



Code of Conduct

*Corporate Compliance Department
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LETTER FROM THE PRESIDENT & CHIEF EXECUTIVE OFFICER

A special message from the President & Chief Executive Officer, Barry Stern to the Employees, medical staff, and all other members of the New York Community Hospital Facility



New York Community Hospital takes pride in acting with integrity, fairness and honesty. This Code of Conduct sets forth the ethical principles that guide our delivery of patient care services, as well as the way we conduct business and behave in the workplace.

The Code supports our Hospital's Mission, Vision and Values as Statements. Because we feel so strongly about our ethical responsibilities, the Board of Trustees has adopted a formal Corporate Compliance Program and appointed a Director of Corporate Compliance to oversee it. The Code applies equally to everyone associated with the Hospital, the Board of Trustees, the Administration, the Medical Staff, and all Employees.

We believe that our employees are partners in maintaining an organization that adheres to the higher ethical and legal standards, and we expect that every employee will act with integrity in any job or endeavor undertaken on behalf of the Hospital.

Managers are expected to maintain open lines of communication with their employees and are encouraged to be especially sensitive and responsive to employee concerns about actual or potential code violations. All employees have a duty to report compliance issues, problems or concerns. You will be protected from retaliation or retribution for reporting in good faith.

Please read this booklet carefully, paying particular attention to those aspects of the Code that apply to your area of responsibility, and use the information to guide your work at New York Community Hospital.

Sincerely,

Barry Stern
President and Chief Executive Officer



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MISSION STATEMENT

New York Community Hospital is committed to provide quality care with compassion and dignity to all patients and to the community.

We the hospital staff recognize these values and our role in fulfilling our Mission.

We are: Committed to our **Patients**, Committed to **Leadership** and Committed to **Excellence**.



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VISION STATEMENT

New York Community Hospital with linkage to the community provides in-patient Medical and Surgical Services. We see ourselves as a center for excellence in Cardiac, Pulmonary, Ophthalmology, and Orthopedic Medicine focusing on individualized attention and care.

New York Community Hospital and Maimonides Medical Center have joined to provide the highest level of specialty care for patients in the communities we serve.

VALUES STATEMENT

New York Community Hospital is a caring place. Patients are received and treated with the utmost respect and dignity.

Our Medical Staff Members and employees treat each other professionally and with respect and dignity.

We are a friendly place.

We are a team that is motivated to pursue our mission.

INTRODUCTION

This Code, based on principles outlined in our Vision, Values and Principles of Behavior and, serves as the foundation of our Corporate Compliance Program. It applies equally to everyone.

- To maintain an effective compliance program, we must all cooperate willingly and participate actively.
- We must report concerns or issues regarding noncompliance to those who can resolve the problem.
- We may report our concerns to any of the following individuals or departments, our Manager/Supervisor, Human Resources and the Director of Corporate Compliance.
- We understand that we can report issues or problems without fear of retaliation from anyone connected with the organization as long as the reporting is done in good faith.

We recognize that we must act in accordance with the Code and conform to its standards, policies and procedures. We are aware that failure to do so can result in serious consequences for the individual employee or medical staff member, as well as for the Organization.

While the Code is designed to provide overall guidance, it does not address every situation. More specific guidance is provided in the Corporate and Medical Staff Bylaws, Director of Corporate Compliance and/or the Personnel (Human Resources) manual and the Hospital Departmental Organization Policy and Procedure manuals.

If questions or concerns persist about a compliance issue, we should contact the Office of Corporate Compliance at (718) 692-8757, kkofman@nych.com or the confidential Helpline at 1-888-309-1565.



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QUALITY OF CARE AND SERVICES

We will provide high quality care and skilled, compassionate, reliable service to our patients and to our community in a safe and healing environment. We will act in accordance with the provision of the Patient Bill of Rights, as well as adhere to the following principles.

