Rochester Regional Health
Code of Conduct

Effective Date: 7/2016
Revised: 4/2024
Last Review Date: 4/2024
TABLE OF CONTENTS

Staff Code of Conduct ................................................................................................................................. 4
Rochester Regional Health System Conflict of Interest Policy ................................................................. 4
Physician Sunshine Act/CMS Open Payments ......................................................................................... 5
Relationships with Industry .................................................................................................................... 6
  Pharmaceutical Samples........................................................................................................................... 6
  Site Access by Pharmaceutical, Medical Device, Medical Testing and other Industry Representatives: ......................................................................................................................... 6
  Medical Education at Rochester Regional Health using the Rochester Regional Health Name or Resources: ................................................................................................................................. 6
  Participation in Industry-Sponsored Program: ....................................................................................... 7
Consulting for Industry: .............................................................................................................................. 8
Industry-Sponsored Programs at Rochester Regional Health: ............................................................... 9
Industry-Sponsored Scholarships and Other Educational Funds for Trainees: ..................................... 9
Professional Travel: ................................................................................................................................. 9
Purchasing: ................................................................................................................................................. 9
Clinical Care: ............................................................................................................................................. 10
Research: ................................................................................................................................................ 10
Federal Award ............................................................................................................................................ 10
Gifts and Business Courtesies .................................................................................................................... 11
Vendor-Sponsored Events .......................................................................................................................... 11
Responsible Use of Assets......................................................................................................................... 12
Quality ....................................................................................................................................................... 13
Care of Patients .......................................................................................................................................... 14
Prohibited Gifts or Inducements to Patients ............................................................................................ 14
Confidentiality Principles ......................................................................................................................... 15
Privacy ....................................................................................................................................................... 15
  Employee Privacy................................................................................................................................... 15
  Patient Privacy ....................................................................................................................................... 15
Recordkeeping and Billing Compliance .................................................................................................... 16
Illegal Referral Practices ........................................................................................................................... 16
Controlled Substances ............................................................................................................................... 17
Work Environment ..................................................................................................................................... 17
<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Involvement</td>
<td>18</td>
</tr>
<tr>
<td>Interactions in the Work Environment</td>
<td>18</td>
</tr>
<tr>
<td>Political Activity</td>
<td>19</td>
</tr>
<tr>
<td>Social Media</td>
<td>20</td>
</tr>
<tr>
<td>Marketing and Communications</td>
<td>20</td>
</tr>
<tr>
<td>Education and Training</td>
<td>21</td>
</tr>
<tr>
<td>Conduct of Activities in Compliance with Fraud, Waste and Abuse Laws</td>
<td>21</td>
</tr>
<tr>
<td>Federal and State False Claims Laws</td>
<td>22</td>
</tr>
<tr>
<td>Federal False Claims Act (“FCA”)</td>
<td>22</td>
</tr>
<tr>
<td>Federal Whistleblower Protection</td>
<td>22</td>
</tr>
<tr>
<td>Program Fraud Civil Remedies Act of 1986</td>
<td>22</td>
</tr>
<tr>
<td>New York False Claims Act</td>
<td>23</td>
</tr>
<tr>
<td>New York Social Services §§145, 145-b and 145-c</td>
<td>24</td>
</tr>
<tr>
<td>New York Public Health §238-a</td>
<td>24</td>
</tr>
<tr>
<td>New York Labor Law §§740 and 741</td>
<td>24</td>
</tr>
<tr>
<td>New York Social Services §366-b</td>
<td>26</td>
</tr>
<tr>
<td>NY Not-for-Profit Corporation Law § 715-B.</td>
<td>26</td>
</tr>
<tr>
<td>New York Penal Law Article 175</td>
<td>26</td>
</tr>
<tr>
<td>New York Penal Law Article 176</td>
<td>26</td>
</tr>
<tr>
<td>New York Penal Code Article 177</td>
<td>26</td>
</tr>
<tr>
<td>New York Penal Law Article 155</td>
<td>27</td>
</tr>
<tr>
<td>Rochester Regional Health’s Policy for the Detection and Prevention of Fraud, Waste and Abuse</td>
<td>27</td>
</tr>
<tr>
<td>Procedures</td>
<td>27</td>
</tr>
<tr>
<td>Additional Rochester Regional Health Policies and Procedures Pertaining to the Detection and Prevention of Fraud, Waste, and Abuse</td>
<td>28</td>
</tr>
<tr>
<td>Reporting Misconduct</td>
<td>29</td>
</tr>
<tr>
<td>INDEX</td>
<td>30</td>
</tr>
</tbody>
</table>
**Staff Code of Conduct**

In carrying out its purpose, vision and shared values, Rochester Regional Health expects that all Staff will conduct Rochester Regional Health business and operations in accordance with both the law and the highest standards of business ethics. Because Rochester Regional Health operates or manages a number of legal entities providing medical services along the continuum of care, this Code of Conduct should not be interpreted as an exhaustive list of standards expected of Rochester Regional Health Staff. This Code of Conduct should be considered in conjunction with entity specific policies and procedures, as well as the Medical and Dental Staff Codes of Conduct developed by the Medical and Dental Staffs of Rochester Regional Health’s respective entities. “Staff” is defined as all Board members, officers, employees, volunteers, contractors, agents, and members of the Medical and Dental Staff and Adjunct Staff/Allied Health Professionals.

**Rochester Regional Health System Conflict of Interest Policy**

Rochester Regional Health has adopted a System Conflict of Interest Policy to ensure the integrity of Rochester Regional Health’s business practices and to ensure that its operations are consistent with its mission as a charitable institution. Rochester Regional Health recognizes and respects the right of Staff members to engage in outside financial, business or other activities as long as these activities do not interfere with the conscientious performance of their duties.

A “conflict of interest” arises where an individual’s outside interests diverge from his or her professional obligations to Rochester Regional Health. Staff may not use their contacts or position in the organization to advance their own financial interests or those of family members. Staff shall avoid both conflicts of interest and the appearance of a conflict of interest.

The System Conflict of Interest Policy is designed to help Staff identify situations that present potential conflicts of interest and explains the procedures for disclosing and managing conflicts of interest. The basic standard for dealing with conflicts of interest is simple:

- If you believe a conflict of interests exists, it must be disclosed. A potential conflict should be disclosed to your immediate supervisor, who may consult with the Rochester Regional Health’s Director of Corporate Compliance or the Rochester Regional Health Compliance Officer via email at conflictofinterest@rochesterregional.org. Until you have disclosed and resolved the potential conflict with your supervisor, treat the situation as if a conflict exists.
- Always disclose and seek resolution of any actual or potential conflict of interests, whether or not you consider it an actual conflict, before taking a potentially improper action.
- Officers, directors and Key Persons must complete an annual Conflict of Interest Disclosure Questionnaire every year, or within 60 days of appointment or hire. The Compliance Officer will notify Staff members who have a duty to complete the Questionnaire, which can be submitted via the Rochester Regional Health’s intranet reporting system. The Compliance Officer should be updated throughout the year based on a change of information provided in the annual disclosure form.
- Rochester Regional Health has the duty to avoid and disclose organizational conflicts of interest that might arise when conducting a procurement action involving a related organization.
No listing of principles can cover every type of situation of conflict that you may confront as a Rochester Regional Health Staff member. The following standards address some matters of particular concern:

- We should avoid placing business with any firm in which we, our families, or our close business associates and personal associates have a direct or indirect interest.
- No Staff member should derive personal economic gain from a transaction to which Rochester Regional Health is a party unless Rochester Regional Health is advised of the individual’s potential conflict and the conflict is managed according to Rochester Regional Health’s policy. Timely disclosure is required so that any potential conflict may be considered prior to entering into the transaction.
- Any involvement by a Staff member in a personal business venture shall be conducted outside the Rochester Regional Health work environment on non-work time.
- Staff may not directly hire or supervise family members.
- Staff should avoid soliciting, offering, accepting or providing any consideration that might be construed as conflicting with Rochester Regional Health’s business interest, such as meals, gifts, loans, transportation or entertainment.

