

*One Way...the Right Way*

# **Mount Sinai Health System Code of Conduct**

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A Guide to Our  
Corporate Compliance  
Program



**Mount  
Sinai**

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

## A MESSAGE TO OUR STAFF

Dear Colleague:

The Mount Sinai Health System comprised of Mount Sinai Beth Israel, Mount Sinai Beth Israel Brooklyn, The Mount Sinai Hospital, Mount Sinai Queens, Mount Sinai Roosevelt, Mount Sinai St. Luke's, New York Eye and Ear Infirmary of Mount Sinai and the Icahn School of Medicine at Mount Sinai (hereinafter referred to as "Mount Sinai") has a long tradition of ethical and responsible conduct that has earned them the respect and trust of patients, families, professional colleagues and the community at large.

The Board of Trustees of the Mount Sinai Health System has adopted a Corporate Compliance Program to ensure that this tradition is maintained, to promote integrity among our staff and to enhance the Mount Sinai Health System's ability to achieve its multi-faceted 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 our 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, 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 the Mount Sinai Health System. We expect that all staff 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 the Mount Sinai Health System 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,

**Peter W. May, MBA**

*Chairman, Board of Trustees  
Mount Sinai Health System*

**Kenneth L. Davis, MD**

*Chief Executive Officer and President  
Mount Sinai Health System*

**Dennis S. Charney, MD**

*Anne and Joel Ehrenkranz Dean,  
Icahn School of Medicine at Mount Sinai  
President for Academic Affairs  
Mount Sinai Health System*

**Frank Cino**

*Chief Compliance Officer  
Mount Sinai Health System*

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### Purpose of the Code of Conduct

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The Mount Sinai Health System, comprised of Mount Sinai Beth Israel, Mount Sinai Beth Israel Brooklyn, The Mount Sinai Hospital, Mount Sinai Queens, New York Eye and Ear Infirmary at Mount Sinai, Mount Sinai Roosevelt, Mount Sinai St. Luke's, and the Icahn School of Medicine at Mount Sinai (hereinafter referred to as "Mount Sinai") 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, consultants, etc.) and volunteers (hereinafter referred to as "staff", as applicable) 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 arise in your daily activities; however, it does provide guidelines, direction and resources you can use to respond to matters and circumstances in the course of your Mount Sinai 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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Mount Sinai staff are expected to treat compliance with ethical standards as a critical element of their responsibilities.

All Mount Sinai 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 Mount Sinai-related information
- Adhere to the highest ethical standards when acting on behalf of Mount Sinai and/or a member institution
- Respect the cultural values and religious beliefs of patients and family members, co-workers, staff members and visitors

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## CORPORATE COMPLIANCE PROGRAM OVERVIEW

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- 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

### Compliance Questions

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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 Mount Sinai 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 Mount Sinai, 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

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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 Helpline, 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 without fear of retaliation or intimidation. 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.



### Organizational Ethics and Quality of Care

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#### Patient Care and Patient Rights

We recognize our ethical and moral obligation to the patients and communities we serve. We treat all patients with respect and dignity and provide a single standard level of care that is both necessary and appropriate.

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 Mount Sinai Health System, includes the rights of patients to make decisions about their medical care.

We respect the rights of patients to be involved in all aspects of their care and obtain informed consent for treatment. Thorough and complete records of patient information will be maintained.

#### Emergency Care

Mount Sinai 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 Mount Sinai 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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### **Confidentiality/Mount Sinai 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 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 Mount Sinai 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 in accordance with Mount Sinai policy
- Report violations of confidentiality breaches to the designated HIPAA Privacy Officer, HIPAA Security 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 mental health and drug and alcohol treatment programs, as well as disclosure of information regarding a patient's HIV status

Any staff who engages in unauthorized or unlawful disclosure of information in violation of the privacy rights of our patients is subject to disciplinary action, up to and including termination. Individuals also may be subject to civil or criminal penalties.

### **Confidentiality of Business Data**

In addition to patient information, other information created by us is confidential. No one shall, without the written consent of Mount Sinai, 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. Staff are prohibited from accessing or otherwise using staff records or information unless authorized to do for legitimate business purposes.