- We will honor the dignity and privacy of each of our patients and will treat them with consideration, courtesy and respect.
- We will provide appropriate and timely care to all patients without regard to race, religion, age, gender, national origin, sexual orientation, disability or military status.
- We will, when a patient presents with an emergency medical condition, provide that patient with a screening examination and stabilization of any emergency condition in accordance with applicable laws, rules and regulations, regardless of the patient's ability to pay.
- We will transfer a patient only after the patient has been medically stabilized and an appropriate transfer has been arranged.
- We will have a qualified practitioner properly evaluate every patient before initiating a treatment plan.
- All individuals employed to meet the needs of our patients will have proper credentials, experience and expertise necessary to perform their duties.
- We will maintain complete and thorough records of patient information to fulfill the requirements set forth in our policies, accreditation standards and applicable laws and regulations.
- All patients asked to participate in a research project will be advised of risks and benefits, as well as alternative services or treatment available. In addition, a patient's refusal to participate will not in any way affect his/her access to care or services provided by the Organization.
- We will support and promote a continuous quality and performance improvement program throughout the Organization.
- We will continuously strive toward a culture of patient safety.



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CONFIDENTIALITY AND PRIVACY

We are committed to maintaining the confidentiality of patient and other information in accordance with legal and ethical standards. Breaches of confidentiality will not be tolerated.

- We will adhere to all established confidentiality and privacy policies and procedures and the laws including the Health Insurance Portability and Accountability Act (HIPAA).
- We will respect the privacy of our patients and fellow employees.
- We will actively protect and safeguard patient information and patients' personal information including social security numbers.
- We will access a patient's chart or medical data only when we are involved in that patient's care, or when we need access to the chart because of administrative, teaching or research requirements.
- We will not reveal information unless it is supported by a legitimate clinical or business purpose, in compliance with organization's policies and procedures, the Medical Staff Bylaws, and applicable laws, rules and regulations.
- We will not discuss patient information in any public area, including elevators, hallways and dining areas.
- We will not use or share "insider information," which is not otherwise available to the general public, for any direct or indirect personal gain or other improper use.
- We will exercise care to ensure that confidential and proprietary information is carefully maintained and managed to protect its value.
- We will not disclose other Organization financial information, including our financial performance and contract pricing for goods and services, without appropriate approval.
- We will treat salary, benefits, payroll, personnel files and information on disciplinary matters as confidential information.
- We will maintain computer workstations and access codes in a confidential and responsible manner. We will not share computer identification information and passwords.

WORK PLACE BEHAVIOR AND EQUAL OPPORTUNITY

We will treat all people with respect, dignity and courtesy. We recognize that our greatest strength lies in the talent of our staff who create the Organization's success and determine its reputation.

- We will provide employees nondiscriminatory terms, conditions and privileges of employment, regardless of race, color, religion, sex, sexual orientation, national origin, age, marital status or military status, and without regard to the disability of qualified persons within the meaning of the applicable law.
- We will provide equal opportunity to all employees and applicants for employment without regard to race, color, religion, sex, national origin, citizenship status, marital status, veteran status, age, pregnancy status, sexual orientation and without regard to the disability of qualified persons within the meaning and subject to the conditions of applicable federal, state and city laws.
- We encourage teamwork and create structures, processes and programs that enable a positive culture to flourish. Disruptive behavior that intimidates others and affects morale or staff turnover will not be tolerated and will be addressed appropriately.
- We will not permit any act of retaliation or reprisal against an employee who in good faith reports a violation of law, regulation, standard, Organization policy or Code of Conduct.
- We support an alcohol, drug and smoke free workplace and abide by Organization policies prohibiting illegal possession, distribution, use or being under the influence of illegal drugs, alcohol or other substances.
- We expect all employees and staff to conform to the standards of their profession as and exercise appropriate judgment in the performance of their duties.
- We will screen all prospective employees to assure that they have not been sanctioned by any regulatory agency and are eligible to perform their designated responsibilities.
- We are aware that every Organization manager is responsible for creating a work environment in which ethical concerns can be raised. If an employee raises an ethical question or concern, the manager must address it. If a manager does not know how to respond, he or she should seek assistance through the chain of command, the Human Resources Department, and/or the Director of Corporate Compliance.
- We will not engage in any disruptive or inappropriate behavior.
 - Examples of inappropriate behavior include: angry outbursts; verbal threats; or demeaning comments; swearing; throwing or breaking objects; bullying; shaming and censuring staff in front of others; insensitive jokes or remarks; and the threat or infliction of physical force or contact.
- We will familiarize ourselves and comply with the contents of the Hospital's Personnel Policies and Procedure applicable to our employment and responsibilities at the Hospital.

