



CONDUCT COUNTS!

Ethics & Billing

SCENARIO

Andy had been looking for full-time work since he graduated from the Respiratory Therapy program a year ago. With a new batch of graduates starting to apply for positions too, he leapt at the opportunity to work for a home oxygen/Continuous Positive Airway Pressure (CPAP) company when offered a job across the city. Although Andy had some exposure to community practice when he was a student he didn't feel entirely confident, mostly because the patients/clients had different needs and asked a lot more questions.

The company that hired Andy had a few locations across Ontario and was owned by two people who were not healthcare professionals. When one of the owner/managers provided Andy's orientation, he told Andy that "sometimes clients need a little convincing" to place an order. This comment, and other similar ones Andy heard over the first week, made him really uncomfortable. He was used to working with people who were all about focusing on the needs of the patients/clients, and he had no experience with "closing the deal," as his new boss liked to say.

After one patient/client returned for a follow-up visit, after not making a decision to get CPAP the first time she'd been in, Andy's boss decided to join in on the consultation. Andy explained to the patient/client the benefits of CPAP for Obstructive Sleep Apnea (OSA), the different types of masks that she could choose from, and the funding that was available from the Assistive Devices Program (ADP) to help off-set the cost of the equipment. The patient/client left without making a decision, but promised to drop in the next day to let Andy know what she decided to do.

Andy's boss had interjected at times during the meeting with the patient/client, trying to pressure her to make a decision. When the patient/client didn't come by the following day, Andy's boss came to him and told him to call her at home to "tell her if she doesn't place the order you'll report her and have her driver's license taken away!" Although Andy was uncomfortable doing so, he did as his boss suggested and left a voicemail message for the patient/client. The next day the patient/client called back and asked to speak with Andy. She told him that he wouldn't need to report her because she had purchased the CPAP equipment at another company. She then told him that she was "disgusted" by her experience at Andy's office and the use of pressure tactics and threats to try to get a sale. The patient/client said that she was going to submit a complaint to the CRTO because Andy "only cared about money!"



PROFESSIONALISM

"Professionalism" or professional conduct is a term often used to describe the behaviours that are expected of individuals who hold a certain role in society. A "professional" is typically someone who has obtained skills that are recognized as requiring specific, intensive training and who applies those skills in a position impacting others (e.g., engineer, lawyer, RT, PT, MD, etc.). Professionals are often held to moral, ethical and legal standards because of this potential impact.



CONDUCT COUNTS!

Ethics & Billing

RESULTS

The patient/client did complain to the CRTO about her experience at Andy's CPAP company. As with any patient/client complaint, the CRTO initiated an investigation. In addition to speaking with the complainant and Andy, the investigator tried to get a statement from Andy's boss but he was always too busy to arrange a convenient time to speak. Documentation from the patient/client's healthcare record was obtained from the company however, along with their policies on ADP claims and reporting non-compliance to physicians. A panel of the Inquiries, Complaints and Reports Committee (ICRC) considered the results of the investigation and decided to recommend to Andy that he use consent forms that patients/clients would sign acknowledging that they are aware of the company's reporting practises, and that Andy review the Standards of Practice and A Commitment to Ethical Practice documents to ensure that he abides by them at all times.

EXPECTATION

When Andy spoke with the investigator he admitted that he left the voicemail message about reporting the patient/client so that she would lose her driver's license. He apologized for doing so, said that he was still learning to navigate this type of practice.

Like other professions that deal with billing and direct-payment aspects of healthcare, Respiratory Therapists who practice in this setting ought to put processes in place that will protect their patient/clients and themselves from misunderstandings. Panels of the ICRC have suggested to Members over the years that they implement consent or acknowledgement forms for a variety of issues, such as:

- ADP will pay up to 75% of the cost of the device(s) but the remaining 25% is the responsibility of the patient/client – trials and supplies may or may not be included in ADP's coverage;
- Invoices or bills will be provided to the patient/client so that s/he can claim payments to Revenue Canada when submitting income tax returns;
- Patients/clients are not obligated to obtain their equipment from any specific provider and their decision to purchase the device(s) or supplies from elsewhere will not affect the care you provide;
- Patients/clients should be made aware of any financial arrangement between a referring physician/agency/facility so that they can decide whether or not they are comfortable with this;
- There are risks and benefits to every treatment;
- Patient/client information may be shared with other healthcare professionals for the purposes of training; or
- Patient/client information may be transmitted electronically (i.e., by email).

After receiving the Panel's decision, Andy asked his boss for a meeting. He took the decision to the meeting and suggested a number of ideas to improve the way that they were doing business. Although Andy knew that he had to describe to his boss how his ideas would benefit the business, he was also sure to explain how these would benefit patients/clients.

BOTTOM LINE

When money is involved, patients/clients may have additional concerns or sensitivities. Ensure that if you practice in a setting that deals with billing, you recognize this and take steps to prevent misunderstandings and adhere to all ethical standards.

RESOURCES

[Commitment to Ethical Practice](#)

[Standards of Practice](#)

[What you need to know about home oxygen](#)