**Physician Sunshine Act/CMS Open Payments**

The Affordable Care Act established a transparency program, now known as Open Payments, which increases public awareness of financial relationships between drug and device manufacturers and certain health care providers. Open Payments requires manufacturers of covered drugs, devices, biologicals, and medical supplies to report payments or other transfers of value they make to physicians (i.e. MD, DO, DDS, DMD, DPM, DC) and teaching hospitals to the Centers for Medicare & Medicaid Services. Also, manufacturers and group purchasing organizations (GPOs) must report to CMS certain ownership or investment interests held by physicians or their immediate family members. This information is collected by CMS and published annually on its website: https://www.cms.gov/openpayments/

As applicable, Rochester Regional Health physicians are expected to report financial relationships with a manufacturer or GPO that may result in a conflict of interest through the procedures set forth in the Rochester Regional Health System Conflict of Interest Policy. In addition, as required by CMS, Rochester Regional Health physicians are encouraged to do the following:

- Become familiar with the information that will be reported about physicians.
- Keep records of all payments and other transfers of value received from applicable manufacturers or applicable GPOs.
- Register with CMS and subscribe to the list serve to receive updates regarding the program.
- Review the information applicable manufacturers and applicable GPOs submitted to CMS regarding payments or transfers of value made to them, as a physician.
- Work with applicable manufacturers and applicable GPOs to make sure the information submitted is correct.

Physician compliance with the above is voluntary. However, a failure to disclose such an interest could result in a violation of Rochester Regional Health’s System Conflict of Interest Policy. In addition, Rochester Regional Health will be reviewing the data available from Open Payments on an annual basis to track such relationships.
Relationships with Industry

“Industry” is defined herein as any organization that is not (i) a federal, state, or local government agency; or (ii) an institution of higher education; (iii) an academic teaching hospital; (iv) a medical center; or (v) a research institute that is affiliated with an institution of higher education. Examples of such organizations include biomedical, pharmaceutical, and medical device companies, and companies that make other products or provide services used by Rochester Regional Health in the treatment of patients or the provision of medical care.

Pharmaceutical Samples:
Accepting free pharmaceutical samples risks interference with prescribing practices since Industry representatives often provide the newest and most costly drugs. Individuals should use their best judgment in these situations. One example where it may be permissible to accept free pharmaceutical samples or educational items from Industry representatives would be where such drugs or items are necessary for patient education (e.g., instructing patients in the use of inhalers).

Individuals should be responsible for providing information to patients concerning affordable options for obtaining medicines. Examples of such options include pharmaceutical assistance programs, vouchers, and large retail chains with low cost medicines.

Site Access by Pharmaceutical, Medical Device, Medical Testing and other Industry Representatives:
Access by pharmaceutical or other Industry representatives to individual physicians or other health care providers must be by invitation only and restricted to non-patient care areas. Individuals may invite a representative if the purpose of the visit is to train Staff on the repair or evaluation of equipment already procured by Rochester Regional Health.

Industry representatives who are qualified health care professionals or scientists and who wish to provide information on their products may do so if invited and only in health care provider-supervised, structured group settings that provide the opportunity for interaction and critical evaluation. Device or other Industry representatives are permitted to be present during patient care interactions if:

- The purpose of the representative’s visit is to provide in-service training or assistance to Rochester Regional Health Staff on devices or equipment.
- There is an agreement between Rochester Regional Health and the representative specifying the terms and conditions of the representative’s presence.
- The representative is appropriately credentialed in accordance with Rochester Regional Health credentialing policies.
- There has been prior disclosure to the patient (or patient representative) that Industry representatives may be present in the procedure area.

Medical Education at Rochester Regional Health using the Rochester Regional Health Name or Resources:
Medical education activities at Rochester Regional Health are organized and managed by each Department. Continuing Medical Education credits are paid through each Department’s budget and providers are offered the opportunity to pursue CME through a stipend determined by contract or departmental policy. Each Department Chair determines what educational activities are best suited for
their respective departments, including whether to apply for CME credits for educational activities. Courses must comply with the Accreditation Council for Continuing Medical Education (ACCME) standards, including those with respect to content validation and meals.

Rochester Regional Health is not an accredited CME provider. Department Chairs may apply to the Rochester Academy of Medicine (RAM) for approval for planned programs. RAM determines if the activity meets ACCME standards and whether the program will qualify for CME credit. Department Chairs are responsible for payment for CME credits through an outside accrediting body such as RAM.

All Industry-sponsored educational programs at Rochester Regional Health that will use the Rochester Regional Health name or resources must have prior approval from the Department Chair. The Department Chair must consider the general terms of the program to ensure the activity is of legitimate educational value and is consistent with Rochester Regional Health standards. For approved activities, any Industry support should be disclosed in connection with the event. All inquiries regarding Industry support for medical education activities will be managed by each individual department.

Staff should not accept more than modest meals in connection with non-ACCME accredited medical education programs. (Please note: both the PhRMA and AdvaMed Codes prohibit industry funding of any entertainment or recreational activities.)

**Participation in Industry-Sponsored Program:**

Rochester Regional Health Staff may speak at Industry-sponsored programs if the individual retains full control and authority over the professional material he/she presents and the communications or presentation is not subject to prior approval by any commercial interest other than approval for the use of proprietary information.

Individuals must disclose the name of the company, the nature of the support and the monetary value of the support related to any speaking engagements to the Corporate Compliance Department at conflictofinterest@rochesterregional.org. If the disclosure is in conjunction with Sponsored Research, the disclosure will be referred to the Director of the Office of Sponsored Programs/Research.

Rochester Regional Health Staff may participate in speaking agreements with the following characteristics:

- Staff member must represent themselves and retain full control and authority over the professional material he/she presents and not be influenced by the sponsoring program.
- Staff member is compensated only for his/her professional material presented.
- Staff member does not present the sponsoring company’s materials or act as the company’s spokesperson or representative for the sponsor’s products.
- Staff member has say in the publicity related to the event.
- Staff member’s presentation has educational/informational purposes.
- Staff member shall not receive compensation above fair market value for the presentation. The compensation from the sponsoring company is not rewarding Staff member for future level of prescribing or any future sales targets. For example, the sponsoring company cannot require speaker to write a minimum number of prescriptions in order to receive the speaker honoraria.
- The speaker program venue is conducive to an educational presentation and/or during an event that is conducive to educational presentations. Certain locations are presumed to be
inappropriate for educational presentations; these include wineries, sports stadiums, fishing trips, golf clubs, high-end restaurants serving expensive meals and alcohol, and adult entertainment facilities.

- The attendees of the program are individuals who have a legitimate business or educational reason to attend the program. Program attendees should not be the speaker’s friends, significant other, or family members; employees or medical professionals who are members of the speaker’s own medical practice; staff of facilities for which the speaker is a medical director; and other individuals with no use for the information.

- The sponsoring company is reputable and plans programs appropriately timed with substantive changes in relevant information, such as new medical or scientific information or a new FDA-approved or cleared indication for a product.

- The sponsoring company’s sales or marketing business units have not influenced the selection of speakers.

- The sponsoring company does not select speakers or attendees based on past or expected revenue that the speakers or attendees have, or will have, by prescriing or ordering the company’s product.

- Staff member has not previously attended a presentation on the same or substantially the same topic (either as a repeat attendee or as an attendee after being a speaker on the same or substantially the same topic).

Exceptions may be granted to allow individual participation in training of providers for a new device or procedure under applicable regulations (e.g., FDA-mandated training).

**Consulting for Industry:**

Individuals must disclose the name of the company, the nature of the consulting and the monetary value of the consulting related to any consulting engagement to the Corporate Compliance Department at conflictofinterest@rochesterregional.org. If the disclosure is in conjunction with Sponsored Research, the disclosure will be referred to the Director of the Office of Sponsored Programs/Research.

Individuals may consult for Industry if:

- Payment for services is at fair market value.
- Consulting arrangement is governed by a written, signed agreement that specifies the services to be provided by the Staff member to the specified organization.
- The relationship and any financial benefits are disclosed to Rochester Regional Health as required under the Rochester Regional Health System Conflict of Interest Policy.
- If, as part of the consulting arrangement, Staff will be participating in sponsored speaker programs, the speaking arrangements must adhere to the rules in the Participation in Industry-Sponsored Program (above) in this Code of Conduct.
Industry-Sponsored Programs at Rochester Regional Health:

Funds from Industry may be accepted to:

- support individual lectures by individuals or faculty from other institutions, provided the sponsoring Rochester Regional Health department has control over the choice of speaker, the setting, invitations to attendees, and other arrangement
- support scientific conferences and symposia at Rochester Regional Health or off-site using the Rochester Regional Health name or resources

Scientific or medical professionals representing Industry may attend the program. Industry support should be publicly disclosed and acknowledged in connection with the event. Individuals must disclose any financial benefits from Industry relating to any participation in Industry-sponsored programs at Rochester Regional Health or off-site using the Rochester Regional Health name or resources.

