



THE UNIVERSITY OF
TOLEDO
1872

COMPLIANCE PLAN

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INTRODUCTION

The University of Toledo has an ongoing commitment to ensure that its affairs are conducted in accordance with both applicable laws and regulations and University policies and practices.¹ In order to achieve this goal, its faculty and staff must be fully informed about applicable laws and regulations, and pertinent policies and practices so that they do not inadvertently engage in conduct that may raise compliance issues. Since the laws and regulations that apply to our activities are extensive, complex and ever-changing, The University of Toledo has adopted a formal Compliance Plan to ensure our employees are aware of their obligations, and to address potential high risk areas of compliance concern.

The University of Toledo consists of the following: Main Campus, Health Science Campus, The University of Toledo Medical Center, Scott Park Campus, Center for the Visual Arts, R.A. Stranahan Arboretum and the Lake Erie Research Center.

Key features of the plan are:

- the designation of the University Audit Committee to maintain oversight of the compliance functions;
- the identification of the compliance code of conduct, including an educational and training plan for dissemination of the code;
- incorporation of standards and policies that guide University personnel and other third parties affiliated with the University in regards to practice in high risk compliance areas;
- a coordinated education and training program for personnel and other third parties affiliated with the University in regards to procedures in high risk compliance areas;
- provide for regular review of overall compliance efforts to ensure that procedures reflect current requirements and that other adjustments are made to improve the program;
- a publicized and uniform mechanism for University personnel and third parties affiliated with the University to raise questions and receive appropriate guidance concerning practice in high risk compliance areas;

¹ University policies and practices includes the University policies, procedures, and practices, the University of Toledo Medical Center policies, procedures and practices, and any other appropriate Departmental policies,

- a publicized process for University employees to report possible compliance issues;
- a procedure for investigating and resolving reports of possible compliance issues;
- based on the OIG Work Plan determine the areas of risk;
- formulation of corrective action plans to address any compliance problems that are identified; and
- a plan to monitor the University's overall compliance efforts.

The compliance program described in this document is intended to establish a framework for legal and ethical compliance by The University of Toledo and its employees. It is not intended to set forth all of the substantive programs and practices of the University that are designed to achieve compliance. The University of Toledo already maintains and/or is developing various compliance practices and those practices continue to be part of its overall legal and ethical compliance efforts. The University of Toledo intends that this compliance plan embrace all elements of an effective program to prevent and detect violations of law and University policies, procedures and ethical standards.

Corporate Compliance

The University of Toledo believes that corporate compliance is critical to its operation. The Board of Trustees and Executive Administration approved the formation of a Compliance Department and the designation of a Compliance Officer to ensure corporate compliance throughout the University especially in areas of high risk. Over the last several months, the Compliance Officer has reviewed many of the current documents, policies, procedures and internal structures of the University in order to formulate this plan. The institution has many mechanisms that already exist to assess, monitor and guide University personnel in compliance. It is the Compliance Officer's function with the guidance from the President and the Executive Compliance Committee to identify, elaborate, coordinate, and develop these documents, policies, procedure, and internal structures into one document for University personnel and their affiliates to use as a guide for compliance issues.

The Compliance Plan ("Plan") is the principal plan that outlines the expectations of behavior and performance for the University. The departments will support the Compliance Plan by providing compliance training programs that address the specific Federal, State and University policies that govern their department. To provide the University and the Medical Center with an adequate comfort level that all employees, agents, and the practice groups are making serious efforts to comply with all applicable federal and state requirements a strong monitoring and auditing process will be included in the plan.

The ultimate objective is to create a Plan that establishes a culture for The University of Toledo, to weave concepts of honesty and integrity into all operations. The time, money, and energy devoted to this effort should be viewed as an investment by the University to assist in realizing its full mission.

BACKGROUND

The University of Toledo has a rich history founded in 1872 emerging into a state institution of higher learning and the home of nine colleges: Arts and Science, Education, Engineering, Business Administration, Health and Human Services, Law, Pharmacy, University College and Graduate school on five campuses.

The Toledo State College of Medicine founded by the Ohio General Assembly on December 18, 1964 has endured major changes occurring in the healthcare and health education industry to develop into the Medical University of Ohio at Toledo.

On March 31, 2006, the governor of the State of Ohio, Robert Taft signed into law the merger of two great institutions: The University of Toledo and the Medical University of Ohio at Toledo.

The University of Toledo merged with the Medical University of Ohio to achieve greatness as one university; achieving efficiencies in operations through rationalization of overhead, better absorption of fixed costs, improved purchasing leverage and other economies of scale; improving the institution's ability to recruit faculty and students; and achieving greater national visibility for the quality and quantity of scholarly research underway at both institutions.

July 1, 2006, the merger was official and The "new" University of Toledo was established and is currently under the direction and guidance of President Lloyd Jacobs. At the present time The University of Toledo consists of: Main Campus, Health Science Campus, The University of Toledo Medical Center, Scott Park, Center for the Visual Arts, R.A. Stranahan Arboretum and the Lake Erie Research Center.

This was not just a merger of two institutions but a merger of two cultures: academic and health care. Today, more so than in the past, we are approaching compliance in a formal and systematic way. Armed with a mandate from management and guidance from the government, we are creating and implementing compliance programs to embody and fulfill our organizations' commitment to compliance as part of providing the best possible health care and education. While much of this plan is designed to address health care and government related issues, compliance in all aspects of university life is a shared responsibility. Compliance is every employee's responsibility to follow the university policies, state and federal regulations that govern specific areas.

