



Policies and Procedures

Policy Title: Conflict of Interest			
Department Responsible: Audit and Compliance Services	Policy Code: ER-ACD-2005-12	Effective Date: June 18, 2020	Next Review/Revision Date: June 2023
Title of Person Responsible: VP, Chief Compliance and Privacy Officer	Approval Council: Leadership Alliance Policy and Procedure Committee		Date Approved by Council: June 18, 2020

PURPOSE:

The purpose of this policy is to identify situations in which a team member may have an actual or potential conflict of interest and to assure that the conflict of interest is eliminated or, where appropriate, that internal controls are implemented or disclosure is made to mitigate the effect of the conflict of interest.

This policy applies to all Cone Health team members, which include employees, board members, vendors, independent contractors, students, trainees, medical professionals and specialists, volunteers, business partners, and workforce members. Workforce members include all of the above listed team members (and any other persons) whose conduct, in the performance of work for Cone Health, is under Cone Health's direct control, whether or not they are paid by Cone Health.

DEFINITION:

Conflict of interest: Any personal or professional relationship that could prejudice an individual's ability to perform his or her duties and responsibilities objectively and/or to act in the best interests of Cone Health.

POLICY:

A conflict of interest occurs when an individual or an institution enters into any type of relationship that interferes with, compromises, or gives the appearance of compromising the professional judgment or obligations of the individual or institution, including safety or quality of care, treatment, and services.

A conflict of interest also may arise if there is a conflict of commitment such that outside activities interfere with the primary obligation of the individual to his or her employer. Any conflict of interest or potential conflict of interest must be fully disclosed, evaluated and, if necessary, managed, reduced, or eliminated.

This Conflict of Interest policy applies to all Cone Health team members in their performance of the administration, teaching, patient care, and other business operations of Cone Health and to non-employees who are appointed by Cone Health to represent its interest on various committees or in other decision-making capacities.

Team members shall conduct their personal and professional relationships, including interactions with third-party vendors, in such a way as to assure themselves, the organization, and the community that

decisions made are in the best interest of the organization without the slightest implication of wrongdoing.

A conflict of interest exists when an employee is in a position to profit directly or indirectly through the application of their authority or knowledge. Also, a conflict of interest exists if a friend or relative benefits or if the organization is adversely affected in any way by the action. The exercise of judgment is required to determine if a potential conflict of interest situation exists.

Examples of conflicts of interest include the following:

1. Accepting gifts, donations, or entertainment from another organization in return for business.
2. Holding a financial interest in a company, by either you or a member of your immediate family, with whom Cone Health does business and influencing the direction of more business to the outside company.
3. Directing Cone Health business to a company where a friend or relative works.
4. Disclosing Cone Health's proprietary information, confidential information, or trade secrets for personal gain.

The interests of the organization are primary and organizational information may not be used for personal gain. Its use may be interpreted as improper even if there is no monetary loss to the organization.

Confidential information belongs to the organization. Use of it by team members, their business associates, friends, or relatives for their own gain is a violation of this policy and is considered misuse of organization property.

Team member responsibilities for conflicts of interest involving gifts, gratuities, and relationships with patients or vendors can be found in Cone Health's policy on [Business Courtesies, Gifts and Supplier Relations](#) (OP-ACD-2016-209).

Violation of this policy may result in corrective action up to and including separation of employment.

PROCEDURE:

Ongoing Disclosure of Conflicts of Interest:

Cone Health team members have a duty to disclose actual or potential conflicts as a condition of their employment. Team members will adhere to the following procedures if a conflict of interest is suspected:

1. The team member will seek guidance from the supervisor or department leader when any questions arise about conflict of interest.
2. The team member will provide full disclosure through submission of the Conflict of Interest Disclosure Questionnaire available online in the Employee Performance Management System (Halogen).
3. The supervisor or department leader will investigate the conflict of interest and determine appropriate action with the assistance of Cone Health Audit and Compliance Services, Human Resources, or the Office of General Counsel, as appropriate. To maintain documentation of the conflict of interest and final outcome, the supervisor or department leader will upload the final determination and the Conflict of Interest Disclosure Questionnaire to the Employee Performance Management System (Halogen).

Annual Disclosures of Conflicts of Interest:

1. On an annual basis, team members at the level of director and above will complete a Conflict of Interest Disclosure form to be submitted online in the Employee Performance Management

System (Halogen). Audit and Compliance Services may also select specific Cone Health business lines, departments, or individuals at its discretion to complete a Conflict of Interest Disclosure form on an annual basis.

2. The Cone Health Conflict of Interest Committee will review the submitted Conflict of Interest Disclosure Questionnaires and determine whether each conflict of interest is impermissible and must be eliminated, or whether internal controls and disclosure are sufficient to mitigate the conflict of interest.

REFERENCE DOCUMENTS/LINKS:

- [Board of Trustees Conflict of Interest](#)
- [Business Courtesies, Gifts and Supplier Relations \(OP-ACD-2016-209\)](#)
- [Conflicts of Interest Involving Licensed Independent Practitioners \(OP-MEC-2009-112\)](#)
- [CHMG Guidelines for Consulting Arrangements](#)
- [CHMG Consulting Agreement Review and Approval Form](#)
- [Conflict of Interest Disclosure Form](#)

PREVIOUS REVISION/REVIEW DATES:

<i>Date</i>	<i>Reviewed</i>	<i>Revised</i>	<i>Notes</i>
October 1, 2005			Original effective date.
January 10, 2009			
September 2012			
June 10, 2015			Updated formatting to match current policy template; no content changes.
September 1, 2015	X		No revisions.
June 15, 2017		X	Policy ownership change to Audit and Compliance Services, updated definitions, policy, and procedure.
June 18, 2020		X	Added paragraph about which persons this policy applies to.