BUSINESS ETHICS AND COMPLIANCE WITH LAWS AND REGULATIONS

We will follow the letter and spirit of applicable laws and regulations, conduct our business ethically and honestly, and act in a manner that enhances the organization's standing in the community and is sensitive to those whom we serve.

- We will make every effort to demonstrate honesty, integrity and fairness in the performance of our duties.
- We will report any practice or condition that may violate any law, rule, regulation, safety standard, Organization policy or the Code of Conduct to appropriate levels of management, Human Resources or the Office of Corporate Compliance.
- We will adhere to all applicable laws, regulations and professional standards regarding financial reporting and disclosures. We will submit accurate claims and reports to the federal, state and local governments.
- We are strictly prohibited from giving or receiving any form of payment, kickback or bribe to induce the referral or the purchase of any healthcare service.
- We will not offer any improper inducement or favor to patients, physicians or others to encourage the referral of patients to our facilities.
- We will not accept any improper inducements or favors from vendors to influence our patients or others connected with the organization to use a particular product or service.
- We will avoid agreements or other actions that may unfairly restrain trade or reduce competition.
- We will be aware of situations that may present potential antitrust and avoid inappropriate discussions with competitors regarding business issues. This includes prices for goods and services, salaries and benefits, payment rates and business plans.
- We will market and advertise accurately and in compliance with laws and regulations.
- We will verify that our contracts for services to be provided to the Hospital are in compliance with the Anti-kickback and Stark laws. All payments by the Hospital must be supported by appropriate documentation.
- We will procure, maintain, dispense and transport drugs or other controlled substances used in the treatment of patients according to applicable laws and regulations.
- We will not make any verbal or written false or misleading statements to a government agency or other payer.
- We will not pursue any business opportunity that requires unethical or illegal activity.
- We will provide reports or other information required to be provided to any federal, state or local government agency are on time, accurate and according to applicable laws and regulations.
- We will comply with federal regulations regarding government contracts and programs in which we participate. We will provide managers and employees who work in relevant areas with knowledge of the governing rules and regulations.
- We will not engage in lobbying activities on behalf of the organization that are inconsistent with the Organization's tax-exempt status.
- We will conduct fundraising in accordance with all applicable laws and regulations and Organization policies and procedures.



We will adhere to the Hospital's policies and procedures relating to Business Ethics and Compliance, including the following:

- * Billing and Claims Reimbursement
- * Business Travel and Entertainment
- * Code of Conduct
- * Conflicts of Interest- Gifts and Gratuities
- * Corporate Compliance Auditing and Monitoring
- * Corporate Compliance Plan
- * Employee Compliance Helpline Operations
- * Employee Compliance Training
- * Federal Deficit Reduction Act of 2005 Fraud and Abuse Provisions
- * Medical Sales Representatives
- * Non-Retaliation
- * Organizational Ethics
- * Sanctions Screening

CONFLICTS OF INTEREST

We will perform our duties on behalf of the Organization and its patients. We will avoid conflicts or the appearance of conflicts between our own interests or an outside interest and the interests of the Organization.

