

**Continuum**  
Hospitals of New York

# CODE OF CONDUCT

*A Guide to Our Corporate Compliance Program*

*One Way...the Right Way*

## A MESSAGE TO OUR STAFF

*Meeting the highest professional standards and adhering to the strictest ethical and legal obligations*

Dear Continuum Health Partners Staff:

The member institutions of Continuum Health Partners, Inc. – Beth Israel Medical Center, St. Luke's and Roosevelt Hospitals, and The New York Eye and Ear Infirmary – have a long tradition of ethical and responsible conduct that have earned them the respect and trust of patients, families, professional colleagues and the community at large.


The Board of Trustees of Continuum Health Partners has adopted a Corporate Compliance Program to ensure that this tradition is maintained, to promote integrity among our staff and to enhance Continuum's ability to achieve its multifaceted health care mission. As academic medical centers, we dedicate ourselves to delivering the highest quality health care, to training new physicians and to pursuing scientific and clinical research. This dedication includes meeting the highest professional standards and adhering to the strictest ethical and legal obligations.

Through our Corporate Compliance Program, we seek to ensure that all of the employees of Continuum's member institutions are committed to conducting themselves in an ethical environment that prides itself on high standards of integrity. This commitment is reflected in this Code of Conduct, which identifies principles for performance in the workplace and specifies expectations with regard to all applicable laws and regulations. The principles outlined in the Code of Conduct govern the behavior of all employees and staff, regardless of position, as well as those doing business with us or at one of our institutions, and protect against unlawful and unethical activity. These guiding principles are designed to assist us in our day-to-day conduct, from which our patients, our fellow colleagues, the health care and business communities and regulatory authorities will judge our integrity.


The design and operation of the Corporate Compliance Program represents a significant commitment of resources by the trustees and senior leaders of Continuum. We expect that all staff associated with Continuum make the same commitment to compliance in the performance of their duties and become familiar with the guidance provided in this Code of Conduct.

We thank you for your commitment to providing an ethical and lawful environment in which to serve our patients. We want to assure our patients and communities that Continuum holds firm to its values and its pledge to provide services, "One Way...the Right Way". With your cooperation, we will continue to be a leader.

Sincerely,

  
**Stanley Brezenoff**  
President and  
Chief Executive Officer

  
**Steven Hochberg**  
Chairman  
Board of Trustees

  
**Louis I. Schenkel**  
Corporate Compliance  
Officer

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## PROGRAM OVERVIEW

### **Purpose of the Code of Conduct**

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Continuum Health Partners, Inc. – Beth Israel Medical Center, St. Luke’s and Roosevelt Hospitals, and The New York Eye and Ear Infirmary (hereinafter referred to as “Continuum”) established this Code of Conduct so that staff will know and understand expectations of behavior. This Code of Conduct is a framework within which all employees and medical staff members, regardless of position, as well as those doing business with us (i.e. vendors, contractors) and volunteers (hereinafter referred to as “staff”, as applicable) at one of our institutions are expected to operate. Responsibility for lawful and ethical behavior is a personal responsibility, and all staff will be held accountable for his or her conduct.

The Code of Conduct is intended to be comprehensive and easily understood. It is not meant to answer every question that might give rise in your daily activities; however, it does provide guidelines, direction and resources to tap into to respond to matters and circumstances in the course of your Continuum duties. No set of guidelines, including our own, can ever substitute for the sound judgment, common sense and personal integrity required to meet the challenges of your job.

### **Staff Responsibilities**

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Continuum staff are expected to treat compliance with ethical standards as a critical element of their responsibilities.

All Continuum staff are required to:

- Read and abide by this Code of Conduct
- Be familiar with, understand and observe the basic legal and regulatory requirements that are relevant to his or her duties
- Ensure the confidentiality of patient and hospital-related information
- Adhere to the highest ethical standards when acting on behalf of Continuum and/or a member institution
- Respect the cultural values and religious beliefs of patients and family members, co-workers, staff members and visitors
- Prevent and/or refrain from discrimination or harassment of any kind, including racial, ethnic or sexual harassment
- Refrain from conflicts of interest and/or using a position for personal gain
- Report possible or actual violations of law or ethical standards

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### Compliance Questions

Integrity, common sense, and sound judgment are your best guides in determining if your personal actions meet the expected standards for ethical and lawful behavior. However, if you find yourself in a situation where you are unsure, ask yourself these questions:

- Is my action consistent with hospital practices and legal or regulatory requirements?
- Could my action give the appearance (to others) of impropriety or wrongdoing?
- Will the action bring discredit to any staff or to Continuum, if disclosed fully to the public?
- Can I defend my action to my supervisor, other staff and to the general public?
- Does my action meet my personal code of behavior?