SCOPE

The Plan consists of the following components:

1. Standards of Conduct. A code of conduct, setting forth standards and policies that guide The University of Toledo personnel and independent contractors;
2. Administrative Responsibility. The designation of University of Toledo officials responsible for compliance efforts, including a Compliance Officer, General Counsel, Executive Compliance Committee and a Compliance Council;
3. Employee screening. A screening process for employees and others to ensure that they have not been charged with violations of law or ethical standards;
4. Education and Training. A coordinated education and training program for UT personnel regarding the compliance plan;
5. Monitoring and Auditing. Regular review of overall compliance efforts to ensure that practices reflect current requirements and that other adjustments are made to improve the program, including a mechanism for University personnel and third parties to raise questions and receive appropriate guidance concerning compliance issues or to report suspected violations;
6. Investigation and Corrective Action. A procedure for investigating and resolving reports of possible compliance issues will be conducted through auditing and monitoring;
7. Enforcement and Discipline. Follow University procedures for appropriate disciplinary action that is enforced and addresses compliance violations.

The provisions of this Plan apply to University of Toledo faculty, staff, physicians, fellows, residents, student interns, volunteers and independent contractors.

The Plan applies to all medical, business, and legal activities performed by faculty, physicians, fellows, staff, student interns, residents, volunteers and independent contractors.

The University of Toledo Employees' Role

The expectations of The University of Toledo employees regarding compliance are as follows:

Comply with The University of Toledo's values and the Standards of Conduct;

Adhere to the Ethical Conduct Statement (where appropriate adherence to these principles will become part of every employee's performance program);

Treat all patients, students, employees and anyone affiliated with the University with respect, dignity and deliver quality care;

Be familiar with the purpose of the Compliance Plan;

Conduct your job in a manner which demonstrates commitment to compliance with all applicable laws and regulations;

Attend educational sessions that relates to job responsibilities;

Attest to the fact, that one has received education in, understands, and will follow the rules and regulations relating to employment;

Report known or suspected violations to the Compliance Officer or EthicsPoint - Anonymous Reporting Line;

Investigate or participate in an investigation to the point of resolution of an alleged violation;

Strive to prevent errors and provide suggestions to eliminate errors.

PURPOSE

The Compliance Program is intended to accomplish the following purposes:

Demonstrate the University's commitment to honest and responsible conduct.

Promote an ethical workplace which encourages compliance within the letter and spirit of the law.

Ensure that the University maintains its standards in medical, business and legal practices through adherence to University policies and procedures.

Prevent, detect and report civil/criminal conduct concerning fraud and abuse violations by its employees or agents.

Educate employees concerning their role in the University Compliance Program.

Provide a workplace that enables employees to participate in the Compliance Program without retaliation.

Through early detection and reporting, minimize any financial loss to government and taxpayers, as well as any corresponding financial loss to the University.

THE UNIVERSITY OF TOLEDO

CODE OF CONDUCT

The University of Toledo's goal of excellence in education, research and in quality patient care is supported by the Code of Conduct. The Board of Trustees and administration of The University of Toledo adopted Standards of Conduct. University employees are expected to exhibit behaviors that are consistent with our vision and our mission. Additional rules may be established by management to meet special requirements of departments or work units or as circumstances require.

Compliance with The University of Toledo Standards of Conduct will ensure that all employees will prevent, detect, and report unlawful work related conduct by its employees and agents.

The University of Toledo will strive to ensure that all activity by or on behalf of the organization is in compliance with applicable laws.

If any employee has questions regarding the existence of, interpretation or application of any law, the employee should contact the Compliance Officer or General Counsel.

The University of Toledo is committed to conducting business with the highest standards of business ethics and integrity. Employees will accurately and honestly represent the University and will not engage in any activity intended to defraud anyone of money, property or services.

If an employee believes or knows that another employee has not honestly and accurately represented the University, then this alleged violation will be reported to the Compliance Officer, General Counsel or the Anonymous Reporting Line - EthicsPoint.

The University of Toledo employees shall strive to maintain the confidentiality of patient and student information and other confidential information in accordance with applicable legal and ethical standards.

The University of Toledo employees have access to a variety of confidential and sensitive information. Inappropriate release of this information could be harmful to the patients, students, their families and the University. Every University employee has the obligation to actively protect and safeguard confidential and sensitive information. All attempts should be made to prevent the unauthorized disclosure of this information.

The University of Toledo employees owe a fiduciary duty of loyalty to the organization. Employees are prohibited from using their University position or knowledge obtained through their position to profit personally or to assist others in profiting at the expense of the University.

All University employees are expected to regulate their activities to avoid actual impropriety or an appearance of impropriety that might arise from the influence of those activities on business decisions of the University or from disclosure or private use of business affairs or plans of the University.

The University of Toledo employees shall conduct all business transactions with vendors, contractors and other third parties free from offers or solicitation of gifts and favors or other improper inducements in exchange for influence or assistance in a transaction.

This standard is intended to guide employees in determining the appropriateness of activities or behaviors with vendors, providers, contractors, third party payers and government entities.

University employees will strive to preserve and protect University assets by making prudent and effective use of University resources and by accurately reporting its financial condition.

This standard is intended to guide employee activities and behaviors that may impact the University's financial health and which reflect a reasonable and appropriate use of the assets of the University.

University employees will promptly notify the Compliance Officer, General Counsel, an appropriate high level employee or use the anonymous reporting line - EthicsPoint and report any violations of law or unlawful work related conduct by its employees and agents.

This standard is intended to motivate employees to utilize the reporting structure to report any known or suspected violations.

POLICY GUIDELINES

It is the policy of the University that its employees will prevent, detect and report improper and unlawful conduct by its employees and agents. The following statements establish a procedural framework but do not encompass all substantive practices.