- We will devote our full time and ability to the Organization during our hours of work at the hospital.
- We will not engage in any activity, practice or act that creates an actual or apparent conflict with the interests of the Organization.
- We encourage employee involvement in community activities. All personal fund raising activities that do not benefit the Organization are prohibited from being conducted onsite. This prohibition includes use of the organization facilities and resources (e.g. letterhead and computers).
- We have an obligation to act solely in the best interest of the Organization, whenever we act as an agent of the organization, in our dealings with suppliers, customers or government agencies. This obligation includes those acts formalized in written contracts, as well as everyday business relationships with vendors, customers, government officials and government employees.
- We will report actual or potential conflicts of interest to our Managers and or the Director of Corporate Compliance of the hospital.
- We will promptly and accurately complete any conflict of interest forms that we may be asked to submit.
- Medical staff members must complete, at a minimum, a Hospital conflict of interest form on every reappointment and will update the information as appropriate.

The following situations are potential conflicts of interest and must be disclosed to the Office of Corporate Compliance:

Having a Financial Interest in a Competitor, Vendor or Related Organization.

We will avoid placing business with a vendor, competitor or related Organization of New York Community Hospital, in which we or members of our immediate family have a direct or indirect interest, employment or other financial relationship, unless the relationship is disclosed and approved according to appropriate Organization policy.

Providing Services for Competitors, Vendors or other Outside Organizations. This includes ANY Institution, but especially Competitors and those currently doing business or seeking to do business with the organization.

We will avoid involving ourselves in any enterprise that does business or competes with our organization when that connection might influence our decisions or affect our ability to perform our functions. If such involvements are necessary, they must be disclosed and approved in accordance with the Hospital's conflict of interest policy.

Participating in Outside Board of Directors/ Trustees of Competitors or those doing business with or on behalf of the organization.

We will disclose to the Office of Corporate Compliance, or in the appropriate manner (e.g. on the Conflict of Interest Form), any situation where we serve as a director, trustee or officer of an organization whose interest may compete or conflict with that of New York Community Hospital. We will provide such disclosure promptly and within the time frames established by the Organization.



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Having a Directorial, Supervisory OR Subordinate Relationship with a Relative, OR Hiring a Relative

We will not hire nor have a reporting relationship to relatives (i.e. spouse, children, parents or siblings) without disclosing that information and securing written permission from our manager, Human Resources Department or the Office of Corporate Compliance. The Hospital reserves the right to avoid the possibility of nepotism by unilateral transfer of the individuals concerned.

Improper gifts and gratuities

We will not solicit or accept cash or in-kind contribution from vendors, suppliers or other contractors in support of any activity of the Organization unless approved by the Executive Office of the Hospital and/or the Office of Corporate Compliance.

Employees will not accept cash or cash equivalent gifts in any amount provided in connection with our employment. Non-cash gifts of nominal value and reasonable meal and entertainment courtesies must comply with Human Resources policy. Non-cash gifts that exceed nominal value may not be accepted. If we have a question as to the value of the appropriateness of a gift, we will seek approval from our manager or the Office of Corporate Compliance

CODING AND BILLING

We will code and bill accurately and document the services rendered and the amounts billed. Communication among the clinicians, the coders and the billers is required so that accurate information is provided.

- We will maintain appropriate documentation to support coding and billing.
- We will bill for services according to medical necessity guidelines established by the various payers.
- We will code and bill only for services that were actually rendered.
- We will properly train staff and provide them with coding and billing updates in a timely manner.
- We will notify the payer of payment errors and process refunds promptly and accurately.
- We do not routinely waive patients' coinsurance and deductibles. However, when it is done, it will be in accordance with established rules, policies and procedures.
- We will maintain complete and thorough records to fulfill requirements set forth in our policies and procedures, accreditation standards and applicable laws and regulations.
- We will continually evaluate our coding and billing activities to identify areas for improvement. We will make special note of concerns identified by regulators (e.g. laboratory services, clinical trials, bad debts, transfers) to mitigate the risk of improper billing.
- We strive to identify errors, report them to our managers or the appropriate Organization authority and correct them in a timely and appropriate manner.
- Our billing is the result of complete and accurate coding, which is based upon complete and accurate documentation of all diagnoses and procedures.