### Leadership Responsibility for Compliance Communication

Management and supervisory staff are responsible for communicating the requirements of the Corporate Compliance Program and this Code of Conduct to those who report to them by emphasizing its importance; taking appropriate measures to detect and correct any violations and prevent recurrence, and imposing consistent and appropriate discipline, if warranted. They shall inform their staff of any particular issues relevant to their respective department and of the various options, including the Corporate Compliance Hotline, for reporting a compliance concern. Leadership personnel are expected to create and maintain an open environment where staff are encouraged and comfortable raising compliance concerns or asking questions. Adherence to the Code of Conduct and support of the Corporate Compliance Program are components of the staff evaluation process for all employees and management staff.

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### Organizational Ethics and Quality of Care

#### Patient Care and Patient Rights

We recognize our ethical and moral obligation to the patients and community we serve. We treat all patients with respect and dignity and provide a single standard level of care that is both necessary and appropriate and in accordance with federal, state and city laws and regulations, as well as hospital policy. We make no distinction in the admission, transfer or discharge of patients or in the care we provide based on race, color, religion, national origin, creed, sex, ethnicity, age, sexual orientation, disability, marital status, veteran's status, citizenship status or source of payment.

Upon admission, each patient is provided with the written statement "Patients' Bill of Rights," which all staff are required to honor. This document, which is posted conspicuously in public areas throughout the hospitals, includes the rights of patients to make decisions about their medical care. We will ensure that a qualified practitioner evaluates every patient before initiating a treatment plan, as well as ensure that all services are performed by appropriately credentialed and properly trained individuals.

We respect the rights of patients to be involved in all aspects of their care and obtain informed consent for treatment. As applicable, each patient or patient designee is provided with a clear explanation of care including, but not limited to, diagnosis, treatment plan, right to refuse or accept care, care decision dilemmas, advance directive options, organ donation and procurement, and an explanation of the risks and benefits associated with available treatment options. Patients or their designee have the opportunity for the resolution of complaints, as well as pastoral or spiritual care. Thorough and complete records of patient information will be maintained.

#### Emergency Care

Continuum observes the federal Emergency Medical Treatment and Active Labor Act ("EMTALA") and applicable state law in providing medical screening and stabilizing treatment to any patient who comes to a Continuum hospital with an emergency condition, regardless of ability to pay. Anyone with an emergency condition is treated and admitted based on medical necessity. In an emergency situation, financial and demographic information will be obtained only after the immediate needs of the patient are met.

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*code of conduct*

Patients will only be transferred to another facility if the patient's medical needs cannot be met at the Continuum hospital, and appropriate care is knowingly available at another facility. Patients may only be transferred after they have been stabilized and are formally accepted by a physician at the receiving facility.

### **Confidentiality / Hospital Information**

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We are committed to maintaining the confidentiality of all proprietary information according to existing laws and standards.

#### **Patient Confidentiality and Privacy**

We carefully avoid any unwarranted invasion or disclosure of patients' privacy. We collect information about the patient's medical condition, history, medication and family illnesses to provide the best possible care. We realize the sensitive nature of this information and are committed to maintaining its confidentiality.

We are committed to complying with all applicable privacy and security laws and regulations, including the applicable aspects of the federal Health Insurance Portability and Accountability Act (HIPAA). To ensure that we protect our patients' rights to privacy, the following guidelines apply:

- All patients are provided with the written "Notice of Privacy Practices"
- Access to Protected Health Information (PHI) is limited to those permitted by law and hospital policy
- Use only legitimate means to collect the information and, whenever practical, obtain it directly from the individual concerned
- Maintaining computer passwords and access codes in a responsible and confidential manner
- Report violations of confidentiality breaches to the designated Privacy Officer or others in the chain of command
- Ensure that patient information is not discussed in any public area, including elevators and dining areas
- Ensure compliance to the special confidentiality rules that apply to patients in drug and alcohol treatment programs, as well as disclosure of information regarding a patient's HIV status

Any staff who engages in unauthorized access and/or unlawful disclosure of information in violation of the privacy rights of our patients is subject to disciplinary action, up to and including termination.

