by another department.

Remember: Non-compliance with the cost principles can lead to disallowance of federal grant funds, financial penalties and/or severe civil and criminal penalties.

You must have IRB approval before beginning human subjects research activities, including:

- research on disease mechanisms,
- biomarker studies,
- therapeutic interventions,
- clinical trials,
- prevention studies,
- epidemiological and behavioral studies,
- tissue and data banking,
- outcomes research, and
- health services research.

Research Compliance

Salary Caps

Sponsors such as the NIH and the Cancer Prevention and Research Institute of Texas (CPRIT) might institute salary caps that represent the maximum amounts they will reimburse MD Anderson for salaries for those who work on a sponsored project.

For awards that are subject to a salary cap, salary must only be charged as equal to or less than the percentage of certified effort applied against the individual's Institutional Base Salary or the applicable salary cap, whichever is less.

Effort Reporting and Certification; Effort Commitment

Effort is the proportion of time spent on any activity expressed as a percentage of total institutional activities for which MD Anderson compensates a workforce member. Total effort for a workforce member must always equal 100 percent regardless of part-time or full-time status, and regardless of number of hours worked.

As noted in the section on expenditure of federal research funds, the expenditure of federal money for personnel costs, e.g., salaries, wages and fringe benefits, is governed by federal cost principles in 45 C.F.R. Part 75 Appendix IX. Thus, the use of grant funds for such personnel costs is permissible only if the payments conform to the requirements in these federal cost principles.

As required by these cost principles, MD Anderson requires workforce members who devote effort on sponsored projects to confirm the percentage of their effort spent in support of each sponsored project and other institutional activities for a given period of time. This confirmation is called effort reporting and certification.

MD Anderson uses the online Employee Compensation Compliance (ECC)/Clinical, Administrative, Research, Education (CARE) system for effort reporting and certification on a quarterly basis.

Remember:

- Accurate and timely certification of effort reports are required by:
 - the federal government under applicable federal cost principles; and
 - MD Anderson's [Effort Certification Policy \(#ACA0016\)](#).
- All PIs and faculty members must certify actual effort that they and their supporting individuals spent on a project, regardless of committed effort or the source of funds used to pay their salary.
- Effort reports for all non-faculty must be certified in accordance with institutional policy.
- Actual/certified effort percentages must be based on a reasonable estimate of work performed during the applicable reporting period.
- Effort certification must be based on first-hand knowledge of the work performed.
- Effort reports are subject to audits by the federal government and the institution.

Important: Non-compliance with effort reporting and certification and effort commitment requirements can result in disallowance of federal grant funds, financial penalties and criminal penalties against those who certify falsified effort.

Transparency in Foreign Support: Foreign Components

Cultivating and maintaining foreign collaborations is critical to furthering our mission and our research. Knowing when to include, request and receive approval of Foreign Components for federally funded research projects is key to complying with federal, state and institutional requirements. Several resources are available on the Office of International Collaboration [Disclosure Requirements](#) page, located on our intranet site.

The NIH defines a Foreign Component as the performance of any significant scientific element or



segment of a project outside of the U.S., either by the funding recipient or by a researcher employed by a foreign organization, whether or not grant funds are expended.

Activities that would meet this definition of Foreign Component include but are not limited to:

- the involvement of human subjects or animals,
- extensive foreign travel by the recipient or their project staff for the purpose of data collection, surveying, sampling and similar activities, or
- any recipient activity that may have an impact on U.S. foreign policy through involvement in the affairs or environment of a foreign country.

In other words, any work by a recipient performed outside the U.S. and by an individual who is employed or paid by a foreign organization.

Foreign Component information should be included in initial grant proposals and in progress reports (annual, final and interim progress reports) submitted via a Research Performance Progress Report (RPPR). If a Foreign Component is expected to be used or will be used to support a

research project, justification must be provided and **prior approval must be received** by the funding agency before the Foreign Component can support the project.

Transparency in Foreign Support: Other Support

Other Support includes **all** resources made available to a researcher in support of or related to their research endeavors, regardless of whether or not the resources have monetary value and regardless of whether they are based at the institution the researcher identifies for the current grant. This includes but is not limited to:

- Resources and/or financial support from all foreign and domestic entities that are available to the researcher, such as financial support for research or laboratory personnel and the provision of high-value materials that are not freely available (e.g., biologics, chemicals, model systems, technology, etc.).
- Consulting agreements in which the project director (PD), PI or other senior/key personnel will be conducting research as part of the consulting activities.

Research Compliance

- In-kind contributions, *e.g.*, office/laboratory space, equipment, or employees or students supported by an outside source. If the time commitment or dollar value of the in-kind contribution is not readily ascertainable, the recipient must provide reasonable estimates. In-kind support must be reported separately from financial support.

Other Support does not include:

- Institutional resources such as core facilities or broadly available shared equipment. List these under Facilities and Other Resources.
- Non-research consulting activities.
- Training awards, prizes or gifts. Gifts are resources provided without any expectation of anything (*e.g.*, time, services, specific research activities, money, etc.) in return. However, an item or service given with the expectation of an associated time commitment is not a gift and is instead an in-kind contribution and must be reported as Other Support.

Include supporting documentation such as copies of contracts, grants or any other agreements specific to senior/key personnel foreign appointments and/or employment with a foreign institution for all Foreign Components reported in Other Support. If the supporting documentation is not in English, translated copies must be provided. Use the Purchase Order process to engage MD Anderson's translation vendor to translate the source documents; MD Anderson will cover these costs. All supporting documentation must be provided as part of the Other Support PDF following the Other Support Format page provided by the NIH.

Conflicts of Interest

MD Anderson is committed to conducting research that is unbiased and in compliance with federal and state laws, rules and guidelines, as well as institutional policies on conflicts of interest (COI).

PHS regulations require that all research funded under PHS grants or cooperative agreements

be free from bias resulting from an investigator's financial conflicts of interest (FCOI).

An investigator is defined as the PD or PI and any other person who is responsible for the design, conduct or reporting of research funded by the PHS. These regulations define FCOI as a significant financial interest that could directly and significantly affect the design, conduct or reporting of PHS-funded research. MD Anderson is required to submit FCOI reports to the PHS, manage investigator FCOI prior to expending any funds under the affected PHS-funded research project, and ensure public accessibility of FCOI held by senior/key personnel on a PHS-funded research project.

FDA regulations require that clinical investigators certify the absence or disclosure of certain financial relationships to sponsors of FDA-regulated trials. This information is used by the FDA to assess the reliability of clinical trial data.

Institutional policy requires all investigators, faculty members, faculty supervisors, trainees and institutional decision makers to disclose specified financial and non-financial relationships to the institution. These disclosure requirements are based on and, in many cases, may be stricter than those in the PHS and FDA regulations.

Remember:

- All investigators, faculty members, faculty supervisors, trainees and institutional decision makers must keep all required disclosures of outside relationships current.
- Non-compliance with COI regulations can result in disallowance of federal research funds and civil and criminal penalties.