Industry-Sponsored Scholarships and Other Educational Funds for Trainees:

Scholarships and other educational funds from Industry or nonprofit organizations substantially supported by Industry may be accepted provided that such scholarships or educational funds are awarded at Rochester Regional Health’s sole discretion. There may be no expressed or implied quid pro quo for the funds. Evaluation and selection of recipients of funds should be fair, equitable and based on established criteria.

Individuals receiving industry-sponsored scholarships or other educational funds must disclose this information to their immediate Supervisor and follow the System Conflict of Interest process.

Professional Travel:

Individuals may accept travel funds from Industry under the following circumstances:

- for legitimate reimbursement for travel to provide contractual services
- to view capital equipment if the equipment is being considered for purchase by Rochester Regional Health
- to participate in meetings directly related to ongoing sponsored research

Individuals must disclose funds provided for travel, lodging and meals.

Unrestricted gifts to the organization may be used in part to support travel for individuals attending professional meetings. Individuals may also accept travel funds from scientific societies, whether or not Industry is the source of the funds.

Purchasing:

If an individual (or an immediate family member) has a financial or ownership interest or a fiduciary role in, or receives payments from a pharmaceutical or medical device manufacturer or distributor and the individual has authority or influence over Rochester Regional Health’s purchases from the company, he or she must report the conflict of interest.

If an individual (or an immediate family member) has an association with Industry, he/she must recuse themselves from involvement in purchasing decisions relevant to the conflicting interests as follows:
- for one year after the receipt of the last payment (to the individual or immediate family member) from the company, in the case of consulting/advisory or royalty payments
- for as long as the individual (or immediate family member) has an equity interest in the company; for one year after a member of the individual’s immediate family terminated employment with the company; and for one year after the end of the fiduciary relationship on the part of the individual or immediate family member

To the extent an individual’s expertise is necessary in evaluating any product, the individual must report his or her financial or fiduciary ties (or those of an immediate family member) to any manufacturer of the product to those responsible for making the procurement decision. The individual may provide information but must recuse himself or herself from voting on purchasing decisions relevant to the conflicting interest.

There may be no expressed or implied quid pro quo, such as a promise of purchases, in connection with the provision of educational support, research support or any other payment or gift of any kind from Industry.

**Clinical Care:**
Practitioners are expected to make treatment decisions, prescribe drugs, and select medical devices on the basis of sound scientific and medical evidence. If a practitioner (or an immediate family member) has a financial or ownership interest (e.g., stock, stock options, or employment) or a fiduciary role in, or receives payments (e.g., royalty or consulting) from Industry and in the course of his or her clinical practice prescribes a drug or a medical device manufactured or sold by the company with which the practitioner (or immediate family member) has the relationship, the practitioner must disclose all financial or other relationships they have with Industry and should be especially careful to ensure that his or her medical decisions are made on the basis of sound scientific evidence.
When making a referral to an entity in which the practitioner has an ownership or investment interest or to an individual with whom the practitioner has a compensation arrangement, the practitioner must make any necessary disclosure to the patient before the referral is made.

**Research:**
All Rochester Regional Health Staff who conduct research activities at Rochester Regional Health must also comply with the Research and Industry Conflicts of Interest Policy.

**Federal Award**
All Staff members responsible for the selection, award and administration of contracts that apply to procurements paid for in whole or in part by a Federal award must represent Rochester Regional Health accurately and honestly and must not engage in any activity intended to defraud anyone of money, property or services. Employees must act in good faith and in the best interest of Rochester Regional Health.
Gifts and Business Courtesies

To prevent undue influence or a potential conflict of interest, Rochester Regional Health Staff may not accept or solicit a gift or benefit from vendors, patients or others who may influence or appear to influence the Staff member’s decision-making, unless accepted in accordance with this policy. However, this policy is not intended to prohibit the exchange of gifts among Rochester Regional Health’s entities and its Staff members, nor among Rochester Regional Health’s Staff members.

- **Gifts from patients and family members**: Unsolicited gifts of nominal value (e.g., flowers, food) may be accepted from patients and their families provided the gift can be shared with other members of the recipient’s department or unit. Gifts of cash, gift cards or certificates, gratuities or other monetary equivalents of any kind should not be accepted by Staff. If a patient or family member offers a gift consisting of cash or a cash equivalent, Staff should refer them to the Rochester Regional Health Foundation.

- **Gifts from vendors or entities with a business relationship with Rochester Regional Health**: Staff may accept gifts of nominal value (e.g. pens, mugs and tote bags) in an amount not exceeding a total value of $100 in any one year from an individual or organization that has a business relationship with Rochester Regional Health. However, Staff may not accept gift certificates or cash equivalents. Staff may not solicit such gifts, nor should Staff accept such gifts if they will improperly influence a business relationship or outcome with the vendor. For example, Staff may not accept vendor gifts in exchange for prescribing or advocating the vendor’s products or services or for performing marketing tasks on the vendor’s behalf during the course of providing care and treatment to patients within Rochester Regional Health.

- **Gifts and business courtesies to referral sources**: In no event will any entertainment or gift be offered to physicians or other individuals in a position to refer patients to a Rochester Regional Health facility. Rochester Regional Health strictly complies with all federal and New York State laws regarding the prohibition of such practices.

- **Gift from Rochester Regional Health Staff to Patients**: See Prohibited Gifts or Inducements to Patients

Vendor-Sponsored Events

Acceptance of vendor invitations to attend off-site events is generally discouraged, unless the individual has received prior approval from his/her supervisor or the Corporate Compliance Officer. Prior to accepting the invitation, the individual should consult with his/her supervisor to ensure that attendance at such an event is in furtherance of a bona fide educational or training purpose and the individual’s work responsibilities to Rochester Regional. The individual’s supervisor, with assistance from the Corporate Compliance Officer, should evaluate any vendor invitation on a case-by-case basis to ensure there is a valid business reason for the individual to attend an event and the vendor’s costs for such an event are reasonable. Upon receiving prior approval, an individual attending a vendor-sponsored event may accept meals or promotional gifts of nominal value (e.g. pens, mugs, and tote bags) offered in connection with the event to the individual and other attendees.

Staff may not accept payment or reimbursement for travel, lodging and meal expenses from vendors to attend off-site product or equipment demonstrations where the vendor has an actual or potential opportunity to enter into a transaction with Rochester Regional Health for such product or equipment.
**Responsible Use of Assets**

Rochester Regional Health has many valued assets, including its physical property, intellectual property, and confidential information. Consistent with our value of stewardship, we shall protect these assets against loss, theft and misuse. Rochester Regional Health’s property may not be used for personal benefit, nor may it be sold, loaned, given away or disposed of without proper authorization. Protecting these assets is everyone’s responsibility.

Rochester Regional Health assets must be used for business purposes during employment with Rochester Regional Health. Improper uses include unauthorized personal appropriation or use of such tangible assets such as computer equipment, office and medical equipment, vehicles, supplies, reports and records, computer software and data and facilities. Intangible assets such as intellectual property, trademarks and copyrights, proprietary information including computer programs, confidential data, business and service plans, designs and expertise must be protected as vigorously as Rochester Regional Health’s physical property.

We shall dispose of surplus, obsolete or scrapped property according to Rochester Regional Health’s policies. Improper disposal of property is prohibited.

We shall protect proprietary information entrusted to us by actual and potential vendors, referral sources, contractors, service providers and others. Rochester Regional will use only legally licensed software in its operations. Use of “pirated” or “bootleg” copies of software is strictly prohibited, as well as unlawful.

Rochester Regional Health will protect the confidentiality, integrity and availability of information by ensuring that all Staff members involved in using and managing IT resources:

- understand their roles and responsibilities relating to the organization’s mission
- understand the organization’s IT security policy, procedures, and practices
- have adequate knowledge of the management, operations and technical controls required and available to protect the IT resources for which they are responsible

Rochester Regional Health’s IT resources must only be used in the course of normal business and health care operation and are the property of Rochester Regional Health. Rochester Regional Health’s IT resources include, but are not limited to, workstation equipment, software, operating systems, storage media, images, networks, e-mail, Internet/Intranet/Extranet-related services and data. This applies to all IT resources, whether accessed from within a Rochester Regional Health facility or remotely. Rochester Regional Health does not allow non-Rochester Regional Health owned IT resources to directly connect to the Health System’s IT resources.

Rochester Regional Heal requires Staff members to report damaged, lost or stolen IT resources to the IS&T Service Desk at 922-HELP as discovered.