- A. The University of Toledo will identify major areas deemed to pose a substantial risk of unlawful activities.

- B. The University of Toledo will establish and maintain compliance standards and procedures to be followed by its employees and agents. These policies and procedures will be designed to prevent and detect unlawful conduct.

To guide employees, the Compliance Officer shall, with the assistance of General Counsel and the Compliance Council, review, develop and recommend revision of policies to achieve The University of Toledo's compliance goals. These policies should be considered an integral part of this Plan.

ADMINISTRATIVE RESPONSIBILITY

COMPLIANCE OFFICER

The Compliance Officer has primary responsibility for implementing and managing the Compliance Plan. The Compliance Officer shall be appointed by the President and approved by the Board.

The Compliance Officer shall direct the development, implementation and monitoring of the Compliance Plan. The Compliance Officer's responsibilities are to:

- Report to the President and the Audit Committee to keep them informed of the operation and progress of compliance efforts. The Compliance Officer will also report to the Board of Trustees as appropriate.
- Address all compliance-related matters, including all policies relating to compliance issues. The Compliance Officer shall work closely with representatives of the Departments and administration to foster and enhance compliance.
- Review and implement policies and procedures and update the policies and the procedures based on changes in the law, audit results, and business issues;
- Ensure there is a practice in place for distributing the Compliance Plan to employees;
- Ensure that compliance issues and concerns within the University are appropriately evaluated, investigated, and resolved;
- Monitor oversight reviews;
- Ensure that employees receive adequate education and training;
- Ensure that compliance-related activities are appropriately documented;
- Monitor the performance of the Compliance Plan and related activities on a continuing basis, taking appropriate steps to improve the effectiveness;
- Identify and address potential compliance vulnerabilities;
- Ensure that an employee screening mechanisms are in place and operating properly;
- Ensure that employee participate in compliance-related activities as a significant part of employee performance evaluation;
- Effectively and efficiently address complaints and other concerns regarding compliance.

BOARD OF TRUSTEES AND AUDIT COMMITTEE

The Board of Trustees has the ultimate responsibility to govern The University of Toledo and establish the strategic direction to attain the University's mission. The Board of Trustees is committed to ensuring the integrity of the university by upholding and promoting the Code of Ethics.

The Audit Committee provides oversight of the quality and integrity of the accounting and financial reporting practices including the system of internal controls as well as oversight and direction of the internal auditing function, compliance issues and the external auditors.

The Board of Trustees and the Audit Committee will:

- Review and approve the Compliance Plan and other key supporting documents to the plan;
- Examine the internal controls over legal compliance and ethics ensuring that they are current with changing laws, regulations and practices;
- Encourage the faculty and staff to be compliant with and adhere to pertinent laws, regulations, policies, procedures and practices.

EXECUTIVE COMPLIANCE COMMITTEE

The University of Toledo Compliance Officer shall be the chairman of the Executive Compliance Committee. The Executive Compliance Committee will assist in fulfilling oversight responsibilities.

The Executive Compliance Committee shall report to the President of the University of Toledo. The committee will consist of representatives designated by: Senior VP of Finance and Strategy, Provost & Executive VP for Academic Affairs, Executive Vice President and Provost for Health Affairs, VP and Executive Director of The University of Toledo Medical Center, Medical Director, Director of Internal Audit, General Counsel, and Compliance Officer.

Additionally, two medical faculty members, two academic faculty members and one other faculty member from the colleges will be appointed from nominations by the faculty senate..

The Executive Compliance Committee fulfills its responsibilities by:

- Reporting to the President;
- Maintaining awareness of the compliance, audit and training activities;
- Providing a forum for communication among the various departments within the University for issues relevant to audit, compliance and ethics;
- Reporting to the committee on concerns within their college and units.

COMPLIANCE COUNCIL – Health Care and Academic

The Compliance Council will consist of The University of Toledo Compliance Officer and an appointed Compliance Representative from each department.

The role of the Compliance Council is:

- Aid in implementation of the Compliance Plan;
- Communication to the employees of their departments the issues related to compliance specific to their departments;
- Develop internal systems and controls to carry out the University standards, policies and procedures as part of its daily operations;
- Implement the Standard of Conduct policies and University policies and procedures to promote compliance with the University's Compliance Plan;
- Develop, assist and track training programs for their department