#### **Confidential Information**

Patient information is to be actively safeguarded by all staff. No one shall, without the written consent of the hospital, disclose any confidential information obtained during the course of employment. This includes, but is not limited to: the hospital's processes, techniques, computer software, equipment, copyrights, research data, clinical and pharmacological data, marketing and sales information, personnel data, patient medical records, patient lists, financial data and any plans that have not been published or disclosed to the general public.

Additionally, staff must not make inappropriate modifications to information or destroy or disclose information except as authorized. Documents containing sensitive data, including patient and Protected Health Information should be properly secured at the end of the business day.

Continuum staff are expected to take reasonable precautions to ensure the physical security of confidential information and facilities.

#### **Information Owned by Others**

Staff who are in a position to receive an outside party's confidential information (oral, visual or written) must do so in accordance with hospital policy or specific agreement with the outside party. Before accepting software from others or signing a license agreement, approval must be obtained from the Vice President for Information Services. Personal software should not be copied for any work done for Continuum, placed or utilized in any Continuum-owned computer system, or generally brought onto Continuum premises.

#### **Staff Privacy**

Continuum respects the privacy and dignity of all staff. Continuum collects and retains staff personal information that is required for the effective operation of Continuum or that is required by law. Continuum has implemented policies and procedures that protect and limit access to staff personal information and comply with applicable laws that govern staff privacy. Staff are prohibited from accessing or otherwise using staff records or information unless authorized to do so for legitimate business purposes.

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**Conducting Hospital Business**

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We will conduct our business in accordance with all laws and regulations and act in a manner that is in the best interest of our institutions and those whom we serve.

**Oversight of Hospital/Patient Assets**

Managers are responsible for establishing appropriate internal controls within their area(s) of purview to safeguard Continuum assets, ensure the accuracy of financial records and reports, and maintain accurate reporting of all transactions. The integrity of Continuum's financial records is critical to effective hospital operations and is a key factor in maintaining the confidence and trust of our staff, patients and other stakeholders. Staff are expected to observe the hospital's rules and practices for safeguarding not only the hospital's assets, but also the property entrusted to us by our patients.

**Accuracy, Retention and Disposal of Documents and Records**

All Continuum staff are responsible for the integrity and accuracy of our business documents and records in order to comply with regulatory and legal requirements, as well as to ensure that records are available to defend our business practices and actions. No one may alter or falsify information on any record or document.

Medical and business records must be fully and accurately completed and maintained, consistent with proper business practices. Continuum takes necessary measures, including the assessment of new hardware and software, to ensure the accuracy and functionality of all appropriate computerized and automated information systems. Staff must comply with Continuum's record retention policies.

**Trade Practices/Antitrust Issues**

We are required to comply with all antitrust laws, which are designed to preserve and foster fair and honest competition within the free enterprise system. These laws could be violated by discussing Continuum business with a competitor, such as how our patient charges are established, disclosing the terms of supplier relationships or agreeing with a competitor to refuse to deal with a supplier. Our competitors are other health systems and facilities in geographic markets where we operate. In general, avoid discussing sensitive topics with competitors or suppliers, unless you are proceeding with the consent of the Legal Department.

**Physician Relationships**

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Any business arrangements with a physician or a physician group must be structured to ensure compliance with legal requirements. Such arrangements must be in writing and approved by the Legal Department.

**Anti-Kickback and Referrals Laws**

Federal and state laws prohibit any form of kickback, bribe or rebate (cash or in-kind) to induce the purchase, recommendation to purchase, reduction or limitation of services, or referral of any kind of health care goods and services or items paid for by the Medicare and the Medicaid programs. Continuum does not offer or receive inducements or create situations in which Continuum appears to be offering or receiving an improper inducement.

**Referrals**

Continuum does not pay for referrals. We accept referrals and admissions based solely on patients' clinical needs and our ability to render the needed services. No staff or any other individual acting on behalf of Continuum is permitted to solicit or receive anything of value, directly or indirectly, in exchange for the referral of patients. Continuum is committed to ensuring that physicians make appropriate referrals in accordance with applicable federal Stark laws and relevant state laws.