Staff members will only use Rochester Regional Health licensed software in its operations. Staff members are responsible for taking all necessary steps to prevent unauthorized access to IS&T resources.

Staff members will protect proprietary information and IT resources entrusted to Rochester Regional Health by vendors, referral sources, contractors, service providers and others.
Staff members are responsible for protecting and managing their user IDs and passwords. The issuances of these user IDs and passwords does not imply any expectations of privacy for IT resources protected by these user IDs.

In order to protect the Health System and its patients, Rochester Regional Health reserves the right to monitor any communications passing through or using Rochester Regional Health’s IT resources including, but not limited to, monitoring of telephone conversations, e-mail transmission and internet usage and access. Employees should not have any expectation of privacy when using any of Rochester Regional Health’s electronic systems, including, but not limited to, its email, telephones, computers, laptops, cell phones, network and internet services. In accordance with New York State Civil Rights Law Section 52-c, Rochester Regional Health notifies all employees that it may monitor, by any lawful means, any and all telephone conversations or transmissions, e-mail, internet access and usage by an employee using any electronic device, network or system, including, but not limited to, the use of a computer, telephone, wire, radio or electromagnetic, photoelectronic or photo-optical systems. Any environment where IT resources are used or managed, must be maintained in a way that protects patient and Rochester Regional Health confidential information.

Staff members are expected to clear their desks of confidential information and lock their systems before they leave at the end of their shift or for extended periods away from their desk.

Acceptable Use Policies:
- Acceptable Use of the Internet: IS5 Internet Use Policy
- Acceptable Use of Email: IS3 Unified Communication and Messaging Usage Policy
- Acceptable Use of Social Media: HRSOP Guide
- Unacceptable Use of IT Resources: Information Security Policy: 06. Compliance
- Acceptable Use of Credit Card Data: IS17 PCI Policy

Quality

Rochester Regional Health continually improves the care we provide, achieving outstanding customer satisfaction and outcomes by adhering to the following principles:

- We shall provide high-quality health care that responds to individual, family and community needs.
- We are responsible for maintaining the integrity and quality of our job performance. This includes using work time to the advantage of our patients and always presenting our best effort on the job.
- As health care providers upon whom patients depend for their health and safety, we must take note of deficiencies or errors, even those that seem small or insignificant. You should report such matters promptly to your supervisor and appropriate Director of Human Resources.
- We are responsible for providing health care and products that comply with all applicable laws, regulations and standards, including state and federal legislation regarding patients’ rights.
We shall maintain medical records and documentation to meet the requirements of medical Staff by-laws, affiliate policies, accreditation standards, and all laws and regulations.

Care of Patients

In order to fulfill our purpose, vision and shared values to uplift humanity through care for our community, we will care for our patients in the following manner:

- We will admit and care for persons without regard for their race, color, creed, national origin, sex, disability, gender identity, gender expression, sexual orientation or any other federal or state protected categories, or ability to pay.
- Each patient admitted as a patient or resident to a facility will be presented with a Patient’s Bill of Rights.
- Patients will be accepted and treated with a caring response to their needs.
- Patients will be treated in a manner that fosters trust, with reasonable consideration given to their diverse background, culture, religion and heritage.
- Patients will be respected as decision-makers regarding their treatment and will be involved whenever possible in understanding proposed treatments, potential risks and outcomes and in choosing the most appropriate treatment.
- Clinicians are expected to make clinical decisions on the basis of patient needs regardless of any contractual arrangement.
- Rochester Regional Health personnel will respect the privacy of all that are treated in our facilities.
- Staff are responsible for maintaining all reasonable and appropriate administrative, technical and physical safeguards in order to ensure the privacy and security of all protected health information.
- Staff shall protect and handle patient property and information in accordance with Rochester Regional Health’s policies. Patient information will be shared only with those who have a legitimate need and are authorized to receive such information.

Prohibited Gifts or Inducements to Patients

Under federal law, any person who offers or transfers to a Medicare or Medicaid beneficiary any “remuneration” that the person knows or should know is likely to influence the beneficiary’s selection of a particular provider of Medicare or Medicaid payable items or services may be liable for civil money penalties. For purposes of federal law, “remuneration” includes transfers of items or services for free or for other than fair market value.

Rochester Regional Health has a strict policy against providing gifts or items or services at less than fair market value to any patient, regardless of their insured status. Certain items of “nominal” value are not considered a gift or inducement and may be provided to patients where appropriate. “Nominal” value is defined as having a retail value of no more than $15 per item or $75 in the aggregate per patient on an annual basis. For any questions on this policy, and prior to providing any discounted or free items to patients, please contact the Compliance Department.
Confidentiality Principles

To ensure confidentiality of Rochester Regional Health’s information, we must adhere to the following principles:

- We will not disclose trade secrets or proprietary information to anyone outside the organization, either during or after hire, except to people authorized by Rochester Regional Health’s management.
- We will return any tangible intellectual property in our possession to Rochester Regional upon termination of affiliation. Examples include operational plans, documents or records, including electronic media.
- We will never use, directly or indirectly, inside information for personal gain or the gain of others. Inside information is information about Rochester Regional Health’s business not generally available to the public and gained through an individual’s position in Rochester Regional Health. Information need not be confidential or proprietary to be considered inside information.

Privacy

Employee Privacy

The personnel files maintained on all Rochester Regional Health employees are the property of Rochester Regional Health. The appropriate Director of Human Resources controls access to this information. However, it is Rochester Regional Health’s policy to allow you to review the contents of your personnel file at any time. Personal information is released outside Rochester Regional Health only with your authorization or to satisfy legitimate investigatory or legal requirements such as subpoenas or court orders. Employees who are responsible for maintaining personnel information cannot violate your privacy without risk of discipline measures up to and including termination.

Electronic mail and electronic files or documents used and stored on Rochester Regional Health equipment are the property of Rochester Regional Health. Therefore, employees cannot assume either personal ownership or privacy over any such material.

Patient Privacy

As providers of health care services, we have a special responsibility in ensuring that the confidentiality of our patients is always maintained. Patient records, results of tests, diagnoses, and any material which relates to our patients must be held in the strictest confidence. No patient information shall be revealed to anyone outside of Rochester Regional Health without the express written authorization of the patient, his/her guardian, administrator or executor and or a court order or as required by law.

Patient information is held in confidence on a need to know basis and violations of this could lead to discipline, including the possibility of termination. We must be extremely careful about discussing any confidential information outside of a work area to avoid the possibility of being overheard, mistakenly releasing confidential information about our patients.

It is imperative to correctly identify a patient in the medical record to ensure quality patient care and to prevent patient safety related errors. Staff need to follow the Rochester Regional Health best practice
Recordkeeping and Billing Compliance

Rochester Regional Health Staff members are required to scrupulously honor our values of integrity and stewardship in all our recordkeeping and reporting activities. We shall only apply business practices that are legal, ethical and honest. Dishonest reporting, both inside and external to Rochester Regional Health will not be tolerated. This includes reporting or organizing information in an attempt to mislead or misinform.

- We shall prepare and maintain company records and reports accurately and honestly. This includes reporting of time worked, business expenses incurred, revenue received, and all documentation of business or service related activities.
- We shall prepare and maintain patient records and reports accurately and honestly. We will bill only for services actually rendered and that are fully documented in a patient’s medical record.
- Cost reports filed with third party payers shall reflect appropriate costs incurred for furnishing health care services.
- We shall not make any entries on Rochester Regional Health books and records that intentionally hide, mislead or disguise the true nature of any transaction.
- Before making any payment for services or goods, we shall require documentation that the services were, in fact, provided or received.
- We shall accurately specify the services to be provided or benefits to be received in all contracts. All contracts will be reviewed before issuance consistent with policy directives.
- We shall take due care to assure that all claims submitted to any government programs or private health care program, individual, department or agency are accurate and conform to all pertinent Federal and State laws and regulations. We shall only submit claims that accurately reflect services or products actually rendered, are medically necessary and are supported by relevant documentation. Any type of inaccurate billing, whether it is intended or not, can subject Rochester Regional Health and the involved Staff member(s) to severe civil and criminal penalties. We shall only be entitled for reimbursement for products or services that have been delivered or performed, were medically necessary and are in accord with the customary charges for such products or services.

Any individual knowingly presenting or causing to be presented claims for payment or approval, which are false, fictitious or fraudulent will be subject to immediate termination.

For questions or concerns regarding recordkeeping or billing compliance, contact your supervisor. If you suspect or are aware of any violations, contact the Corporate Compliance Officer or Corporate Compliance Department at 585.922.9436 or utilize the confidential Rochester Regional Health Compliance Hotline at 877.647.6725 (toll free) or rrhcompliancehotline.alertline.com.

