



**Shasta County Health and Human Services Agency  
Managed Care, Compliance & Quality Management**

**Code of Conduct**

**1.0 Persons/Programs Affected** (Check all that apply)

<input checked="" type="checkbox"/> All Staff	<input type="checkbox"/> All Managers	<input type="checkbox"/> All Supervisors	

\*Each branch to have unique Persons/Programs Affected  
\*All employees include all employees—full-time, part-time and extra-help.

**2.0 Definitions**

**Covered Individuals** refers to all Shasta County Health and Human Services Agency (HHSA) employees, volunteers, students, contractors, and all other individuals with responsibility pertaining to the ordering, provision, documentation, coding or billing services payable by a federal health care program for which HHSA seeks reimbursement and the services are performed under the Managed Care Plan agreement between Shasta County and State Department of Health Care Services.

**Contractor Providers** refers to Covered Individuals who contract with HHSA (or who are employed by or subcontracted with a person or entity who contracts with HHSA) to provide services at locations that are not owned or leased by HHSA.

**3.0 Policy**

The Shasta County HHSA Code of Conduct Policy and Procedure along with each Code of Conduct provide guidance to all Covered Individuals, in order to carry out daily activities within appropriate ethical standards and applicable laws and regulations.

**4.0 Procedure**

All Covered Individuals are required to receive, understand, sign and adhere to the HHSA Code of Conduct (For employees, volunteers, and students – Employee Code of Conduct and for Contracted Providers – Contractor Code of Conduct).

Each Code of Conduct shall set forth the following:

- A. HHSA’s commitment to full compliance with all statutes, regulations, and guidelines applicable to Federal health care programs, including HHSA’s commitment to prepare and submit accurate claims consistent with such requirements;



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- B. HHSA's commitment that all Covered Individuals shall be expected to report suspected violations of any statute, regulation, or guideline applicable to Federal health care programs, to a supervisor, the Shasta County Compliance Officer or designee, or through the toll-free confidential HHSA Compliance Disclosure Line;
- C. The possible consequences to HHSA, and to any Covered Individual, of failure to comply with all statutes, regulations, and guidelines applicable to Federal health care programs or of failure to report such non-compliance;
- D. The right of all Covered Individuals to use the HHSA Confidential Disclosure Line, as well as HHSA's commitment to confidentiality and non-retaliation with respect to disclosures.

The Compliance Officer or designee shall ensure all Covered Individuals have received, signed, and been trained on the Code of Conduct.

All HHSA Covered Individuals are required to sign the Code of Conduct.

- A. For employees, volunteers, and students of HHSA, failure to sign the Employee, Volunteer, and Student Code of Conduct or to comply with the rules of the Employee, Volunteer, and Student Code of Conduct is in violation of HHSA policy. Failure to sign or comply with this Code of Conduct may subject the HHSA employee, volunteer, or student to disciplinary action, up to or including termination of employment, or termination of the association between volunteers and interns, and HHSA.
- B. For Contracted Providers, failure to sign the Contractor Code of Conduct or to adhere to the rules of the Contractor Code of Conduct is in violation of HHSA policy and may result in termination of contract, and the inability to enter into future contracts with HHSA.

Procedures for Contracted Providers:

- A. HHSA will require its Contracted Providers that have Covered Individuals to:
  - a. Have each of Contractor's Covered Individuals acknowledge and sign the Contractor Code of Conduct;
  - b. Obtain and retain (subject to review by HHSA) signed certifications that each of Contracted Provider's Covered Individuals have received, read, and understands the HHSA Contractor Code of Conduct and agrees to abide by the requirements of HHSA's Contractor Code of Conduct.



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- B. Contracted Providers that are located in, and Medi-Cal certified by another county, may comply with the certifying county’s program integrity requirements, upon approval of the Compliance Officer or designee.