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.

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

### **Conducting Mount Sinai 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 Mount Sinai/Patient Assets**

Managers are responsible for establishing appropriate internal controls within their areas(s) of purview to safeguard Mount Sinai assets, ensure the accuracy of financial records and reports, and maintain accurate reporting of all transactions. Staff are expected to observe Mount Sinai's rules and practices for safeguarding not only Mount Sinai's assets but also the property entrusted to us by our patients.

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

All Mount Sinai 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.

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### **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 Mount Sinai 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 subject to approval under Mount Sinai's policies and procedures.

### **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. Mount Sinai does not offer or receive inducements or create situations in which Mount Sinai appears to be offering or receiving an improper inducement.

### **Referrals**

Mount Sinai 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 Mount Sinai is permitted to solicit or receive anything of value, directly or indirectly, in exchange for the referral of patients.

Mount Sinai 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

Mount Sinai 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 only 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. Mount Sinai operates oversight systems to verify that claims are submitted only for services actually provided and that services are billed as provided. Appropriate training is provided to staff involved in the billing, coding and claim submission process.

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 that 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.

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

### Cost Reports

Mount Sinai is committed to complying with federal and state laws requiring the submission of complete and accurate Cost Reports related to hospitals' 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.

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## **Legal and Regulatory Compliance**

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### **Deficit Reduction Act of 2005**

Mount Sinai 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 Mount Sinai 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 Mount Sinai's policies and procedures for detecting fraud, abuse and waste.

### **Licensure/Accreditation**

The hospitals comprising Mount Sinai 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. Staff are expected to be familiar with the regulations governing their area and to stay abreast of new developments.

### **Tax Status**

Mount Sinai is exempt from taxation by the federal, state and local governments because of its charitable mission. We provide community benefits that include health care services, medical training, education, research and community outreach activities. Mount Sinai's sales tax exemption can be used only for legitimate hospital activities. Personal items may not be purchased through Mount Sinai even if Mount Sinai is reimbursed by the staff member.

### **Government Inquiries and Investigations**

It is the policy of Mount Sinai 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 Mount Sinai shall immediately notify their supervisor who in turn must notify the Legal Department and the Department of Audit and Compliance Services. It is Mount Sinai's policy to ensure that government agencies are provided promptly with all necessary and appropriate information.

### **Personal Use of Mount Sinai Resources**

Mount Sinai'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 Mount Sinai. Any use of Mount Sinai resources for personal financial gain unrelated to Mount Sinai is prohibited.

### **Copyright**

Mount Sinai 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 Mount Sinai and are to be primarily used for business purposes. Limited responsible personal use of communications systems is permitted; however, Mount Sinai 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 or stored on mobile or portable devices until such time that its confidentiality can be ensured (i.e. encryption).

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### Workplace Conduct and Practices

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#### General

As an organization, Mount Sinai recognizes that our staff, physicians and volunteers who serve our institutions, are our greatest assets. Mount Sinai 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 Mount Sinai'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. Mount Sinai 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 Mount Sinai's Human Resources policies are responsibilities of each staff member.

#### Equal Employment Opportunity and Diversity

Mount Sinai is committed to providing an equal opportunity work environment. We will comply with all laws, regulations and policies related to non-discrimination and fair employment practices in all of our personnel actions. 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**

Mount Sinai 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 Mount Sinai staff have the right to work in an environment free of harassment. Mount Sinai will not tolerate harassment by anyone based on the diverse characteristics or cultural backgrounds of those who work at Mount Sinai. 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.

Mount Sinai 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 Mount Sinai.

### **Immigration**

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

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### Staff Loyalty and Conflicts of Interest

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#### Conflict of Interest

In the course of conducting Mount Sinai business, we are expected to put Mount Sinai'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, Mount Sinai 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 Office. For additional guidance as to Mount Sinai'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 Mount Sinai. Any activities, such as a second job or personal business must not conflict with obligations to Mount Sinai. Staff with secondary employment that may be perceived as a conflict of interest with their Mount Sinai 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 Mount Sinai's policy that all gifts from vendors are strictly prohibited. Solicitation of personal gifts or entertainment is never permissible.

