

MEMORANDUM

To: OneCity Health Partners

From: Catherine G. Patsos, Esq. 
Acting Chief Corporate Compliance Officer

Date: February 7, 2018

Re: **DSRIP Compliance Attestation of OneCity Health Partners**

The purpose of this correspondence is to provide all performing providers (hereinafter also referred to as “Partners”) in the NYC Health + Hospitals sponsored OneCity Health (“NYC Health + Hospitals/OneCity Health” or “OneCity Health”) Performing Provider System (“PPS”) with a link to an online survey tool regarding *Compliance Attestation of OneCity Health Partners* (“Attestation”). The online survey will make it easier for Partners to complete the Attestation. To complete the Attestation, please access the link at: <https://www.surveymonkey.com/r/SH6SSPK>. This Attestation, which on a whole provides OneCity Health with a critical snapshot of the compliance foundation of its Partners, must be completed by all Partners and returned to the NYC Health + Hospitals/OneCity Health Office of Corporate Compliance (“OCC”) by close of business June 30, 2018.

The passages provided hereunder explain, in pertinent part:

- (i) Why the Attestation is required;
- (ii) The key topics covered in the Attestation; and
- (iii) The next steps Partners are required to take with regard to completing and submitting the Attestation to the NYC Health + Hospitals/OneCity Health OCC.

I. Background

A. *Legal Requirements*

As a PPS lead in the New York State Department of Health Delivery System Reform Incentive Payment (“DSRIP”) Program, OneCity Health is responsible for taking “reasonable steps to ensure the Medicaid funds distributed as part of the DSRIP program are not connected with fraud, waste, and abuse.”¹ Pursuant to New York State Office of the Medicaid Inspector General (“OMIG”) DSRIP guidance on the topic at hand, “[i]t is reasonable for [OneCity Health] to consider its [Partner’s] program integrity systems when dedicating resources and developing [OneCity Health’s] systems.”²

Based on the foregoing, OneCity Health has developed the Attestation, which is designed to assess the compliance program integrity of its Partners. OneCity Health therefore requests that all Partners disclose the following compliance-related information within the Attestation³:

- (i) The status of completion of DSRIP compliance training by their medical practice or organization (hereinafter collectively referred to as “Organization”);
- (ii) An acknowledgment by Partners that their workforce members are familiar with and adhere to the *NYC Health + Hospitals Principles of Professional Conduct*, and
- (iii) Proof of OMIG compliance program-related certifications by those Partners that are required by law and/or OMIG policy to submit such certifications.

B. *Overview of the Key Components of the Attestation Process*

An outline of the fundamental subjects that surround the Attestation is a crucial component in ensuring that Partners understand the attestation process and appropriately complete the Attestation. Accordingly, Sections II-VI below discuss the following key Attestation topics, respectively;

- (i) DSRIP Compliance Training;

¹ Office of the Medicaid Inspector General’s (“OMIG”) *DSRIP Compliance Guidance 2015-01 Revised: Special Considerations for Performing Provider System (PPS) Leads’ Compliance Program*, pgs. 1-2 [Recommendations], available at: https://www.omig.ny.gov/images/stories/compliance_alerts/20150901_DSRIP_CompGuidance_2015-01_Rev.pdf.

² *Id.* at p. 2.

³ Partners are reminded that § 2.3.8 of the Master Services Agreement (“MSA”) between NYC Health + Hospitals, HHC Assistance Corp. d/b/a/ OneCity Health Services, and each Partner, requires Partners to conduct a DSRIP compliance program as required by New York State or NYC Health + Hospitals/OneCity Health. Additionally, § 2.3.9 of the MSA requires Partners to certify their full performance of their compliance obligations.

- (ii) *NYC Health + Hospitals' Principles of Professional Conduct*;
- (iii) OMIG Annual Compliance Certifications;
- (iv) Completion and Return of the Attestation; and
- (v) Questions Concerning the Attestation.