If you have a fraud-and-abuse-related concern or question, contact Institutional Compliance at 713-745-6636 or the Compliance Hotline at 800-789-4448.



Sexual Misconduct Prevention and Reporting

Texas state law requires you to report incidents of sexual misconduct to the Title IX Coordinator, who serves as MD Anderson's director of the Office of Fair Employment Practices. Title IX protects all employees and students from sexual misconduct.

As recipients of National Institutes of Health (NIH) funding, we are required to comply with applicable federal civil rights laws and regulations as a term and condition of the awards. MD Anderson must notify the NIH within 30 days of the removal of a grant's PD/PI or other senior/key personnel who are removed from their positions or disciplined due to harassment, bullying, retaliation or hostile working conditions.

Sanctions that may be taken by the NIH for substantiated allegations of sexual misconduct include but are not limited to:

- removal of the PI from the grant;
- suspension of pending awards associated with the PIs;
- prohibition of grant transfer to another institution;
- special training reporting requirements from the institution; or
- removal of the PI from the NIH peer review service.

Safety

Q & A

Question: Sanya, a research nurse at MD Anderson, is responsible for coordinating, evaluating and following patient participation in a clinical trial of Drug X, funded by Drugs Unlimited. Because Sanya has many years of nursing experience with cancer patients, Drugs Unlimited wants to hire Sanya as a consultant for planning future clinical trials involving patients receiving chemotherapy, and to audit ongoing Drug X clinical trials at two other sites. All the consulting work will be done outside of Sanya's normal work hours at MD Anderson, and Sanya thinks she has accrued just enough paid time off to perform the audits. What should Sanya do?

Answer: Sanya should follow the steps outlined in MD Anderson's [Conflict of Interest and Conflict of Commitment Policy \(#ADM0255\)](#) before she agrees to perform or performs any consulting or audit work for Drugs Unlimited.

Question: Dr. Smith is a PI on a research project funded by a federal grant. What actions must she and her team take to accurately certify the percent effort that they've spent on the project?

Answer: PIs and faculty members must certify actual effort worked by themselves and their team members, regardless of committed effort or the source of funds used to pay their salaries. Dr. Smith and each of her team members must maintain documentation of their effort on the project. Each quarter, they must individually confirm that their percent effort is an accurate representation of actual effort, and then Dr. Smith must certify allocation of her effort and that of her team members.



Billing & Reimbursement Compliance

Documentation Requirements

Documentation of medical records, business records and billing practices at MD Anderson should be consistent with MD Anderson's core values of Caring, Integrity and Stewardship. Documentation and billing that are accurate, complete and timely help MD Anderson demonstrate its commitment to high-quality patient care in a manner that maintains the valued trust of our patients and our colleagues.

To that end, MD Anderson has developed policies and procedures regarding documentation and billing practices that are consistent with our core values and comply with applicable federal and state laws and private payor requirements. Among other things, MD Anderson's policies and procedures require that all medical records and business records be accurate and complete, and contain no false information. In addition, these policies and procedures require each patient's billing claim to completely and accurately reflect the health care services provided, as documented in the medical record. Examples of unacceptable billing practices include but are not limited to:

- billing for items or services not accurately documented in the medical record;
- billing for items you did not personally perform;
- billing for items or services that weren't actually rendered;
- billing for items or services not appropriately ordered;

- billing for items or services that were not medically necessary;
- billing for items or services rendered without the appropriate supervision;
- always assigning the same level of service regardless of the level of care provided;
- unbundling procedure codes;
- submitting duplicate bills; and
- filing false or inaccurate cost reports.

Note: The Civil False Claims Act prohibits MD Anderson from knowingly presenting a false or fraudulent claim for payment or approval. "Knowingly" includes actual knowledge, deliberate ignorance of the truth or falsity of the information, or reckless disregard of the truth or falsity of the information — and it requires no proof of specific intent to defraud. The penalties may include three times the overpayment plus \$12,537-\$25,076 for each item or service presented for payment. Penalties change over time; contact Institutional Compliance to confirm current penalty charges.

If you believe a documentation or billing practice is inconsistent with MD Anderson's documentation and billing policies and procedures, discuss the issue with your immediate supervisor. If you do not feel comfortable discussing the issue with your immediate supervisor, you may discuss the issue with upper-level management. Call Institutional Compliance at 713-745-6636 or the Compliance Hotline at 800-789-4448. You can also email us at BillingReimbursemen@mdanderson.org.

Integrity



Remember, improper documentation or billing practices may be considered fraudulent activities resulting in corrective action for those committing such behaviors. Corrective actions also may be imposed against individuals who have knowledge of improper documentation or billing practices and who remain silent or fail to report such behavior.

To learn more about documentation and billing practices, see MD Anderson's:

- [Billing Compliance Plan](#)
- [Fraud, Waste, and Abuse Policy \(#ADM0157\)](#)
- [Medical Documentation Policy \(#CLN0555\)](#), located on our intranet site
- [Delinquent Documentation Penalty Policy \(#CLN0510\)](#), located on our intranet site
- [Medical Record Policy \(#CLN0554\)](#), located on our intranet site

Clinical Research Billing

It is MD Anderson's policy that research-related items and services provided to human subjects research participants are accurately billed in compliance with all relevant laws, rules and guidelines, as well as the relevant study protocol and informed consent document.

Billing for services provided to human subjects research participants can be very complex as both the sponsor and the participant may be responsible for various costs of a study. Any time a sponsor provides funding for items and services, such items and services may not be billed to the research participant or the research participant's insurance carrier. Knowingly submitting bills to patients or payors for items and services paid for by the sponsor may constitute fraud and may result in criminal and civil penalties under

federal and state law. MD Anderson workforce members involved in human subjects research are responsible for ensuring that:

- clinical-research–related billing is based on actual services rendered, is allowable by law, and is consistent with the informed consent document signed by the human subjects research participant; and
- clinical-research–related charges are billed to the appropriate party.

To learn more about clinical research billing, see MD Anderson's:

- [Billing Compliance Plan](#)
- [Clinical Research Billing Policy \(#ADM1047\)](#), located on our intranet site
- [Study Calendar & Coverage Determination Policy for Clinical Trials \(#ADM1138\)](#), located on our intranet site

For other policies relevant to appropriate documentation and billing, see MD Anderson's Handbook of Operating Procedures at inside.mdanderson.org/institutional/policies.

If you have a fraud, waste, and abuse concern or question, call Institutional Compliance at 713-745-6636 or the Compliance Hotline at 1-800-789-4448. You can also email us at BillingReimbursemen@mdanderson.org.

Code of Conduct check: Bill accurately

When you document and bill for the care you've provided, be accurate, be thorough, be honest — and be timely.

Billing & Reimbursement Compliance

Question: What are the most frequently audited billing issues and/or most frequent audit findings?