Illegal Referral Practices

Rochester Regional Health Staff members are stewards of the funds Rochester Regional Health receives from government sources to provide covered individuals with quality health care. There are a number of laws governing Medicare, Medicaid and other federal health programs. These laws prohibit the payment
of any form of remuneration in return for the referral of Medicare or Medicaid patients. It is also illegal to induce the purchase of goods or services by Medicare or Medicaid for such referrals.

The Federal Anti-Kickback Statute imposes criminal penalties on individuals and entities that knowingly and willfully seek or receive compensation in return for referring an individual or arranging for the provision of services for which payment may be made under a Federal health care program. The types of payments prohibited by the Statute include, but are not limited to, kickbacks, bribes and rebates.

The Federal Self-Referral Law (Stark Law) prohibits a physician with a financial relationship with an entity from providing any designated health service from referring Medicare and Medicaid patients to that entity unless the relationship or service qualified under Stark Law statutory exception. The Stark Law also prohibits an entity from billing the federal health care programs for items and services ordered by a physician who has a financial relationship with that entity.

To summarize these statutes:

- No Staff member shall solicit, receive, offer to pay or pay remuneration of any kind including rebates, kickbacks or bribes in exchange for referring, or recommending the referral of any individual to another person, hospital or medical facility of Rochester Regional Health for services, or in return for the purchase of goods or services to be paid for by Medicare or Medicaid.
- No Staff member shall offer or grant any benefit to a referring physician or other referral source on the condition that such physician or referral source refer or agree to refer any patients to a person or medical facility.
- No physician shall make referrals for designated health services to entities in which the physician has a financial interest either through ownership or a compensation arrangement.
- No physician shall bill for services rendered as a result of an illegal referral.

If you become aware of, or are involved in, a situation involving bribery, kickbacks or inappropriate referrals, it is your obligation to report it immediately to the Corporate Compliance Officer or Corporate Compliance Department at 922-9436 or utilize the confidential Rochester Regional Health Compliance Hotline at 877.647.6725 (toll free) or rrhcompliancehotline.alertline.com.

**Controlled Substances**

Many Staff members have routine access to prescription drugs, controlled substances and other medical supplies. Most of these substances are governed and monitored by specific regulatory organizations and must be administered by physician order. These items are to be handled properly and only by authorized individuals to minimize risk to Staff and patients. If you become aware of the diversion of drugs from any Rochester Regional Health facility, you should immediately report the issue to your immediate supervisor or manager. You may also report this into the confidential Rochester Regional Health Compliance Hotline at 877.647.6725 (toll free) or rrhcompliancehotline.alertline.com.

**Work Environment**

- Rochester Regional Health shall maintain a safe, accessible, and healthy patient treatment and work environment consistent with our values of quality, stewardship and compassion. We
commit to creating an environment that fosters safety, accessibility, security and comfort of patients, visitors and Staff.

- To protect the interest of our Staff and patients, Rochester Regional Health is committed to an alcohol and drug-free work environment. All Staff must report for work free of the influence of alcohol and illegal drugs. Reporting to work under the influence of any illegal drug or alcohol, having an illegal drug in your system, or using, possessing or selling illegal drugs while on work time or property may result in disciplinary action, up to and including termination of employment.

- Rochester Regional Health shall rigorously uphold all policies, procedures, laws, regulations, standards and practices intended to make the treatment of patients and work environment healthy and safe.

- Rochester Regional Health shall comply with regulations, reporting and monitoring procedures required by federal, state and local government agencies.

- Rochester Regional Health shall ensure that drugs and pharmaceuticals are safely stored, inventoried, and that missing drugs are promptly reported to the appropriate supervisor.

Community Involvement

Rochester Regional Health shall actively strive to be a good corporate citizen of every community in which we provide services or conduct business. We shall apply our corporate values vigorously and consistently in every community.

Rochester Regional Health encourages and respects the rights of its Staff members to become involved in various community service activities as they individually deem appropriate. Such activities; however, shall not interfere with the performance, by that Staff member, of his or her duties. In the performance of these service activities, special care must be taken that perceptions not be created that the person is acting on behalf of Rochester Regional Health.

Interactions in the Work Environment

Rochester Regional Health recognizes people as valued resources. Employee relationships built upon mutual respect are essential to achieving a high level of integrity in our work. Rochester Regional Health pledges that every employee will be treated and judged as an individual on the basis of qualifications without regard to, sex, color, race, creed, citizenship, ancestry, national origin, religion, marital status, sexual orientation, gender identity, and expression of political belief, military or veteran status, domestic violence victim status, predisposing genetic characteristics, disability or any characteristic or status protected by law. This pledge extends to all areas of the employment relationship, including hiring, promotion, benefits, training and discipline.

Rochester Regional Health is also committed to providing a work environment in which employees and others are free from harassment, discrimination and disruptive behavior. Employees who witness any of these prohibited activities are encouraged to report the alleged violation/observation to any Rochester Regional Health leader, the Chief Human Resource Officer (CHRO), the Chief Medical Officer, or the Rochester Regional Health Compliance Hotline (toll free: 877.647.6725 or rrhcompliancehotline.alertline.com). Any leader who receives a complaint or report of harassment,
sexual harassment or disruptive behavior and/or observes harassing, sexually harassing and/or disruptive behavior is required to report it to the Human Resource Director immediately.

For further information specific to harassment, please refer to the Anti-Harassment and Disruptive Behavior policy located within the Rochester Regional Health Human Resources Guide Standard Operating Procedures; Members of the Medical and Dental Staff (MDS) should also review the MDS Code of Conduct related to behavioral expectations and the MDS’ policy against harassment and disruptive behavior.

Employees are encouraged to express themselves freely and responsibly through established procedures. Complaints shall be treated as confidential information and shall be revealed only to those who need to know as part of an investigation or resolution process. Rochester Regional Health will not tolerate any interference, retaliation or coercion by an employee against any employee who expresses a complaint or concern.

We recognize and honor as valuable assets the diversity of employees and the richness of experience they bring to Rochester Regional Health. All employees are expected to observe the standards of our professions and exercise judgment and objectivity. Significant differences of professional opinion should be referred to Rochester Regional Health leadership for prompt resolution. All Staff shall show respect and consideration for one another, regardless of position, status or relationship.

**Political Activity**

Citizen participation in government is an essential element of our democracy. However, when we chose to participate in government through political activity, we must be certain that our activities are not viewed as activities taken on behalf of Rochester Regional Health. As a tax-exempt entity, Rochester Regional Health is strictly prohibited from participating in any political action and engaging in such activity could jeopardize its tax-exempt status. Accordingly, the following will apply:

- Rochester Regional Health respects the rights of Staff to be or not to be involved on an individual basis with political activities of their own choosing.
- When speaking publicly on such issues, Staff may not give the impression or appearance that they are speaking on Rochester Regional Health’s behalf.
- Staff members may hold public office as individuals, and not as representatives of Rochester Regional Health, provided that only personal time is used in carrying out the duties of such office and provided that the duties do not interfere with the duties of the Staff member for Rochester Regional Health. If you hold such a position, you must be sensitive that the position not actually or be perceived to conflict with the interests of Rochester Regional Health.
- No corporate funds may be used in connection with any political activity and no one may make contributions on behalf of Rochester Regional Health.
- No individual may be reimbursed in any manner for political activities.
- No Rochester Regional Health facilities may be used for political activity.
Social Media

Rochester Regional Health understands that social media has become an integral way for individuals to connect and share their experiences with family, friends and co-workers. However, use of social media also presents certain risks and carries with it certain responsibilities. In order to help you make responsible decisions about your use of social media, the following guidelines have been established:

- **Focus at work.** Refrain from using social media while on work time or on equipment provided by Rochester Regional Health, unless it is work-related as authorized by your supervisor. Do not use Rochester Regional Health’s email addresses to register on social networks, blogs or on other online tools utilized for personal use.

- **Engage in real life whenever possible when resolving conflict in the work environment.** Always be fair and courteous to Staff, patients, industry representatives or other people who work on the behalf of Rochester Regional Health. Keep in mind you are more likely to resolve work-related complaints by speaking directly with your coworkers or by utilizing the procedure described below for issues that should be reported to your Human Resources Business Partner or to the Corporate Compliance Officer.

- **Never share patient information over social media.** Even if you do not use specific details, such as the patient’s name, you could be violating state and federal laws that protect patient information.