You may, however, receive from a grateful patient or patient's family certain perishable or consumable gifts given to a group or a department (i.e. flowers, candy), which are considered items of nominal value. Under no circumstances may you solicit gifts from patients or their families.

There may be times when employees 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 Mount Sinai for associated expenses in accordance with existing policy.

Questions related to gifts and entertainment and business courtesies should be referred to the Corporate Compliance Office.

### **Political Activities and Contributions**

As a tax-exempt entity, Mount Sinai is prohibited from participating in political activity by law. Mount Sinai 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. Mount Sinai 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 Mount Sinai. Further, employees are not permitted to use his or her position at Mount Sinai to further the political activity of any person or group.

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

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### **Promotion of Products**

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

### **Securities and Insider Information**

Staff may not discuss information about Mount Sinai or other entities, which do business with Mount Sinai 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**

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Mount Sinai 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 Mount Sinai 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 Mount Sinai's 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. Mount Sinai's policy is to submit only true, accurate, and complete costs related to research grants.

## Health and Workplace Safety

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### Environmental Health and Safety

Mount Sinai 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 Mount Sinai operations. Mount Sinai is dedicated to promoting the occupational health and safety of its staff. It is Mount Sinai'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 Mount Sinai and/or 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

Mount Sinai 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 Mount Sinai premises may result in immediate termination. Mount Sinai may use drug testing as a means of enforcing this policy.

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### **Business and Community Conduct**

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#### **Fund-Raising**

As a charitable not-for-profit corporation, Mount Sinai relies on charitable contributions from donors to support its medical, educational and research activities. All activities related to fund-raising for Mount Sinai 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 fair, truthful and non-deceptive information in these materials. The Department of Marketing and Communications 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**

Mount Sinai 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 Mount Sinai 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 Mount Sinai'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.

#### **Responsible Use of Social Media**

Protected Health Information, employee information and confidential business-related information and data cannot be posted to any social media site (i.e. Facebook, Twitter, etc.) unless authorized by the Press Office.

## The Corporate Compliance Program

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### Corporate Compliance Program Structure and Your Responsibility

The Corporate Compliance Program is intended to demonstrate in the clearest possible terms the absolute commitment of Mount Sinai to the highest standards of integrity, ethics and compliance. The Chief Compliance Officer has responsibility for the implementation of the Corporate Compliance Program. The Chief Compliance Officer provides periodic reports to the Compliance Oversight Committee and the Audit and Compliance Committee of the Board of Trustees.

### 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 Mount Sinai 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 Office. *(continued)*

The Corporate Compliance Helpline is an additional means of enabling staff to report problems and concerns or obtain clarification about compliance issues anonymously or confidentially. Helpline conversations are not recorded or traced. The Helpline 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 Helpline # is **800-853-9212**. The Corporate Compliance Office will investigate all Helpline calls.

### **Reporting Concerns – Non-Retaliation/Non-Intimidation**

Retaliation and/or intimidation 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 make a false accusation with the purpose of harming or retaliating against another staff member will be subject to disciplinary action.

### **Internal Investigations**

Mount Sinai is committed to investigating all reported concerns promptly and confidentially to the extent possible. The Corporate Compliance Office 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 Non-Compliance**

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 Mount Sinai's policies and procedures, or to report violations or suspected violations, could pose significant risks to Mount Sinai, our staff, as well as to the patients we serve. Examples of consequences to Mount Sinai and/or staff for non-compliance 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, will be determined and depend upon the nature, severity and frequency of the violation. The discipline may be imposed 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**

Mount Sinai is committed to an ongoing assessment process. Monitoring and audit activities are conducted under the auspices of the Corporate Compliance Office. The audits will be designed to address Mount Sinai'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.

### **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 Mount Sinai staff. They include Mount Sinai-wide, hospital-wide and department-wide 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.

## FOR MORE INFORMATION

For more information on the Corporate Compliance Program, call the Corporate Compliance Office at **212-241-3211**. 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
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 Affairs
Lobbying	Government Affairs
Political Participation	Government Affairs
Marketing	Marketing
Media Inquiries	Press Office
Research and Grants	Research
Computer/Software/Hardware	Information Technology

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