**References and Citations**

U.S. Sentencing Guidelines §8B2.1 (Effective Compliance & Ethics Program)

**5.0 Attachments**

Shasta County HHSA, Mental Health Plan Employee Code of Conduct  
Shasta County HHSA, Mental Health Plan Contractor Code of Conduct

**6.0 Revision History**

Date	No.	Action:
05/27/2014	2014-19	Adopted
04/10/2017	2014-19.2	Revised Code of Conduct into two (Employee & Contractor)

**7.0 Other Agency Involvement**

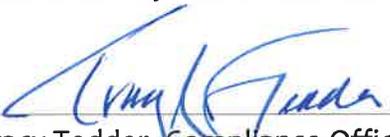
N/A

**8.0 Authorization/Signatures**

The above policy and procedure has been reviewed and is authorized for immediate implementation:

  
\_\_\_\_\_  
Donnell Ewert, M.P.H., Director  
Shasta County Health and Human Services Agency

5/16/17  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Tracy Tedder, Compliance Officer  
Director, Business & Support Services  
Shasta County Health and Human Services Agency

5/12/17  
\_\_\_\_\_  
Date

**SHASTA COUNTY HEALTH AND HUMAN SERVICES AGENCY,  
MENTAL HEALTH PLAN (MHP)  
EMPLOYEE, VOLUNTEER, AND STUDENT CODE OF CONDUCT**

Shasta County Health and Human Services Agency (HHSA), maintains high ethical standards and is committed to complying with all applicable statutes, regulations, and guidelines. HHSA and each of its employees, volunteers, and students shall follow this Employee, Volunteer, and Student Code of Conduct as applicable to services performed under the Managed Care Plan agreement between Shasta County and the State Department of Health Care Services.

**1. PURPOSE**

The purpose of this HHSA Code of Conduct is to ensure that all HHSA employees, volunteers, and students providing services under the Shasta County Managed Care Plan agreement (the agreement between Shasta County and State of California Department of Health Care Services to provide specialty mental health services to eligible Shasta County Medi-Cal beneficiaries), are committed to conducting their activities ethically and in compliance with all applicable state and federal statutes, regulations, and guidelines applicable to Federal Health Care programs, and with all related HHSA Policies and Procedures. This Code of Conduct also serves to demonstrate HHSA's dedication to providing quality care to its clients, and to submitting accurate claims for reimbursement to all payers.

**2. CODE OF CONDUCT - GENERAL STATEMENT**

- A. This Code of Conduct is intended to provide HHSA employees, volunteers, and students with general guidelines to enable them to conduct the business of HHSA in an ethical and legal manner;
- B. Every HHSA employee, volunteer, and student performing duties under the Managed Care Plan agreement shall uphold this Code of Conduct;
- C. Failure to sign or comply with this Code of Conduct, or failure to report reasonably suspected issues of non-compliance, may subject the HHSA employee, volunteer, or student to disciplinary action, up to or including termination of employment, or termination of the association between volunteers and interns, and HHSA. In addition, such conduct may place the individual, or HHSA, at substantial risk in terms of its relationship with various payers. In extreme cases, there is also the risk of action by a governmental entity up to and including an investigation, criminal prosecution, and/or exclusion from participation in the Federal Health Care Programs.

**3. CODE OF CONDUCT**

All HHSA employees, volunteers, and students performing duties under the Managed Care Plan agreement shall:

- A. Perform their duties in good faith and to the best of their ability;
- B. Comply with all statutes, regulations, and guidelines applicable to Federal Health Care programs, and with this Code of Conduct and with HHSA's own policies and procedures;
- C. Refrain from any illegal conduct. When an employee, volunteer or student is uncertain of the meaning or application of a statute, regulation, or policy, or the legality of a certain practice or activity, he or she shall seek guidance from his or her immediate supervisor or the designated HHSA Compliance Officer or designee;
- D. Not obtain any improper personal benefit by virtue of their employment, volunteer, or student relationship with HHSA.
- E. Notify the HHSA Compliance Officer or designee immediately upon the receipt (at any location) of any inquiry, subpoena, or other agency or government request for information regarding HHSA;
- F. Not destroy or alter HHSA information or documents in anticipation of, or in response to, a request for documents by any applicable government agency or from a court of competent jurisdiction;
- G. Not engage in any practice intended to unlawfully obtain favorable treatment or business from any entity, physician, client, resident, vendor, or any other person or entity in a position to provide such treatment or business;
- H. Not accept any gift of more than nominal value or any hospitality or entertainment, which because of its source or value, might influence the employee, volunteer, or student's independent judgment in transactions involving HHSA;
- I. Disclose to the HHSA Compliance Officer or designee any financial interest, official position, ownership interest, or any other financial or business relationship that they (or a member of their immediate family) has with HHSA's employees, vendors or contractors;
- J. Not participate in any false billing of HHSA, clients, other government entities, or any other party;
- K. Not participate in preparation or submission of any false cost report or other type of report submitted to the HHSA or any other government entity.
- L. Not pay or arrange for HHSA to pay any person or entity for the referral of clients to HHSA, and shall not accept any payment or arrange for HHSA to accept any payment, for referrals from HHSA;