- **Never share confidential business information over social media.** Do not post internal reports, policies, procedures or other internal business-related confidential communications that you learn about in connection with your Rochester Regional Health job duties and responsibilities.

- **Never represent yourself as a spokesperson for Rochester Regional Health unless specifically authorized to do so.** If Rochester Regional Health is a subject of the content you are creating, be clear and open about the fact that you are not speaking on behalf of Rochester Regional Health and that such content reflects only your own views and opinions.

- **Facts only please.** Make sure you are always honest and accurate when posting information or news, and if you are mistaken, correct it quickly. Never post unsubstantiated comments or information known to be false about Rochester Regional Health, fellow Staff members, customers, patients, partners, vendors or competitors.

- **Rochester Regional Health prohibits taking any negative action against any Staff for reporting a possible deviation from this Code of Conduct or for cooperating in an investigation.**

Adherence to these guidelines is important to ensuring responsible social media use. Any inappropriate postings that may include discriminatory remarks, harassment and threats of violence or similar inappropriate or unlawful conduct will not be tolerated and may subject you to disciplinary action up to and including termination.

Marketing and Communications

Rochester Regional Health marketing and communications practices shall be developed and implemented in a manner consistent with Rochester Regional Health’s purpose, vision and shared values. The heart of the marketing ethical standards is the guideline “Primum non nocere” — not knowingly to do harm. Rochester Regional Health’s marketing and communications ethical standards require Rochester Regional Health to:

---

**ROCHESTER REGIONAL HEALTH | Code of Conduct**

April 2024
• Respect the privacy of the patient – physician/caregiver relationship.
• Provide communications that are designed to inform and persuade but not to deceive.
• Present information and claims that are fair, complete and can be substantiated.
• Engage in sales activities that reject high-pressure tactics.
• Engage in fair and equitable pricing.
• Maintain research integrity by avoiding misrepresentation of pertinent data.

Education and Training

Every Staff member will have access to this Code of Conduct, which is located on the portal. New employee orientation includes guidance on where to navigate on the portal to find this Code. Ethics and corporate compliance education is included in the general orientation for all new hires and the annual mandatory topics for all current employees.

Compliance with the ethics listed in this Code of Conduct is the responsibility of all Rochester Regional Health Staff. Senior leadership, management, and supervisory staff have a particular responsibility in ensuring the modeling of the ethical behaviors to enhance our success. Adherence to the Rochester Regional Health Compliance Plan and this Code of Conduct will be an important measurement of success.

Conduct of Activities in Compliance with Fraud, Waste and Abuse Laws

Staff shall conduct all activities in compliance with applicable laws and regulations, including fraud and abuse laws, self-referral and anti-kickback prohibitions.

• Staff shall maintain impartial relationships with actual and potential vendors and contractors. We shall avoid exerting or appearing to exert influences on behalf of those with whom Rochester Regional Health does business or may do business because of friendship or any other relationship.
• All vendors and contractors who have or desire business relationships with Rochester Regional Health are mandated to abide by our organizational ethics. Rochester Regional Health employees having knowledge of vendors or contractors who violate these ethics in their relationship with Rochester Regional Health should report these to their supervisor or appropriate Human Resources Director.
• Staff should avoid selling merchandise or requesting donations for any purpose from employees or patients on Rochester Regional Health’s premises without specific prior approval by the senior leadership of the facility.
• Staff shall not condition any charitable gift or contribution made by Rochester Regional Health on an actual or potential business relationship with Rochester Regional.
• Donations offered to a Rochester Regional Health facility or on behalf of employees must be referred to the appropriate Foundation Director or to the senior leadership of that facility.
• Staff may not endorse any private product or private service on behalf of Rochester Regional Health.
Federal and State False Claims Laws

There are both federal and New York State criminal and civil laws pertaining to fraud and abuse in the submission of claims for payment or approval to federal and state governments and to private payers. These laws provide: (i) governmental authorities with broad authority to investigate and prosecute potentially fraudulent activities, (ii) criminal, civil and administrative penalties for fraudulent or abusive activities, and (iii) anti-retaliation provisions for individuals who make good faith reports of waste, fraud and abuse. A summary of these laws is set forth below.

Federal False Claims Act (“FCA”)

The FCA (31 U.S.C. section 3729) allows a civil action to be brought against any person who:
- knowingly presents, or causes to be presented, a false or fraudulent claim for payment
- knowingly makes, uses or causes to be made or used a false record or statement to get a false or fraudulent claim paid
- conspires to defraud the government by getting a false or fraudulent claim allowed or paid
- acts in reckless disregard of the truth or falsity of information

Examples of fraud include when an individual or entity purposely bills for a service that was never provided or for a service that has higher reimbursement than the actual service produced. Fraud may also include failing to repay any known overpayment. Abuse may include a range of improper behaviors or billing practices, including: billing for a non-covered services, misusing codes on the claim or inappropriately allocating costs on a cost report.

Violation of the FCA is punishable by a civil penalty of between $13,946 and $27,894 per false claim, as well as an assessment of up to three times the amount claimed as damages sustained by the government (treble damages). The FCA is enforced by the Attorney General of the United States, who is required to investigate violations. It also permits private persons to bring suit on behalf of the United States and entitles the private persons bringing suit to receive a percentage of monies obtained through settlements, penalties and/or fines collected in such action. Actions brought by private persons, or “relators” for violations of the FCA are known as “qui tam” actions. If a qui tam action brought by a relator is frivolous or commenced in order to harass the defendant, the relator may be liable to pay the defendant’s fees and costs associated with such action.

Federal Whistleblower Protection

The FCA protects relators or whistleblowers from retaliatory actions by Rochester Regional Health. The FCA specifically provides that any employee, contractor, or agent who is discharged, demoted, suspended, threatened, harassed or in any manner discriminated against in the terms and conditions of employment because of reporting violations of the FCA will be entitled to reinstatement with seniority, double back pay, interest, special damages sustained as a result of discriminatory treatment and attorney’s fees and costs. (See 31 U.S.C. §§3729-3733).

Program Fraud Civil Remedies Act of 1986

The Program Fraud Civil Remedies Act (PFCRA) provides for the imposition of administrative remedies on any person who makes, presents or submits (or causes to be made, presented or submitted) to
certain federal agencies a claim or statement that the maker knows or has reason to know: (i) is false, fictitious or fraudulent; or (ii) includes or is supported by any written statement which asserts a material fact which is false, fictitious or fraudulent; or (iii) includes or is supported by any written statement which omits a material fact, is false, fictitious or fraudulent because of the omission and is a statement in which the person or entity has a duty to include such material fact; or (iv) is for the provision of items or services which the person or entity has not provided as claimed. (See 31 U.S.C. § 3801 – 3812).

The PFCRA authorizes the imposition of federal administrative charges. It imposes on any person who submits, or causes to be submitted, a false claim or a false statement a civil penalty of up to $13,507 for each wrongfully filed statement or claim, regardless of whether property, services, or money is actually delivered or paid. If any payment is made, property is transferred, or services are provided in reliance on a false claim, the person submitting it is also subject to an assessment of not more than twice the amount of the false claim. This assessment is in lieu of damages sustained because of the false claim.

New York False Claims Act

New York State Finance Law makes it unlawful in the State of New York for a person or entity to commit any of the fraudulent acts set forth in the federal False Claims Act. The New York False Claims Act (“the Act”) also makes it unlawful for a person or entity to: (i) have property or money of the State or local government and, with the intent to defraud or willfully conceal the property or money, deliver less property or money than the amount stated in the receipt; (ii) make or deliver a document certifying receipt of property without completely knowing that the information on the receipt is true; or (iii) knowingly buy or accept unlawfully sold public property from a State or local government employee or officer. (See New York State Finance Law §§187-194)

The term “knowingly” is defined under the Act with language identical to that of the FCA. Proof of specific intent to defraud is not required, provided that acts occurring by mistake or as a result of mere negligence do not subject a person to liability.

For the commission of any single fraudulent act, the actor shall be liable to the State for a civil penalty of between $6,000 and $12,000, and to either the State or local government for three times the amount of damages each sustained as a result of the fraudulent act.

Civil enforcement actions under the Act are commenced by either the Attorney General of the State of New York, by any local government, or by any private person who brings an action on behalf of the State or any local government. A private person who brings an action on behalf of the United States may be entitled to receive a percentage of monies obtained through settlements, penalties and/or fines collected in such action. The Act also provides protection to qui tam relators (individuals who commence a False Claims action) who are discharged, demoted, suspended, threatened, harassed or in any other manner discriminated against in the terms and conditions of their employment as a result of their furtherance of an action under the Act. Remedies include reinstatement with comparable seniority as the qui tam relator would have had but for the discrimination, two times the amount of any back pay, interest on any back pay, and compensation for any special damages sustained as a result of the discrimination, including litigation costs and reasonable attorneys’ fees.