Answer: The more common auditing concerns and findings include:

- Missing or incomplete documentation for services billed
- Admitting a patient to the wrong care setting/status (e.g., inpatient admissions that don't meet medical necessity criteria or the two-midnight rule, and inappropriate admissions to observation)
- Always assigning the same level of service regardless of the level of care provided
- Failing to have appropriate orders signed
- Billing the wrong type of service (e.g., providers of the same specialty billing multiple "initial" inpatient encounters for the same patient)
- No chief complaint or reason for the visit documented
- Billing under the wrong date of service, or date the tests are performed
- Billing for related evaluation and management services that are part of a global fee as separate professional fees (e.g., billing for pre-operative, post-operative visits)
- Unbundling and/or billing for services that are not permitted to be separately billed (e.g., billing for an IV start when an infusion code also is billed)
- Billing for procedures that were not performed by the billing provider (e.g., a physician billing for services provided by an advanced practice provider (APP))
- Billing the patient or payor for items or services that should be paid by a study sponsor
- Billing for teaching physician services when the teaching physician was not present for the key or critical portion of a procedure
- Incorrect use of modifiers

Question: My department chair has encouraged me to always bill for services at a high level of service, regardless of the individual circumstances. I feel like this is improper. I don't want to do something that is wrong, but I'm afraid I may lose my job if I don't do what I've been told to do. What should I do?

Answer: First, consider discussing the request with your chair to make sure you understand the facts and that they're aware of your concerns. If you feel that you cannot comfortably discuss the request with your chair, contact Institutional Compliance. Don't take part in any improper or illegal activity. Please also refer to MD Anderson's [Non-Retaliation Policy \(#ADM0254\)](#) for additional information regarding protections against retaliation.

Q&A

Question: My supervisor told me to bill a patient's insurer for health care services we provided and not to bill the patient for the co-pay and deductible amounts. What should I do?

Answer: Contact Institutional Compliance. Medicare and most private payors require MD Anderson to collect a patient's co-pay(s) and deductible amount(s) when billing the insurer for services. Waivers of co-pays and deductibles could result in liability under federal and state laws.

Question: I noticed that a patient's record does not include all the procedures performed on the patient. I asked my co-worker about the discrepancy, and they said that this type of thing happens all the time and to ignore it. Should I ignore the errors?

Answer: No. You should notify your supervisor of the situation immediately. Medical record documentation should accurately reflect all services provided to the patient.

Question: As an APP, I frequently perform patient visits alone. However, I was told that for these visits, I need to bill them under the name of the physician I was working with that day, or whose schedule the patient was on, even though the physician was not present. I asked my supervisor if this was correct, and he said that was the department's procedure. Should I continue to submit these charges this way?

Answer: No. If your supervisor cannot help you, contact Institutional Compliance or the Compliance Hotline and ask for direction or assistance. The medical record documentation and the billed charges must match and should accurately reflect who performed the services provided to the patient. APPs are permitted and expected to bill for the services they perform.

Question: As an APP, during a patient visit, I personally performed a procedure alone. The physician was not present and did not perform any portion of the procedure. However, I was told to bill it under the name of the physician I was working with that day since they were responsible for the patient's care and was the supervising physician. I asked my supervisor if this was correct, and he said that was the department's procedure. Should I continue to submit these charges this way?

Answer: No. If your supervisor cannot help you, contact Institutional Compliance or the Compliance Hotline and ask for direction or assistance. The medical record documentation and the billed charges must match and should accurately reflect who performed the services provided to the patient.

Question: What are the rules for using cloned documentation and Smart Tools within OneConnect?

Answer: Please see our [Cloned Documentation and Smart Tools Standards \(#ATT3471\)](#), which is attached to our [Medical Documentation Policy \(#CLN0555\)](#).

If you have any additional questions or concerns regarding Billing and Reimbursement Compliance, please call Institutional Compliance at 713-745-6636 or the Compliance Hotline at 800-789-4448. You can also email us at BillingReimbursemen@mdanderson.org.

Use of MD Anderson Resources

You drive our mission of Making Cancer History®

As an MD Anderson workforce member, you have an opportunity to contribute to our goal of Making Cancer History® by managing the substantial resources entrusted to us.

By safeguarding and enhancing our resources, we're able to provide research-driven patient care, seek new knowledge about cancer, educate others and explore ways to prevent cancer.

Patient Care: People come from all over the world seeking the research-driven patient care that we provide. In our 80-plus years, we have cared for more than one million patients.

Research: Our research efforts set the standard for oncology care. Important scientific knowledge gained in laboratories is rapidly translated into clinical care. And our research programs are considered some of the most productive in the world aimed solely at cancer.

Education: Each year, we share our expertise with more than 6,600 physicians, scientists, nurses and many other health professionals who take part in our programs to receive specialized training in the investigation, prevention and treatment of cancer. We also grant degrees through the MD Anderson UTHealth Graduate School and the School of Health Professions.

Prevention: We conduct research efforts to advance the knowledge and understanding of cancer prevention and associated health practices, and we also provide comprehensive preventive care and health screenings for everyone.

MD Anderson is committed to using its resources in ways that best further its mission and strategic vision as set by the citizens of the State of Texas.

As a state institute of higher education, MD Anderson's resources are considered public resources that are subject to special laws, rules, and guidelines. An institutional resource is anything of value that supports the mission of MD Anderson. Institutional resources include but are not limited to things such as:

- your time and effort and other workforce members' time and effort;
- office supplies and lab equipment;
- communications channels including but not limited to MD Anderson email, work address, social media, Inside News, institutional bulletin boards and telephone systems;
- MD Anderson's Brand including its logo and tagline; and
- information resources such as email, cloud storage, computers, software, and any other data, software and hardware owned or used by MD Anderson.

As an MD Anderson workforce member, you may not use institutional resources:

- for personal benefit or gain, including utilizing staff members' time to perform tasks related to outside activities;
- in a wasteful manner;
- to harm another person;
- for political activity; or
- for illegal activity such as bribes or kickbacks.



Limited use of MD Anderson resources for personal purposes, known as “incidental use,” is permitted as long as the use is brief and does not:

- result in a cost to MD Anderson that is more than nominal;
- interfere with official duties;
- disrupt or distract from the conduct of official business; and
- compromise the security or integrity of MD Anderson information.

For more information on use of state resources, see our [Use of State-Owned Property, Equipment, Services, Funds, and Resources Policy \(#ADM0340\)](#).

Non-Solicitation

As an MD Anderson workforce member, you cannot use institutional resources to solicit support for unauthorized charitable fundraising, political contributions or personal benefit. These provisions were established to protect workforce members from unauthorized solicitations and receiving unauthorized material, and to ensure that our work environment is consistent with our mission.

Examples of solicitation include:

- using MD Anderson email, physical spaces or other institutional resources to advertise for a personal business;
- using institutional resources to sell your child’s Girl Scout cookies on campus or otherwise;
- using institutional resources to raise funds for a political candidate; or
- requesting donations of goods or money for unauthorized charities.