**Third Party Payer Relationships**

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**Billing, Coding and Reimbursement**

Continuum is committed to full compliance with all laws and regulations relating to billing, coding and reimbursement. This commitment applies to the government programs of Medicare and Medicaid, as well as those of other third party payers. We will ensure that all billings to governmental and third-party payers are true and accurately reflect services only for medically necessary services and other necessary data provided to our patients. Staff are prohibited from knowingly presenting or causing to be presented claims for payment or approvals that are false, fictitious or fraudulent. Continuum operates oversight systems to verify that claims are submitted only for services actually provided, and services are billed as provided. Appropriate training is provided to staff involved in the billing, coding and claim submission process.

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Any subcontractors engaged to perform billing or coding services are expected to have the necessary skills, quality control processes, systems and appropriate procedures to ensure all billings for government and commercial insurance programs are complete and accurate.

If mistakes or errors occur, they are reported to a manager promptly and corrected in a timely and appropriate manner. If improper payment occurs, we will notify the payer promptly and process refunds in a timely manner. Strict compliance with all relevant Medicare and Medicaid laws and regulations is required by all staff.

Continuum does not routinely waive patients' deductibles or copayments or otherwise provide for financial benefits to patients in return for admission.

### Cost Reports

Continuum is committed to complying with federal and state laws requiring the submission of complete and accurate cost reports related to hospital operations. Those laws and regulations define what costs are allowable and outline the appropriate methodologies to claim reimbursement for the cost of services provided to program beneficiaries. Cost reports are subject to internal and/or external audit to ensure that any identified issues are corrected in a timely manner.

## Legal and Regulatory Compliance

### Deficit Reduction Act of 2005

Continuum is committed to complying with the requirements of Section 6032 of the Federal Deficit Reduction Act of 2005 (DRA) and to preventing and detecting any fraud, waste or abuse. It is the policy of Continuum that all staff, including physicians, management, consultants and vendors and contractors who provide services, shall comply with all applicable federal and New York State laws pertaining to false claims and statements, whistleblower protections under these laws and Continuum's policies and procedures for detecting fraud, abuse and waste. Such policies and procedures are contained in the *Employee Handbook*.

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### Licensure

The hospitals comprising Continuum are licensed by the State of New York and accredited by the Joint Commission. These and other entities that regulate our hospitals have numerous requirements determining how our hospitals deliver services. Such laws and regulations include such issues as accreditation, licenses, permits, access and consent for treatment, medical staff membership and delineation of clinical privileges, certificate of need, access to medical records and confidentiality and Medicare and Medicaid. Staff are expected to be familiar with the regulations governing their area and to stay abreast of new developments.

### Tax Status

Continuum is exempt from taxation by the federal, state and local governments. Continuum's sales tax exemption can be used only for legitimate hospital activities. Personal items may not be purchased through Continuum even if Continuum is reimbursed by the staff member.

### Restrictions for Government Personnel

Staff may not provide or pay for meals, refreshments, travel or lodging expenses for government employees; offer any type of gratuity under any circumstances; or entertain a public official without authorization from the Legal Department.

### Government Inquiries and Investigations

It is the policy of Continuum to cooperate with and properly respond to all governmental inquiries and investigations. Any staff approached by any federal or state law enforcement or regulatory agency (i.e. Medicare, Medicaid) official seeking information about any aspect of the hospital shall immediately notify their supervisor who in turn must notify the Legal Department. It is Continuum's policy to ensure that government agencies are provided promptly with all necessary and appropriate information.

### Personal Use of Continuum Resources

Continuum's assets, which include staff time, materials, supplies, equipment and information, are to be used and maintained primarily for business-related purposes. You may not use these resources in a manner that could be harmful or embarrassing to Continuum. Any use of Continuum resources for personal financial gain unrelated to Continuum is prohibited.

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### Copyright

Continuum staff are prohibited from reproducing any copyrighted materials without the express permission of the copyright holder, unless appropriately licensed from the copyright holder. All staff are required to adhere to laws and policies relating to intellectual property, including patents, trademarks and copyrights.

