

MJHS/Elderplan Code of Conduct



Dear Colleagues,

Life is full of codes. Some are silently passed from one generation of family or friends to the next. Others are created and updated solely to keep us as safe, healthy and happy as possible. At MJHS, our code of conduct is public and based on our organization's long legacy of caring—for each other, as well as for those we serve. It is also built on our core values of commitment, caring, respect, excellence, honesty, accountability, sustainability and leadership.

We have established a reputation for providing quality health care and, in the case of the health plans, quality benefits and services. How? By following the standards and requirements of this code of conduct.

This short, yet important booklet offers all of us a roadmap to maintaining our collective high standards and expectations. Filled with much more than a list of "to-dos and to-don'ts," our code of conduct includes true workplace scenarios and offers realistic, ethical solutions to a variety of situations. A series of questions and answers are also in each section. These are meant to create a framework for the underlying principle that, when in doubt, we should always take the high road and act with integrity.

One of the most important aspects of our code is that there is no retaliation against, or retribution toward, anyone who calls attention to any activity that does not uphold our core values, or our commitment to our mission, the people we serve and each other. In health care, trust is invaluable. That is why our non-retaliation policy is in place—to protect those who speak up when something needs to be corrected or improved.

Like a lot of codes, ours has withstood the test of time. Read the words carefully; make them part of your workplace DNA. Keep the code handy for future reference — so you may refer to it as needed. And, because we all work closely together, please encourage your colleagues to do the same.

Guided by our shared mission, values and the principles outlined in the code of conduct, we are confident that MJHS will remain the go-to resource for health care and health plans for generations of New Yorkers to come.

Sincerely,

David Wagner President & CEO

Preface

The MJHS/Elderplan Code of Conduct serves as our guide for legal, moral and ethical behavior in the workplace and for understanding expectations. It is a compass by which each of us can make good decisions and is an important part of the MJHS/Elderplan Compliance Program. The Code of Conduct applies to all of the MJHS participating agencies and their programs, including both provider agencies and the health plan (Elderplan).

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The MJHS/Elderplan Code of Conduct

The framework for providing the programs and services of MJHS/Elderplan (the organization) is contained in this Code of Conduct (the Code). It is our commitment to professional integrity, legal compliance and ethical conduct. The Code is a key part of our larger Compliance Program. The Code is a summary of MJHS/Elderplan standards of conduct and compliance policies and procedures. See MJHS/Elderplan's Compliance and Human Resources sections of the Policy and Procedures Manager (PPM) for detailed policies and procedures.

The Code gives us foundational values and standards and is built on the premise that we all know right from wrong. This means making our decisions and choosing our actions based on what we know to be right, according to all applicable laws and regulations, and according to the policies and procedures we all agree to follow as employees and associates of MJHS/Elderplan.

The Code cannot contain all of the rules, policies and procedures we are each required to follow. It does not outline every possible situation in which the right course of action is not crystal clear. But it does give concrete guidance in specific areas and guiding principles to consider in other situations.

Definition: The Code

Throughout this document, references to the Code of Conduct, or just "the Code," encompass MJHS/Elderplan's commitment to a culture of integrity, and compliance with all applicable federal and state laws, statutes, regulations and sub-regulatory guidance, contractual commitments and MJHS/Elderplan policies and procedures.

Mission Statement and Core Values

A fundamental basis of ethical behavior lies in mores, beliefs and values. MJHS/Elderplan's mission and core values serve as cornerstones for the Code.

Our Mission Statement

"Rooted in Jewish values and traditions and consistent with the highest standards of quality care, MJHS/Elderplan seeks to be the premier provider of health services in the Greater Metropolitan Area, ensuring access to health, supportive and community-based services across the continuum of need."

Employee compliance with the Code ensures our actions support our mission.

Our Core Values

MJHS/Elderplan leadership created a list of "core values," which are the building blocks of how employees should perform, interact with each other and aim to fulfill MJHS/Elderplan's mission.

Each core value is a "brick" employees must use to build and solidify MJHS/Elderplan's structure of excellence. Our eight core values include:

- **Commitment**—our mission and values always come first. We are dedicated to those we serve, to each other, to the community and to our business partners
- Caring—we show we care by listening, guiding, supporting and communicating with concern and kindness in all of our interactions
- **Respect**—we welcome the opinions, values and beliefs of others. We appreciate the contributions of our staff at all levels

- **Excellence**—we expect everyone to give the best care and service possible
- **Honesty**—we are truthful in what we do and what we say. We insist on the same from others. We speak up when something does not seem right
- Accountability—we are responsible for our actions regardless of the outcome
- **Sustainability**—we honor the goals, actions and decisions that affect MJHS/Elderplan's continued success. As both individuals and members of the MJHS/Elderplan family, we are committed to the future of our programs and services
- **Leadership**—we are self-starters and motivate others by our initiatives

Who Must Follow the MJHS/Elderplan Code of Conduct?