HUMAN RESOURCE DEPARTMENT

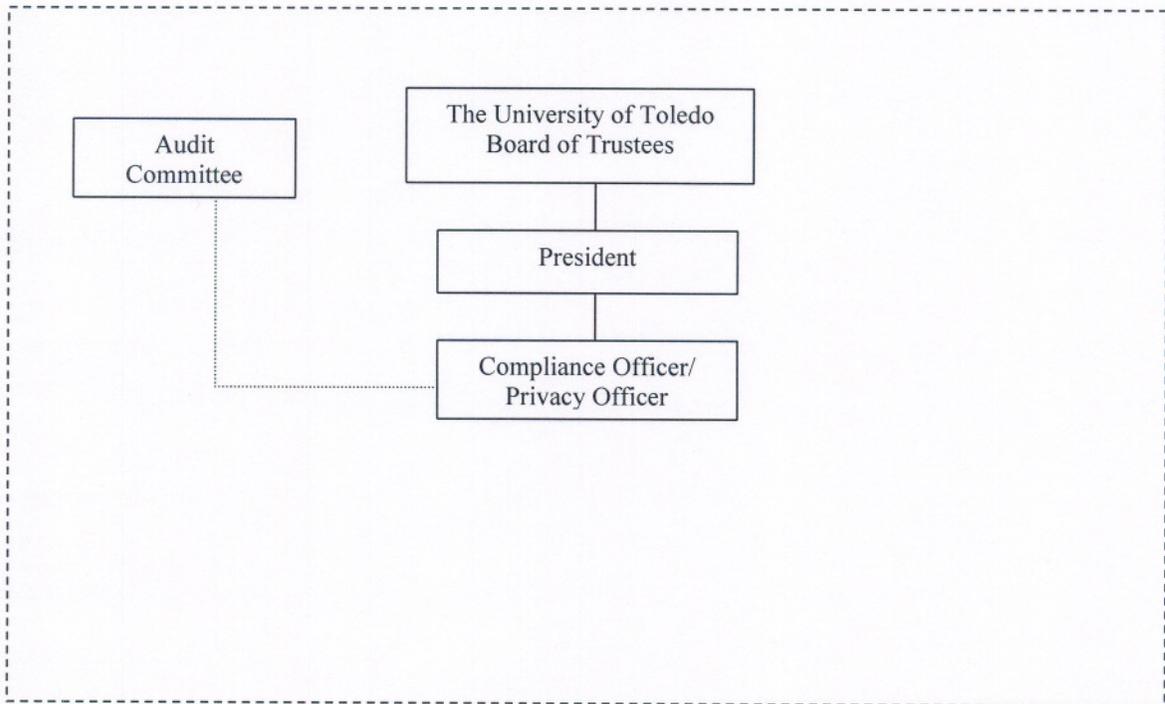
Human Resource Department (HRD) will distribute the Compliance Plan to new hires and assist administrators, department heads and managers to implement the Compliance Plan. HRD will advise the Compliance Officer on processes in the investigation of reported, detected or alleged, violations or as may be required by the Union per applicable contract language.

INTERNAL AUDIT

Internal Audit will work in conjunction with the Compliance Officer and appropriate administrators and managers to investigate questions of compliance and determine corrective action plans as appropriate.

COMPLIANCE DEPARTMENT

ORGANIZATIONAL CHART



DEPARTMENT and ADMINISTRATIVE STANDARDS and PROCEDURES

Applicable campus departments shall develop, document, and monitor Standards and Procedures specific to their department. The Standards and Procedures shall be incorporated into and supplement this Compliance Plan. These standards and procedures are designed to identify the specific compliance issues relevant for each clinical and administrative area. The basis of all documents must demonstrate the department's intent to conform to the law and regulatory requirements.

Clinical and administrative departments shall appoint a compliance representative. This representative will work with the Compliance Officer to identify high risk compliance areas for their clinical and administrative area and oversee the implementation of both the Compliance Plan and the Standards and Procedures for their department. The Compliance Representative is required to ensure:

- Distribution of the Compliance Plan and Department and Administrative Standards and Procedures to their employees
- Ensure that employees receive annually, training on compliance and department-specific issues;
- Open communication regarding any and all compliance matters;
- Ensure new employees' understanding of regulations and review as appropriate;
- Departmental and Administrative Standards and Procedures are monitored and updated on an ongoing basis.

Each clinical and administrative department's Standards and Procedures should specify:

- The method to be used to encourage employee involvement;
- How all Employees will be trained on compliance issues;
- How training of Employees will be monitored
- Who will train new Employees;
- The timeline for training new Employees;
- Documentation of the training; and;
- The ramifications for failure to follow the compliance plan.

Each departmental and administrative Standard and Procedures shall be reviewed by the Compliance Officer.

EMPLOYEE SCREENING

The University of Toledo shall conduct appropriate background checks as stipulated in the University policy. The University of Toledo shall also conduct reasonable screening of third parties with whom it may conduct business to ensure they have not been convicted of criminal offenses related to health care or otherwise barred from participation in governmental programs. Screening will be conducted in accordance with Federal and State Regulations and University policies and procedures as stated and amended.

EDUCATION AND TRAINING

The Compliance Officer will oversee training and education of administration, physicians, faculty, staff, students and continued retraining of current personnel on the Compliance Plan and University policies concerning compliance. To accomplish that objective, the Compliance Officer and Compliance Council Representatives will be responsible for developing training on compliance for all employees and a second training session covering more specific information for appropriate personnel as noted in the Department and Administrative Standards and Procedures.

General training sessions will be conducted to educate all personnel on the Compliance Plan and to heighten awareness among all employees and communicate and emphasize the University's commitment to ethical behavior. All employees will receive a copy of the standards of conduct. These, plus basic information about the University's compliance plan and how it operates, are the core of general training.

The Compliance Officer will ensure that there are systematic and ongoing training programs that educate and maintain awareness of compliance policies among existing staff in high-risk areas and for new personnel.

The Compliance Council Representatives and the Compliance Officer shall work together to develop training materials and a system to document that such training has occurred. Failure to participate and document annual participation in this compliance education will result in, at a minimum, documentation on the employee performance evaluation and possible restriction on the employee's job duties.

All training session attendees will be provided with information on who to contact for specific questions.

MONITORING AND AUDITING

The Compliance Officer shall monitor the University's performance to ensure that the University is striving for and demonstrating continual improvement on compliance activities. Annual reviews will be conducted based on relevant Fraud Alerts and the OIG WorkPlan. The review will be limited in scope, generally conducted through a random sampling, of the specific compliance issue. The Compliance Officer will request and subsequently house all reviews. Supervisors will be held responsible to perform periodic self-audits of their department to ensure compliance.

If any of these reviews identify instances of possible non-compliance, the Compliance Officer shall review the situation with the Executive Compliance Committee to determine whether there has been any activity inconsistent with University policies and what further action is necessary.

