



CODE OF CONDUCT

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A. **GENERAL STANDARDS**

1. **Introduction.** Staten Island Performing Provider System, LLC (SI-PPS) has formed a performing provider system (PPS) for purposes of the Delivery System Reform Incentive Payment (DSRIP) program (the SI-PPS). This Code of Conduct (the Code) provides guidance so that you can respond properly when compliance-related issues arise. It is designed to assist you in the performance of your role within SI-PPS. The Code is not intended to cover every issue that may arise, but it can help you to make the right decisions or ask the right questions. The Code applies to all Board members, employed and non-employed staff, vendors, consultants and contractors of SI-PPS (PPS Associates) and Participating Providers. PPS-Associates and Participating Providers working on behalf of SI-PPS must also adhere to the ethical standards set out in the Code.

All PPS Associates are responsible for maintaining an ethical environment. Your actions at SI-PPS must demonstrate your commitment to honesty, integrity and accountability every day. Certain SI-PPS compliance policies are referenced in this Code. Other compliance policies can be reviewed upon request to the SI-PPS Compliance Officer and on SI-PPS' website.

You have a duty to know, understand and comply with the requirements of all SI-PPS Policies, regardless of whether they are referenced in this Code.

2. **Compliance Program.** SI-PPS' Compliance Program demonstrates our firm commitment to compliance and ethics. The Governing Body, consisting of Board members, is responsible for guiding the Compliance Program. The SI-PPS Compliance Officer reports to the Compliance Committee, the Chief Executive Officer, and the Governing Body on a periodic basis to ensure that they are fully informed on compliance issues and that transparency exists in the program at all times. The Compliance Committee provides direction, oversight and guidance to the Compliance Program.

You are required to use common sense and have a duty to comply with the standards as described in this Code and the Compliance Program while participating in the DSRIP Program.

You are expected to act in accordance with the standards reflected in the Code and shall be required to sign and date a statement that reflects your knowledge of, and commitment to, the standards of set forth in the Code.

Your performance and the status of your relationship with SI-PPS and the DSRIP program will be evaluated, in part, based on your compliance with the Code, the Compliance Program, and SI-PPS' compliance-related policies and procedures.

All Participating Providers shall at all times be in compliance with all federal, state and local laws, rules, and regulations and all rules, standards, guidelines, policies, and procedures of the New York State Department of Health (DOH) relating to the DSRIP program, as applicable to them, including but not limited to, their implementation of an effective compliance program.

The SI-PPS Compliance Officer carries out the day-to-day implementation of the Compliance Program. Please contact your compliance officer or the SI-PPS Compliance Officer if you have questions about any compliance-related issue.

Please contact your compliance officer whenever you have a question about any compliance-related issue. Your compliance officer will notify the SI-PPS Compliance Officer about any compliance issues relating to the DSRIP program.

3. Discipline. All PPS Associates who violate the Code or related policies and procedures, including failing to report suspected compliance problems, participating in non-compliant behavior, or encouraging, directing, facilitating or permitting either actively or passively non-compliant behavior, may be subject to disciplinary action, including termination of employment or contractual arrangement with SI-PPS. The discipline imposed will be determined on a case-by case basis and will depend upon the nature, severity and frequency of the violation. If SI-PPS determines that a violation has included criminal violations of law or regulation, SI-PPS will cooperate with law enforcement authorities in connection with any investigation and prosecution of the offender. The disciplinary policy will be firmly and fairly enforced with respect to all persons affiliated with SI-PPS. Possible disciplinary actions include, but are not limited to:

- verbal warning
- written warning
- suspension
- termination of employment
- exclusion from SI-PPS and/or the DSRIP program

RELATED POLICY:

SI-PPS POLICY #12: “Disciplinary Guidelines”

The disciplinary policy will be firmly and fairly enforced.