For the Code to be effective, everyone needs to know, understand and follow its standards and requirements. This includes all employees, volunteers, interns, officers and Board Members of MJHS/Elderplan. We also expect our first tier, downstream and related entities (FDR), consultants, contractors, temporary employees and other business partners to follow these guidelines. Failure to do so may result in disciplinary action against an employee and/or termination of a business relationship.

If you become aware of a potential violation of this Code, the law or our policies—it is your duty to report it in a timely manner. If you are ever in doubt about the Code or potential violations of the Code, ask for help. Following this Code is everyone's responsibility and enables us to deliver on our mission.

We are all in this together!

Non-Retaliation

MJHS/Elderplan maintains a strict policy of nonintimidation and non-retaliation for good faith participation in its Compliance Program, including, but not limited to: reporting potential issues, investigating issues, conducting self-evaluations, audits and remedial actions, and reporting to appropriate officials.

When you report potential or actual noncompliance, your report will be kept confidential to the extent permitted by law and to the extent possible consistent with our obligation to investigate and resolve your report. If you report through the Compliance Hotline, the Intranet Hotlink or electronic form at www.mjhs.org, you can choose to remain anonymous. (See the Compliance Reporting box below.)

Please know that if you report a potential or actual compliance issue in good faith, we will protect you in accordance with our non-retaliation policy. Any MJHS/Elderplan employee who engages in intimidation and retaliation will be subject to disciplinary action up to and including termination. For more information see the Non-Retaliation Policy and the Company Employee Handbook.

Compliance Contacts

How to Report a Potential Compliance Issue, Including Fraud, Waste and Abuse (FWA)

All employees, officers, Board Members and other persons affiliated with MJHS/Elderplan have a duty to immediately report potential compliance issues, which include suspected fraud, waste and/or abuse. You have several ways to report a suspected violation:

- Contact your supervisor who has an obligation to, in turn, report the suspected violation to Compliance or Human Resources (for Human resources-related issues)
- Contact the Corporate Compliance Officer at (718) 921-7971
- Contact the Elderplan Compliance Officer at (718) 759-4458 (for Elderplan related issues)
- Contact Human Resources staff (for Human Resources related issues)
- Use the Compliance Hotline, **(855) 395-9169**, the Hotlink (see Intranet) or the Compliance website form at **www.mjhs.org/compliance** to anonymously report an issue
- Contact the Elderplan Special Investigations Unit (SIU) for member, provider and vendor related FWA incidents

Code of Conduct vs. Employee Handbook

If you have reviewed your Employee Handbook, some of what you read here should be familiar. Both describe certain circumstances where compliance questions arise with some frequency. Here is the main difference between the two documents. The Code of Conduct's topics and examples address

common broad legal and ethical situations that may arise at MJHS/Elderplan, which may include human resources issues. In contrast, the Employee Handbook emphasizes our human resource policies and procedures and our expectations for behaviors related to employment and co-workers.

The MJHS/Elderplan Compliance Program

MJHS/Elderplan maintains a Compliance Program as one of its good business practices. It provides the foundation for supporting our legal, ethical and moral behavior. It contributes to us being a valued and trusted company in the community. In addition, MJHS/Elderplan contracts with certain federal and state government agencies to provide or administer health care and services for our patients/members. We provide or administer these services to patients/members in accordance with MJHS/

Elderplan's contractual and regulatory requirements as set forth by those governing federal and state agencies. The MJHS/Elderplan Compliance Program includes compliance with the Code of Conduct, helps ensure that MJHS/Elderplan has systems and processes in place to be compliant with the laws, regulations, regulatory guidance and contract provisions that we are required to follow. Everyone has a role to play in making our Compliance Program effective.





Leadership Role In Compliance

MJHS/Elderplan leaders are essential to the Compliance Program. They are role models of compliant and ethical behavior and promote an environment of integrity and trust within their departments by:

- Encouraging staff to be accountable for their actions and holding them to it
- Expecting staff to promptly report any errors so

they can be corrected in the right way. In doing so they understand and consider that sometimes people make mistakes

- Promoting a culture of transparency and open communication
- Talking about relevant compliance issues at staff meetings and providing compliance education on a regular basis

Your Responsibilities and Obligations

The first step is to understand that we are all responsible for and obligated to help prevent, detect and correct instances of potential non-compliance. To make sure we are able to recognize and properly handle potential non-compliance issues, MJHS/ Elderplan is committed to:

- All-employee compliance training
- Job-specific training and education
- Implementing our policies and procedures
- Enforcing our standards through disciplinary actions
- Routine auditing and monitoring

- Promptly responding to and correcting non-compliance
- Communicating on general and specific compliance topics
- Reporting compliance activities to the Compliance Committees and Boards of Directors
- Proactively monitoring performance in meeting regulatory standards, and self-disclosing noncompliance to federal and state regulators
- Requiring our first tier, downstream and related entities, vendors and contractors to adhere to a Code of Conduct, government requirements and to report potential non-compliance, including fraud, waste and abuse to MJHS/Elderplan

5 Things You Need To Know About Compliance

- 1. We are all responsible for compliance and are obligated to report potential compliance issues.
- 2. If you don't understand something, speak up!
- 3. If you suspect a compliance issue, report it!
- 4. All reports are investigated and treated confidentially.
- 5. Anyone who makes a report in good faith will be protected from retaliation and intimidation.