The Director of Internal Audit and the Compliance Officer shall develop an Audit Plan based on the Office of Inspector General's Work Plan. Changes to the Audit Plan may be made based on the results of the Risk and Vulnerability Assessment. To promote and ensure compliance, the Internal Audit Department shall incorporate compliance issues in the performance of regular, periodic audits.

REPORTING AND INVESTIGATING COMPLIANCE ISSUES

The University of Toledo strives to comply with all federal and state statutes. The following items are identified as critical issues, however, the plan does provide for the flexibility to add areas of concern:

- Fraud and Abuse/False Claims
- Medicare and Medicaid Anti-kickback Statutes/Stark Laws
- Health Insurance Portability & Accountability Act (HIPAA)
- Improper claims for clinical trials/provider based clinics/organ acquisition
- DGME/IME Reimbursement
- Research
- Emergency Medical Treatment and Active Labor Act (EMTALA)
- Medicare Part D
- Research
- National Collegiate Athletic Association (NCAA)
- Construction
- Family Educational Rights & Privacy Act (FERPA)
- Public Records Laws
- Ohio Ethics Laws
- Discrimination Laws
- Applicable Federal and State Laws
- Federal Financial Aid

REPORTING OF ISSUES

Employees have a duty to ask questions regarding potential compliance issues and to report potential compliance concerns to their supervisor, central office, the compliance officer, or the anonymous reporting line. If any employee knows of or suspects a compliance violation, they are to report it immediately without fear of retaliation (See No Retaliation section). Where to best raise your concerns depends on your particular concern and situation.

The Compliance Officer shall be notified of any complaints or other information that suggest a violation of the Compliance Plan, applicable law or University policy. To determine whether a violation has occurred and how to respond to protect the University from future violations and enforcement actions, investigations will be coordinated with Legal Counsel, using internal or external auditors as appropriate.

GUIDELINES FOR REPORTING

Employees should review these guidelines to assist in the decision of what issues should be reported, what method to use to report, information needed from the reporter and methods to determine the status and resolution of the report.

When to Report

Employees should report if they have information about or have observed a possible violation of The University of Toledo policies including the Standard of Conduct or any Federal, State or Local laws and regulations.

How to Report

1. Local Resolution – The best place to raise a concern typically begins with your own college, department, unit thru supervisory channels.
2. Central Offices – Due to the subject matter or due to work or personal relationship it may be best to raise questions through a specialized central office. Examples include the Human Resource Department for concerns regarding discrimination or sexual harassment. Athletic Compliance Officer for possible NCAA violations or the Research Compliance Officer for research concerns.
3. Compliance Officer - If the employee is uncomfortable with the direct approach, needs advice on how to handle an issue or issues have not been resolved satisfactorily, the employee can call and report to the Compliance Officer at 419-383-6933 or 419-215-7901.

4. Anonymous Reporting Line (Confidential) The University of Toledo has an Anonymous Reporting Line – EthicsPoint to provide a simple way to report any situation or university conduct believed to violate university policy, Federal, State or Local laws and regulations, government contract or grant requirements. EthicsPoint's toll-free numbers is **1-888-416-1308** or go to <http://secure.ethicspoint.com/domain/en/report>.
5. Report Directly to the Fiscal Intermediary or Center for Medicare & Medicaid Should employees feel that the issues or concerns are not being addressed by administration the employee may file a complaint directly to the government. This is called a Qui Tam report and the employee may receive compensation should the complaint meet the requirements set by the government.

What information should be included in the report?

Describe the situation completely and if possible include such information as;

- dates,
- names,
- facilities, and departments involved
- be as detailed as possible

The process to resolving an issue when submitted to EthicsPoint -

Reports submitted via EthicsPoint will be handled as promptly and discreetly as possible, with facts made available only to those who need to know to investigate and resolve the matter. All reports submitted through EthicsPoint will be carefully reviewed by University personnel. Matters involving allegations of misconduct, serious violations of law or policy will be directed to Legal Counsel.

Within 5-10 business days the reporter should return to the website for the status of the investigation. The University may have information on your report, or may require further information in order to proceed with an investigation.

Due to the nature of certain claims, the University may be limited with respect to action(s) it may be able to take in response to a report if the individual submitting the report does not wish to make his or her identity known.

Will reporting impact employment?

The University is committed to safeguarding the confidentiality of individuals who submit reports. Employees are the best asset in monitoring compliance. Therefore, the University of Toledo has a policy that prohibits retaliation against an employee for reporting or inquiring about potential breaches or for seeking guidance on how to handle suspected breaches.

If an employee believes that they have been retaliated against, they should contact the Compliance Officer immediately.

Status and resolution of a complaint

To determine the status or resolution of a complaint the reporter may:

1. Contact the Compliance Officer regarding the status of their complaint.
Note: If the action involves discipline of another employee, the reporter will not be informed of the type of action taken.
2. The employee may notice a change in procedure that will indicate that management has been involved in taking steps to resolve their concerns.
3. The reporter can return to EthicsPoint using the Report Key assigned by EthicsPoint and your private password to determine the status of the investigation.

ACADEMIC AFFAIRS

Reporting Options for Students – the anonymous reporting line does not support reporting of academic matters involving faculty and students. Academic matters should be reported to the Office of Academic Affairs. Non-academic student conduct matters should be reported to the Office of Student Judicial Affairs. Student employees that have concerns regarding their job can use the reporting options listed above.