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SAFEGUARDING RESOURCES/ASSETS

We will protect our assets and the assets of others entrusted to the Organization against loss, theft or misuse. This includes physical and intellectual property.

- We will maintain internal controls within our areas of responsibility to safeguard the organization's assets and ensure the accuracy of financial statements and all other records and reports.
- We will use Organization property appropriately and take measures to prevent any unexpected loss of equipment, supplies, materials or services. We are aware that managers must approve any personal use of Organization equipment, supplies, materials or services.
- We will report time and attendance accurately and will work productively while on duty.
- Travel and entertainment expenses should be consistent with our job responsibilities, the organization's needs and in accordance with organization policy.
- We will issue and maintain financial reports, accounting records, research reports, expense accounts, time sheets and other documentation that are accurate and clearly reflects the true nature of transactions.
- We will follow the laws regarding intellectual properties, including patents, trademarks, marketing, copyrights and software.
- We will not copy organization computer software unless it is specifically allowed in the license agreement.
- We will adhere to established policies and procedures governing record management and comply with the record retention and destruction policies/schedules for our departments.



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ENVIRONMENTAL CONSIDERATIONS

We will provide a safe and secure environment for patients, staff and visitors.

- We will consider the safety and security of patients, employees and medical staff in all of our activities.
- We will report any unsafe condition to our manager, the Safety Officer or someone else in authority to correct the problem.
- We will exercise good judgment with regard to the environmental aspects of the use of Organization buildings, property, laboratory processes and medical products.
- We will comply with established Safety and Infection Control policies and procedures, which are intended to avoid job-related hazards and ensure a safe work environment.
- The Hospital is a smoke-free environment and we will comply with established policies in this matter.
- We will comply with all law and regulations governing the handling, storage, use and disposal of hazardous materials, other pollutants and infectious wastes.
- We will comply with permit requirements that allow for the safe discharge of pollutants into the air, sewage systems, water or land.
- We understand that the Organization will pursue initiatives based on specific threats on-site or in our community.
- We will report any possible violation of the organization's Safety policies and procedures, laws, regulations or standards to our manager or supervisor. If we are not satisfied that the issue has been addressed, we will notify the Safety Office or the Office of Corporate Compliance.
- Any individual working at the Organization is required to wear the appropriate identification card. If asked, an employee, member of the medical staff or other healthcare provider will identify themselves by name and department.



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EMPLOYEE ISSUES AND CONCERNS

It is our responsibility to understand and comply with applicable rules, regulations and laws that govern the Organization and its employees. We will also comply with The “Code of Conduct” and “Principles of Behavior.” We understand that violating the principles of the Code can result in corrective action, up to and including termination.

- If there is a question or concern about a situation that appears to be illegal or unethical, we may first seek guidance from our manager. If we are uncomfortable addressing the issue with our manager or the manager has failed to address the issue in a timely manner, we will inform one of the following: senior management, Human Resources or the Director of Corporate Compliance.
- Management is responsible for responding to issues or concerns identified by employees. If a manager is unable to respond to an employee, he/she is encouraged to seek guidance from a superior and, if necessary, the Corporate Compliance Officer.
- We are aware that the organization has established a toll-free Compliance Helpline. The number is 1-888-309-1565 and it operates 24 hours a day, seven days a week. The Compliance Helpline is operated by an outside organization and can take calls in English and in Spanish. Reports received by the Helpline will be investigated promptly by the Office of Corporate Compliance. Calls may be made anonymously, and every effort will be made to ensure the confidentiality of the information provided.
- In addition to other issues, the Helpline may be used to report complaints regarding accounting, internal accounting controls or auditing matters related to the accuracy or integrity of the Organization’s financial statements. Such matters will be investigated by the Compliance Director and reported to the Audit and Corporate Compliance Committee of the Board of Trustees.
- We may report concerns or raise questions through any of the aforementioned channels. We are aware that employees who fail to report a suspected or known violation of the Code of Conduct or other policies and procedures may be subject to corrective action.