### Electronic Media

All communications systems, electronic mail, Internet and Intranet access or voice mails are the property of Continuum and are to be primarily used for business purposes. Limited responsible personal use of communications systems is permitted; however, Continuum reserves the right to monitor the use of its electronic media resources and to take appropriate disciplinary measures in cases of misuse. Patient or confidential information should not be sent through the Internet or Intranet until such time that its confidentiality can be ensured. Staff may not use communication systems to send harassing, threatening or obscene messages, send copyrighted documents that are not authorized for reproduction, conduct a job search or open misaddressed mail.

## Workplace Conduct and Practices

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### General

As an organization, Continuum recognizes that our staff, physicians and volunteers, who serve our institutions, are our greatest assets. Continuum is committed to providing an employment setting that treats all staff with fairness, dignity and respect, and affords them an opportunity to grow, to develop professionally and to work in a team environment.

It is Continuum's policy to:

- Provide equal opportunity for employment and advancement on the basis of ability and aptitude
- Protect the health and safety of staff
- Compensate staff fairly and equitably
- Train staff adequately relative to their job responsibilities

Staff are encouraged to develop their individual skills and understanding of their job. Continuum honors all applicable agreements with organized labor and/or its collective bargaining agreements. The Human Resources Department has manuals of policies and procedures to implement the above stated goals. Familiarity and adherence to Continuum's Human Resources policies are responsibilities of each staff member.

### Equal Employment Opportunity and Diversity

Continuum is committed to providing an equal opportunity work environment. We will comply with all laws, regulations and policies related to nondiscrimination and fair employment practices in all of our personnel actions. Such actions include hiring, placement, transfers, promotions, training, compensation, evaluations, leaves of absence, recruiting, corrective action, and discipline and staff reductions. We make reasonable accommodations to the known physical and mental limitations of otherwise qualified staff with disabilities. Retaliation against individuals for raising claims of discrimination or harassment is prohibited.

### Employment/Screening

Continuum verifies the credentials and qualifications of all individuals applying for employment and hires only qualified individuals with appropriate expertise, licensure and experience.

We will not hire or contract with any individual or entity who is excluded, suspended, debarred or otherwise ineligible to participate in the federal and state health care programs (Medicare, Medicaid) or has been convicted of a criminal offense related to the provision of health care items or services and has not been reinstated in the federal and state health care programs after a period of exclusion, suspension, debarment or ineligibility.

### Harassment/Workplace Violence

All Continuum staff have the right to work in an environment free of harassment. Continuum will not tolerate harassment by anyone based on the diverse characteristics or cultural backgrounds of those who work at Continuum. Degrading or humiliating jokes, slurs, intimidation or other harassing conduct is not acceptable. Any form of sexual harassment is strictly prohibited. This prohibition includes unwelcome sexual advances or requests for sexual favors in conjunction with employment decisions, as well as other verbal or physical conduct that creates a hostile work environment.

Continuum does not tolerate workplace violence, which includes threatening, aggressive or abusive behavior. Moreover, as part of our commitment to a safe workplace, staff are prohibited from possessing firearms, other weapons or other dangerous instruments and materials on the premises of Continuum.

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**Immigration**

Federal law prohibits Continuum from hiring individuals who are not legally authorized to work in this country.

**Hiring of Former Government Employees**

Former government employees who, upon termination of their government service, seek employment with Continuum must obtain clearance from the Human Resources Department to preclude any potential conflict of interest.

**Staff Loyalty and Conflicts of Interest**

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**Conflict of Interest**

In the course of conducting Continuum business, we are expected to put Continuum's interests ahead of any outside business, commercial or personal interest. Staff should avoid situations in which conflict of interest, or the appearance of a conflict, could arise. A conflict of interest may also exist if the demands of your outside activities influence or appear to influence your ability to make objective decisions in the course of your job responsibilities.

All staff are required to complete a conflict of interest questionnaire upon hire and certain categories of staff are required to file an annual disclosure statement. Because it is impossible to describe every potential conflict of interest scenario, Continuum relies on your commitment to exercise sound judgment to seek advice when appropriate and to adhere to the highest ethical standards in the conduct of your professional and personal interactions. Anyone who believes he or she has a conflict of interest or the appearance of a conflict of interest shall immediately report it to his or her supervisor, department manager or the Corporate Compliance Officer. For additional guidance as to Continuum's policy on these types of issues, the Conflict of Interest policy should be consulted.

