2.5.1 Institutional Compliance Program

Chapter 2 - General
Original Effective Date: April 2000

Section: 2.5 Institutional Compliance Program
Date Last Reviewed: November 2022

Responsible Entity: Chief Compliance and Privacy Officer
Date Last Revised: November 2022

I. Purpose

The mission of the Institutional Compliance Program is to support UT Health San Antonio's (UTHSA) mission, vision, and core values. UT Health San Antonio expects all workforce members to follow the highest standards of personal conduct as established by University policy and federal, state, and local laws.

Workforce members who encounter situations they believe to violate the University's Institutional Handbook of Operating Policies (IHOP), federal health care program requirements or other applicable state or federal law or regulation are expected to immediately consult their supervisor, another member of management, or the chief compliance and privacy officer. Employees may also call the Compliance Hotline at 877-507-7317 in confidence and anonymity. Any person with a concern regarding a breach of ethics or a possible compliance matter should promptly notify the Institutional Compliance and Privacy Office (ICPO).

II. Scope

This policy applies to all UT Health San Antonio faculty, staff, students, residents, health care providers, researchers, contractors, or any other individual providing services on behalf of UTHSA (collectively, Workforce Member, including employees and non-employees).

III. Policy

A. Institutional Compliance Program is designed to:

1. Ensure that UT Health San Antonio complies with the framework of federal and state laws, regulations, and guidelines, as well as University of Texas System and UTHSA policies that govern institutional operations.
2. Detect, deter, resolve, and prevent potential violations of UTHSA policies and other applicable governmental rules and regulations.

3. Promote a culture of compliance and encourage workforce members to conduct all UTHSA business with honesty and integrity.

4. Reinforce UTHSA's mission by providing quality patient care services and receiving appropriate reimbursement based on accurate clinical documentation, coding and billing, and patient and clinical research services.

5. Conduct periodic monitoring audits or similar assurance activities of operations, including technical and professional billing, privacy, research, and other compliance-related issues. These audits or similar assurance activities are aimed at ensuring adherence to general compliance policies, applicable compliance plans, UTHSA policies and procedures, and applicable federal and state laws and regulations.

6. Establish, review, revise, and communicate applicable policies that facilitate education of all responsible parties and promote the importance of compliance.

7. Develop and deploy education and training programs related to the Institutional Compliance Program.

8. Encourage all workforce members and other responsible parties to report all suspected or known improper activities to the immediate supervisor, another member of management, or the chief compliance and privacy officer. Individuals may also call the Compliance Hotline at 877-507-7317 in confidence and anonymity.

9. Establish and maintain mechanisms for responsible parties to raise questions and concerns about potential compliance issues without fear of retaliation, and to ensure that those concerns are appropriately addressed.

10. Report, disclose, trend, and follow up as appropriate, on potential violations or inappropriate interpretation of UTHSA compliance-related policies, compliance standards, laws, or regulations as identified.

B. Compliance Program Oversight

1. Responsibility for oversight of the Institutional Compliance Program rests with a multi-disciplinary Compliance and Ethics Committee (CEC), whose membership is appointed by the president, chief compliance and privacy officer (CCPO), and annually approved by the CEC.

2. The responsibility for implementing and managing the Institutional Compliance Program is assigned to the chief compliance and privacy officer (CCPO), who
functions within UT Health San Antonio's organizational structure. The CCPO, or designee, will, with assistance from the CEC, perform the following activities:

a. Develop or assist with developing the annual compliance work plan, and compliance risk management plans for high-risk areas identified through the yearly Compliance Risk Analysis.

b. Review the laws, regulations, statutes, policies, and guidelines related to UTHSA business functions.

c. Recommend the creation of new, and revisions to, UTHSA policies and procedures to the Executive Committee (EC) for approval.

d. Investigate new business trends that may have compliance implications.

e. Develop, implement, and monitor practical methodologies and systems to optimize compliance and ethics.

f. Develop, implement, promote, ensure compliance with, and document educational training programs to ensure the understanding of federal and state laws and regulations involving ethical and legal business practices that impact UTHSA activities.

g. Promote responsible guardianship of state funds and resources entrusted to UT Health San Antonio.

h. Provide input and guidance, as needed, on investigations of alleged misconduct and noncompliance.

i. Communicate regularly with the CEC on new and emerging issues.

C. Compliance Plans and Policies

The Institutional Compliance Program is comprised of additional compliance plans to ensure that the institution and its workforce members uphold UTHSA's commitment to the highest standards of business and ethics. These plans consist of the following:

1. Institutional Compliance Plan
2. Billing and Coding Compliance Plan
3. Privacy Compliance Plan
4. Research Compliance
5. Export Control Compliance
6. Endowment Compliance
D. Code of Ethics and Standards of Conduct

1. UT Health San Antonio requires all staff, faculty, and other workforce members to follow the Code of Ethics and Standards of Conduct adopted by UTHSA.