B. DUTY TO COMPLY AND REPORT

1. Obligations. It is the responsibility of all PPS Associates to comply fully with all governing laws, regulations, SI-PPS policies and procedures and the Code. Everyone must offer their complete cooperation with any investigation by SI-PPS and/or governing authorities, as well as the resolution of any compliance issues. Specifically, all PPS Associates shall furnish SI-

PPS with information concerning any compliance issues they identify affecting DSRIP funds or arising under any local laws, rules, regulations, standards, guidelines, policies and procedures relating to the DSRIP program. Such information shall be reported to the SI-PPS Compliance Officer. All Participating Providers and their compliance officers shall work cooperatively with SI-PPS and its representatives to address and remediate any compliance issues so identified and, upon request, will afford SI- PPS and its representatives reasonable access to their operations for this purpose.

Everyone who is employed by, or affiliated with, SI-PPS must work together to create a culture of compliance.

You are required to report any actual or suspected violations of the Code, the DSRIP program, SI-PPS' policies and procedures and/or federal or state law and/or any other compliance-related issues, including but not limited to, conflicts of interest, fraud, or other misconduct of any type related to SI-PPS' operations to your compliance officer, the SI-PPS Compliance Officer or the Compliance Helpline.

2. **Consequences for Not Reporting Potential Compliance Issues.** The failure to comply with the laws and/or to report suspected violations of state or federal law can have very serious consequences for SI-PPS and for any affiliated individual who fails to comply or report. You may be terminated from employment (or from your contractual arrangement with SI-PPS), or be subject to other disciplinary measures, including but not limited to exclusion from SI-PPS and/or the DSRIP program depending on the nature of the violation.

3. **Non-Intimidation and Non-Retaliation.**

We do not permit anyone to retaliate in any manner against an individual who reports any potential compliance problem or violation of law in good faith.

SI-PPS also prohibits anyone from intimidating or retaliating against any PPS Associate who discloses a compliance concern. Any possible instances of intimidation or retaliatory action must be immediately reported your compliance officer. SI-PPS will immediately investigate and take appropriate action with respect to all suspected acts of retaliation or intimidation. Any individual who is found to have retaliated against any SI-PPS Associate or intimidated any SI-PPS Associate will be subject to immediate discipline, up to and including termination of employment, termination of contractual relationship and/or exclusion from SI-PPS and/or the DSRIP program. It is an explicit violation of SI-PPS' policy to intimidate or retaliate against an individual who participates in good faith in the Compliance Program.

RELATED POLICY:

SI-PPS POLICY #13: “Non- Intimidation and Non-Retaliation”

4. Responding to Potential Compliance Issues. SI-PPS is committed to investigating all reported concerns promptly, thoroughly and confidentially, to the extent possible and appropriate. The Compliance Officer directs the investigation of compliance concerns. Where an internal investigation substantiates a reported violation, SI-PPS initiates corrective actions or other changes that need to be made in order to remedy the problem. These actions can include making prompt repayment of any government funds to which we are not entitled, notifying the appropriate government agency, instituting disciplinary action, and implementing systemic changes to prevent a reoccurrence of the problem.

SI-PPS does not permit intimidation or retaliation against anyone for good faith and honest participation in an internal or external investigation. Everyone affiliated with SI-PPS is expected to cooperate with all investigations.

5. Deficit Reduction Act of 2005 - False Claims Acts. Under the Deficit Reduction Act of 2005, any employer who receives more than \$5 million per year in Medicaid payments is required to provide information to its employees about the federal False Claims Act, state false claims laws, and the rights and protections afforded to whistleblowers and the employer’s policies and procedures for detecting and preventing fraud, waste and abuse.

We do not permit anyone to retaliate in any manner against an individual who reports any potential compliance problem or violation of law in good faith.

Liability will be imposed on individuals who knowingly submit a false record in order to obtain payment from the government or who obtain money from the federal government to which he or she is not entitled and then uses false statements or records in order to retain the money.

Private parties are permitted to bring actions to recover money on behalf of the United States and to share in a percentage of the proceeds obtained by the government. Persons who bring these actions are protected against retaliation.