1 Amounts applicable to PFCRA penalties as of February 9, 2024; penalty amounts are adjusted periodically.
New York Social Services §§145, 145-b and 145-c

Section 145 of the Social Services Law makes it a misdemeanor to submit false statements or deliberately conceal material information in order to receive public assistance, including Medicaid. Section 145-b of this statute declares it unlawful to knowingly make a false statement or representation (or by deliberate concealment of any material fact or other fraudulent scheme or device) to attempt to obtain, or to obtain, payment from public funds for services or supplies furnished under the New York State Medical Assistance Program. The local social services district has the right to recover civil damages equal to three times the amount by which the figure is falsely overstated or $5,000, whichever is greater.

In addition, under Section 145-b, the New York State Department of Health may impose a civil monetary penalty up to $10,000 for each item unless there was a violation within the previous five years and those penalties will be up to $30,000 per item, as restitution to the Medical Assistance Program, if the person or entity knew, or had reason to know that: (i) the payment related to care, services or supplies were medically improper, unnecessary or in excess of the documented medical needs of the person to whom they were furnished; (ii) the care, services or supplies were not provided as claimed; (iii) the person who ordered or prescribed care, services or supplies which were medically improper, unnecessary or in excess of the documented medical need of the person to whom they were furnished was suspended or excluded from the Medical Assistance Program at the time the care, services or supplies were furnished; or (iv) the services or supplies for which payment was received were not, in fact, provided.

Section 145-c of the Social Services Law states that if a person applies for or receives public assistance, including Medicaid, by intentionally making or intending to make a false or misleading statement, the needs of the individual or that of his/her family shall not be taken into account for the purpose of determining his/her needs or that of his/her family for six months if a first offense, for 12 months if a second offense (or if benefits wrongfully received are at least $1,000 but not more than $3,900), for 18 months if a third offense (or if benefits wrongfully received are in excess of $3,900), and five years for any subsequent occasion of any such offense.

New York Public Health §238-a

With certain limited exceptions, this statute prohibits the submission of Medicaid claims which are the result of a referral from a health care provider or a referring practitioner to a health care service provider (clinical laboratory services, pharmacy services, radiation therapy services, physical therapy services or X-ray or imaging services) who has a financial or familial relationship with the health care provider or referring practitioner.

New York Labor Law §§740 and 741

Section 740 of the Labor Law prohibits any retaliatory behavior by an employer to discharge threaten, penalize, or in any other manner discriminate against an employee, former employee, or independent contractor including (i) adverse employment actions, or threats to take such adverse employment actions, against an employee in the terms of conditions of employment including but not limited to discharge, suspension, or demotion; (ii) actions or threats to take such actions that would adversely impact a former employee’s current or future employment; or (iii) threatening to contact or contacting United States immigration authorities or otherwise reporting or threatening to report an employee’s suspected citizenship or immigration status or the suspected citizenship or immigration status of an employee’s
family or household member to a federal, state or local agency. An employer may not take such retaliatory action against an employee who: (a) discloses, or threatens to disclose to a supervisor or to a public body an activity, policy or practice of the employer that the employee reasonably believes is in violation of law, rule or regulation or that the employee reasonably believes poses a substantial and specific danger to the public health or safety; (b) provides information to, or testifies before, any public body conducting an investigation, hearing or inquiry into any such activity, policy or practice by such employer; or (c) objects to, or refuses to participate in any such activity, policy or practice.

The law allows employees so treated to bring a civil action for: (i) injunction relief to restrain continued retaliation; (ii) reinstatement to the same or equivalent position held before the retaliatory action or front pay in lieu thereof; (iii) reinstatement of benefits and seniority; (iv) compensation for lost wages, benefits and other remuneration, and (v) the payment of reasonable costs, disbursements, and attorney’s fees. In addition to the foregoing remedies, employers who are found to have acted in bad faith in a retaliatory action may be fined up to $10,000, and/or be required to pay punitive damages if the violation was willful, malicious, or wanton. The protections of this statute are available two years from the date of the retaliatory action and if the employee has notified his supervisor of the violation of the law and has afforded the employer a reasonable opportunity to correct such activity, policy or practice. Employer notification is not required if (a) there is an imminent and serious danger to the public health or safety; (b) the employee reasonably believes that reporting to the supervisor would result in a destruction of evidence or other concealment of the activity, policy or practice; (c) such activity, policy or practice could reasonably be expected to lead to endangering the welfare of a minor; (d) the employee reasonably believes that reporting to the supervisor would result in physical harm to the employee or any other person; or (e) the employee reasonably believes that the supervisor is already aware of the activity, policy or practice and will not correct such activity, policy or practice.

Employers shall inform employees of their protections, rights and obligations under this section, by posting a notice in conspicuous and easily accessible places customarily frequented by employees and applicants for employment.

Section 741 of the Labor Law prohibits a health care employer from taking any retaliatory action against an employee if the employee (a) discloses or threatens to disclose to a supervisor, to a public body, to a news media outlet, or to a social media forum available to the public at large, an activity, policy or practice of the employer or agent that the employee, in good faith, reasonably believes constitutes improper quality of patient care or improper quality of workplace safety; or (b) objects to, or refuses to participate in any activity, policy or practice of the employer or agent that the employee, in good faith, reasonably believes constitutes improper quality of patient care or improper quality of workplace safety.

The employee’s disclosure is protected only if the employee first brought the improper quality of patient care or improper quality of workplace safety to the attention of a supervisor and afforded the employer a reasonable opportunity to correct such activity, policy or practice, unless the danger is imminent to the public or patient or employee and the employee reasonably believes in good faith that reporting to a supervisor would not result in corrective action. If an employer takes a retaliatory action against the employee, the employee may sue in state court for reinstatement to the same, or an equivalent position, any lost back wages benefits and other remuneration, reinstatement of full fringe benefits and seniority rights, and attorneys’ fees. If the employer is a health provider and the court finds that the employer’s retaliatory action was in bad faith, it may impose a civil penalty of $10,000 and/or require the employer to pay punitive damages if the violation was willful, malicious, or wanton. The protections of this statute are available two years from the date of the retaliatory action.
New York Social Services §366-b

This statute identifies which acts constitute fraudulent practices. Any person who, with intent to defraud, presents for allowance or payment any false or fraudulent claim for furnishing services or merchandise, knowingly over-bills for services or merchandise, or knowingly submits false information to obtain authorization to furnish services or merchandise shall be guilty of a class A misdemeanor (or a violation if so prescribed by a provision of the New York Penal Code). In addition, any person who, by false statement or with deliberate concealment of material facts or by impersonation or other fraudulent method, helps or attempts to help another person obtain medical assistance to which such latter person is not entitled shall be guilty of a class A misdemeanor (or a violation if so prescribed by a provision of the New York Penal Code).

NY Not-for-Profit Corporation Law § 715-B

No director, officer, employee or volunteer of Rochester Regional Health who in good faith reports any action or suspected action taken by or within Rochester Regional Health that is illegal, fraudulent or in violation of any adopted policy of the corporation shall suffer intimidation, harassment, discrimination or other retaliation or, in the case of employees, adverse employment consequence.

New York Penal Law Article 175

Four crimes in this law relate to filing false information or claims and have been applied in Medicaid fraud prosecutions:

1. §175.05 - Falsifying business records involves entering false information, omitting material information or altering an enterprise’s business records with the intent to defraud. It is a class A misdemeanor.
2. §175.10 - Falsifying business records in the first degree includes the elements of the §175.05 offense and includes the intent to commit another crime or conceal its commission. It is a class E felony.
3. §175.30 - Offering a false instrument for filing in the second degree involves presenting a written instrument, including a claim for payment, to a public office knowing that it contains false information. It is a Class A misdemeanor.
4. §175.35 (class E felony) - Offering a false instrument for filing in the first degree includes the elements of the second degree offense and must include an intent to defraud the state or a political subdivision. It is a class E felony.

New York Penal Law Article 176

This law applies to claims for insurance payments, including Medicaid or other health insurance, and contains six crimes. The penalty ranges from a class A misdemeanor for intentionally filing a health insurance claim knowing it is false to a class B felony for filing a false insurance claim for over $1 million.