Fraud, Waste and Abuse

Fraud, waste and abuse (FWA) are special types of compliance issues. FWA is a big concern in the health care system, including Medicare and Medicaid programs, and we are obligated to report any FWA issues we see in our day-to-day jobs. FWA can be committed by providers, brokers, health plans, pharmacies, pharmacy benefit management companies, our members and even our fellow employees.

In addition, it is illegal to knowingly present, or cause to be presented, a false or fraudulent claim or statement to the government, as stated in the False Claims Act. False claims, fraud, dishonesty or criminal conduct of any sort on the part of any employee, officer, director or anyone doing business with MJHS/Elderplan will not be tolerated.

The Definition of Fraud, Waste and Abuse

Fraud. An intentional deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to himself or some other person. It includes any act that constitutes fraud under applicable federal or state law.

Examples: Double-billing, forging or altering prescriptions and billing for more expensive procedures than were actually provided.

Waste. To use health care benefits or spend health care dollars in a careless or needless manner.

Examples: Duplicative tests and procedures; preventable hospital readmissions; and medical errors.

Abuse. Practices that are inconsistent with sound fiscal, business or medical practices, and result in an unnecessary cost to the Medicare, Medicaid or MJHS/Elderplan programs.

Examples: Reimbursement for services that are not medically necessary or that fail to meet professionally recognized standards for health care.





MJHS/Elderplan Fraud, Waste and Abuse (FWA) Program

As part of the overall Compliance Program, MJHS/Elderplan conducts various anti-fraud activities. At Elderplan, parts of the FWA program are administered by the Special Investigations Unit (SIU), including investigations of member, provider and vendor FWA. The purpose of the FWA program is to increase awareness of and improve prevention and detection of health care fraud. MJHS/Elderplan cooperates with regulatory and law enforcement

agencies in their investigation and prosecution of health care fraud. These efforts are making a difference. Every MJHS/Elderplan employee is trained on FWA when newly hired and Elderplan employees must take a refresher course every year as part of the required compliance trainings. Our vigilance in this area can help protect MJHS/ Elderplan and maintain the quality and affordability of health care.

Delivering quality care or abusing the system?

- Q. I've noticed one physician orders the same extensive lab work on every Elderplan member regardless of the member's diagnosis. Is he just being extra thorough or is this an issue?
- A. You need to report this so we can find out. Ordering and getting reimbursed for unnecessary tests is not permitted and may be abuse.

Coding effectively or expediently?

- Q. The Billing department recently hired a new employee who I have seen using the same code for similar, but different services. I have tried to educate her to use the correct codes, but she keeps using the wrong codes. I do not want to get her in trouble. What should I do?
- A. You need to report this to your manager to ensure that your co-worker uses correct codes. Billing codes determine how much money MJHS will be reimbursed by Medicare, Medicaid and private insurance companies for the services provided. Using the wrong code can result in less or more revenue than MJHS is entitled. (Overpayments must be repaid to Medicare and Medicaid right away).

What if I see fraud outside of MJHS/Elderplan?

- Q. I was at a meeting with a broker and I learned that he misrepresented Elderplan to a member. What do I do?
- A. Bring this to your manager's attention immediately. If it was an honest mistake, that's one thing. If it's a pattern of fraudulent behavior, that's something very serious.

Workplace Conduct and Employment Practices

MJHS/Elderplan recognizes people as our greatest asset. The organization's ability to deliver quality patient/member care and services is directly related to the skills and abilities of our employees. We are committed to fair practices and welcome cultural diversity in the workplace.

MJHS/Elderplan will not tolerate acts of discrimination. All employees are treated with respect, regardless of race, color, national origin, ancestry, religion, sex, age, disability, citizenship, marital status, creed, genetic predisposition or sexual orientation. This policy applies to recruitment, placement, promotions, transfers, retention, compensation, benefits, training,

reduction in workforce, attendance, discipline, discharge, retirement, pension policies, human resources' programs and activities, policies and conditions of employment. MJHS/Elderplan leaders are responsible for assuring that this policy is followed at all times and that all employees know about and understand this policy.

At MJHS/Elderplan, each of us has the right to work in an environment free of harassment, intimidation and workplace violence. Accordingly, we prohibit any behavior that creates an intimidating, hostile or offensive work environment. If you observe or experience any form of harassment or violence, you should report the incident immediately.