Other examples of solicitation can be found in our [Charitable Activities, Charitable Expenditures, and Solicitation Policy \(#ADM0115\)](#)

Political Activities and Contributions

MD Anderson recognizes the right of its workforce members to participate in political activities on their own time as long as such activities do not:

- involve the use of state resources or the workforce member’s official position;
- interfere with the performance of the workforce member’s duties and responsibilities related to UT System and MD Anderson; or
- create the appearance that either UT System or MD Anderson is endorsing a particular candidate, position, bill or other position.

MD Anderson workforce members may make political contributions from their personal funds. However, political contributions from any source of MD Anderson funds are strictly prohibited.

For more information on political activities and contributions, see our [Political Activity Policy \(#ADM0262\)](#) and [Memberships Policy \(#ADM0134\)](#).

Code of Conduct check: Focus on Making Cancer History®

Don’t use any MD Anderson resources, including your time and your colleagues’ time, in a wasteful manner, for personal benefit, to harm someone, for political activity or for illegal activity.

Use of MD Anderson Resources Q&A

Question: I sell cosmetics in my spare time and process order requests using my computer at work. Does this present any problems?

Answer: Yes, this activity is problematic. As a member of MD Anderson's workforce, you are an employee of the State of Texas. This means you may not use state resources, which include state time or property, to conduct a personal business. You also may not use state property during your lunch break or after work hours to conduct a personal business. See our [Use of State-Owned Property, Equipment, Services, Funds, and Resources Policy \(#ADM0340\)](#).

Question: My daughter is selling Girl Scout Cookies, and my co-workers have expressed an interest in purchasing a number of boxes. Is it acceptable to sell the cookies during my work hours or to leave sign-up/order sheets in the break room?

Answer: No. MD Anderson strives to protect workforce members and non-workforce members from unauthorized solicitations. To that end, our [Charitable Activities, Charitable Expenditures, and Solicitation Policy \(#ADM0115\)](#) prohibits the sale of products to raise funds for organizations or activities not authorized by MD Anderson (e.g., Girl Scout Cookies).

Question: May I use my department's copy machine to copy flyers for my child's birthday party?

Answer: No. Copying flyers for your child's birthday party is not considered an incidental use.

Question: An employee I supervise wants to travel to Washington, D.C., to attend a three-day conference that includes a day of lobbying. She will go to the U.S. Capitol and speak to legislators about cancer rights. How do I manage this?

Answer: MD Anderson workforce members may participate in political activities on their own time but should contact Government Relations before participating in any such activities. Additionally, MD Anderson workforce members may not use state time, money, equipment or any other state resource for political purposes. Therefore, any time spent lobbying may not be paid for or reimbursed by MD Anderson. If the workforce member is attending the conference for work-related purposes, then two days may be treated as work days, but the lobbying day must be allocated as paid time-off or annual leave. Likewise, MD Anderson cannot pay for any expenses related to political activities. Additionally, the workforce member may need to notify the Texas Office of State-Federal Relations (OSFR) in advance of traveling to the Washington, D.C., area. Remember, as state employees we owe a duty to the State of Texas. It makes no difference whether someone is lobbying for cancer rights or for a particular candidate; these activities cannot be related to their job at MD Anderson. For more information, see our [Political Activity Policy \(#ADM0262\)](#).

Gifts

Our ability to recruit patients from or refer patients to other providers should align with our core value of Integrity. Similarly, our interactions with vendors should align with our core value of Stewardship. This means gifts must not be a factor in recruiting or referring patients or in interacting with vendors. Gifts can include cash, gift cards, mementos or any other benefit or item of value.

Giving Gifts

As an MD Anderson workforce member, you are prohibited from giving the following gifts:

- Gifts to patients, which could be a violation of federal and state laws particularly if they are being offered to influence a patient's choice in provider.¹
- Gifts to anyone in exchange for patient referrals to MD Anderson, which could be a violation of the federal anti-kickback statute.²

Gifts, including payments or non-cash benefits, to physicians, health care professionals or others providing services to MD Anderson must comply with all federal and state rules and regulations.

Receiving Gifts

As an MD Anderson workforce member, you should never accept a gift from a vendor if you have any reason to believe it was given to influence your institutional responsibilities (e.g., purchasing decisions or use of state assets).

Cash or cash equivalents (e.g., gift certificates, gift cards, vouchers) from any vendor or third party who is doing or interested in doing business with MD Anderson are prohibited.

Cash gifts from patients and their friends or family members to faculty members are governed by the Bylaws of the Physicians Referral Service Faculty Practice Plan.

Code of Conduct check: Avoid gifts

In general, you can't accept or give gifts, favors, benefits, services or items of value — especially in return for preferential treatment or patient referrals.

However, under all circumstances, please keep in mind that as an MD Anderson workforce member, you must not:

- accept gifts from anyone, including vendors, in exchange for referring patients to that individual or vendor; and
- accept gifts from anyone, including vendors, in exchange for patient referrals to themselves or MD Anderson.

To learn more about gifts, see our [Ethics for State Employees Policy \(#ADM0337\)](#).

¹ Note: The Civil Monetary Penalties Law contains various prohibitions including offering remuneration to a Medicare or Medicaid beneficiary that the person knows or should know is likely to influence the beneficiary to obtain items or services billed to Medicare or Medicaid from a particular provider. "Remuneration" includes giving items or services for free. As of 2022, the penalty may include up to \$20,000 for each item or service and three times the amount claimed for each item or service (or three times the amount of the remuneration). This figure may change annually; contact Institutional Compliance for details.

² Note: The federal anti-kickback statute provides that it is a crime to knowingly and willfully solicit, receive, offer or pay remuneration of any kind for the referral of an individual to another for the purpose of supplying items or services that are covered by a federal health care program; or for purchasing, leasing, ordering or arranging for any good, facility, service or item that is covered by a federal health care program unless the arrangement meets a "safe harbor" or is determined to be permissible after an analysis. The penalty may include the imposition of a fine of up to \$100,000, imprisonment of up to ten years or both. Contact Institutional Compliance for details.

Gifts Q&A

Question: One of our department's vendors sent gift cards for everyone in our office. Are we allowed to accept them?

Answer: No. Cash or cash equivalents (e.g., gift certificates, gift cards, vouchers) should not be accepted from any vendor or third party who is doing or is interested in doing business with MD Anderson. In general, non-cash gifts valued at less than \$50 may be accepted unless the workforce member has any reason to believe that the gift is being offered to influence them or the decisions they make.

Question: A pharmaceutical company's representative would like to sponsor a holiday lunch for the department. Is this okay?

Answer: No. Meals or other types of food directly funded or provided by medical service representatives (such as pharmaceutical company employees) are prohibited. Food for non-educational events such as faculty meetings must not be accepted under any circumstances. See our [Funding for Accredited and Non-Accredited Educational Activities Policy \(#ADM1020\)](#).

Question: To get more patients to come to our department, we would like to raffle an iPad. Is this okay?

Answer: No. It's against federal and state law to offer gifts to a patient in order to get the patient's business. In addition, there are special rules regarding raffles in the State of Texas. For more information, contact our Legal Services department at 713-745-6633.