- M. Not use confidential HHS information for their own personal benefit or for the benefit of any other person or entity, while employed at HHS, or at any time thereafter;
- N. Not disclose confidential medical information pertaining to HHS's clients without the express written consent of the client or pursuant to court order and in accordance with all applicable laws and HHS's own Policies and Procedures;
- O. Promptly report to the HHS Compliance Officer or designee any and all violations or reasonably suspected violations of this Code of Conduct;
- P. Promptly report to the HHS Compliance Officer or designee any and all violations or reasonably suspected violations of any statute, regulation, or guideline applicable to Federal Health Care programs or violations of HHS's own applicable Policies and Procedures;
- Q. Know they have the right to use HHS's Confidential Disclosure Line without fear of retaliation with respect to disclosures; and with HHS's commitment to maintain confidentiality, as appropriate; and
- R. Not engage in or tolerate retaliation against anyone who reports suspected wrongdoing.

**4. SHASTA COUNTY COMPLIANCE OFFICER**

The Shasta County HHS Compliance Officer may be contacted at:

Compliance Officer

Shasta County Health and Human Services Agency, Business & Support Services

1810 Market Street, Redding, CA 96001

P.O. Box 496005, Redding, CA 96049-6005

(530) 245-6750

24/7 Confidential Disclosure Line: (530) 229-8050 or 1-866-229-8050

Email: [mhcompofer@co.shasta.ca.us](mailto:mhcompofer@co.shasta.ca.us)

Shasta County Health & Human Services Agency (HHSa)

**EMPLOYEE, VOLUNTEER,  
AND STUDENT  
CODE OF CONDUCT  
CERTIFICATION**

I, \_\_\_\_\_ by signing this Certification  
(*Print First and Last Name*)

acknowledge that:

1. I have received a copy of the Code of Conduct;
2. I have read and understand the Code of Conduct; and
3. I agree to comply with the Code of Conduct.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Please return signed certification to HHSa Compliance Program staff.

Thank you.

**SHASTA COUNTY HEALTH AND HUMAN SERVICES AGENCY,  
MENTAL HEALTH PLAN (MHP)  
CONTRACTOR CODE OF CONDUCT**

Shasta County Health and Human Services Agency (HHS), maintains high ethical standards and is committed to complying with all applicable statutes, regulations, and guidelines. HHS Contractors shall follow this Contractor Code of Conduct (Code of Conduct) as applicable to services performed under the Managed Care Plan agreement between Shasta County and the State Department of Health Care Services and this Agreement between the County of Shasta and HHS Contractor.

**1. PURPOSE**

The purpose of this HHS Code of Conduct is to ensure that all HHS Contractors providing services under the Shasta County Managed Care Plan (the agreement between Shasta County and State of California Department of Health Care Services to provide specialty mental health services to eligible Shasta County Medi-Cal beneficiaries) and this Agreement between the County of Shasta and Contractor, are committed to conducting their activities ethically and in compliance with all applicable state and federal statutes, regulations, and guidelines applicable to Federal Health Care programs. This Code of Conduct also serves to demonstrate HHS's dedication to providing quality care to its clients, and to submitting accurate claims for reimbursement to all payers.

**2. CODE OF CONDUCT - GENERAL STATEMENT**

- A. This Code of Conduct is intended to provide HHS Contractors with general guidelines, to enable them to conduct the business of HHS in an ethical and legal manner;
- B. Every HHS Contractor is expected to uphold this Code of Conduct;
- C. Failure to comply with this Contractor Code of Conduct, or failure to report reasonably suspected issues of non-compliance, may result in the HHS Contractor's termination of contracted status. In addition, such conduct may place the Contractor, the individuals employed by Contractor, or HHS, at substantial risk in terms of its relationship with various payers. In extreme cases, there is also the risk of action by a governmental entity up to and including an investigation, criminal prosecution, and/or exclusion from participation in the Federal Health Care Programs.