Patient/Member Quality Care and Rights

Our primary mission is to provide quality health care and services to our patients/members. We treat all patients/members with respect and dignity, and provide or arrange for care and services that are both necessary and appropriate. In the care and services we provide, we do not discriminate based on race, color, national origin, ancestry, religion, sex, age, disability, citizenship, marital status, creed, genetic predisposition or sexual orientation or source of payment for care. While we strive to render or arrange for care and services in an efficient manner, clinical care decisions are not based on patient/member financial means or business economics, nor are member enrollment decisions based on beneficiary health conditions.

MJHS/Elderplan has a comprehensive program to promote the quality of patient/member care and measure its effectiveness. MJHS/Elderplan

monitors quality in numerous ways, including review of patient/member outcomes, implementing national initiatives related to patient/member safety and quality, and through patient/member satisfaction surveys. MJHS/Elderplan also compares the quality of its services against national standards and benchmarks in an effort to identify ways to continually improve the quality of our care and services. This establishes standards of care and services that reflect best practices, such as:

- Providing care to our patients/members with respect for their values, beliefs and cultures
- Showing we care by listening and communicating with kindness
- Helping patients/members make informed decisions about their health
- Protecting the dignity of our patients





Conflict of Interest

A conflict of interest occurs when you or a relative have employment outside of MJHS/Elderplan (or other activities or relationships) that creates an actual or potential conflict in your ability to do your job, and in particular, your ability to influence or make an objective decision that is in MJHS/Elderplan's best interest. Simply put, any such activities and relationships are not allowed without prior disclosure of the conflict and receipt of consent from MJHS/Elderplan for such employment or the making of any decision. Any questions or concerns about a conflict of interest must be discussed with Human Resources staff or the Compliance Officer.

Examples of such conflicts of interest include, but are not limited to:

 Having another job with a company that competes or contracts with or is a supplier of MJHS/ Elderplan

- Having a financial or ownership interest in a company that does business with MJHS/Elderplan
- Making business decisions that involve friends or family
- Having a supervisory or reporting relationship to family or close friends

By signing this Code you attest that you are either free of any conflict of interest or that you have disclosed any potential conflicts of interest to MJHS/Elderplan. At the time of hire you are asked to read and attest to understanding our Conflict of Interest policy. Subsequently, you are required to report any actual or potential conflicts of interest as they arise. In addition, officers, Board Members, management and other key employees must complete a Conflict of Interest attestation annually. See more on conflict of interest and employment of relatives in MJHS/Elderplan's Employee Handbook and the Conflict of Interest Policy.

Business Partnerships

We are committed to the long-term success of each MJHS/Elderplan program. MJHS/Elderplan is honest and fair in all of our dealings with first tier, downstream and related entities (FDRs), vendors, consultants and other business partners.

We expect the same behavior from our vendors and business partners and hold them to the same standards described in this Code. As such:

- Vendors are selected based on quality, availability, price and ability to meet the needs of our organization
- MJHS/Elderplan does not choose vendors based on a personal relationship, inducement or offer
- MJHS/Elderplan interacts with our vendors in a respectful and honest manner

Contracting

MJHS/Elderplan negotiates and enters into fair and equitable contractual arrangements with reputable vendors and individuals that meet the needs of our organizations. All arrangements must comply with applicable federal and state laws. Prior to executing

arrangements for items and services, we verify that all contracted parties are eligible to participate in federal and state-funded health care programs. All contracts must be in writing, as well as reviewed and approved by the Legal department.

Gifts/Hospitality/Entertainment

Our business transactions with vendors, suppliers, contractors and other third parties must be free from influence and even the appearance of influence. You cannot accept gifts and business courtesies, with few exceptions. You may not accept anything of value, including favors, discounts on goods or services, gratuities, entertainment, or personal services payments (collectively "gifts") (with the exception of meals in the course of actual business meetings) from any person or

organization doing or seeking to do business with MJHS/Elderplan. Likewise, you may not offer gifts or business courtesies as these may influence or be perceived as influencing others in business transactions with MJHS/Elderplan.

Similarly, our relationship with patients/members is to provide care and services. Therefore, accepting gifts from patients/members or their families is not allowed.

Inducements, Improper Referrals and Fraud, Waste and Abuse

At MJHS/Elderplan, you are not to use any financial or other type of reward that could be seen as trying to induce a person or entity to conduct business with us. In fact, inducements for referrals fall under the New York State and Federal Anti-Kickback Statutes, which state that it is illegal to knowingly and willfully solicit, receive, offer or pay remuneration (including any kickback, bribe or rebate) for referrals for services that are paid under a state or federal health care program. Various examples include trying to induce:

- Potential Medicare beneficiaries to join Elderplan (excludes nominal non-cash promotional gifts permitted by law)
- Referral sources to recommend MJHS/Elderplan programs and services
- Employees and other licensed professionals to deny or limit care
- Medicare or Medicaid beneficiaries to commit fraud, waste or abuse

How much is too much when it comes to gifts?

- Q. A vendor who does a lot of work for our department just offered my supervisor tickets to the Super Bowl. Can we accept?
- A. No. This type of gift has a very high value, even if it's purely a "thank you" gesture with no strings attached.