Examples of false claims include:

- Billing for a higher level of services than were actually performed
- Billing for services that were not medically necessary
- Billing multiple codes instead of one billing code for a drug panel test to increase reimbursement
- Submitting a claim under one patient’s name when services were provided to another person
- Altering claims forms or medical records
- Billing for services provided by an unlicensed provider; and
- Failing to repay overpayments within 60 days after identification

6. **Distribution and Use of DSRIP Funds.** SI-PPS will not engage in, nor tolerate anyone engaging in, any improper billing practice. All distributions and uses of DSRIP funds must be made in compliance with the DSRIP program requirements and applicable laws and regulations, and will not reflect or be based on referrals between Participating Providers or on any other improper basis.

C. **COMMITMENT TO OUR PATIENTS**

1. **High Quality Patient Care.** Providing high quality care to patients is at the core of the mission of SI-PPS and the DSRIP program. Consistent with the commitment to this mission and with promoting evidence-based medicine, patient engagement and the coordination of patient care across care settings and providers, we expect our PPS Associates to:

- Honor the dignity and privacy of each of our patients and treat them with consideration, courtesy and respect;
- Provide appropriate, timely and individualized care to all patients without regard to age, gender, disability, race, color, religion, national origin, actual or perceived sexual orientation, marital status, veteran status or based on the source of payment for the patient or member's services or the patient or member's ability to pay;
- Protect and promote the rights of every patient, including, but not limited to, the patient's right to respect, privacy, a dignified existence, self-determination and the right to participate in all decisions about their own care, treatment and discharge;
- Ensure that patient care conforms to acceptable clinical and safety standards that patients are properly evaluated and treated by qualified practitioners;
- Maintain complete and thorough records of patient information to fulfill the requirements set forth in our policies, accreditation standards and applicable laws and regulations;
- Support and promote a continuous quality and performance improvement program throughout SI-PPS and the Participating Providers; and
- Continuously strive toward a culture of patient safety and provide quality medical care to their patients.

While SI-PPS is committed to lowering the costs of health care services while enhancing the quality of care, it may not reduce or limit any medically necessary services to any patients.

Our commitment to quality of care and patient safety is an obligation of every person affiliated with SI-PPS.

2. **Safeguarding Patient Information.** We demonstrate our respect for our patients by protecting the confidentiality and security of all personal information they share with us for the purpose of receiving quality medical care. This information, known as "Protected Health Information" or "PHI," can include patients' names, addresses, phone numbers, Social Security

numbers, medical diagnoses, family illnesses and other personal information. Federal and state laws, as well as quality of care standards, require us to keep this information confidential.

SI-PPS expects everyone to protect medical records and treat PHI with the highest level of confidentiality. We must never use, disclose or discuss patient information except as necessary for patient care, billing or operations, or as required by law. The use and disclosure of, and requests for PHI will be limited to the minimum necessary to accomplish the intended purpose.

Subject to emergency exceptions, patient privacy will be protected and PHI will be released only to persons authorized by law or by the patient's written authorization. It is inappropriate for you or your affiliates to:

- Discuss patients' cases in a public area where conversation may be overheard by others; and
- Permit access to a patient's record by individuals who are not involved in legitimate activities relating to the patient.

If you are unsure of the rules governing the release of PHI, ask your supervisor, your compliance officer or your HIPAA privacy officer and be sure you understand such rules before you release any information.

Anyone affiliated with SI-PPS who engages in unauthorized access or disclosure of patient information will be subject to disciplinary action up to and including termination of employment, termination of contractual relationship and/or exclusion from SI-PPS and/or the DSRIP Program. Individuals also may be subject to civil or criminal penalties.

If you become aware of any unauthorized disclosure of patient information, you must report immediately to your supervisor, HIPAA privacy officer, or compliance officer. SI-PPS prohibits intimidation or retaliation against any person who makes a good faith report of a privacy violation.

3. Records and Truthful Reporting. You are obligated to keep accurate, timely and complete records, reports, communications and other medical and business information and documentation relating to any activity, claims submission, arrangements or transactions relating to the operations of SI-PPS or the DSRIP program.

You are prohibited from presenting documentation that is incomplete, contradictory or inaccurate, that documentation will not be used to report data and metrics under the DSRIP Program. In providing reports on data and metrics, all data must be correctly entered to ensure accuracy and truthfulness. SI-PPS will not tolerate anyone engaging in any improper reporting practice.

