

HEALTH INSURANCE PORTABILITY & ACCOUNTABILITY ACT (HIPAA)

HIPAA is the federal law created to reduce healthcare administrative costs and to promote the use of electronic medical records (EMR). It includes Privacy and Security Rules to protect the confidentiality of patients' medical records.

All Associates are expected to know and comply with our HIPAA policies and procedures. Montefiore's HIPAA policies are posted on the intranet, under Policies, Associate Policies and Procedures, Administrative Policy and Procedure Manual. Simply type HIPAA in the search bar to locate them. Also, make sure that you have signed and reviewed a copy of the Montefiore Confidentiality statement. Violations of patients' privacy can result in significant damages to Montefiore's reputation and can even result in financial penalties.

Common Sense

Most of HIPAA is common sense. There are, however, several basic rules to guide our compliance with HIPAA's privacy and security requirements.

Need to Know and Minimum Necessary Rules

Disclose the minimum amount of information necessary for the situation and only access patient information if you have a job-related reason to do so.

Before you look at patient information, ask yourself, "Do I need to know this to do my job?" If the answer is no, don't look. If the answer is yes, look at only the information you need, and don't share it with anyone who is not involved in the patient's treatment.

Examples of Violations of HIPAA Privacy and Security Regulations

Examples of violations of HIPAA regulations and related policies include, but are not limited to:

- Unauthorized access to patient information
- Sharing of passwords for database and/or computers containing patient health information
- Discussing confidential patient information in public areas like elevators, hallways, and cafeterias where individuals can hear confidential information
- Failing to encrypt patient information sent outside of the Montefiore's internal network

"I Couldn't Help Overhearing"

Not all information is locked up in a file room or protected by passwords in a computer. Remember that this information includes the fact that the patient is at our hospital in the first place. If you see an acquaintance while you are at work, it may be natural to say to a third party: "Guess who I saw today." But, you must keep it to yourself. The person you saw may not want anyone to know that he or she is receiving medical evaluations or treatment.

There is also no doubt that you will overhear private health information as you do your day-to-day work. You are obligated to keep any information you overhear to yourself.

"Even the Trash is Private"

Any piece of paper containing patient information must not be discarded in regular trash cans. Montefiore has provided blue shredding bins at various locations for the disposal of documents that contain patient information. The bins are emptied and the documents are shredded under supervision of a Montefiore representative. These bins may also be used for recycling paper, unless a separate patient information recycling receptacle has been provided at your location.

Who are the Information Privacy and Security Officers at Montefiore?

As required by the HIPAA regulations, Montefiore has an Information Privacy Officer and an Information Security Officer. The responsibilities of these Officers are to ensure that privacy and the information security policies are followed at the Montefiore and that incidents or allegations of breaches of confidentiality are handled appropriately.

The Information Privacy Officer is in Montefiore's Compliance Department: 718-920-7059

The Information Security Officer is in Emerging Health Information Technology: 914-457-6168

Your Responsibility is to Help Ensure Compliance with HIPAA

If you spot someone breaking the rules, report it to your supervisor or directly to the Information Security or Privacy Officer. You should feel comfortable going to any of them with violations you observe or with questions about how to follow the Privacy and Security Rules.

CORPORATE COMPLIANCE PROGRAM

"BE PREPARED FOR THE ELEMENTS"

The Corporate Compliance Program is a permanent undertaking initiated by the Montefiore Board of Trustees with the participation of a cross-section of disciplines at the institution. Its function is to enhance the atmosphere of fairness, sound judgment, and mutual respect, as well as assuring that all Montefiore operations are conducted within the parameters of federal and state laws and regulations and Montefiore's policies and procedures.

The Compliance Program goal is to make sure that all individuals who work for or, on behalf of, Montefiore understand and comply with all applicable laws and regulations. Integrity, honesty and ethical behavior are critically important assets, because they sustain the trust of our patients, their families, third-party payers, government regulators, suppliers and the community at large.

Montefiore does not support and will not tolerate unethical or unlawful behavior. By engaging in such behavior, you may damage the institution's reputation and jeopardize its ability to carry out the mission. Montefiore expects that all Associates will conduct themselves in accordance with the highest ethical standards and avoid even the appearance of wrongful conduct. In this way, Montefiore can continue to maintain the trust on which the fulfillment of its vision and mission depends.

Montefiore's comprehensive compliance program foundation includes the following seven elements:

1. The development and distribution of written standards of conduct, as well as written policies and procedures that promote Montefiore's commitment to compliance.
2. The designation of a chief compliance officer and other appropriate bodies, e.g., an Executive Compliance Committee, charged with the responsibility of operating and monitoring the compliance program, and who report directly to the Chief Executive Officer and the governing body.
3. The development and implementation of regular, effective education and training programs for all affected Associates.
4. The maintenance of a process, such as a hotline, to receive complaints, and the adoption of procedures to protect the anonymity of complainants and to protect complainants from retaliation.
5. The development of a system to respond to allegations of improper/illegal activities and the enforcement of appropriate disciplinary action against Associates who have violated

internal compliance policies, applicable statutes, regulations or Federal health care program requirements.

