

<b>Beacon Comprehensive Behavioral Health Management Policy and Procedure Manual</b>	
<b>Policy Name:</b> Ethical Standards and Conflict of Interest	<b>Patient Rights and Responsibilities</b>
<b>Date:</b> 8-94 <b>Reviewed by QI Committee:</b> 7-06, 7-07, 7-08, 7-09, 7-10, 7-11 <b>Revised by QI Committee:</b> 7-06, 7-07, 7-09, 7-11	<b>Page:</b> 1 of 3 <b>Policy Number:</b> RR-5

**Purpose:** To ensure that each employee makes every effort to protect the welfare of those who seek services, and the employee uses his or her skills only for purposes consistent with these values. To ensure the maintenance of clear and ethical referral practices by preventing conflict of interest potential for Beacon Comprehensive Behavioral Health Management (Beacon CBHM) employees.

**Policy:**

1.0 Oversight

The President/CEO, Vice President of Product Management and Compliance, Vice-President of Clinical Services, Director of Intensive Services, Director of Care Management, and QI Executive Assistant share responsibility for ensuring the highest ethical standards are maintained by Beacon CBHM employees.

2.0 Guidelines

- 2.1 The patient remains the primary concern and the referral source is always secondary.
- 2.2 The patient is treated with respect and dignity and an employee will never demean the patient with inappropriate language in actual contact or in case review.
- 2.3 Referrals to private providers are to be made under the guidelines established by Policy *Intake and Referral*, AR-2.
- 2.4 Developing or pursuing a relationship with the patient or former patient is totally unacceptable behavior for an employee and will result in termination.
- 2.5 An employee’s illicit involvement in drugs will result in termination.
- 2.6 An employee’s conviction of a crime while employed with Beacon CBHM will result in termination.
- 2.7 Confidential material will not be removed from the Beacon CBHM office without prior approval of the Vice President of Product Management and Compliance or Vice-President of Clinical Services.
- 2.8 No employee will at any time accept reimbursements, gratuities, or tangible favors from agencies, private practitioners, patient or patients’ relatives, and all gifts will be returned and documented as returned. The Human Resources Manager may approve acceptance of gifts of nominal value that reflect no conflict of interest, misconduct, or unethical behavior. Usual and customary gifts presented during the holiday season are acceptable.

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- 2.9 No Beacon CBHM employee will be in a position to refer and provide treatment for the same patient and therefore, Bacon CBHM employees involved in making referrals must inform the Vice-President of Product Management and Compliance or designated Director of any outside employment, affiliations, or association with mental health treatment providers.
- 2.10 In their commitment to the understanding of human behavior, Beacon CBHM employees value sensitivity awareness, objectivity and integrity. In providing services, they maintain the highest standards of their profession, accepting responsibility for the consequences of their work and making every effort to ensure their services are appropriate.
- 2.11 Beacon CBHM employees recognize the boundaries of their competence and the limitations of their training. They maintain knowledge of current scientific and professional information and offer recommendations consistent with recognized professional standards.
- 2.12 Beacon CBHM employees act with due regard for the needs, special competencies and obligations of their colleagues in psychology and other professions.

3 **Professional Ethical Standards and Relationships**

- 3.1 All professional staff at BCBHM must comply with the ethical codes of their respective disciplines that are consistent with state and federal law. In addition, mechanisms are built in at each level of management to handle allegations of unethical practices by BCBHM employees or those reported to BCBHM staff regarding any behavioral health provider who is providing care to a member.
- 3.2 BCBHM defines a professional relationship as any interaction between a BCBHM employee and any consumer of BCBHM business, in all domains. This includes relationships or interactions between BCBHM employees and members, and those with a direct supervisory relationship, either as an employee of BCBHM, employee of BCBHM customer health plans, state regulatory agencies, and/or between BCBHM employees and servicing providers. BCBHM asserts that within the context of a professional relationship, its employees maintain a relationship with members through providing expertise or healthcare related services.
- 3.3 BCBHM employees are trained to respect and maintain confidentiality and recognize a professional relationship as a business alliance where the distinct role of each party remains clear. Dual relationships that have potential to interfere with maintaining the effectiveness of a professional relationship and compromising professional objectivity are strictly prohibited. Examples of prohibited relationships are
  - 3.3.1 A material professional or business relationship with a member or network provider
  - 3.3.2 A personal relationship with a member or network provider
  - 3.3.3 A familial relationship with a member or network provider
  - 3.3.4 A prior treatment relationship with a member or network provider

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**Professional Accountability**

- 4.1 Employees - BCBHM holds itself and its employees accountable for their practice. BCBHM ethics policy employs a code of professional conduct, which prohibits staff from engaging in unprofessional relationships. This includes engagements that may result in the BCBHM employee growing emotionally invested in a member and/or provider and taking a personal stance within business-related decision-making that interferes with professional judgment.
- 4.2 Any ethical violations by BCBHM employees will require, at a minimum, a plan of action for remediation of the violation and may involve progressive disciplinary procedures, including immediate disciplinary actions (up to and including termination of employment) and/or contact with state/professional ethics or disciplinary boards. A plan of action is to be written by the Human Resources Department with input from the Vice President of Product Management and Compliance, the employee’s supervisor, and Medical Director as indicated.
- 4.3 BCBHM employees, who are aware that they are being investigated by a professional licensure or regulatory agency, or any other similar entity, must report the fact that such an investigation is underway to the Human Resources (HR) Department. HR will determine if the employee’s applicable supervisor and director should be notified.
  - 4.3.1 BCBHM will maintain and respect the confidentiality and privacy of all BCBHM employees in the course of the investigation and resolution of any ethical complaint.
  - 4.3.2 All BCBHM professional employees will attend at a minimum a mandatory annual education program regarding ethical practice, conflict of interest, confidentiality, and cultural diversity. Attendance of this education will be documented in the employee’s annual training module.
- 4.4 Providers - All BCBHM professional staff shall be vigilant to situations that may present ethical questions, dilemmas or violations in the delivery of services to members, including dilemmas or violations in the delivery of services to members. (i.e., evidence that call/report to appropriate protective agencies has not occurred where there is knowledge of potential abuse of children, the elderly, or the disabled, concerns associated with patient abandonment where transfer of care needs have not been addressed by a provider, member report that office based treatment occurred in a coffee shop).
  - 4.4.1 In these situations, BCBHM staff must adhere to the highest ethical standards and discuss any concerns with their supervisor.
  - 4.4.2 If a Provider discovers they are being investigated by a professional licensure or regulatory agency, or any other similar entity, the provider must report the fact that such an investigation is underway to BCBHM Manager, Network. These issues shall be referred to the Vice-President of Product Management and Compliance and will be investigated, reviewed, and resolved as delegated.
  - 4.4.3 As required by contract, BCBHM will follow procedures for filing a Potential Quality Incident with the health plan quality management department.

3.0 Notification to Employees

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At the time of hire and during each annual performance review, all employees receive written notification regarding the above Confidentiality and Conflict of Interest guidelines.