Hospitality or illegal activity?

- Q. Some regulators will be onsite next month and will be putting in full days at our offices. Can we provide lunch for them?
- A. Most likely no. There are very strict guidelines regarding gifts and hospitality offered to government employees and public officials. Please check with the Compliance Officer to make sure what we see as a friendly gesture will not break any laws.
- Q. A vendor sent our department a holiday gift basket of snacks. Can we accept this?
- A. Yes, provided the contents are shared with everyone in the department.

Gratitude or conflict?

- Q. The daughter of one of the residents who recently passed away donated a lot of art supplies, books, and magazines to the facility. Today, she brought me her mother's pendant because she wants to thank me for taking good care of her mother. Can I keep it?
- A. No. You are not allowed to accept gifts from residents, patients, members or their families.

Policitical Activity and Lobbying

MJHS/Elderplan employees are free to participate in and contribute to political organizations or campaigns. You must, however, do so as an individual. You may not present yourself as a representative of MJHS/ Elderplan in any of these types of activities, nor may you get reimbursed by MJHS/Elderplan for anything related to these activities.

Since MJHS/Elderplan is a tax-exempt, not-for-profit organization, we must follow requirements of the Internal Revenue Service, the New York State Not-For-Profit Corporation Law and other federal and state laws. We expect you to refrain from taking part in any activity that would jeopardize the tax-exempt status of MJHS/Elderplan.

MJHS/Elderplan has many contacts and dealings with governmental bodies and officials. Our efforts are focused in our areas of expertise and consist largely of making recommendations concerning legislation or regulations being considered. In addition, we may analyze and take public positions on issues related to the operation of MJHS/Elderplan. These efforts are coordinated through our Legal department and are within the scope of Internal Revenue Service and other federal and state rules. If you have any questions about lobbying and political activity, please contact our Legal department.

Is this a business dinner or a political event?

- Q. I bought tickets to a fundraising dinner for a local politician. I took a colleague and we discussed business. May I expense it?
- A. No. Reimbursing you for funds given to a specific candidate would be the same as contributing to his/her political campaign, which MJHS/Elderplan is not allowed to do.

Confidentiality, Privacy and Security

We work in an industry that contains highly sensitive personal, health and business information—the confidentiality of which is also highly regulated. Every MJHS/Elderplan employee must be aware of what confidential and proprietary information is, and maintain the privacy and security of both MJHS/Elderplan and patient/ member information according to the laws, rules, regulations and sub-regulatory guidance provided by the government. To review our full policies, see the organization's privacy and security policies and procedures and the section on confidentiality in the Employee Handbook.

Confidential means that it is not appropriate for general public knowledge; it may cause harm to an individual or organization if that information becomes public knowledge. Confidential information includes patient/member information.

Proprietary means that it is related to or involves MJHS/Elderplan. Other companies and individuals would also have proprietary information specific to them.

MJHS/Elderplan's confidential and proprietary information is non-public information that is created, recorded or used in support of MJHS/ Elderplan programs and services. It includes much of our daily work processes and outputs, including MJHS/Elderplan's strategic planning.

A good guideline to use is that if it is on www.mjhs. org or www.elderplan.org public websites, then it is public and you can direct any interested party to that information. If you have questions on anything else, talk to your supervisor.

Our patient/member's confidential information is called "Protected Health Information" (PHI). This is discussed more in a later section.

You should never discuss any confidential information (patient/member information or proprietary information) at all in social or routine business conversations. Again, refer to the MJHS/ Elderplan's privacy and security policies and procedures.

MJHS/Elderplan Information

In general, you should use and disclose confidential and proprietary information with co-workers on a "need-to-know" basis in accordance with organization privacy and security policies and procedures. Two important concepts that restrict access to and exchange of confidential information on a "need-to-know basis are:

 Role-based access means you are granted access to proprietary and other work-related information depending on the tasks you perform at MJHS/Elderplan. Access to information will differ from one employee to another.

 Minimum necessary requirement means that you request, use or disclose only the information necessary for the purpose of the request, use or disclosure.

MJHS/Elderplan and department-specific privacy and security policies and procedures contain permitted uses and disclosures of information.

What do I do about repeated requests?

- Q. My co-worker keeps asking me for more information than I think she needs to do her job. Do I just keep saying no?
- A. Decisions about employee access to information are made by supervisors and managers. Ask your co-worker to speak to her supervisor about her access needs. Talk to your supervisor if your co-worker continues to ask you for more information.

Protected Health Information

Protected Health Information (PHI) is information about a patient/member, including, but not limited to, demographic and health information in any form such as paper, verbal or electronic. PHI also relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual which identifies the individual or which there is a reasonable basis to believe the information can be used to identify the individual.

In short, an easy way to think of PHI is that it is health care or payment related information about an individual collected, used or transferred by a health care or health plan organization, or their business partners, that identifies the individual or which there is a reasonable basis to believe the information can be used to identify the individual.