Under the DSRIP Program, SI-PPS and the Participating Providers must submit quality and other relevant data to the New York State Department of Health (DOH). Those responsible for submitting this data will be expected to strictly follow all regulations and guidance governing these procedures. All reports must be accurate and truthful, and we should never misrepresent data submitted to government entities in connection with the DSRIP program.

Purposeful misstatements to government agencies will result in sanctions, up to and including termination and/or exclusion. SI-PPS will not tolerate or accept any falsified documents by anyone.

If you have any questions as to the truth, accuracy or completeness of any documentation for reporting purposes, you must report your concern to your compliance officer. Your compliance officer will notify the SI-PPS Compliance Officer about any compliance issues relating to the DSRIP program.

4. **Marketing and Advertising.** We market SI-PPS' services in a fair, truthful and ethical manner and adhere to the applicable federal and state regulatory standards as well as patient engagement requirements as necessary for DSRIP project implementation. Our marketing materials are designed to reflect only the services available. SI-PPS uses marketing and advertising to educate the public, report to our community, increase awareness of our services and to recruit staff.

D. OUR COMMITMENT TO GOVERNMENT REGULATORS

1. **Coding and Billing.** One of the most important aspects of SI-PPS' commitment to compliance is our dedication to the preparation and submission of accurate claims for payment to federal and state health care programs.

We have a zero tolerance policy with respect to billing for improper claims.

All claims for payment for any service provided by Participating Providers must be supported by complete documentation in the medical record, proper coding based on that record and bills that accurately reflect the coding. Participating Providers shall bill only for those goods and services actually provided and medically necessary.

Accurate and timely documentation also depends on the diligence and attention of Participating Providers who treat patients in our network. We expect those Participating Providers to provide complete and accurate information in a timely manner.

Participating Providers should always bill accurately for services rendered in accordance with the law and with its agreements with third party payers. When you receive a question from a patient or a third-party payer about an invoice or charge, promptly address the question, if authorized to do so, or refer the matter to the person who is authorized to address it.

Under federal law, all identified overpayments must be refunded to the government payer within 60 days of identification. Failure to do so can result in fines and other penalties.

2. Prevention of Fraud and Abuse. You shall not take any action that is believed to be in violation of any statute, rule, or regulation in connection with SI-PPS' operations or the DSRIP Program. You must act in the most ethical and legal manner and refrain from any conduct that may violate any laws related to fraud, waste and abuse. SI-PPS strictly prohibits PPS Associates from offering, paying, asking for, or accepting money or any other benefit in exchange for patient referrals, purchases, leases or orders. Such actions are a violation of federal and state civil and criminal laws.

Specifically, you must comply with all laws prohibiting

- the transfer of anything of value in order to induce the referral of patients or any government program business (i.e., Medicare, Medicaid and other federal or state health care programs); and
- the making of false representations or the submission of false, fraudulent or misleading claims to any government entity, third party payor, or SI-PPS.

This includes, but is not limited to:

- data or claims related to services not rendered;
- data or claims for services not documented;
- data or claims which characterize the service differently than the service actually rendered; and
- data or claims which do not otherwise comply with the DSRIP program, SI-PPS' operations, or other applicable programs or contractual requirements.

Violation of any of these standards of conduct may result in discipline and corrective action being imposed, up to and including termination or exclusion from SI-PPS and/or the DSRIP Program. If you are unsure whether an action is unlawful or non-compliant, then you should check with a supervisor or your Compliance Officer before proceeding with the action.

Participating Providers are permitted to make referrals to one another. Such referrals, however, will always be made based on the documented medical needs of the patient, and not on the basis of enhancing reimbursement. Federal and state laws make it unlawful to pay any individual on the basis of the volume or value of referrals of services or test costs reimbursed by a state or federally funded program (such as Medicare or Medicaid).

3. Antitrust. SI-PPS engages in activities that may be subject to state and federal antitrust laws. Generally, these laws prohibit competitors from entering into agreements to fix prices or to reduce price competition. We should not provide information about SI-PPS' business to a competitor. In addition, we are to refrain from engaging in unfair practices that might restrict competition.

