

DEPARTMENT: Legal	POLICY DESCRIPTION: Physician Relationship Training
PAGE: 1 of 3	REPLACES POLICY DATED: 1/1/01, 3/15/02, 2/15/03, 8/1/03, 8/31/2005; 1/1/06, 3/1/08, 1/1/09
EFFECTIVE DATE: March 1, 2013	REFERENCE NUMBER: LL.020
APPROVED BY: Ethics and Compliance Policy Committee	

<p>SCOPE: All Chief Executive Officers (CEOs) and Chief Financial Officers (CFOs) of Company-affiliated hospitals, all Practice Managers and Administrators of other Company-affiliated facilities, individuals who market Company-affiliated facilities' services to physicians, and all other personnel substantially involved in negotiating or monitoring physician relationships.</p>
<p>PURPOSE: To ensure that all Required Individuals, as defined below, receive training in Physician Relationships, as defined below, to be aware of current laws and regulations related to Physician Relationships, including but not limited to the Federal anti-kickback statute (42 U.S.C. § 1320a-7b(b)) and the Federal physician self-referral statute (42 U.S.C. § 1395nn).</p>
<p>POLICY:</p> <ol style="list-style-type: none"> 1. Within 90 days of being hired, each Required Individual must complete one hour of Physician Relationship training. Such training must be completed prior to negotiating or contracting with physicians, or monitoring such relationships. 2. After initial Physician Relationship training, Required Individuals must complete one hour of Physician Relationship training annually thereafter. 3. Each Required Individual will receive a copy of the physician relationship policy checklist annually. 4. The purpose of Physician Relationship training is: <ol style="list-style-type: none"> a. the development of permissible Physician Relationships; b. the personal obligation of each Required Individual to ensure that all aspects of each Physician Relationship are permissible; c. an understanding of the applicable laws, regulations, and policies, including but not limited to the Federal anti-kickback statute (42 U.S.C. § 1320a-7b(b)) and the Federal physician self-referral statute (42 U.S.C. § 1395nn); d. the legal sanctions for engaging in improper Physician Relationships; and e. examples of proper and improper Physician Relationships.
<p>DEFINITIONS:</p> <p>"Physician Relationship" means any contractual or financial relationship with a physician or physician entity, such as a physician practice (group or solo).</p> <p>"Required Individuals" are individuals who are required to receive Physician Relationship training including:</p> <ul style="list-style-type: none"> • Chief Executive Officers of Company-affiliated hospitals; • Chief Financial Officers of Company-affiliated hospitals;

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- Facility and Division Chief Medical Officers;
- Practice Managers, Administrators and Chief Medical Officers of other Company-affiliated facilities;
- Department Directors who interact with a physician concerning i) the provision of services by the physician to the facility for which payment is to be made, or ii) a benefit to be conveyed to the physician by the facility;
- Anyone who negotiates directly in whole or in part an agreement with a physician or physician entity, such as a physician practice (group or solo);
- Anyone who contributes in a meaningful way to the monitoring and/or oversight of Physician Relationships, including confirming the performance of services to be rendered by the physician, and the payment for services rendered by the physician; and
- Anyone working directly with physicians in a sales or marketing capacity.

PROCEDURE:

1. The facility Ethics and Compliance Officer (ECO), or designee, must ensure that each Required Individual receives the required one hour of Physician Relationship training prior to negotiating or contracting with physicians, or monitoring such relationships, and annually thereafter.
2. Within 90 days of being hired, Required Individuals must receive the Physician Relationship training by attending presentations by operations counsel at division or market meetings, by attending New ECO Orientation, or by using materials developed by the Legal Department for that purpose.
3. Within 90 days of being hired, Required Individuals must receive a copy of the physician relationship policy checklist (available on the Company Intranet at: [PHYSICIAN RELATIONSHIP CHECKLIST](#))
4. A facility's ECO should confer with the facility's Operations Counsel on a regular basis to review any issues at the facility regarding physician relationships. Together, they will determine whether any individuals required to complete annual Physician Relationship training should receive additional or more direct training.
5. Annual Physician Relationship training may be accomplished by attending presentations by operations counsel at division or market meetings or by using materials developed by the Legal Department for use by individuals who are unable to attend such presentations.
6. The ECO, or designee, will also be responsible for ensuring that each Required Individual receives a copy of the physician relationship policy checklist on an annual basis.



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<p>7. Participation in the Physician Relationship training must be tracked using the Company's HealthStream Learning Center (HLC).</p> <p>8. It is the responsibility of the facility ECO to ensure appropriate processes are in place for compliance with this policy.</p>
<p>REFERENCES:</p> <p>42 U.S.C. §§ 1320a-7b(b) and 1395nn; 69 Fed. Reg. 16054 (March 26, 2004); General Statement on Agreements with Referral Sources; Approval Process Policy, LL.001</p>