FRAUD AND ABUSE PLAN

A comprehensive fraud and abuse plan to detect, correct, and prevent fraud, waste, and abuse. The plan will include procedures to voluntarily self-report potential fraud or misconduct related to the Part D program to the appropriate government authority.

CORRECTIVE ACTION PLAN

Whenever a compliance issue has been identified, through monitoring, reporting of possible issues, investigations, or otherwise, the Compliance Officer along with the appropriate University personnel (management) will develop a plan to address the issue. In developing a corrective action plan, the Compliance Officer may obtain advice and guidance from General Counsel and the Executive Compliance Committee. Management will be responsible for implementing the corrective action.

Corrective action plans should be designed to ensure not only that the specific issue is addressed but also that similar problems do not occur in other areas or departments. Corrective Action plans may require that compliance issues be handled in a designated way, that certain training takes place, that restrictions be imposed on particular employees, or that the matter be disclosed externally. Sanctions or discipline, in accordance with University rules, may also be recommended. If it appears that certain individuals have exhibited a propensity to engage in practices that raise compliance or

competence concerns, the corrective action plan should identify actions that will be taken to prevent such individuals from exercising substantial discretion in regard to that compliance area.

NO RETALIATION

Employees who report in good faith possible compliance issues will not be subjected to retaliation or harassment as a result of their report. Concerns about possible retaliation or harassment should be reported to the Compliance Officer. To the point possible to pursue an investigation, attempts will be made to make communications anonymous and confidential. It is the intent that no employee shall experience retribution as a result of reporting.

ENFORCMENT AND DISCIPLINE

Refer to the employee policy and procedures that apply to each perspective unit. Compliance is an active, on-going process that is everyone's responsibility. Failure to comply with the Compliance Plan, University policies and Federal, State and Local laws and regulations will result in consequences. Any employee (regardless of position) may be subject to discipline, up to and including termination, if it is determined that his/her actions (or inactions) constituted a willful violation of law or a willful failure to adhere to the University's compliance standards.

REVISIONS TO THE PLAN

This Compliance Plan is intended to be flexible and adaptable to changes in regulatory requirements. The Plan will be regularly reviewed to assess whether it is working.

The Plan will be reviewed annually and changed as experience shows that a certain approach is not effective or suggests a better alternative.

IMPLEMENTATION OF COMPLIANCE PLAN

The Compliance Officer will work with Legal Counsel, the Compliance Council and administration to develop an implementation plan.

The implementation of the plan at a minimum will include:

1. Written policies and procedures relating to medical, business and legal compliance issues;
2. Educational and training programs relating to legal and regulatory areas;
3. Departmental and administrative compliance training modules, where appropriate;
4. A monitoring system to assess the University's compliance;
5. An annual review of the existing Compliance Plan in order to identify the need for changes and to identify specific compliance objectives during the succeeding year.

Executive Compliance Committee

Representatives designated by:

Senior Vice President of Finance and Strategy

Provost & Executive VP for Academic Affairs

Executive Vice President and Provost for Health Affairs

Vice President & Executive Director for The University of Toledo Medical Center

Medical Director

Director of Internal Audit

General Counsel

University of Toledo Compliance Officer

2 Medical Faculty

2 Academic Faculty

1 Other Faculty Member

Compliance Council

Representative from each of these departments would be appointed to reside on the Compliance Council Committee:

Health Care Council

Admitting

Patient Accounting

Research

Reimbursement

Revenue Cycle

Coding

Clinics

Risk Management

Academic Council

Enrollment Services

Finance

Facilities Management

Student Services

Human Resources

Accounting

Contracting

Faculty Affairs

Information Systems

Departmental Compliance Officers

Research Compliance Officer

FERPA Compliance Officer/Registrar

Facilities Compliance Officer

Laboratory Compliance Officer

Student Judicial Compliance Officer

Athletic Compliance Officer

All others as assigned

Human Subject Compliance Officer

IT Security Compliance Officer

Financial Aid Compliance Officer

HIPAA Benefits Compliance Officer

Safety and Security Officer

DEFINITIONS

| | |
|---|--|
| Fraud | Fraud is defined as an intentional, false representation or concealment of a material fact intended to induce another to act in a particular way, due to reliance on the false representation or concealment to his or her injury. |
| Federal Corporate Sentencing Guidelines | <p>If an individual or organization is found guilty of intentional criminal conduct (not errors/mistakes) against the federal government; the Corporate Sentencing Guidelines are invoked for determining the sentence. The process is based on a series of tables used in calculating a culpability score. The score increases based on the severity of the offense, proof of intent, etc. The maximum monetary fine that can be imposed against a convicted organization under the guidelines is \$290,000,000. In a criminal prosecution, managers/officers may be criminally charged and the organization could lose its license to treat Medicare patients.</p> <p>However, the structure of the guidelines allows for significant reduction in the score/penalties if the organization can demonstrate it made a good faith effort to implement an effective compliance program, designed to prevent and detect errors/irregularities. To be effective, the plan must be customized to the organization, all employees need to be familiar with it, and it must have a mechanism for reporting concerns. With the involvement of all employees in becoming familiar with this document, being diligent of all regulations impacting their areas of responsibility, and reporting all concerns through proper channels, our compliance plan has all of the necessary elements to be deemed effective.</p> |
| False Claims | The False Claims Act (FCA) includes both civil and criminal provisions used in enforcement of the law, which makes it an offense for any person/entity to present a false claim to the United States government. The elements necessary to establish a civil FCA violation are (1) presentation of a claim, (2) to the United States government, (3) with actual knowledge that the claim is false/fraudulent or with reckless disregard or deliberate ignorance of the truth or falsity of the claim. |
| Medicare/Medicaid Anti-Kickback | Makes it a crime for a person (normally a physician) to knowingly and willfully solicits or accepts payment or other |