2. UT Health San Antonio is committed to full compliance with all applicable laws, rules, and guidelines. To such end and in order to uphold UTHSA's core value of Integrity, workforce members are required to conduct themselves in accordance with the principles comprising UTHSA's Code of Ethics and Standards of Conduct.

E. Workforce Member Responsibilities

Compliance is both an institutional and an individual commitment at UTHSA. Each individual is expected to commit to:

1. Maintaining a working knowledge of the laws, regulations, policies, rules, and procedures which apply to their individual job responsibilities;
2. Complying with the laws, policies, and procedures which apply to their individual job responsibilities;
3. Upholding the highest legal and ethical standards in fulfilling their job duties at UTHSA; and
4. Promptly addressing ethical or compliance issues or concerns.

F. Management's Responsibilities

1. Management personnel at every level are expected to set an ethical tone and to be role models for legal and ethical behavior in their departments. They should strive to create a department culture which promotes the highest legal and ethical behavior and encourages everyone in the department to voice concerns when they arise.

2. The department chair/head or leader of each operating unit is accountable for ensuring that their subordinates are adequately trained, and for detecting noncompliance with applicable policies and legal requirements when reasonable management efforts would have led to the discovery of problems or violations.

G. Reporting Compliance Concerns

1. Remaining silent and failing to report any violation or potential violation that a workforce member knows or should have known of may subject a person to corrective action up to and including termination.

2. To ensure open communication in all dealings with the chief compliance and privacy officer and the Compliance and Ethics Committee, workforce members
contacting Institutional Compliance are assured non-retaliation in accordance with the Protection from Retaliation for Reporting Suspected Wrongdoing policy.

3. To report compliance concerns, workforce members and any other members of the UTHSA community, including patients and their family members, may:
   a. Call the Compliance Hotline at 877-507-7317;
   b. Contact the Institutional Compliance and Privacy Office directly at 210-567-2014 or compliance@uthscsa.edu;
   c. Contact the chief compliance and privacy officer at 210-567-2066.

4. Suspected fraud, waste, and abuse involving state resources may be reported to the State's Auditor's Office's Hotline at 1-800-TX-AUDIT (1-800-892-8348). The State Auditor's Office provides additional information at its website, https://sao.fraud.texas.gov/.

5. UTHSA has established a Compliance Hotline, listed above, for workforce members and other members of the UTHSA community to report all suspected violations or questionable conduct. The Compliance Hotline includes the following features:
   a. The Compliance Hotline number is included in employment materials, the Institutional Compliance and Privacy website, UTHSA's Code of Ethics and Standard of Conduct, and is displayed in poster form on university bulletin boards;
   b. Telephone calls to the hotline are treated anonymously, upon request, and confidentially to the extent possible;
   c. The caller is not recorded, traced or identified, and the caller is not required to furnish their name;
   d. Information provided to the hotline is treated as privileged to the extent permitted by applicable law;
   e. Upon receiving information from the hotline, the CCPO will communicate and disseminate all compliance complaints to the triage team and assign to the appropriate party for investigation;
   f. Each report will be reviewed, and the CCPO or designee will initiate any investigations, corrections and/or follow-up on an as-needed basis in accordance with the provisions of this plan; and
   g. The CCPO will provide routine reports and periodic updates as deemed necessary to the CEC and president, or designee.

6. Intentionally making false accusations is a serious violation of UT Health San Antonio policy and may lead to corrective actions against the person making the accusation, up to and including termination of employment. Workforce members may not use the Compliance Hotline to protect themselves from the outcome of
2.5.1 Institutional Compliance Program

their own violations or misconduct; however, self-reporting is strongly encouraged and may be considered a mitigating factor when determining the appropriate corrective actions.

IV. Definitions

When used in this document, the following words have the meaning set forth below unless a different meaning is required by context.

Workforce Member – UT Health San Antonio faculty, staff, students, residents, health care providers, researchers, contractors, or any other individual providing services on behalf of the University, including employees and non-employees.

V. Related References

For questions regarding this policy, contact the Institutional Compliance and Privacy Office at 210-567-2014 or compliance@uthscsa.edu.

Rules and Regulations

Texas Education Code Section 51.943
Regents' Rules and Regulations, Standards of Conduct, Series 30103

Institutional Handbook of Operating Policies (IHOP)
IHOP 10.1.2 Code of Ethics and Standards of Conduct
IHOP 2.5.2 Protection from Retaliation for Reporting Suspected Wrongdoing

VI. Review and Approval History

A. The approving authority of this policy is the University Executive Committee.

B. The review frequency cycle is set for three years following the last review date, a time period that is not mandated by regulatory, accreditation, or other authority.

<table>
<thead>
<tr>
<th>Effective Date</th>
<th>Action Taken</th>
<th>Approved By</th>
<th>Date Approved</th>
</tr>
</thead>
<tbody>
<tr>
<td>04/2000</td>
<td>Policy Origination</td>
<td></td>
<td></td>
</tr>
<tr>
<td>05/2015</td>
<td>Policy Revision</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11/2022</td>
<td>Policy Revision</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>