There are some MJHS/Elderplan employees who rarely or never come across PHI. For others, their jobs may revolve around processing PHI. Regardless, we are all responsible for protecting our patient/member's health information. You must always abide by your job-specific procedures for handling and protecting PHI. See MJHS/Elderplan privacy and security policies and procedures for more information on protecting confidential information.

The chart below shows several examples of protected health information.

Examples of an Individual's Protected Health Information

Name	Diagnosis	Addresses
Identification Numbers	Date of Birth or Death	Phone Numbers
E-mail Addresses	Family Member Names and Contact Information	Claim Information
Social Security Number	Biometric Identifiers (e.g., finger and voice prints)	Vehicle Identifiers (e.g., license plate numbers)
Full Face Photographic Images or Comparable Images	Device Identifiers/Serial Numbers	Any Other Unique Identifying number, Characteristic or Code

Conversation or confidential information?

- Q. At a family event a relative was asking me very specific questions regarding what we learned about our MJHS/Elderplan strategy at the latest Employee Town Hall/staff meeting. What's okay to share?
- A. Membership numbers are public information. We include those on every press release. Where those numbers are relative to our goals, however, is not public. Town Hall information is for employees, and you are always welcome to ask questions at these events, so ask if it's okay to share something specific you may have learned.
- Q. I often take public transportation during the course of my workday. Is it okay to make work-related phone calls or use my laptop while in transit?
- A. It depends. You must be aware of your surroundings and remember NEVER to discuss patient/member information in public where others may hear you, and keep your laptop out of public view.



Privacy and Security Breaches

A privacy or security breach is when a patient/ member's PHI is accessed, used or disclosed in a manner that is not permitted by law and/or under MJHS/Elderplan privacy and security policy and procedures.

MJHS/Elderplan has physical, technical and administrative safeguards in place to protect and secure confidential information, including PHI. A few examples of safeguards include:

- The physical security of electronic equipment and paper documents
- Encryption software (e.g., for computers, emails, tablets and cell phones)
- Monitoring use of electronic equipment and data files
- Using training materials and policies and procedures to educate and guide employees about appropriate access, use and disclosure of confidential information.

Despite our best efforts, sometimes unauthorized access, use and disclosure occur. These are generally referred to as privacy and security breaches.

One of our greatest assets against unauthorized access, use and disclosures, and for addressing breaches, is you. We look to staff to follow our privacy and security practices and we rely on you to tell us if you believe confidential information will be or has been accessed, used or disclosed in a way that is not permitted. Prompt notice of potential privacy or security breaches are key to our taking prompt actions to stop and remediate a problem. If you know of a potential or suspected violation or breach of MJHS/Elderplan privacy and security policies, report it to MJHS/Elderplan's Privacy Officer or to the Compliance department through any of the avenues of communication identified in this Code.

What do I do about an unauthorized disclosure?

- Q. I accidentally sent an email containing PHI externally to a contact in my email directory who was not the intended email recipient. Do I have to report this?
- **A.** Yes. You should immediately tell your manager or someone on the Compliance Contacts list on page 7. The Compliance department will review the situation and work with management to take steps to prevent future disclosure, as well as mitigate the situation.

What do I do about lost documents?

- Q. I am a Nurse Assessor. I lost my briefcase containing several beneficiary assessment documents on the way back to the office. I tried unsuccessfully to backtrack my steps to find the briefcase. What do I do?
- A. You should immediately tell your manager, who will contact the Compliance department. Your manager and Compliance will determine the next steps to mitigate the situation.

Electronic Communications and Social Media

The MJHS/Elderplan Social Media Policy details the rules on the use of electronic communications systems and social media. Please read it thoroughly. This is an area that is growing and changing quickly so we simply cannot anticipate all challenges. But again, you can help ensure appropriate use by using MJHS/Elderplan's electronic communications

systems for business purposes only. For social media, make sure that your participation on external social media sites is done on your own time and that you limit the references made to MJHS/Elderplan and the work you do here. Never post patient/member information, including photos.

MJHS/Elderplan Assets

It is easy to remember: If MJHS/Elderplan supplied it to you, it is MJHS/Elderplan's property and considered a MJHS/Elderplan asset. Be aware, too, that assets include more than just equipment and

supplies. MJHS/Elderplan records, financial data, research results, business strategies, etc., are also assets to be protected.

Intellectual Property

Intellectual property ranges from the MJHS/ Elderplan logo to trade secrets to any programs you may have helped to develop. Like physical assets, intellectual property belongs to MJHS/Elderplan and must be used only as designated. When you leave and are no longer affiliated with MJHS/ Elderplan, all MJHS/Elderplan property, resources and confidential information must remain with MJHS/Elderplan.

Finally, MJHS/Elderplan also respects the confidential and proprietary rights and intellectual property of other companies and individuals. We abide by all applicable laws regarding copyright, patents, trade secrets, trademarks, privacy and financial disclosures. We follow fair business practices, which means we do not use improper channels to glean information about competitors, nor do we spread false information about them.