4. Record Retention. Accurate and complete records are crucial for the continuity of patient care, appropriate and proper billing, and for compliance with regulatory, tax, and financial

reporting requirements. Everyone who enters information into a medical record, business record, regulatory or financial report has a responsibility to do so in a truthful, accurate, legible and timely manner. Records must be retained by SI-PPS, as required by federal and state laws.

5. **Response to Governmental Inquiries.** SI-PPS cooperates fully with government inquiries and investigations. We do not prevent persons affiliated with us from speaking with government officials. However, you should contact your supervisor and legal counsel before doing so. When we receive a request for documents or a subpoena, we refer it to legal counsel, who will coordinate our response and ensure that it is appropriate and complete. We never destroy, alter or change SI-PPS records requested by or related to a government investigation.

When we receive notice of an investigation or lawsuit, a request for document, or a subpoena, we preserve all related records and cooperate with legal counsel in making them ready for evaluation and/or production.

E. **OUR COMMITMENT TO OUR BUSINESS PARTNERS**

Our business partners, suppliers, contractors, Participating Providers, and others with whom we do business are vital to our success. We always treat them with respect, professionalism and fairness.

Our patients and the community we serve frequently associate our business partners' performance with SI-PPS.

We examine the background of our business partners before allying with them to ensure they demonstrate high standards of ethical business conduct.

SUPPLIER, VENDOR, SUBCONTRACTOR, ATTORNEY AND CONSULTANT RELATIONSHIPS.

SI-PPS selects our suppliers, vendors, subcontractors, attorneys and consultants based on the quality, price, delivery and supply of their goods and services. We obtain these services only when there is a legitimate need for them.

We do not accept any form of compensation that is designed to influence the selection process.

1. **Referral of Patients.** PPS Associates shall not pay or offer to pay anyone: colleagues, physicians or other persons or entities for the referral of patients.

Similarly, PPS Associates shall not accept payments for referrals that they make. When patients are referred to other providers, PPS Associates shall ensure that the referrals are based on the patient's documented need for the referred service and the ability of the referred provider to meet that need.

PPS Associates are permitted to make referrals to one another. Such referrals, however, will always be made based on the documented medical needs of the patient, and not on the basis of enhancing reimbursement.

2. **Gifts and Interactions with Industry.** SI-PPS does not solicit, accept, make or offer to make any payment, or accept or provide any other thing of value to another person or company with the understanding or intention that such payment is to be used for an unlawful or improper purpose. SI-PPS does not offer or give gifts of any kind to government officials. Such gifts can be misinterpreted as an attempt to improperly influence the official and are absolutely prohibited.

It is recognized that employees may be sent gifts with a modest value (under \$50) by business or other professional contacts, and each employee may determine whether or not such gifts should be accepted. However, the receipt of gifts, gratuities, or sponsoring of entertainment from those seeking to influence business decisions of SI-PPS should be politely declined. You should recognize that even if you believe that the acceptance of such a gift, gratuity, or participation in entertainment will not influence your decision, the person making the gesture will have the perception that his or her action has influenced your judgment. Courtesies such as meals, beverages, and/or other entertainment should be scrutinized. When meals or refreshments are provided as part of a business meeting, and where it is normal **business courtesy to accept the meal or refreshment, if permissible.**

PPS Associates shall not make or offer to make any payment or provide any other thing of value to another person with the understanding or intention that such payment is to be used for an unlawful or improper purpose.

Any questions regarding whether or not an item or situation falls within the scope of this section must be raised immediately with your compliance officer, who, in conjunction with legal counsel, will assess the propriety of the particular situation. Any concerns regarding violations of this section should be brought to the attention of a supervisor or your compliance officer.

3. **Review of all Contracts and New Arrangements.** All contracts, leases, and other financial relationships concerning SI-PPS and its operations will be reviewed to ensure compliance with federal and state laws, rules and regulations.