II. DSRIP Compliance Training

Pursuant to New York State mandatory provider compliance program regulations, NYC Health + Hospitals is required to adopt and implement an effective compliance program, which includes the provision of periodic compliance “training and education of all affected employees and persons associated with [NYC Health + Hospitals] . . . on compliance issues, expectations and the compliance program operation.”⁴ Under the OMIG DSRIP compliance guidance, these compliance and training and education requirements extend to the DSRIP program.⁵ Accordingly, all Partners who have received or are eligible to receive DSRIP funds are required to undergo compliance training and education on the NYC Health + Hospitals/OneCity Health compliance program.⁶

OneCity Health, as the PPS Lead, is responsible for ensuring that Partners complete DSRIP compliance training.⁷ To facilitate this training requirement, on December 28, 2017 all Partners were provided with a memorandum from Wayne A. McNulty, OneCity Health’s former Chief Compliance Officer, which described the New York State requirement that all Partners provide DSRIP compliance training to its workforce members involved or associated with, or otherwise affected by the DSRIP Program.

Attached to the December 28, 2017 memorandum was a PowerPoint presentation (hereinafter “PowerPoint”) titled *Delivery System Reform Incentive Payment Program Compliance Training and Education*. The memorandum and PowerPoint communicated that all Partners were welcomed to utilize the PowerPoint to satisfy their DSRIP compliance training requirements. Specifically, with regard to the PowerPoint, Partners were instructed that they could exercise any of the following approaches to appropriately utilize the training provided by OneCity Health:

⁴ 18 NYCRR §521.3[c][3] and Social Services Law § 363-d[2][c].

⁵ See OMIG’s *DSRIP Compliance Guidance 2015-01 Revised: Special Considerations for Performing Provider System (“PPS”) Leads’ Compliance Program*, *supra* at pgs. 2-3 [Special Considerations by Element – Element 3].

⁶ See *id.*

⁷ See OMIG’s *DSRIP Compliance Guidance 2015-02-Frequently Asked Questions by Performing Provider System (PPS) Leads Relative to Compliance Programs*, pg. 2, available at: https://www.omig.ny.gov/images/stories/compliance_alerts/20150715_dsrip_fags.pdf.

- (i) Use the PowerPoint to develop a presentation for in-person/live compliance training and education;
- (ii) Incorporate the content of the PowerPoint into the existing compliance training and education computerized modules (e.g., automated online training); or
- (iii) Simply distribute the PowerPoint to workforce members involved with or otherwise affected by the DSRIP program.

III. NYC Health + Hospitals Principles of Professional Conduct

As stated in the PowerPoint, it is expected that all Partners will comply with the NYC Health + Hospitals Principles of Professional Conduct (“POPC”), which is a guide that sets forth NYC Health + Hospitals’ compliance expectations and describes NYC Health + Hospitals’ standards of professional conduct as well as efforts to prevent, fraud, waste, and abuse. The POPC is annexed to this Memorandum as Attachment A. It is also available on the NYC Health + Hospitals’ public website at <http://www.nychealthandhospitals.org/wp-content/uploads/2016/07/principles-of-professional-conduct.pdf>.

All Partners must adhere to the requirements outlined in the POPC. In sum and substance, the POPC calls for Partners to meet the following key requirements:

- (i) adopt the POPC or their own code of conduct that includes the POPC’s core objectives or substantially similar compliance goals;
- (ii) not engage in unprofessional conduct, as described in Section VI of the POPC, which includes, for example, the following:
 - The misuse or misallocation of DSRIP funds; and
 - The hiring or contracting with persons or entities excluded from participation in Federal health care programs;
- (iii) timely report to NYC Health + Hospitals any violation of the POPC of which it becomes aware; and
- (iv) fully cooperate, to the extent applicable, with any investigation by NYC Health + Hospitals or, if required, any governmental agency.

In the Attestation, Partners are asked a series of questions to confirm whether or not they have met the foregoing four requirements of the POPC.

IV. OMIG Annual Compliance Certifications

OneCity Health utilizes the following two OMIG compliance certifications to help it assess the program integrity of Partner's compliance foundation:

- (i) The New York Social Services Law § 363-d Certification; and
- (ii) The Deficit Reduction Act of 2005 Certification.

The Attestation asks a series of questions to determine whether a Partner is required to submit to OMIG one or both of the two aforementioned certifications, and if so, whether said Partner has actually carried out this requirement.