**Outside or Dual Employment**

Employees' primary employment obligation is to Continuum. Any activities, such as a second job or personal business, must not conflict with obligations to Continuum. Staff with secondary employment that may be perceived as a conflict of interest with their Continuum position must make such a disclosure to their supervisor.

**Gifts and Entertainment/Business Courtesies**

Gifts and entertainment represent an area of potential conflict in situations where a competitive, regulatory, supervisory or adversarial relationship could exist. Giving or accepting gifts and entertainment can sometimes be construed as an attempt to unduly influence a relationship.

It is Continuum's policy that no personal gifts may be offered or received under circumstances in which the gift might possibly influence the exercise of proper business judgment, regardless of whether this was or was not the intent of the donor or recipient. Accordingly, one should not provide or accept gifts of more than nominal value. Gifts of money (including gift certificates) are never acceptable. Solicitation of personal gifts or entertainment is never permissible.

Acceptance of a perishable or consumable gift (e.g., fruit baskets, cookies, flowers) of nominal value given to a department or group by a vendor during the holiday season or by a patient as a token of appreciation is permissible; however, such gifts should be shared with other staff.

There may be times when staff may wish to accept from a current or potential business associate an invitation to attend a social event, participate in training and educational opportunities or receive information about new products or services. Staff should seek reimbursement from the hospital for associated expenses in accordance with hospital policy. Questions related to gifts and entertainment and business courtesies should be referred to the Corporate Compliance Officer.

**Political Activities and Contributions**

As a tax-exempt entity, Continuum is prohibited from participating in political activity by law. Continuum funds or resources are not to be used to contribute to political campaigns or for gifts or payments to any political party or any of their affiliated organizations. Continuum resources include employees' work time, telephones or computers.

Staff are permitted to participate in the political process on their own time and own expense, but may not do so on behalf of Continuum. Further, staff are not permitted to use his or her position at Continuum to further the political activity of any person or group.

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Senior management is responsible for developing Continuum's position on relevant legislative and regulatory issues. If you are contacted by legislators or regulators regarding Continuum's position on public issues, you should refer them to the Director for Government and Community Affairs. No staff may engage in lobbying or hire an outside lobbyist or consultant without authorization from the Corporate Compliance Officer.

### Promotion of Products

It is a violation of Continuum policy for staff to endorse commercial products using Continuum's name without the prior approval of Continuum. Payment for endorsement is not permitted. Vendors are not permitted to market their products on Continuum premises without prior approval.

### Securities and Insider Information

Staff may not discuss information about Continuum or other entities that do business with Continuum to others, which could be construed as "material non-public information." Such information is defined as any information that would affect securities prices, either positively or negatively, that is not generally available to the investing public. Material non-public information may include plans for mergers, marketing strategy, financial results or other similar business dealings.

### Research and Grant Requirements

Continuum is committed to observing the highest ethical standards relating to research and will ensure compliance with all federal, state and local laws and regulations, as well as relevant Continuum policies and procedures. All proposed research involving human subjects must be submitted to the Institutional Review Board (IRB) for review and approval. All research and grant proposals must conform to IRB standards and to the hospitals' informed consent policies. Research misconduct will not be tolerated. Research misconduct includes fabricating, changing or falsifying results of studies.

Refusal of patients to participate in a research study will not compromise his or her access to care and services. Continuum's policy is to submit only true, accurate, and complete costs related to research grants.

## Health and Workplace Safety

### Environmental Health and Safety

Continuum is committed to providing and maintaining a healthy, safe and secure environment for all patients, staff and visitors. We comply with applicable laws and regulations relating to the environment, including those relating to the handling, storage, use and disposal of pollutants, hazardous materials and infectious wastes that may be used or generated in the course of hospital operations. Continuum is dedicated to promoting the occupational health and safety of its staff. It is Continuum's policy to provide and require the use of appropriate protective equipment and measures, and insist that all work be performed in a safe and responsible manner. All staff are required to become familiar with emergency and safety plans. Material Safety Data Sheets, which contain information about hazardous chemicals, are available to all staff.