**3. CODE OF CONDUCT**

All HHS Contractors and employees, volunteers, and interns of Contractor shall:

- A. Perform their duties in good faith and to the best of their ability;
- B. Comply with all statutes, regulations, and guidelines applicable to Federal Health Care programs, and with this Code of Conduct;

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- C. Refrain from any illegal conduct. When a Contractor is uncertain of the meaning or application of a statute, regulation, or policy, or the legality of a certain practice or activity, Contractor shall inform the HHSA Compliance Officer or designee;
- D. Not obtain any improper personal benefit by virtue of their contractual relationship with HHSA;
- E. Notify the HHSA Compliance Officer or designee immediately upon the receipt, at any location, of any inquiry, subpoena, or other agency or government request for information regarding HHSA or the services provided under this agreement between HHSA and Contractor;
- F. Not destroy or alter HHSA information or documents in anticipation of, or in response to, a request for documents by any applicable government agency or from a court of competent jurisdiction;
- G. Not engage in any practice intended to unlawfully obtain favorable treatment or business from any entity, physician, client, resident, vendor, or any other person or entity in a position to provide such treatment or business;
- H. Not accept any gift of more than nominal value or any hospitality or entertainment, which because of its source or value, might influence the Contractor's independent judgment in transactions involving HHSA or the services provided under this agreement between HHSA and Contractor;
- I. Disclose to the HHSA Compliance Officer or designee any financial interest, official position, ownership interest, or any other financial or business relationship that they (or a member of their immediate family, or persons in their employ) has with HHSA's employees, vendors or contractors;
- J. Not participate in any false billing of HHSA, client, other government entities, or any other party;
- K. Not participate in preparation or submission of any false cost report or other type of report submitted to the HHSA or any other government entity;
- L. Not pay, or arrange for Contractor to pay, any person or entity for the referral of HHSA client to Contractor, and shall not accept any payment or arrange for any other entity to accept any payment for referrals from Contractor;
- M. Not use confidential HHSA information for their own personal benefit or for the benefit of any other person or entity, while under contract to HHSA, or at any time thereafter;

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- N. Not disclose confidential medical information pertaining to HHSA's clients without the express written consent of the client or pursuant to court order and in accordance with all applicable laws;
- O. Promptly report to the HHSA Compliance Officer or designee any and all violations or reasonably suspected violations of this Code of Conduct;
- P. Promptly report to the HHSA Compliance Officer or designee any and all violations or reasonably suspected violations of any statute, regulation, or guideline applicable to Federal Health Care programs;
- Q. Know they have the right to use HHSA's Confidential Disclosure Line without fear of retaliation with respect to disclosures; and with HHSA's commitment to maintain confidentiality, as appropriate; and
- R. Not engage in or tolerate retaliation against anyone who reports suspected wrongdoing.

**4. SHASTA COUNTY COMPLIANCE OFFICER**

The Shasta County HHSA Compliance Officer may be contacted at:

Compliance Officer  
Shasta County Health and Human Services Agency, Business & Support Services  
1810 Market Street, Redding, CA 96001  
P.O. Box 496005, Redding, CA 96049-6005  
(530) 245-6750

24/7 Confidential Disclosure Line: (530) 229-8050 or 1-866-229-8050

Email: [mhcompofcr@co.shasta.ca.us](mailto:mhcompofcr@co.shasta.ca.us)

*CODE OF CONDUCT CERTIFICATION PAGE FOLLOWS*



Shasta County Health & Human Services Agency (HHS)

# CODE OF CONDUCT - CONTRACTOR CERTIFICATION

I, \_\_\_\_\_, by signing this Certification  
(Print First and Last Name)

acknowledge that:

1. I am an employee of <name of contractor>, a contractor of the County of Shasta, through its Health and Human Services Agency;
2. I have received a copy of the Code of Conduct;
3. I have read and understand the Code of Conduct; and
4. I agree to comply with the Code of Conduct.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Contractor shall maintain all current signed Code of Conduct – Contractor Certification forms on file and retain forms for a period of seven years after employee no longer works for Contractor, and provide to HHS upon request, or submit depending upon agreement terms, this signed certification to HHS Compliance Program staff at 1810 Market Street, Redding, CA 96001, or to P.O. Box 496005, Redding, CA 96049-6005.

Thank you.