Remember, not all Partners are required to complete these OMIG compliance certifications. Rather, only Partner Organizations that meet the criteria described below are required to annually file such certifications. Thus, if your organization does not fall into the categories described below, simply answer "NO" to the relevant questions in the Attestation.

A. New York Social Services Law § 363-d and 18 NYCRR Part 521

New York Social Services Law ("SSL") § 363-d and its implementing regulations found at 18 NYCRR Part 521, require certain providers to annually certify through the OMIG website that they have an "effective" compliance program. Certifications are required by provider organizations that:

- (i) Are subject to Public Health Law Article 28 or 36⁸;
- (ii) Are subject to Mental Hygiene Law Article 16 or 31⁹; or
- (iii) Claim, order, bill or receive at least \$500,000 within a 12 month period from Medicaid.¹⁰

The OMIG SSL § 363-d certification may be found on the OMIG website at: <https://www.omig.ny.gov/compliance/certification>,

For guidance or more information regarding SSL § 363-d certification, OneCity Health recommends that Partners review, in consultation with their counsel, the *OMIG Frequently Asked Questions (FAQs) – NYS Mandatory Compliance Programs*, which is

⁸ 18 NYCRR 521.1.

⁹ *Id.*

¹⁰ *Id.* at 521.2.

available on the OMIG website at:

https://www.omig.ny.gov/images/stories/provider_compliance/ssl_faqs.pdf.

The Attestation requires Partners who confirmed that they completed the SSL § 363-d certification to include proof of the same (e.g., a copy of the electronic confirmation receipt that OMIG provides to each Partner upon their SSL § 363-d certification submission) along with their completed Attestation.

B. *Deficit Reduction Act of 2005*

The Deficit Reduction Act of 2005 (“DRA”) requires providers who receive or make \$5 million or more in direct Medicaid payments to annually certify through the OMIG website that they have:

- (i) Established and disseminated to all their employees, including management, and any contractor or agent of their provider organization, written policies that provide detailed information about¹¹:
 - The Federal False Claims Act, remedies for false claims and statements, and State laws pertaining to civil or criminal penalties for false claims and statements;
 - Whistleblower protections under the Federal False Claims Act and State laws;
 - The role of the Federal False Claims Act and State law in preventing and detecting fraud, waste, and abuse in Federal health care programs; and
 - The provider organization’s policies and procedures for detecting fraud, waste, and abuse; and
- (ii) Included the following information in the provider’s organization’s employee handbook (if one exists):
 - Information about the Federal False Claims Act and comparable New York State laws, as described above in paragraph (i) of this subdivision;
 - A specific discussion of the rights of provider organization’s employees to be protected as whistleblowers; and

¹¹ See summary questions related to the requirements of the DRA derived from 42 USC §1396a (a)(68), OMIG’s *NYS Mandatory Provider Compliance Program Certification - DRA Certification Form* [DRA Questions], available at: <https://www.omig.ny.gov/certification-header?type=dra>.

- A specific discussion of the provider organization's policies and procedures for detecting fraud, waste and abuse.

For guidance or more information regarding OMIG DRA certification requirements, we recommend that you review, in consultation with your counsel, the OMIG Federal Deficit Reduction Act Frequently Asked Questions (FAQs), which is available at: https://www.omig.ny.gov/images/stories/provider_compliance/dra_faqs.pdf.

The Attestation requires Partners who confirmed that they completed the DRA certification to include proof of the same (e.g., a copy of the electronic confirmation receipt that OMIG provides to each Partner upon their DRA certification submission) along with their completed Attestation.

V. Completion of the Attestation

The Attestation should be completed online, <https://www.surveymonkey.com/r/SH6SSPK>, and electronically signed by an authorized representative of your Organization no later than **June 30, 2018**. If for any reason an Organization cannot complete this Attestation electronically, it may be printed and returned by email, fax, or mail to the NYC Health + Hospitals/OneCity Health Office of Corporate Compliance:

Kevin Rogan
Senior Executive Compliance Officer
NYC Health + Hospitals/OneCity Health
Office of Corporate Compliance
160 Water Street, Suite 1129
New York, New York 10038
Kevin.rogan@nychhc.org
Office number: (646) 458-5644
Fax number: (646) 458-5624

VI. Questions Concerning the Attestation

If you have any questions regarding this communication, please contact Kevin Rogan, Senior Executive Compliance Officer, at Kevin.rogan@nychhc.org, or by phone at (646) 458-5644.