Staff must immediately report workplace injuries or unsafe conditions in accordance with hospital-specific policy and procedure. No staff will be subjected to retaliation or reprisal for being injured on the job or for reporting a workplace injury or unsafe situation.

### Substance Abuse and Impairment

Continuum is committed to an alcohol and drug-free workplace environment. All staff are expected to report for work free of the influence of alcohol and illegal substances. Working under the influence of any illegal drug or alcohol, using, possessing, or distributing illegal drugs while at work or on Continuum premises may result in immediate termination. Continuum may use drug testing as a means of enforcing this policy.

### Prescription Drugs

Continuum is legally responsible for the proper distribution and handling of regulated pharmaceutical products, including prescription drugs, controlled substances, hypodermic needles and drug samples. All staff must be vigilant in complying with all applicable laws, regulations and hospital procedures, maintaining the highest professional standards in safeguarding pharmaceuticals of all kinds, and preventing unauthorized access to them. If you become aware of the diversion of drugs from Continuum, it should be reported immediately to your supervisor or to the Corporate Compliance Officer.

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## Business and Community Conduct

### Fund-Raising

As a charitable not-for-profit corporation, Continuum relies on charitable contributions from donors to support its medical, educational and research activities. All activities related to fund-raising for Continuum must be coordinated with the Development Department. Fund-raising activities will be conducted in accordance with applicable laws and regulations.

### Marketing and Advertising

Our marketing material reflects only those services available in accordance with our licensure and accreditation. We will present only truthful and nondeceptive information in these materials. The Department of Public Affairs and Marketing is responsible for reviewing and evaluating all material that is distributed to the community to ensure that the information being provided is accurate.

### Relationships with Suppliers, Vendors and Subcontractors

Continuum manages its relationships with suppliers, vendors and subcontractors in a fair and reasonable manner, consistent with all applicable laws, good business practices, and in accordance with Continuum policies and procedures. Selection of suppliers, vendors and subcontractors will be made on the basis of objective criteria, including quality, service, price, delivery, technical excellence, adherence to schedules, and supply of goods and services. Purchasing decisions will be made on vendors' ability to meet Continuum's needs and not on personal relationships, friendship, favors, gratuities or contributions. Suppliers, vendors and subcontractors will be expected to abide by this Code of Conduct.

*One Way...the Right Way*

## The Corporate Compliance Program

### Corporate Compliance Program Structure and Your Responsibility

The Corporate Compliance Program is intended to demonstrate in the clearest possible terms the absolute commitment of Continuum to the highest standards of integrity, ethics and compliance. The Corporate Compliance Officer, appointed by the President and Chief Executive Officer of Continuum, has responsibility for the implementation of the Corporate Compliance Program. The Corporate Compliance Officer reports to an oversight committee comprised of members of the Board of Trustees, and is assisted in coordination with such departments as the Department of Legal Affairs and the Department of Human Resources.

### Obligation to Report

All staff have a responsibility and are required to report any activity by any staff colleague, physician, contractor or vendor that appears to violate applicable laws, rules, regulations or this Code of Conduct, through the appropriate chain of command. Failure to make an appropriate report may result in disciplinary action. Reporting enables the potential problem to be investigated promptly and addressed in a timely and appropriate manner.

### What to Report

Report concerns about any legal, ethical, quality, behavioral or practical issue, or any activity that you think may be a problem. Pay particular attention to issues related to federal and state health care programs (i.e. Medicare, Medicaid). Reasonable belief that a violation is possible is sufficient to initiate a report. To help you determine whether an issue should be reported, consider the following questions:

- Does the matter comply with pertinent hospital policies and procedures?
- Is the action legal? Is it ethical?
- How would the action appear if it were disclosed to the public?

### Resources for Reporting Violations

Reports of suspected or actual violations can be made in person, by e-mail, by telephone or in writing. Staff reports should first be made, if possible, to the staff member's supervisor or department manager. Reports may also be made directly to any department listed in the directory at the end of this booklet, to the Department of Human Resources, Department of Legal Affairs or directly to the Corporate Compliance Officer.

*code of conduct*  
(continued)

The Corporate Compliance Hotline is an additional means of enabling staff to report problems and concerns or obtain clarification about compliance issues anonymously or confidentially. Hotline conversations are not recorded or traced. The Hotline is not a substitute for established grievance policies or chain of command communications, however, and only should be used after other available reporting mechanisms have been considered. The toll-free Hotline # is **1-800 692-2353**. The Corporate Compliance Officer will investigate all Hotline calls.