| | |
|---|---|
| Statute | remuneration for referring a patient to another for the furnishing of any item or service for which payment may be made in whole or in part by the Medicare or Medicaid programs. The statute also makes it a crime to knowingly and willfully offer or pay remuneration to "induce" such a referral. An "inducement" is any act intended "to exercise influence over the reason or judgment of another in an effort to cause the referral or program-related business." |
| Stark I & II | Prohibits physicians from referring Medicare and Medicaid patients to a hospital or other entity for the provision of "designated health services" if the physician or immediate family member has a financial relationship with that entity. Financial relationships are defined as both ownership/investment interests and compensation relationships. Designated health services include physical and occupational therapy, radiology services (including MRI, CAT scans, and ultrasound services), radiation therapy, durable medical equipment, orthotics and prosthetic devices, home health services, outpatient prescription drugs, and inpatient and outpatient hospital services. |
| Health Insurance Portability & Accountability Act | Also known as Administrative Simplification, HIPAA has been called the most sweeping legislation to affect the healthcare industry in over 30 years. The legislation is sub-divided (HIPAA) into four categories: <ul style="list-style-type: none"> • Transaction standards for the transmission of claims, enrollment, eligibility, premium payments, claims status, referrals, and the coordination of benefits. • Code set standards for diagnosis codes, medical procedure codes, national drug codes, and dental procedure codes. • Privacy standards that require all individually identifiable health information be kept private and not disclosed without the patient's permission. • Security standards that require processes be implemented to ensure data integrity, confidentiality, and availability. |
| Family Educational Rights & Privacy Act (FERPA) | A Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education. |
| Improper claims For Clinical Trials | Since September 2000, Medicare has covered items and for services furnished during certain clinical trials as long as those items and services would typically be covered for Medicare beneficiaries, but for the fact that they are provided in an experimental or clinical trial setting. Hospitals that participate in clinical trials should review |

the requirements for submitting claims for patients participating in clinical trials.

Improper claims
for Organ
Acquisition Costs

Hospital that is approved transplantation centers may receive reimbursement on a reasonable cost basis to cover the costs of acquisition of certain organs. Organ acquisition costs are only reimbursable if a hospital satisfies several requirements, such as having adequate cost information, supporting documentation, and supporting medical records. Hospitals must also ensure that expenses not related to organ acquisition, such as transplant and post-transplant activities and costs from other cost centers, are not included in the hospital's organ acquisition costs.

NCAA

National Collegiate Athletic Association manual governs competition in a fair, safe and equitable and sportsmanlike manner and to integrate intercollegiate athletics into higher education so that the educational experience of the student-athlete is paramount.

Billing

Will be consistent with Medicare/Medicaid rules. Charges will be substantiated with physician orders, medical necessity, and with medical services provided.

Documentation

Documentation will accurately reflect the patient's Condition, medical treatment and procedures provided.

Coding

All coding will accurately reflect procedures performed or diagnosis as documented.

Claims

Claim submission will adhere to all governmental regulations.

Cost Reports

Cost reports will be completed according to Medicare/Medicaid rules and regulations.

Contracts

All transactions must be at fair market value and reviewed by legal counsel or legal representative.

Grants

Grant contracts will follow as stipulated in the contract.

Federal Aid

Federal Aid requirements shall be followed as stated in the requirements.

Research

Research contracts and projects shall adhere to the requirements set forth by the contract, Federal and State regulations and university policy.

THE UNIVERSITY OF TOLEDO

Mission, Values, and Vision

The mission of The University of Toledo is to improve the human condition and advance knowledge through excellence in learning, discovery, engagement and service as a diverse, student-centered public metropolitan research institution.

The University of Toledo Core Values

Core Value I

- **Compassion, Professionalism and Respect** – Treat every individual with kindness, dignity and care; consider the thoughts and ideas of others inside and outside of our University with a strong commitment to exemplary and institutional altruism.

Core Value II

- **Discovery, Learning and Communication** – Vigorously pursue and widely share new knowledge; expand the understanding of existing knowledge and develop knowledge, skills and competencies of our students, faculty, staff and community while promoting a culture of lifelong learning.

Core Value III

- **Diversity, Integrity and Teamwork** - Create an environment that values and fosters diversity, earns the trust and commitment of our colleagues and the communities we serve, and provides a collaborative and supportive work environment based upon stewardship and advocacy while holding ourselves to the highest ethical standard.

Core Value IV

- **Engagement, Outreach and Service** – Provide services that meet our students' and regions' needs and where possible exceed their expectations; be a global resource and the partner of choice for education, individual development and health care, as well as a center of excellence for cultural, athletic and other events.

Core Value V

- **Excellence, Focus and Innovation** – Strive, individually and collectively, to achieve the highest level of focus, quality and pride in everything we do; to continuously improve our operations and engage in reflective planning and

innovative risk-taking in an environment of academic freedom and responsibility.

Core Value VI

- **Wellness, Healing and Safety** – Promote the physical and mental well-being and safety of others, including our students, faculty and staff; to provide the highest levels of health promotion, disease prevention, treatment and healing possible for those in need within our community and around the world.

The University of Toledo – The University of Toledo Medical Center Mission

The mission of The University of Toledo Medical Center is to provide superior patient care that is compassionate and cost effective and to support and enhance the health education of The University of Toledo. In partnership with the university, the hospital continuously strives to develop and incorporate advancements in health-care knowledge to improve the quality of patient care.

