Name of Policy:	Organizational Business Ethics		
Policy Number:	3364-100-50-05	THE UNIVERSITY OF TOLEDO MEDICAL CENTER	
Department:	Hospital Administration	•	
Approving Officer:	Chief Executive Officer, UTMC		
Responsible Agent:	Chief Medical Officer	Effective Date:	05/01/2024
Scope:	The University of Toledo Medical Center	Initial Effective Date:	9/23/1996
New policy proposal Minor/technical revision of existing policy Major revision of existing policy X Reaffirmation of existing policy			

(A) Policy Statement

The hospital and its employees shall operate according to a code of organizational business ethics with respect to marketing, patient admission, discharge, transfer and billing.

(B) Purpose of Policy

To support ethical operations and fair treatment of patients, and to ensure that the hospital conducts its business patient care practices in an honest, decent and proper manner.

(C) Procedure

- 1. Advertising and Marketing activities are conducted in accordance with the following guidelines:
 - a. All marketing activities must be consistent with the hospital's mission, vision and values.
 - b. The content of marketing communications must be truthful, accurate, fair and complete; marketing materials only reflect the services and the level of licensure and accreditation available.
 - c. Claims cannot be false, misleading, coercive or insensitive to the health care needs of the public.
 - d. Advertising should not endorse the use of excessive, unnecessary or unfounded health care services.
 - e. Comparisons between two health care providers must be objectively measured and fully substantiated.
 - f. Individual marketing programs may target specific communities; however, the needs of the entire community must be considered.
 - g. Advertising that includes cost information must be accurate and current.
 - h. All marketing communication pertaining to the hospital and its services must be approved by the Marketing Department; such approval will take into consideration adherence to the aforementioned guidelines.
- 2. Patient admission, discharge and transfer processes are conducted in accordance with the needs of the patient for health care services.
 - a. At no time will an emergency admission or transfer be denied because of lack of the patient's ability to pay for health care services.
 - b. If a patient is unable to meet financial requirements, the Financial Counseling staff will make every effort to assist the patient in making appropriate arrangements for admission and payment of services.
 - c. Annual hospital budgeting shall include a provision for "doubtful accounts" and charity care.
- 3. All patients have the right to request an itemized bill which includes dates of service. The Department of Service Excellence works in concert with the Billing Office and Utilization Management to review patient and other payer questions and concerns about charges, and to resolve any billing conflicts.

- 4. With respect to patients with longer lengths of stay, the patient's right to perform or refuse to perform tasks in or for the hospital is supported and protected. If the patient agrees to perform tasks for the hospital, staff should ensure that:
 - a. the work is appropriate to the patient's needs and therapeutic goals;
 - b. the patient agrees to the work arrangement described in the plan of care;
 - c. the plan specifies the nature of the services performed and whether the services are nonpaid or paid; and
 - d. compensation for paid services is based on customary standards and procedures.
- 5. The Hospital and its employees will act in accordance with the principles and guidelines set forth in the Ohio Revised Code Section 3345.21 and the Ohio Ethics Law, Chapter 102 with respect to:
 - a. gifts/tangible benefits
 - b. travel and lodging
 - c. discounts, samples or free goods
 - d. bribes
 - e. vendor purchases for private use
 - f. prizes from vendor sponsored promotions
 - g. improper use of UT equipment, supplies or personnel
 - h. privileged and confidential information
 - i. outside employment, business or consulting activity
 - j. conflict of interest
 - k. providing false and misleading information.

Approved by:		Review/Revision Date:			
		6/2/99	4/1/2020		
		3/27/02	5/1/2024		
/s/		7/25/05			
Rick Swaine	Date	9/2/2008			
Chief Executive Officer		5/23/2011			
		5/1/2014			
Review/Revision Completed By:		4/1/2017			
HAS					
		Next Review l	Date: 05/01/2027		
			Jacc. 03/01/2027		
Policies Superseded by This Policy: 7-50-05 - Organizational Business Ethics					