### Reporting Concerns – Non-Retaliation

Retaliation against any staff who seeks advice, raises a concern or reports an ethical or compliance issue in good faith will not be tolerated. Staff who deliberately makes a false accusation with the purpose of harming or retaliating against another staff member will be subject to disciplinary action.

### Internal Investigations

Continuum is committed to investigating all reported concerns promptly and confidentially to the extent possible. The Corporate Compliance Officer will coordinate any findings and take prompt and appropriate corrective action(s). We expect all staff to cooperate with investigation efforts.

### Corrective Action

Where an internal investigation substantiates a reported violation, appropriate corrective measures will be taken, including, but not limited to, notifying the appropriate governmental agency, instituting appropriate disciplinary action and implementing systemic changes to prevent a similar violation from recurring in the future. Corrective action plans will be shared with all appropriate parties.

### Consequences of Noncompliance

Failure to comply with applicable laws and regulations, including federal and state health care program requirements, or with the requirements of this Code of Conduct or Continuum's policies and procedures, or to report violations or suspected violations, could pose significant risks to Continuum, our staff, as well as to the patients we serve. Examples of consequences to Continuum and/or staff for noncompliance include: exclusion from participation in federal and state health care programs, such as Medicare and Medicaid; criminal and/or civil fines and penalties.

### Disciplinary Action

Disciplinary action, up to and including termination, may be taken for:

- Violating this Code of Conduct
- Failing to report a violation of the Code of Conduct or cooperate in an investigation
- Retaliating against an individual for reporting a violation or possible violation of the Code of Conduct
- Deliberately making a false report of a violation of the Code of Conduct

Principles of fairness will apply, including, when appropriate, a review of a disciplinary decision.

### Internal Monitoring and Auditing

Continuum is committed to an ongoing assessment process. Monitoring and auditing activities are conducted under the auspices of the Corporate Compliance Officer. The audits will be designed to address Continuum's compliance with laws, regulations and policies governing, among other things, coding, reimbursement, documentation, medical necessity and other areas that may be deemed as high-risk areas.

### Additional Resources

While this Code of Conduct provides overall general guidance, there are additional guiding resources with respect to our Corporate Compliance Program available to Continuum staff. They include Continuum-wide, hospital-wide and department-specific policies and procedures, the *Employee Handbook*, as well as consultation with individuals within your chain of command, beginning with your immediate supervisor. Additional resources include periodic informational newsletters and other similar advisory memoranda.

### Acknowledgement

Upon initial employment, all staff are required to sign an Employee Acknowledgement form confirming that they have received this Code of Conduct and that they will read, understand and commit to abide to its provisions.

## FOR MORE INFORMATION

For more information on the Corporate Compliance Program, call the Corporate Compliance Officer at (212) 523-2162. Specific institutional policies and procedures can be found in Corporate Compliance, Administration and Human Resources manuals. Additionally, in-service training programs are scheduled throughout the year. Check on the Intranet or with your supervisor for dates and times. The following are departmental contacts for a range of issues relating to this Code of Conduct:

<b>Topic/Issue</b>	<b>Department Contact/Resource</b>
Anti-Kickback/Referrals	Legal Affairs
Antitrust Laws	Legal Affairs
Government Personnel	Legal Affairs
Release of Information	Legal Affairs
Tax	Legal Affairs
Billing, Coding, Reimbursement	Finance
Conflict of Interest	Corporate Compliance
Contributions	Development
Fund-raising	Development
Discrimination/Harassment	Human Resources
Hiring Practices	Human Resources
Immigration	Human Resources
Labor & Employee Relations	Human Resources
Government Relations	Government and Community Affairs
Lobbying	Government and Community Affairs
Political Participation	Government and Community Affairs
Marketing	Public Affairs and Marketing
Media Inquiries	Public Affairs and Marketing
Research & Grants	Grants Management & Research
Software	Information Systems
Hardware	Information Systems

**Continuum**  
Hospitals of New York

Beth Israel Medical Center  
Beth Israel Brooklyn  
Roosevelt Hospital  
St. Luke's Hospital  
NY Eye and Ear Infirmary