Education: The medical school will be educating future leaders of medical practice, biomedical and healthcare research, and medical education. All dimensions will be improved and be better integrated. The University of Toledo will have a national reputation for an innovative curriculum, will compete effectively for top medical students, residents, and fellows, and will have well defined financial support for the educational mission. The University of Toledo will be a lifelong educational partner with all those who have touched the system, including faculty and staff, students and trainees, referring physicians, patients, and the community.

Patient Care: The patient care enterprise within The University of Toledo Medical Center will proactively seek to improve the health of the population of Ohio and Michigan and beyond, through direct patient services, new care coordination models, patient-oriented education, and clinical and healthcare research. The University of Toledo will be nationally recognized by patients, payers, and peers as a provider of innovative, evidence-based, outcomes-oriented, friendly, accessible, coordinated, and cost-competitive health care, regularly benchmarking its' self using appropriate metrics.

Research and Technology Development: The University of Toledo will enhance its reputation as a leading institution in advancing biomedical and behavioral knowledge and in achieving clinical impact from its laboratory, clinical, population-based, and health services research. Through discoveries and applications, the University will enhance its capabilities and competitiveness in patient care and contribute to improved health nationally and worldwide. The Office of Research Collaboration a partnership including the University of Toledo and Bowling Green was created among researchers, practitioners, and the metropolitan community to advance research in Northwest Ohio.

THE UNIVERSITY OF TOLEDO EXPECTATIONS

To excel in our mission, function as a team. Establish standards for patient care, teaching, and research. Every employee is vital, fully aware of his or her role and responsibilities, possesses a set of unique attributes and skills, is empowered to contribute to mutually established goals, and is accountable for his or her own and our collective actions. Each employee is regularly acknowledged for his/her contributions toward our continued achievements.

To organize and locate our programs and services to meet the expressed needs and expectations of our customers (patients, payers, referring physicians, faculty and staff, trainees, regulatory agencies and research benefactors); and do so in a manner that optimizes the return on the resources available to us.

Our efficiency is continuously reviewed and variations minimized through process improvements (Total Quality).

The efficacy of the health services that we provide is continuously challenged as new technologies become available and/or cost reductions can be realized.

Our achievements and outcomes for the health care services provided are measured by patient centered methodologies and by peer standards for our research and educational enterprises.

We expect all who seek to join us at The University of Toledo to share our Vision, exemplify our Values and strive to meet our Expectations.

Sources:

The University of Michigan Health System Corporate Compliance Program- May 2000
Jeanne Strickland, Chief Compliance Officer, Privacy Director & Security Officer

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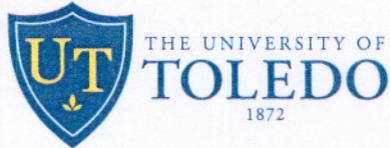
Compliance 101 Second Edition Debbie Troklus & Greg Warner

Newsletter, Healthcare Compliance Letter, Vol 3, Issue 1, January 3, 2000, Developing
an Effective Compliance Plan in an Era of Austerity: Observations from Ruth L Constant
and Lawrence M. Leahy 2006, CCH Incorporated – <http://health.cch.com/primesrc>

CCH-Exp, health-Comp-Manual, ¶ 50,280 How Should the Organization Empower the
Compliance Officer? 2006, CCH Incorporated <http://health.cch.com>

The University of Toledo Policies and Procedures: <http://utoledo.edu>

Medical University of Ohio at Toledo Policies and Procedures: <http://www.meduohio.org>

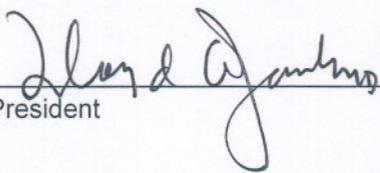


The Board of Trustees reviewed and approved the compliance plan on November 13, 2006.

The Compliance Plan will be evaluated at least on an annual basis and modified as necessary with Board Approval. The evaluation will determine whether the plan elements have been satisfied, including the appropriate level of development and dissemination of the program's standards, the effectiveness of training and education efforts, and the findings of auditing and monitoring activities.

Approval Date: November 13, 2006

Signatures:



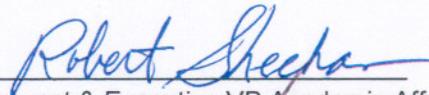
President



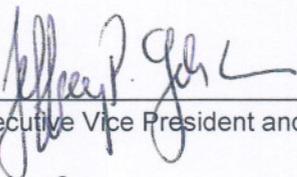
Chairman of Board of Trustees



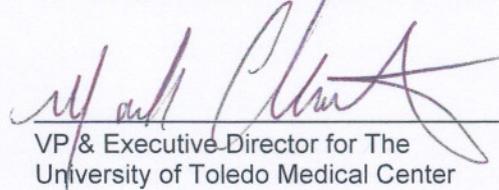
Senior Vice President Finance & Strategy



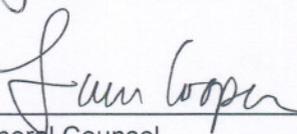
Provost & Executive VP Academic Affairs



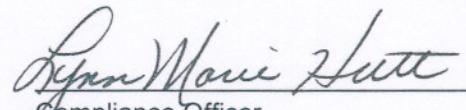
Executive Vice President and Provost for Health Affairs



VP & Executive Director for The University of Toledo Medical Center



General Counsel



Compliance Officer

I have read and understand my responsibility to comply with the Compliance Plan. I have the responsibility to uphold The University of Toledo's Mission statement, Values and Code of Conduct as well as abide by all policies and procedures including Federal and State laws and regulations that pertain to my employment; attend required education and training session and report any suspected violations.

Signature

Date