4. **Purchasing and Competitive Bidding Policy**. All purchasing decisions must be made with the purpose of obtaining the highest quality product or service for SI-PPS at the most reasonable price. No purchasing decision may be made based on any consideration that any person affiliated with SI-PPS or any family member or friend of such person will benefit by the transaction. The sole criteria behind all purchasing decisions must be only that they are in the best interest of SI-PPS.

F. **OUR COMMITMENT TO OUR COLLEAGUES**

1. **Conflicts of Interest**

We are obligated to avoid conduct that could create a conflict of interest.

- We do not use our positions or confidential information obtained in the course of our work for personal gain.
- We make sure that any outside jobs or positions do not conflict with our work at SI-PPS.
- We disclose any potential conflict of interest.

Examples of potential conflicts of interest include:

- Having a material financial interest (or a family member having a financial interest) in an entity that is either a competitor of, or a vendor (or potential vendor) to SI-PPS;
- Purchasing or leasing real estate that may increase in value based on knowledge that SI-PPS may have an interest in the property; and
- Hiring subordinates or SI-PPS vendors to perform personal work for yourself or your family without appropriate administrative approval.

Certain members of the SI-PPS community must file annual Conflict of Interest Disclosure Forms. You will be notified if you are required to do so.

RELATED POLICY:

SI-PPS POLICY #4: “Conflicts of Interest and Recusal”

2. **Confidential Business Information**. Confidential information about the business of SI-PPS or any of its PPS Associates must also be held in confidence and you may not use such confidential information as a basis for personal gain. Such confidential information includes, but is not limited to: patient lists, contractors, agents, vendors, development plans, financial data, proprietary research, marketing strategy and information about pending or contemplated business deals.

You shall not release any information relating to transactions pending with SI-PPS to any person unless such information has been published or otherwise made generally available to the public. You must also refrain from disclosing information about any consideration or decision, or any other information that might be prejudicial to the interest of SI-PPS.

We always keep SI-PPS business information confidential and do not use it as a basis for personal gain.

3. **Non-Discrimination and Equal Employment Opportunity.** SI-PPS promotes diversity in our workforce at all levels of our organization. We are committed to providing a work environment where everyone is treated with respect, dignity and fairness. We are an equal opportunity employer and do not discriminate on the basis of race, color, creed, religion, gender, national origin, actual or perceived sexual orientation, veteran status, marital status, age or disability.

We celebrate cultural and other differences because they contribute to the strength of SI-PPS.

We comply with all laws, regulations and policies relating to equal employment opportunities in hiring, reductions in force, transfers, terminations, evaluations, recruiting, compensation, promotions and discipline. We make reasonable accommodations to the known limitations of qualified individuals with disabilities.

4. **Harassment.** SI-PPS strives to provide a workplace that is free from harassment and disruptive behavior. Degrading jokes, slurs, intimidation or other forms of harassment are not acceptable at SI-PPS.

We do not tolerate harassment of any kind, especially harassment by anyone based on diverse characteristics or the cultural backgrounds of those who work with us.

Sexual harassment can be particularly harmful to the work environment and is prohibited. This prohibition includes unwelcome sexual advances or requests for sexual favors in conjunction with your employment. Verbal and physical harassment or abuse and any other behavior that creates an intimidating, hostile or offensive work environment have no place at SI-PPS. If you engage in this conduct, you will be subject to discipline.

If you observe or experience any form of harassment or violence, you must report it to your supervisor, your human resources Department, a member of your management, your compliance officer or the SI-PPS Compliance Officer or the Helpline at **855-233-3138** or by visiting www.statenislandperformingprovidersystem..ethicspoint.com online.

5. Leadership and Professionalism. SI-PPS is committed to the highest standards of excellence in the practice of medicine and strongly believes that collaboration, communication and collegiality are essential for the provision of safe and competent patient care.

All individuals associated with SI-PPS must treat others with respect, courtesy and dignity and must conduct themselves in an appropriate, professional and cooperative manner.