6. The use of audits and/or other evaluation techniques to monitor compliance and assist in the reduction of identified problem areas.
7. The investigation and remediation of identified systemic problems and the development of policies addressing the non-employment or retention of sanctioned individuals.

The Office of Inspector General (OIG,) encourages the use of hotlines (including anonymous hotlines) to maintain open lines of communication. *Communication is the backbone of an effective compliance program.* Montefiore has established a 24-Hour Compliance Hotline: 1-800-MONTEFIORE-8595 (800-662-8595) to address concerns relative to noncompliance that cannot be addressed through other channels. However, we strongly suggest that all Associates follow their departmental Chain of Command, i.e. Immediate Supervisor, Manager, Director, Administrator or Human Resources if applicable, before contacting the hotline, giving them the opportunity to address and attempt to rectify the issue.

All Associates have a duty to report any suspected violations of the Code of Conduct. Anyone who reports conduct that he or she sincerely believes is improper will be protected from retaliation.

Montefiore has adopted a written policy that provides information about the False Claims Act for detecting and preventing waste, fraud and abuse. The False Claims Act is a federal law, which allows people who are not affiliated with the government to file actions against federal contractors claiming fraud against the government. The act of filing such actions is informally called "**whistle blowing.**" Persons filing under the Act stand to receive a portion of any recovered damages. The Act provides a legal tool to counteract fraudulent billings turned in to the Federal Government. Claims under the law have been filed by persons with insider knowledge of false claims which have typically involved health care, military, or other government spending programs. Several states, including New York, have also created False Claims Act statutes to protect their state against fraud by including qui tam provisions, enabling them to recover money at the state level. Many of these laws mirror the federal False Claims Act and simply apply it to the state's jurisdiction.

Montefiore strongly encourages Associates to report compliance concerns to the Compliance Department and to allow a reasonable time for investigation of the concerns before contacting a government agency.

Montefiore has a Code of Conduct that affirms its commitment to the highest standards of ethics, professional service and quality healthcare as well as its steadfast compliance with all legal and regulatory requirements. In part, the Code states:

- Billing, coding and reimbursement procedures are performed in accordance with contracts with third-party payers and all legal requirements. Services are billed using only billing codes that accurately describe the services that were provided and accurately reflect documentation in the medical record.
- We acknowledge all patient/family/customer/visitor concerns and complaints. We promptly investigate and resolve complaints to the fullest extent possible.
- We never deny urgent or emergent care based on a patient's ability to pay for services.
- Associates do not ask for or accept any gifts in exchange for services or that anyone could think were for that purpose.
- Complete and accurate patient registration information for all patients is collected and recorded in a timely manner.
- Clinical and billing Associates communicate with each other effectively and accurately to ensure correct billing.

As Associates of Montefiore, each of us is responsible for reading and adhering to all the

guidelines outlined in the Code. This means:

- All Associates are expected to be familiar with the Code of Conduct and with the detailed policies, procedures and rules that apply to their positions.

To prevent violations, managers and supervisors are responsible for enforcing compliance with legal and regulatory requirements by:

- Regularly discussing the code with associates who report to them and emphasizing its importance
- Addressing all concerns reported in good faith and taking appropriate action to correct any violations and prevent recurrence
- Imposing consistent and appropriate disciplinary measures if warranted; and not condoning or ignoring misconduct that comes to their attention

MANAGEMENT OF DISRUPTIVE CONDUCT

(HR POLICY VI-3)

It is Montefiore's policy to treat everyone with respect, courtesy and dignity. In order to promote the highest standards of patient care and a professional environment, Montefiore requires that all Associates, medical staff members, allied health professionals, practitioners, students and volunteers conduct themselves in a civil, professional and cooperative manner.

Violent, disruptive or inappropriate conduct which could potentially have an adverse impact on patient care or the work environment will not be tolerated. Such behavior will result in disciplinary action, up to and including termination.

Any associate who is subjected to or witnesses disruptive/inappropriate conduct should report the incident to their immediate supervisor. An associate may also report the incident directly to Human Resources, Corporate Compliance, or Risk Management.

CONFLICT RESOLUTION

(HR Policy VI-5)

Montefiore believes that Conflict Resolution is critical to maintaining safety and promoting the highest level of patient care.

The foundational principles that each associate must demonstrate to support effective conflict management include:

- A willingness to acknowledge the existence of conflict
- Open communication
- Dealing with conflict within an environment of mutual respect
- Acceptance and tolerance of different perspectives
- Commitment to fundamental fairness

These principles allow Montefiore to establish a cooperative learning and performance culture in which everyone knows and understands their roles, supports each other in them and learns from each other.

ANTI-HARASSMENT & ANTI-DISCRIMINATION

(HR POLICY VI-6)

Montefiore is committed to providing its Associates, patients and visitors with an environment free from discrimination, unlawful harassment and other harassing behavior. Maintaining such an environment is a responsibility shared equally by all Associates. Montefiore's policy prohibiting discrimination and harassment applies to all individuals affiliated with Montefiore, including full- and part-time Associates, temporary Associates, agency workers, patients, students, visitors, volunteers, vendors, consultants and independent contractors. This policy applies to conduct both in the workplace and at work-related activities outside of the workplace (for example, an off-site business meeting or a business-related social event occurring after regular working hours).