Working for the State

MD Anderson is a state institution of higher education. As such, our workforce members are public servants of the State of Texas and subject to state ethics laws that guide the behavior and actions of state employees.

Conflicts of Interest

Compliance with MD Anderson's conflict of interest policies allows MD Anderson to honor its core value of Integrity. A conflict of interest exists when the loyalty of an MD Anderson workforce member is divided between responsibilities to MD Anderson and responsibilities to an outside party.

Federal regulations, state laws and institutional policies govern conflict of interest issues. As an MD Anderson workforce member, you should familiarize yourself with the appropriate policy in cases of possible conflicts of interest. In general, you should not commit to outside activities that interfere with your institutional responsibilities.

Outside activities are personal relationships and cannot:

- use MD Anderson resources, including facilities and property;
- intrude on your commitment to MD Anderson;
- require you to share MD Anderson's confidential information; or
- conflict with MD Anderson's mission.

For more information on conflicts of interest, see our [Conflict of Interest and Conflict of Commitment Policy \(#ADM0255\)](#) and [Conflicts of Interest and Conflicts of Commitment Policy for Faculty Members, Investigators, Institutional Decision Makers and Trainees \(#ACA0001\)](#).

Bribery

In your capacity as a state employee and an MD Anderson workforce member, you may not intentionally offer or accept any benefit — no matter how large or small — that influences your decision-making or is received as consideration for a violation of your duties.

For more information on bribery issues, see our [Ethics for State Employees Policy \(#ADM0337\)](#) and [Conflict of Interest and Conflict of Commitment Policy \(#ADM0255\)](#).

Honoraria

As an MD Anderson workforce member, you may not solicit or accept payment for services that would not have been requested of you if you were not employed at MD Anderson.

A helpful way to analyze whether acceptance of honoraria is permissible is to ask, “would my services be as desirable if I did not work at MD Anderson?”

However, as an MD Anderson workforce member, you may accept compensation for providing a service for which you have specific expertise. If compensation is provided by a pharmaceutical company, health care services or equipment vendor, additional laws and rules related to anti-kickback may apply.

Honoraria and fees for faculty members are governed by the Bylaws of the Physicians Referral Service (PRS), our [Faculty Extramural Leave Policy \(#ACA0051\)](#) and our [Conflicts of Interest and Conflicts of Commitment Policy for Faculty, Investigators, Institutional Decision Makers, and Trainees \(#ACA0001\)](#).

See our [Ethics for State Employees Policy \(#ADM0337\)](#) to learn more about honoraria.

Endowments

MD Anderson's Vice President of the Finance & Chief Accounting Office and Associate Vice President & Controller of the Controller's Office are responsible for directing Endowment Compliance education programs, which focus on adherence to [UT System Policy UTS138: Gift Acceptance Procedures](#) associated with the establishment of endowments. These education programs also ensure that the terms of the Official Endowment Agreement are strictly followed.

Working for the State

As an MD Anderson workforce member, you are not authorized to accept donations on behalf of the institution. That authority is vested with The University of Texas Board of Regents (Board of Regents).

If you are approached about a proposed donation, notify the Office of the Chief Financial Officer or the Division of Philanthropy. The Chief Financial Officer will arrange for proper reporting to the Board of Regents, and the donor will be sent an acceptance letter from the appropriate institutional official. All terms and restrictions placed on any gift or donation must be agreed to and accepted by the Board of Regents before it can be accepted.

All MD Anderson workforce members must comply with the requirements set forth by MD Anderson's Endowment Compliance Plan. To learn more, review the [Endowment Compliance Plan](#).

Abuse of Position

As an MD Anderson workforce member, you commit an offense if you intentionally or knowingly do either of the following with the intent to obtain a benefit or to harm or defraud another person:

- Violate a law relating to your position
- Misuse state resources (e.g., MD Anderson property, services, personnel, or any other thing of value belonging to MD Anderson)

To learn more about abuse of position, see our [Ethics for State Employees Policy \(#ADM0337\)](#) and [Use of State-Owned Property, Equipment, Services, Funds, and Resources Policy \(#ADM0340\)](#).



Work Environment

MD Anderson is committed to creating a caring and healthy environment for everyone – including its workforce members and students. To that end, our workforce members and students are expected to treat each other in a fair and respectful manner in accordance with our core values of Caring, Integrity, Discovery, Safety and Stewardship to uphold all federal and state laws, rules and guidelines.

Behavior That Undermines a Culture of Safety

Safety, quality of patient care and research, and the retention of our most valuable resource – our people – are dependent on MD Anderson's ability to foster teamwork, maintain open lines of communication, and cultivate a positive, collaborative work environment.

Behavior that undermines a culture of safety is unprofessional and unacceptable at MD Anderson. Such behaviors create an unhealthy or even hostile work environment, as well as:

- undermine team trust and effectiveness;
- disrupt the learning environment;
- increase medical errors and/or preventable, adverse outcomes;
- contribute to poor patient satisfaction;
- add to the cost of patient care;
- lower the morale and engagement of workforce members and students;
- drive qualified workforce members and students to seek new positions in more professional learning and working environments; and
- negatively impact the institution's ability to attract highly qualified and motivated workforce members and students.

Behavior that undermines a culture of safety sometimes goes unreported and therefore unaddressed. Workforce members and students may be hesitant to report such behaviors because they:

- are uncertain if the behavior would be considered disruptive, unprofessional behavior or sexual misconduct;
- fear retaliation or are uncomfortable reporting on a colleague; or
- are unaware of how to report.

Examples of Behaviors that Undermines a Culture of Safety

- Overt actions such as verbal outbursts and physical threats.
- Passive activities such as not performing assigned tasks or quietly exhibiting uncooperative attitudes during routine activities.
- Reluctance or refusal to answer questions, return phone calls or return pages.
- Speaking with condescending language or voice intonation.
- Exhibiting impatience with questions or discussions.
- Retaliating against those who report intimidating and/or disruptive behaviors.

Non-Retaliation Policy

MD Anderson workforce members are required to report misconduct, including instances of intimidating or disruptive behaviors. Our [Non-Retaliation Policy \(#ADM0254\)](#) prohibits any individual from retaliating or taking adverse action against a workforce member who has reported misconduct, or reported intimidating and/or disruptive behaviors. Any workforce member who believes that they have been subjected to any retaliation related to reporting intimidating and/or disruptive behaviors should file a complaint with MD Anderson's Equal Employment Opportunity (EEO) team for investigation.

Sexual Harassment and Sexual Misconduct

MD Anderson is committed to the principle that our learning and working environment should be free from inappropriate conduct of a sexual nature. Sexual misconduct and sexual harassment are unprofessional behaviors. Any MD Anderson workforce member who engages in such behavior is subject to corrective action up to and including termination of employment.

All workforce members who see or become aware of potential sexual misconduct during the course of their employment, must promptly report the incident, to include all known information, to the Title IX Coordinator. Students are not required to report sexual misconduct but are encouraged to do so that it may be appropriately addressed.