Can I post good news?

- Q. I'm a Case Manager and I would love to post updates of some of my favorite patients/members on my Facebook® page. Is this okay?
- A. No, it's not. Patient/member information is PHI, which may not be released without the patient/member's written permission to MJHS/Elderplan. Also, remember, once you send information electronically, you have no control over where it will end up.



Physical Property

While it is MJHS/Elderplan's responsibility to maintain equipment, it is your responsibility to take care of it and report any problems or issues.

For the most part, MJHS/Elderplan property must remain on site unless approval has been given to remove it. It should go without saying that taking or using supplies, materials or equipment for personal use is dishonest and considered to be theft.

What if it's for a good cause?

- Q. I volunteered to make flyers for the local animal shelter. May I use my department's machine to make photocopies? What if I bring my own paper?
- A. No, sorry. Unless it's for an organization or event MJHS/Elderplan is supporting, you may not and should not use Company assets to promote it.
- Q. My grandfather is in the hospital and not eating well. I am terribly worried about his health. Can I take a couple of cans of liquid nutritional supplement for him from the kitchen in the nursing home where I work?
- A. While your worry is understandable, you will need to purchase the supplements for your grandfather from a store or pharmacy. At MJHS/Elderplan, we do not use Company resources for personal benefit, even when the cause is noble.

Accuracy of Records/Document Retention and Destruction

It is our responsibility to create and maintain accurate and complete records, as well as only destroy organizational records, in compliance with federal and state laws and applicable policies. MJHS/Elderplan policies provide guidance on

the proper creation, amendment, maintenance, retention and destruction of organizational records and documents. Speak with your manager or contact the Compliance department for additional guidance.

Requests for Information Pursuant to an Investigation or Legal Proceeding

MJHS/Elderplan promptly and appropriately responds to requests for information pursuant to a government investigation or legal proceeding. These requests may come in the form of a subpoena, summons, warrant, letter or verbal request. Only certain management personnel are authorized to accept them on behalf of the organization. Accepting or acting on these requests

may expose the organization, and sometimes you as an individual, to significant fines or other types of criminal, civil or administrative penalties. If you are asked to accept a legal document or to share information of any kind for any reason, immediately consult with your supervisor, the Compliance department or the Legal department.

Accurate Billing and Coding of Services

MJHS/Elderplan takes great care to assure that billing and reporting are accurate and conform to all applicable federal and state laws and regulations. We only bill for services that are ordered by a physician, are medically necessary and documented

in the medical record. We monitor and verify that claims are coded correctly and information provided for claims and cost reports are accurate. Errors in billing or payment are adjusted in a timely fashion.

Excluded and/or Sanctioned Persons or Entities

An excluded and/or sanctioned person or entity is one that is not allowed to participate in federal and state health care programs (e.g., Medicare, Medicaid). Most commonly, these are individuals who have been found guilty of fraudulent billing or misrepresentation of credentials. MJHS/Elderplan cannot, directly or indirectly, employ or contract with any excluded person or entity. To this end, we screen employees, volunteers, Board of Director members, first tier, downstream and related entities (FDR), vendors, contractors, and others against the Office of the Inspector General (OIG), U.S. General Services Administration (GSA), NYS Office of the Medicaid Inspector General (OMIG) and other databases.

MJHS/Elderplan must ensure that no persons or entities employed, contracted or affiliated with MJHS/Elderplan are "excluded" in these databases. If a person or entity contracted with MJHS/ Elderplan becomes excluded, MJHS/Elderplan must immediately stop such person or entity from directly or indirectly providing any care or services to MJHS/Elderplan patients/members. (See MJHS/ Elderplan exclusion screening policies for more information.)

If you become aware that a person or entity is excluded as described above, report it. You may learn of the exclusion before we conduct our routine screenings so your report could hasten our interventions.

Marketing and Fundraising

MJHS/Elderplan requires marketing staff, home care planners, account liaisons and all other business initiative representatives embrace the highest levels of professional ethics, norms and values. They must follow all current applicable regulations and avoid any appearance of impropriety.

All staff with public contact will promote a positive reputation for all MJHS/Elderplan programs, products and services by being truthful about what we are able to provide.

We are also committed to following all the rules and regulations that apply to charitable fundraising. Any inquiries about donations should be referred to MJHS Foundation.

Conducting Research

Each MJHS participating agency must ensure that all research activities are scientifically justified, legal and ethical. The MJHS Institute for Innovation in Palliative Care maintains a Research Committee to oversee and track research activities. The Committee's responsibilities include, but are not limited to:

- Ensuring that the proposed research projects have scientific value and reflect good research practice in accordance with law and regulatory requirements
- Ensuring that proposed research projects are consistent with the MJHS mission and values
- Tracking and providing periodic review of ongoing research projects

Compliance FAQs

How do I know if something is a potential compliance issue?