Unlawful harassment is prohibited

Under this policy, harassment is verbal or physical conduct that denigrates or shows hostility to or aversion toward an individual because of his/her race, color, sex, religion, creed, national origin, alienage or citizenship status, age, actual or presumed disability, history of disability, sexual orientation, genetic predisposition or carrier status, pregnancy, military status, marital status, or partnership status or any other characteristic protected by law that: (a) has the purpose or effect of creating an intimidating, hostile or offensive work environment; (b) has the purpose or effect of unreasonably interfering with an individual's work performance; or (c) otherwise adversely affects an individual's employment opportunities. Harassing conduct may include (but is not limited to):

- Epithets, slurs or negative stereotyping
- Threatening or intimidating acts
- Denigrating jokes
- Displaying or circulating objects or written or graphic material that denigrates or shows hostility or aversion toward an individual or group (including through email, the internet, or the mail)

Sexual harassment is prohibited

Sexual harassment is a type of unlawful harassment. Sexual harassment is defined in this policy and in federal guidelines as unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature when, for example, (a) submission to such conduct is made either explicitly or implicitly a term and condition of an individual's employment; (b) submission to or rejection of such conduct by an individual is used as the basis for employment decisions affecting the individual; or (c) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive working environment. Examples of sexual harassment are:

- Touching or groping
- Unwanted sexual advances or requests for sexual favors
- Sexual jokes and innuendos
- Verbal abuse of a sexual nature
- Commentary on an individual's appearance or body
- Displaying or circulating sexually suggestive objects or written or graphic material (including through email, the internet, or the mail)

Retaliation is prohibited

Retaliation is a form of discrimination. Montefiore prohibits retaliation against any individual who (a) reports, in good faith, discrimination or harassment or retaliation or (b) participates in an investigation of such a report. Montefiore will severely discipline any person who engages in retaliation.

Reporting harassment

Montefiore strongly urges individuals to promptly report their complaints or concerns so that rapid and effective action can occur. Montefiore urges individuals to make the complaint before the objectionable conduct becomes severe or pervasive. An individual can make a report to:

- The individual's immediate supervisor
- The administrative or clinical leader of the individual's department
- A Human Resources Business Partner
- A Labor or Employee Relations Manager
- The Director of Employee and Labor Relations
- The Associate General Counsel for Labor and Employment
- Corporate Compliance
- Compliance Hotline (1-800-662-8595)

Managers and supervisors must report discrimination

Managerial Associates are required under this policy to promptly report to either an HR Business Partner or Labor and Employee Relations any complaint they receive concerning discrimination, harassment or retaliation.

Investigation of a complaint

Montefiore will promptly investigate a complaint about discrimination, harassment or retaliation. Human Resources is responsible for ensuring that the investigation is prompt, thorough, fair, and accurate. Montefiore will keep confidential the identities of the individuals involved in the investigation (including the person who made the complaint, the person accused of violating this policy, and the persons interviewed during the investigation) to the extent feasible to conduct an adequate investigation and take any appropriate corrective action.

This policy relies, in part, on the good faith of Montefiore Associates. If an associate deliberately abuses this policy and files a false or malicious complaint, Montefiore may discipline the associate. Such discipline may include, but is not limited to, a suspension without pay or discharge.

MAINTAINING A NON-VIOLENT WORKPLACE

(HR POLICY VII-20)

Acts or threats of violence or abuse are strictly prohibited. Individuals who engage in acts or threats of violence or abuse are subject to immediate discharge.

Physical abuse may include, but is not limited to, physical touching that is intimidating, hitting, slapping, punching, kicking, pinching, grabbing or pushing. Verbal abuse may include, but is not limited to, the use of language (in either spoken or written form) that is directly or indirectly threatening, obscene, hostile, humiliating or degrading. Gestures designed to intimidate an individual are also prohibited. Such gestures include, but are not limited to

inappropriate touching which includes invading someone's personal space, fist shaking, spitting, slamming doors, and throwing objects.

Any act or threat of violence or abuse toward an individual should be immediately reported to the Security Department or its designee.

Upon receipt of a report, Security shall immediately notify the Director of Employee and Labor Relations, or designee, and department head(s) of individuals involved in the incident. The Director of Security and/or Security Supervisor shall document the incident in an Occurrence report. The Director of Labor and Employee Relations shall determine whether further investigation is necessary, and shall determine the appropriate level of discipline.

In the case of alleged serious infractions, the individual(s) should be placed off work without pay, pending investigation. If an associate is found to have not committed the alleged act of violence or abuse, then he/she may be reinstated and paid for time lost. If, however, after review by the Director of Employee Relations or designee, it is determined the alleged act was committed, the associate(s) will be subject to appropriate disciplinary action, up to and including termination.