For more information, see our [Sexual Misconduct Prevention Policy \(#ADM0285\)](#) and [Sexual Misconduct Under Title IX: Reporting, Process, and Resources Policy \(#ADM3384\)](#).

How to Report

Sheri Wakefield
Director, Office of Fair Employment Practices
Title IX Coordinator and Clery Officer
Email: OFEP@mdanderson.org
Phone: 832-750-5500
Fax: 713-792-8515

Online reports:
www.mdanderson.org/TitleIX
www.mdanderson.org/campussafety

Mailing Address:
MD Anderson Cancer Center
HR Strategic Partners
1515 Holcombe Blvd., Unit 1612
Houston, TX 77030-4009

Office Location:
Mid Campus Building 1
Floor 2, Human Resources Reception Area
7007 Bertner Avenue
Houston, TX 77054-3403

Corrective Action

As MD Anderson workforce members, we each are responsible for educating ourselves with performance criteria for our particular jobs (e.g., rules, procedures and standards of conduct) and for maintaining standards of conduct suitable and acceptable for our work environments. If you fail to fulfill the responsibilities set out by such performance criteria, you may be subject to corrective action up to and including termination of employment. Any sanctions will be applied in accordance with relevant MD Anderson policies.

For more information, see our [Corrective Action Policy \(#ADM0256\)](#).

For questions regarding the MD Anderson work environment, contact your Human Resources (HR) Business Partner at 713-745-6947 (5-myHR).

How to Report

For threats of violence, immediately contact The University of Texas Police at 713-792-2890.

MD Anderson does not tolerate intimidating or disruptive behaviors, or sexual misconduct.

Managers and supervisors are expected to ensure that such behaviors are reported and addressed without delay.

Workforce members and students also have a duty to report intimidating or disruptive behaviors. Reports may be made through any of the following methods. All reports are treated confidentially and may be made anonymously.

- Your immediate supervisor, who can enlist the help of leaders and Human Resources.
- The Safety Reporting Tool, accessible from computer desktops and our intranet.
- 713-745-6947 (5-myHR).
- 713-792-7867 (2-STOP).
- Compliance Hotline (800-789-4448).
- Your HR Business Partner.
- OFEP@mdanderson.org.

Equal Employment Opportunities

It is MD Anderson’s policy to provide equal employment opportunity (EEO) without regard to:

- race;
- color;
- religion;
- sex;
- pregnancy;
- sexual orientation;
- gender identity/ expression;
- national origin;
- age;
- disability;
- veteran status;
- genetic information; and
- any other basis protected by institutional policy or by federal, state, or local laws unless such distinction is required by law.

Such EEO protections apply to all matters related to employee hiring or status including but not limited to:

- advertising;
- recruitment;
- selection;
- employment;
- placement;
- compensation;
- benefits;
- upgrading;
- training;
- transfer;
- performance management/ corrective action;
- promotion;
- demotion;
- realignment; and/or
- termination.

Further, it is the policy of MD Anderson to provide a work environment free from verbal, physical or visual forms of discrimination or harassment.

For more information, see our [Equal Employment Opportunity Policy \(#ADM0284\)](#) or contact EEO & HR Regulations at EEOGroup@mdanderson.org.

Additionally, to ensure compliance with the Equal Employment Opportunity Policy, MD Anderson has established the following specific policies:

- [Affirmative Action Policy \(#ADM0287\)](#)
- [Accommodating Disabilities in the Workplace Policy \(#ADM0286\)](#)
- [Sexual Misconduct Prevention Policy \(#ADM0285\)](#)
- [Nursing Peer Review Program Policy \(#CLN0632\)](#)

Fitness for Duty and Drug Free Workplace

It is MD Anderson’s policy that all workforce members report to work in a condition to safely perform their duties. When at work, every workforce member must be free of illegal drugs or alcohol and able to safely and effectively perform the essential functions of their position.

MD Anderson prohibits the use of alcohol or a controlled substance — as well as its unlawful manufacture, sale, distribution or possession — in or on premises or property owned or controlled by MD Anderson, regardless of whether such activity results in the imposition of a penalty under a criminal statute. Individuals who violate these policies are subject to appropriate corrective action including but not limited to mandatory referral into the Employee Assistance Program for treatment in an approved drug assistance or rehabilitation program, and/or termination of employment.

For more information, see our [Fitness for Duty Policy \(#ADM0284\)](#) and our [Employee Assistance Program Policy \(#ADM0275\)](#), or contact the Employee Assistance Program at MDA-EmployeeAssistanceProgram@mdanderson.org.

**Code of Conduct check:
Think and act ethically**

Follow our ethical standards and those of your professional organizations. Before you say or do something, ask yourself: How would this look to our patients and our community? Would this harm our reputation?

Work Environment

Stop the Line for Patient Safety

Any workforce member who observes or becomes aware of a potential risk to patient safety has the authority and responsibility to speak up and request the process be stopped in order to clarify the patient safety situation (i.e., Stop The Line).

If a workforce member believes that they have been subjected to any retaliation related to a Stop The Line request, they should report such suspected retaliation so that it may be investigated in accordance with our [Non-Retaliation Policy \(#ADM0254\)](#). To learn more about Stop The Line, including examples of what situations may prompt a Stop The Line request, see our [Stop The Line for Patient Safety Policy \(#CLN1185\)](#), located on our intranet site.

For more information, see the following policies:

- [Employee Assistance Program Policy \(#ADM0275\)](#)
- [Drug Detection and Deterrence Policy \(#ADM0309\)](#)
- [Practitioner Health and Impairment Policy \(#CLN0619\)](#), located on our intranet site.
- [Fitness for Duty Policy \(#ADM0274\)](#)
- [Drug-Free Campus & Workplace Policy \(#ADM0278\)](#)
- [Nursing Peer Review Program Policy \(#CLN0632\)](#), located on our intranet site.



Work Environment Q&A

Question: A co-worker has vacation pictures on her desk that are somewhat provocative. If I'm uncomfortable with these pictures, can she be made to remove them?

Answer: Maybe. Consider bringing the matter to your co-worker's supervisor or contact your HR Business Partner at 5-myHR (713-745-6947) for assistance.

Question: My supervisor has repeatedly asked me out on dates. I'm not interested in dating him and this is making me very uncomfortable. What can I do?

Answer: Consider informing your supervisor that this behavior makes you uncomfortable. However, if you prefer not to discuss the subject with your supervisor, contact your HR Business Partner at 5-myHR (713-745-6947) for assistance.

Question: I've repeatedly spoken with my supervisor about the rude and impatient way a team member from another department speaks to me and others in my department. To date, I've seen no change in their behavior. Who else can I speak with besides my supervisor?

Answer: First, speak with the other team member's supervisor about your concerns. If you're uncomfortable going directly to their supervisor, consider talking to your supervisor or HR Business Partner to ask for assistance in bringing this issue to the attention of others.



Your Rights and Responsibilities

Compliance Concerns

As MD Anderson workforce members, we each are responsible for reporting violations or potential violations. Remaining silent and failing to report a violation or potential violation may subject you to corrective action.