A potential compliance issue exists when a business process or behavior does not follow or is inconsistent with this Code, laws, regulations, sub-regulatory guidance and/or policies and procedures. One of the purposes of our new hire, annual compliance-related and department-specific training courses is to help you identify these situations.

For example, if Elderplan is required to notify all members of the changes in their benefits by September 30 of each year but it looks as if we will not get the information mailed until October 15, that is a potential compliance issue.

For example, if MJHS is required to have a physician sign an order and he /she does not sign the order, that is a potential compliance issue.

What if I don't understand a rule or regulation?

Not understanding does not excuse you from complying. If you do not fully understand a rule,

regulation, policy or procedure, please speak up! There are several ways to get clarification:

- **1**. Ask your supervisor. It is his or her job to explain it clearly.
- **2**. Ask the Corporate Compliance Officer.
- **3**. Ask the Elderplan Compliance Officer (for Elderplan-related issues)
- **4.** Submit your question to the Compliance Hotline or Compliance Hotlink and Compliance staff will respond.

What do I do if I suspect a potential compliance issue?

We embrace the concept of shared compliance at MJHS/Elderplan. That means we are all responsible for it, regardless of job title or responsibilities. If you suspect a compliance issue, you are obligated to report it as soon as possible. You do not have to find out many details, but you do need to have the basic facts: who, what, when, and where. Then report it through one of the avenues listed in the Code.

What obligations do I have as a manager?

- Q. One of my employees just came to me with something he thinks is a potential compliance issue. I'm not sure it is. What do I do?
- A. Talk to your supervisor to get clarification. If you prefer, you or the employee who brought it to your attention can report it through various means as outlined in the Code. The employee did the right thing by reporting it to you, so it is your responsibility and affirmative obligation to report the suspected violation to the Compliance department and/or Human Resources department.



How do I report a compliance issue?

Report the issue to your supervisor—unless, of course, it is your supervisor who is involved or you would be more comfortable reporting to someone else. If that is the case, then report it through one of the avenues listed in the Compliance Contacts section on page 7.

What happens if I don't report something that turns out to be a compliance issue?

You are obligated to report. If you participated in the MJHS/Elderplan compliance training—and you are required to complete it both as a newly hired employee and annually thereafter—you will be able to identify potential compliance issues. If you do not report a situation that you reasonably should have identified as a potential compliance issue, you will be subject to disciplinary action. That is why we make it as easy as possible for you to report potential compliance issues. As noted here, you have several ways to report and can even do so anonymously.

What happens after I report a potential compliance issue?

To most of your coworkers and other employees it may seem like nothing is happening. But every reported issue will be investigated. Documents are reviewed, the people involved are interviewed and you may be asked for additional, clarifying information. The results of the investigation may be presented to the Compliance Committee, the CEO, and/or Board of Directors.

MJHS/Elderplan may also use the information to self-report a compliance issue to the Center for Medicare and Medicaid Services (CMS), New York State Department of Health or other regulators or authorities, if deemed necessary. The actions taken as a result of the investigation will depend on the severity of the issue. It could be something as simple as implementing a new policy or procedure. Or it could include disciplinary action up to and including immediate termination of those involved.

Will I be treated differently if I report a potential compliance issue?

No. There should be no difference in your workplace duties, responsibilities or relationships. In fact, MJHS/Elderplan has a policy against retaliation and intimidation. MJHS/Elderplan will not tolerate anyone retaliating against you or trying to intimidate you when you have reported something in good faith. (On the flip side, however, knowingly making a false report is a very serious issue—one that will be addressed through disciplinary action up to and including termination—so, "in good faith" is the key here.) If you feel you are being retaliated against or intimidated, contact the Human Resources department or the Compliance Officer to report it. As a reminder, you can use the Compliance Hotline, Hotlink or MJHS/Compliance website 24/7 to report issues related to non-compliance, unethical or illegal activities.

Why do I have to take compliance training every year?

Compliance—meeting our legal and contractual requirements—is not an option for MJHS/ Elderplan. Annual compliance training is a requirement as a Medicare and Medicaid contractor. Also, annual training makes good sense to remind us of our compliance commitments

and obligations. That makes it a requirement for MJHS/Elderplan employees. If you do not complete and maintain your training, you will be subject to disciplinary action. Because regulations and requirements change, we work to keep the training current and relevant. The better trained you are, the better you will be able to spot potential compliance issues and know what to do once you see them.

MJHS/Elderplan Code of Conduct Attestation

Please know that with your signature on the attestation page, you are attesting to your understanding of and commitment to uphold this Code of Conduct. It is your obligation to recognize and report any suspected compliance issues. In turn, the Organization will support you if you have reported an issue in good faith.

By signing this Attestation, I acknowledge that:

- 1. I understand that this attestation is a condition of my employment with MJHS/Elderplan.
- 2. I have received a copy of the Code of Conduct.
- 3. I have read and understand the Code of Conduct.
- 4. I will comply with the MJHS/Elderplan's Code of Conduct.

Signature:	Date:
Print Name:	
Title:	
Business Unit/Department:	