New York Penal Code Article 177

This statute makes it a crime to commit “health care fraud,” an act which is defined as any time a person who, with the intent to defraud a private or public health plan, knowingly and willfully provides
materially false information or omits material information for the purpose of receiving payment for health care items or services that the person or entity is not otherwise entitled to receive. The penalty for the commission of health care fraud ranges from a class A misdemeanor to a class B felony, based upon the amount of payment fraudulently obtained from a single health plan during a one-year period.

New York Penal Law Article 155

This penal law addresses the crime of larceny, which applies to a person who, with intent to deprive another of his/her property, obtains, takes or withholds the property by means of trick, embezzlement, false pretense, false promise, including a scheme to defraud, or other similar behavior. This statute has been applied to Medicaid fraud cases. Depending on the value of the property, the crime ranges from a class E felony to a class B felony.

The Policies and Procedures of Rochester Regional Health are intended to detect and prevent fraud, waste and abuse in its system, including waste, abuse and fraud in the federal and state health care programs.

Rochester Regional Health’s Policy for the Detection and Prevention of Fraud, Waste and Abuse

In compliance with the Social Security Act (as amended in the Deficit Reduction Act of 2005), Rochester Regional Health, strives to provide detailed information to all of its employees and agents on the False Claims Act, federal administrative remedies for false claims, New York laws pertaining to civil and criminal penalties for false claims, and whistleblower protections contained in such statutes.

Rochester Regional Health requires all employees, directors, officers, volunteers, agents, contractors and professional staff members, and Medicaid Patients to report suspicions of fraud, waste, or abuse and educates all of its employees and agents to enable them to detect, prevent, and report suspected incidents of fraud, waste, and abuse.

Rochester Regional Health prohibits any employee from intentionally or recklessly submitting a claim which includes fraudulent information or is based on fraudulent documentation to any federally-funded or state-funded program for payment approval.

Any Rochester Regional Health participant who violates, or encourages, directs, facilitates, or permits violations of applicable laws, regulations, Rochester Regional Health Code of Conduct or its policies and procedures will risk individual indictment, criminal prosecution and penalties, and civil actions for damages and penalties. Moreover, that individual also subjects Rochester Regional Health to the same risks and penalties. Any Rochester Regional Health participant who violates any of these requirements may be subject to discipline, up to and including immediate termination.

Procedures

Persons covered by this policy who suspect fraud, waste, or abuse are required to fully report this to their immediate supervisor or other manager in the chain of command, or directly to Corporate Compliance. If reporting to the supervisor or other manager in the chain of command and discussing the potential issue with him/her does not resolve the concern, then the person making the report and the
supervisor/manager are required to fully report the concern directly to Corporate Compliance. In addition, persons covered by this policy are required to cooperate with Corporate Compliance as Corporate Compliance investigates and resolves potential compliance issues. This report will be forwarded to the Rochester Regional Health Compliance Officer or Rochester Regional Health Compliance Director by the supervisor for review and follow-up or referral.

An employee or agent may confidentially call the Rochester Regional Health Compliance Officer at 585.922.9436 or the Rochester Regional Health Compliance Department at 585.922.5527 to report or schedule a meeting for any potential compliance concerns or incidents. There will be appropriate follow-up by the Rochester Regional Health Compliance Officer and/or Compliance Director or a designee appointed.

Any employee or agent may also report perceived incidents of fraud, waste, or abuse on an anonymous and/or confidential basis by utilizing the Rochester Regional Health Compliance Hotline at 877.647.6725 (toll free) or rrhcompliancehotline.alertline.com. The individual may remain anonymous, but must provide information sufficient to facilitate an appropriate investigation. If he/she chooses to remain anonymous, the individual is asked to identify him/herself with a code word/number. An individual that has made a report may access the Hotline to review feedback on his/her allegations. It should be known that during the investigation evidence can be produced that requires the reporter’s anonymity to be relinquished. At all times, your privacy and confidentiality will be respected. Compliance Hotline reports can only be accessed by the Rochester Regional Health Compliance Officer and Rochester Regional Health Compliance Director or designee appointed.

Upon receiving reports of suspected noncompliance, the Compliance Officer will initiate an investigation to ascertain whether or not a violation of applicable law has occurred. If a violation has occurred, corrective action steps will ensue immediately.

An individual also has the right to report his or her suspicions to the appropriate government agency. There will be no adverse action, intimidation or retribution taken against any participant for good faith participation in the compliance program, including but not limited to reporting potential issues, investigating issues, self-evaluations, audits and remedial actions, and reporting to appropriate officials or providing information to, or for testifying before any public body conducting an investigation, hearing or inquiry into any such violation as provided in Sections 740 and 741 of the New York State Labor Law. Remedies include reinstatement with comparable seniority as the participant would have had before the discrimination, two times the amount of any back pay, interest on any back pay, and compensation for any special damages sustained as a result of the discrimination, including litigation costs and reasonable attorneys’ fees. Any substantiated adverse action, intimidation and or retribution will result in disciplinary action, up to and including termination of employment. The Compliance Officer or their designee will investigate all reports of potential adverse actions, retaliations or intimidation.

Additional Rochester Regional Health Policies and Procedures Pertaining to the Detection and Prevention of Fraud, Waste, and Abuse

In addition to the foregoing Policy and Procedures, certain departments and affiliates of Rochester Regional Health have adopted additional policies and procedures intended to prevent fraud, waste, and abuse. Employees should contact their supervisors or managers to discuss any of these additional policies and procedures that may be relevant to their positions.
Reporting Misconduct

If you become aware or believe a violation of this Code of Conduct has occurred by anyone working for or on behalf of Rochester Regional Health, you should report it immediately, fully, and objectively to your supervisor and/or the affiliate Director of Human Resources. Members of the Medical and Dental Staff should consult the MDS Code of Conduct for other reporting options related to harassment and disruptive behavior. However, you may wish to report any perceived violations on a strictly anonymous basis by following this procedure:

Contact the anonymous Rochester Regional Health Compliance Hotline at 877.647.6725 (toll free) or rrhcompliancehotline.alertline.com.

The Corporate Compliance Department will investigate the source of the concern, and follow-up with you, at your request. At all times, your privacy and confidentiality will be respected and protected. You can never be wrong in truthfully reporting conduct that you believe or view as questionable.

Rochester Regional Health is committed to ensuring that this Code of Conduct is enforced and that violations will result in the imposition of appropriate disciplinary measures up to and including the termination of employment or affiliation with Rochester Regional Health.
INDEX

Assets ............................................................... 12
Acceptable Use Policies ................................. 13
IT resources ...................................................... 12
Licensed software ......................................... 12
User IDs and passwords ................................. 13
Care of Patients .............................................. 14
Clinical Activities ........................................ 21
Community Involvement ................................. 18
Confidentiality Principles ................................. 15
Conflict of Interest
Policy .............................................................. 4, 5, 8
Standards ......................................................... 4, 5, 7, 13, 14, 18, 19, 20
Controlled Substances ..................................... 17
Education and Training .................................... 21
Ethics ................................................................. 4, 21
False Claim Laws
Federal ................................................... 16, 17, 22
New York State ........................................... 11, 22, 23, 24, 26, 27, 28
Program Fraud ................................................ 22
Federal Award .................................................. 10
Fraud, Waste and Abuse ................................. 27
Procedures .................................................. 19, 27, 28
Reporting Misconduct ..................................... 29
Gifts ................................................................. 11
Patients and family ......................................... 11
Referral sources ............................................. 11, 12
Vendors ....................................................... 11, 12, 20, 21
Illegal Referral Practices ................................. 16
Marketing and Communications ..................... 20
Mission .......................................................... 4, 12, 20
Open Payments .............................................. 5
Political Activity ............................................. 19
Privacy ........................................................... 15
Employee ..................................................... 15, 18
Patient .......................................................... 14, 15
Purchasing Relationships, Industry
Purchasing ..................................................... 9
Quality ........................................................... 13
Recordkeeping and Billing Compliance ............ 16
Relationships, Industry .................................... 6
Clinical Care .................................................. 10
Consulting ..................................................... 8
Industry Representatives ............................... 6
Medical Education ......................................... 6, 7
Pharmaceutical ............................................. 6
Research ........................................................ 10
Sponsored Program ......................................... 7, 9
Travel ............................................................ 9
Social Media .................................................. 13, 20
Sponsored Program
Scholarships .................................................. 9
Values .......................................................... 4, 16, 17, 18, 20
Vendor-Sponsored Events ............................... 11
Work Environment ......................................... 17, 18