To discuss or report compliance concerns, you're encouraged to directly contact the Chief Compliance and Ethics Officer via the page operator at 713-792-7090, or through Institutional Compliance at 713-745-6636.

MD Anderson also has a Compliance Hotline that anyone may call to report suspected violations or questionable conduct: 800-789-4448.

All discussions and reports to the Compliance Hotline are treated confidentially and may be made anonymously. Each report is reviewed, and the Chief Compliance and Ethics Officer initiates needed investigations, corrections or follow-up.

Anyone also may report suspected fraud, waste and abuse involving state resources to the State Auditor's Office (SAO) Hotline at 800-TX-AUDIT (800-892-8348). The SAO provides additional information on its website, sao.fraud.state.tx.us.

Governmental Investigations

MD Anderson cooperates with governmental investigations. To that end, Institutional Compliance will assist all workforce members in taking the appropriate steps to cooperate with such governmental investigations.

As an MD Anderson workforce member, it's imperative that you immediately, even after hours, notify the Chief Compliance Officer or Institutional Compliance if you're approached by a person who has identified themselves as a governmental investigator.

Illegal/Unethical Activities

MD Anderson is committed to maintaining an ethical culture that is consistent with its mission, vision and core values. To that end, MD Anderson upholds a "zero tolerance" policy toward any illegal or unethical activity, or knowing, intentional or willing non-compliance. MD Anderson will not accept a workforce member's claim that improper conduct occurred for the benefit of MD Anderson. Any such conduct is not for the benefit of MD Anderson and is expressly prohibited.

Compliance issues can be complex, and identifying a suspected violation is not always easy. Here's a checklist to help:

- Does the activity comply with MD Anderson's Code of Conduct?
- Does the activity violate federal or state law?
- How would the activity look to your family, friends, patients or the community if published on the front page of the paper?

Non-Retaliation

MD Anderson encourages and in some cases requires its workforce members to report any perceived misconduct, including actual or potential violations.

It's understandable that some workforce members may be hesitant to report any suspected violations out of fear of retaliation. MD Anderson has established a non-retaliation policy to encourage workforce members to report any perceived misconduct.

For more information, see our [Non-Retaliation Policy \(#ADM0254\)](#).

Your Rights and Responsibilities Q&A

Question: How do I contact the Chief Compliance and Ethics Officer?

Answer: By calling 713-745-6636 or the page operator at 713-792-7090.

Question: How can I report a compliance concern?

Answer: You can:

- talk to your supervisor,
- call Institutional Compliance at 713-745-6636,
- page the Chief Compliance Officer at 713-792-7090, or
- call the Compliance Hotline at 1-800-789-4448.

Question: I received a letter from the FBI that demands access to MD Anderson patient records and confidential information. What should I do?

Answer: Immediately call the Chief Compliance and Ethics Officer and take no action until the Chief Compliance and Ethics Officer or their designee is able to assist.

Question: I work at The Aquarium entrance. Someone just introduced themselves to me as an investigator with the Food and Drug Administration (FDA). Do I allow them into the building?

Answer: No. Let them know that you are required to call the Chief Compliance and Ethics Officer to alert them of their arrival and support their needs. Take no action until the Chief Compliance and Ethics Officer or their designee is able to assist.



Resources

Professional Standards

Accountants

Texas State Board of Public Accountancy:

www.tsbpa.texas.gov

American Institute of Certified Public Accountants:

www.aicpa-cima.com

Advanced Practice Nurses

Texas Board of Nursing:

www.bon.texas.gov

Attorneys

American Bar Association:

www.americanbar.org

State Bar of Texas:

www.texasbar.com

Auditors

Texas State Auditor's Office:

www.sao.texas.gov

Dentists

State of Texas Board of Dental Examiners:

www.tsbde.texas.gov

Medical Physicists

American Association of Physicists in Medicine:

www.aapm.org

American College of Radiology:

www.acr.org

Nurses

American Nurses Association:

www.nursingworld.org

Texas Board of Nursing:

www.bon.texas.gov

Optometrists

Texas Optometry Board:

www.tob.tx.gov

Pharmacists

Texas State Board of Pharmacy:

www.pharmacy.tx.gov

Physical and Occupational Therapists

The Executive Council of Physical Therapy and

Occupational Therapy Examiners:

www.ptot.tx.gov

Physician Assistants

American Academy of Physician Assistants:

www.aapa.org

Texas Physician Assistant Board:

www.tmb.state.tx.us

Texas Academy of Physician Assistants:

www.tapa.org

Physicians

American Medical Association:

www.ama-assn.org

Texas Medical Board:

www.tmb.state.tx.us

Psychologists

Texas State Board of Examiners of Psychologists:

www.bhec.texas.gov/texas-state-board-of-examiners-of-psychologists/index.html

Researchers

Office for Human Research Protections:

www.hhs.gov/ohrp

Social Workers

Texas State Board of Social Worker Examiners:

www.dshs.texas.gov/socialwork

Veterinarians

Texas State Board of Veterinary Medical Examiners:

www.tbvme.state.tx.us

Websites

Research-Related

Animal and Plant Health Inspection Service:
www.aphis.usda.gov/aphis/home

Animal Welfare Information Center:
www.nal.usda.gov/programs/awic

Centers for Disease Control and Prevention:
www.cdc.gov

Food and Drug Administration:
www.fda.gov

National Cancer Institute:
www.cancer.gov

National Institutes of Health:
www.nih.gov

Office for Human Research Protections:
www.hhs.gov/ohrp

Federal Government

Centers for Medicare & Medicaid Services:
www.cms.gov

Office for Civil Rights
www.hhs.gov/ocr

Office of Inspector General:
www.oig.hhs.gov

Novitas Solutions:
www.novitas-solutions.com

U.S. Department of Health and Human Services:
www.hhs.gov

Office of Foreign Assets Control:
www.ofac.treasury.gov

Office of Hazardous Materials Safety:
www.phmsa.dot.gov/about-phmsa/offices/office-hazardous-materials-safety

Office of Laboratory Animal Welfare:
www.olaw.nih.gov

Office of Research Integrity:
www.ori.hhs.gov

Texas Government

State of Texas Agencies and Departments:
www.texas.gov/texas-state-agencies-departments

Texas Department of Insurance:
www.tdi.texas.gov

Texas Department of Licensing and Regulation:
www.tdlr.texas.gov

Texas Department of State Health Services:
www.dshs.texas.gov

Texas Ethics Commission:
www.ethics.state.tx.us

Texas Health and Human Services Commission:
www.hhs.texas.gov

Texas Higher Education Coordinating Board:
www.highered.texas.gov

Texas Office of Attorney General:
www.oag.state.tx.us

Texas State Library and Archives Commission:
www.tsl.texas.gov

The University of Texas System

The University of Texas System
Board of Regents:
www.utsystem.edu/offices/board-regents

The University of Texas System
Office of General Counsel:
www.utsystem.edu/offices/general-counsel

State and Federal Laws

General Fraud & Abuse Compliance Laws - Federal

Conspiracy to Defraud the Government
with Respect to Claims
18 U.S.C. § 286

False, Fictitious or Fraudulent Claims
18 U.S.C. § 287

False Statements Relating to Health Care Matters
18 U.S.C. § 1035

Health Care Fraud
18 U.S.C. § 1347

Criminal Penalties for Acts Involving Federal Health Care
Programs (Including the Federal Anti-kickback Statute)
42 U.S.C. § 1320a-7b

Federal Stark Law
42 U.S.C. § 1395nn

Civil False Claims Act
31 U.S.C. § 3729-33

Civil Monetary Penalties
42 U.S.C. § 1320a-7a

General Fraud & Abuse Compliance Laws - Texas

Texas Solicitation of Patients Act
Texas Occupations Code § 102.001 et seq.