Appropriate professional and cooperative behavior means any reasonable conduct intended to advocate for patients, to recommend improvement in patient care and to participate in the operations, leadership or activities of the staff, including the Medical Staff. Behaviors that undermine a culture of safety include, but are not limited to:

- the use of profanity in the workplace;
- the refusal to speak or respond to others;
- inappropriate physical contact;
- sexual, religious, racial or other unlawful harassment;
- throwing objects; and
- destruction of SI-PPS property.

Breaches of the Code by any PPS Associate will be addressed in accordance with our policies.

Anyone who observes or is subjected to inappropriate conduct by any PPS Associate can notify their supervisor, human resources, your compliance officer or if related to the DSRIP program/SI-PPS to the SI-PPS Compliance Officer, the Helpline at **855-233-3138** or by visiting www.statenislandperformingprovidersystem..ethicspoint.com online. A person who makes such a report in good faith cannot be retaliated against for making the report.

6. Political Contributions. We do not use SI-PPS revenues directly or indirectly for political activities or in support of political campaigns. We do not reimburse personal expenses related to any political activities including money spent in support of any political candidate. You may not solicit political contributions from your colleagues in SI-PPS. We do not take positions on political elections or campaigns.

7. **Use of SI-PPS Resources.** Each of us is responsible for preserving SI-PPS' assets including time, material, supplies, equipment and information. All communication systems including, but not limited to, telephones, computers, electronic mail, Intranet, Internet access and voicemail are the property of SI-PPS and are to be used primarily for business purposes in accordance with our policies.

You have no right to privacy with respect to anything you create, store, send or receive on SI-PPS computer and telephonic systems. SI-PPS reserves the right to monitor and/or access all communications, usage and contact.

8. **Intellectual Property.** SI-PPS is committed to adhering to all applicable intellectual property laws. We will respect the intellectual property and copyright laws regarding books, trade journals, and other applicable resources. All software used in connection with business must be properly licensed and used in accordance with that license.

9. **Screening of Excluded Individuals and Entities.** SI-PPS will not knowingly employ, appoint, elect, contract or bill for any individual or entity that has been listed as debarred, excluded or is otherwise ineligible for participation in federal or state health care programs. We routinely search the lists of excluded and ineligible persons, including the U.S. Department of Health and Human Services, Office of Inspector General, the General Services Administration and the New York State Department of Health's exclusion lists.

You are required to report to us if you become excluded, debarred or ineligible to participate in federal or state health care programs or have been convicted of a criminal offense related to the provision of health care items or services.

RELATED POLICY

SI-PPS POLICY #6: "Employee Screening"

10. **Responsible Use of Social Media.** Protected health information, employee health information and confidential business information (such as SI-PPS business plans) must not be posted on Facebook, Twitter or any other social media site, unless specific advance written permission is obtained.

Think before you act and protect patient privacy.

G. COMPLIANCE RESOURCES

1. **How to Report a Violation of the Code.** You should report any violation of the Code to your compliance officer and your compliance officer will report any DSRIP related compliance issues to the SI-PPS Compliance Officer. You may also call SI-PPS' **Compliance Helpline at 855-233-3138 with any DSRIP related compliance issues.** While Helpline calls may be made anonymously, supplying your name and contact information may assist in the investigation.

SI-PPS will attempt to communicate material changes to the Code prior to the implementation of such changes. However, SI-PPS reserves the right to modify, amend or alter the Code and its policies and procedures without prior notice to any person.

2. **The Compliance Helpline.** The Compliance Helpline is available 24 hours a day, seven days a week. Compliance Helpline callers may remain anonymous and those who choose to give their names will have their identities protected to the extent allowed by law. The Compliance Helpline has multi-lingual operators who can take reports from individuals whose first language is not English. The Compliance Helpline can be reached by calling **855-233-3138** or by visiting [www. statenislandperformingprovidersystem.ethicspoint.com](http://www.statenislandperformingprovidersystem.ethicspoint.com).



ACKNOWLEDGEMENT

SI-PPS requires you to sign an acknowledgement confirming that you have received and read the Code of Conduct, understand its contents and agree to abide by the terms as well as the spirit and intent of the Code.

Questions regarding the Code should be directed to your supervisor or your manager or your Compliance Officer.

Employee signature

Employee name (print)

Employer

Date

