Medical Staff Services

 **Conflict of Interest Policy**

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| Medical Staff/APP Member’s Name: |  |
| Medical Staff Services Department or Committee Title: |  |
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| This Statement is filed for: |
| [ ]   | Credentialing Purposes (New or Renewal)  |
| [ ]   | Annual or New Officer, Department Chief or Committee Chair |
| [ ]   | Update |
| [ ]   | IRB Submission |
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| Policy: It is the policy of UMC Medical Staff that all staff members granted membership and/or privileges including those providing contracted services to the organization shall act in good faith to fulfill their responsibilities. In order to achieve this goal, all staff members and practitioners shall fully and openly disclose any actual or potential conflict of interest at the time they arise in the course of providing or directing patient care, conducting the affairs of the organization, or providing services to the organization.Conflict of Interest documents are maintained in the Medical Staff offices with a copy sent to the UMC Compliance Officer for review.Definitions:For the purposes of the policy, a Conflict of Interest is a situation that has the potential to negatively influence and/or compromise the decision making ability of a Responsible Person from promoting objectivity of purchasing, business planning and clinical decisions, based on a financial or personal relationship with an Interested Third Party. This may also include the interests of Immediate Family Members as well the personal interest of the Responsible Person. A Conflict of Interest may exist even if the Responsible Person perceives no potential conflict or believes the relationship with the Interested Third Party will not affect their decision making ability. A Conflict of Interest is evaluated according to a set of factual circumstances involving risk and not on the character of the individual. The existence of a potential Conflict of Interest does not imply that the Responsible Person is improperly motivated. Although it is impossible to list every circumstance giving rise to a conflict of interest, the following will serve as a guide to the types of activities that might cause conflict of interest and to which this policy applies.“**Material Financial Interest”** includes, but is not limited to:a. Fees for consulting or writing including serving on an advisory panel, including travel, hotel, restaurants, resort fees, etc.; b. Fees for Speaking Engagements, including speaker training sessions and use of slides created by Interested Third Party for purely promotional purposes; c. Equity Interests/Stock Options in a company that does or may do business with UMC or provides products or services for UMC patients; d. Have financial interest in a product, medical device or services company whose products they prescribe use or recommend; f. Royalty income, from design/development services for medical device companies or the right to receive future royalties under a license, patent, or copyright; g. Officer, Director or any other fiduciary role, whether or not remuneration is received for such service; h. Ownership/Partnership/Principal interest in a company that does business or may do business with UMC or provides products or services for UMC patients; l. Employment or independent contractor relationship with a company that does business with or may do business with UMC or provides products or services for UMC patients; m. Intellectual Property Rights, includes patent, trademark, or copyright.; q. Acceptance of Company Gifts related to marketing such as free supplies and devices.**“Family Member”** means a spouse or domestic partner, children and their spouses, grandchildren and their spouses, parents and their spouses, grandparents and their spouses, brothers and sisters and their spouses, nieces and nephews and their spouses, parents-in-law and their spouses. Children include natural and adopted children. Spouses include domestic partners.**“Ownership”** includes ownership through sole proprietorships, stock, stock options, partnership or limited partnership shares, and limited liability company memberships. It is not required that ownership in diversified funds that are not controlled by you or an immediate family member be reported. |
| **Material Financial Interests:** |
| [ ]   | I have no conflicts to report  |
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| Yes | No |  |
| [ ]  [ ]  | Do you (or does a family member) have any material financial interests in any company that provides goods or services to the Hospital, or otherwise does business with the Hospital? If yes, please list below, using additional sheets if necessary. |
| **Name of Person Name of Person****(Self or Family Member)** | **Name of** **Company** | **Percent of Ownership** | **Royalties** | **Speaking or Consulting**  |  **Other** |
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| The Transparency Reports and Reporting of Physician Ownership or Investment Interests [CMS-5060-F], codified at 42 CFR Parts 402 and 403 requires applicable manufacturers of drugs, devices, biologicals, or medical supplies covered by Medicare, Medicaid, or CHIP to report annually to the Secretary certain payments or transfers of value provided to physicians or teaching hospitals ("covered recipients"). In addition, applicable manufacturers and applicable group purchasing organizations (GPOs) are required to report annually certain physician ownership or investment interests. The Secretary is required to publish applicable manufacturers' and applicable GPOs' submitted payment and ownership information on a public website.UMC Physicians, who are employed, affiliated with contract with, or utilize the services of UMC for their patients are required under UMC Medical and Dental Staff Bylaws to know and abide by all applicable federal regulations related to their position. While this summary is presented for condensed reference due to the specificity of much of the material, a link is being provided to the official Federal Register related to 42 CFR Part 402 and 403. It is this material that physicians and Advanced Practice Professionals (APPs) are required to know. <https://www.cms.gov/OpenPayments/Downloads/Affordable-Care-Act-Section-6002-Final-Rule.pdf>If an issue that gives rise to an actual or potential conflict of interest will not be considered by a deliberate or decision-making body, the individual shall make the disclosure to the person or committee to whom the individual is accountable in the Medical Staff structure. It shall be the responsibility of the individual or committee to which the disclosure is made to determine whether and to what extent the person making the disclosure may participate in consideration of the issue.Conflict of Interest Disclosure Statements submitted will be reviewed by the Chief of Staff (or designee) and the Corporate Compliance Officer. If further review is necessary, the Disclosure statement will be forwarded to the Medical Executive Committee and/or the Board of Hospital Trustees. |
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| **I certify that the information hereby submitted is accurate and complete as of the date stated below, and that I shall provide written notice within 30 days to the Medical Staff of any changes to the information, after such date** |
| Print Name: |  |
| Date: |  |
| Signature: |  |

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| **FOR MEDICAL STAFF OFFICE** |
| Memo Completed/Submitted to Chief(s): |  |
| COI Sent to Compliance Officer: |  |

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| Yes | No |  |
| [ ]  [ ]  | Letter sent to Provider Date: |

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| Further Action/Review: |  |

MEC: 03/23/10, 09/28/10, 04/26/11, 05/24/11, 04/23/13, 4/26/16, 11/27/18

BOT: 04/20/10, 01/12/11, 06/21/11, 06/18/13, 07/19/16, 6/26/2019

Hospital Policy Committee 8/26/20

Hospital Quality 9/8/20

Medical Executive Committee 9/22/20