Texas False Claims Act
Texas Human Resources Code § 36.002

Privacy and Confidentiality - Federal

HIPAA Privacy Rule 45 C.F.R. Part 160 and Part 164,
Subparts A and E

HIPAA Security Rule 45 C.F.R. Part 160 and Part 164,
Subparts A and C

Privacy and Confidentiality - Texas

Medical Records Privacy
Texas Health & Safety Code Chapter 181

Unauthorized Use of Identifying Information
Business & Commerce Code, Chapter 521

Mental Health Records
Texas Health & Safety Code Chapter 611

Communicable Diseases
Texas Health & Safety Code Chapter 81

Ethics Laws - Texas

Political Activities by Certain Public Entities and
Individuals
Texas Government Code Chapter 556

Standards of Conduct for State Officers or Employees
Texas Government Code § 572.051

Requirement to Use State Property for State Purposes
Texas Government Code § 2203.004

Texas Bribery Statute
Texas Penal Code § 36.02

Acceptance of Honorarium
Texas Penal Code § 36.07

Gifts to Public Servant
Texas Penal Code § 36.08(d)

Abuse of Official Capacity
Texas Penal Code § 39.02

Misuse of Official Information
Texas Penal Code § 39.06

State and Federal Laws

Research Laws

Animal Welfare Act
7 U.S.C. §§ 1231 et. seq.
9 C.F.R. Parts 1 through 3

Financial Disclosure by Clinical Investigators
21 C.F.R. Part 54

Promoting Objectivity in Research for which
PHS Funding is Sought
42 C.F.R. Part 50 Subpart F

Food, Drug and Cosmetic Act
U.S.C. Title 21, Chapter 9

Investigational New Drug Application
21 C.F.R. Part 312

New Drug Applications
21 C.F.R. Part 314

Radioactive Drugs for Certain Research Uses
21 C.F.R. Part 361.1

Electronic Records; Electronic Signatures
21 C.F.R. Part 11

Good Laboratory Practice for Non-Clinical Laboratory
Studies
21 C.F.R. Part 58

Investigational Device Exemptions
21 C.F.R. Part 812

Pre-market Approval of Medical Devices
21 C.F.R. Part 814

Protection of Human Subjects
21 C.F.R. Part 50 45 C.F.R. Part 46

Institutional Review Boards
21 C.F.R. Part 56

NIH Guidelines for Research Involving Recombinant
DNA Molecules
[https://grants.nih.gov/grants/policy/nihgps/html5/
section_4/4.1.26_research_involving_recombinant_or
synthetic_nucleic_acid_molecules_including_human_
gene_transfer_research.htm](https://grants.nih.gov/grants/policy/nihgps/html5/section_4/4.1.26_research_involving_recombinant_or_synthetic_nucleic_acid_molecules_including_human_gene_transfer_research.htm)

Public Health Service Policies on Research Misconduct
42 C.F.R. Part 93.103

Responsible Prospective Contractors
45 C.F.R. Part 94

Select Agents

Possession, Use, and Transfer of Biological Agents and
Toxins
7 C.F.R. Part 331

Possession, Use, and Transfer of Biological Agents and
Toxins
9 C.F.R. Part 121

Interstate Shipment of Etiologic Agents
42 C.F.R. Part 72

Select Agents and Toxins
42 C.F.R. Part 73

Civil Money Penalties, Assessments and Exclusions
42 C.F.R. Part 1003

Time and Effort Reporting

Cost Principles for Educational Institutions
(OMB Circular A-21)
2 C.F.R. Part 220

Grants for Research Projects
42 C.F.R. Part 52

Uniform Administrative Requirements for Awards and
Subawards
45 C.F.R. Part 74

Contract Cost Principles and Procedures
48 C.F.R. Part 31

Export Controls

Export Administration Regulations
15 C.F.R. Part 730

International in Arms Regulations
22 C.F.R. Part 120

Foreign Assets Control Regulations
31 C.F.R. Part 500

Foreign Trade Statistics Regulations
15 C.F.R. Part 30



Institutional Code of Conduct

MD Anderson is committed to full compliance with all applicable laws, rules and guidelines.

To such end, we are all required to conduct ourselves in accordance with the ten principles of our Institutional Code of Conduct.

Know and follow the rules

Know and follow the letter and the spirit of applicable laws, rules and guidelines, as well as UT System and MD Anderson rules, policies, procedures and compliance plans.

Think and act ethically

Follow our ethical standards and those of your professional organizations. Before you say or do something, ask yourself: How would this look to our patients and our community? Would this harm our reputation?

Keep it confidential

Handle all MD Anderson information, especially patient information, in ways that meet applicable laws, rules, guidelines and document retention schedules. Treat our information the same way you treat yours.

Commit to research integrity

Perform all research efforts in ways consistent with applicable legal, ethical and professional requirements, as well as MD Anderson rules, policies and procedures.

Avoid gifts

In general, you can't accept or give gifts, favors, benefits, services or items of value — especially in return for preferential treatment or patient referrals.

Bill accurately

When you document and bill for the care you've provided, be accurate, be thorough, be honest — and be timely.

Focus on Making Cancer History®

Don't use any MD Anderson resources, including your time and your colleagues' time, in a wasteful manner, for personal benefit, to harm someone, for political activity or for illegal activity.

Be true to our mission

Avoid outside influences: Don't engage in activities or enter into contracts that could or could seem to interfere with your MD Anderson work, make you disclose confidential MD Anderson information or affect your independent judgment.

Be a good colleague

Act with honesty and good faith in all matters. Don't engage in discriminatory, harassing, retaliatory, inappropriate, intimidating or disruptive behaviors.

When in doubt, point it out

If you think or discover that someone isn't following our Code of Conduct, promptly notify the chief compliance and ethics officer or the Institutional Compliance Office. And always cooperate fully with all inquiries and investigations related to reported issues.

MD Anderson's Standards of Conduct

Do the Right Thing

Do the Right Thing: MD Anderson's Standards of Conduct

is a publication of MD Anderson's Institutional Compliance team.

Email: Institutional_Compliance@mdanderson.org

Telephone: 713-745-6636

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Compliance Hotline: 800-789-4448

Online: www.mdanderson.org/dotherightthing

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