Thank you for taking the time to read this communication and completing the Attestation.

Attachments

ATTACHMENT A



NYC HEALTH + HOSPITALS

PRINCIPLES OF PROFESSIONAL CONDUCT



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NYC HEALTH + HOSPITALS

PRINCIPLES OF PROFESSIONAL CONDUCT

I. POPC OVERVIEW.

The *Principles of Professional Conduct* (“POPC”) is a guide that sets forth NYC Health + Hospitals’ compliance expectations and commitment to comply with all applicable Federal and State laws. It describes NYC Health + Hospitals’ standards of professional conduct and efforts to prevent fraud, waste, and abuse. All NYC Health + Hospitals workforce members and business partners, as described in Section II below, are expected to carry out their duties and functions in a manner that is lawful and ethical. Workforce member responsibilities under the POPC are listed in Section IV below, and business partner responsibilities under the POPC are listed in Section V below.

II. WHO DOES THE POPC APPLY TO?

The POPC applies to and governs the conduct of: (i) NYC Health + Hospitals workforce members (whether permanent or temporary), including all NYC Health + Hospitals employees, members of the Board of Directors, personnel, affiliates, medical staff members, volunteers, students, and trainees, throughout all NYC Health + Hospitals facilities, units, and entities; and (ii) NYC Health + Hospitals business partners who are required by law or contract to comply with this POPC, including the POPC’s core objectives specified in Section III below. Business partners include OneCity Health/Delivery System Reform Incentive Payment (“DSRIP”) Program partners as well as contractors, subcontractors, agents and other persons or entities that, on behalf of NYC Health + Hospitals, provide billing or coding functions, furnish health care services or items, or monitor the health care provided by NYC Health + Hospitals.

III. POPC CORE OBJECTIVES.

The core objectives of the POPC are to ensure that NYC Health + Hospitals workforce members and, as applicable, its business partners:

- Fulfill NYC Health + Hospitals’ mission;



- Provide and deliver high quality, dignified and comprehensive care and treatment for the ill and infirm, both physical and mental, particularly to those who can least afford such services;
 - Extend equally to all we serve comprehensive health services of the highest quality, in an atmosphere of humane care and respect;
 - Promote and protect, as both an innovator and advocate, the health, welfare and safety of the people of the State of New York and of the City of New York; and
 - Join with other health workers and with communities in a partnership which will enable each of our institutions to promote and protect health in its fullest sense - - the total physical, mental and social well-being of the people of the State of New York and of the City of New York;
- Uphold NYC Health + Hospitals’ values by continuously reinforcing the six essential features of our daily work outlined in NYC Health + Hospitals *Guiding Principles*;
 - Keep patients first;
 - Keep everyone safe;
 - Work together;
 - Pursue excellence;
 - Manage your resources; and
 - Keep learning;
 - Prevent, identify, and correct unlawful and unethical behavior and fraud, waste, and abuse;
 - Identify, assess, and monitor potential risk areas;
 - Adhere to all applicable provisions of Federal and State law, NYC Health + Hospitals’ Corporate Compliance and Ethics Program, and NYC Health + Hospitals’ policies, including provisions that require the reporting of violations to appropriate parties;
 - Prevent the submission of inappropriate claims and billings and the receipt of improper payments by implementing training initiatives, establishing internal controls, and carrying out auditing and monitoring activities; and



- Minimize financial loss and reduce the likelihood of an overpayment by a federal health program, governmental entity or other third party payor;
- Deliver high quality, medically necessary care and services to all individuals in need regardless of their ability to pay;
 - Ensure that only health practitioners and other health professionals who are duly licensed, certified, credentialed or otherwise qualified in accordance with Federal and State law, medical staff bylaws and associated rules, and internal policies, are authorized to deliver care to patients;
 - Respect and protect patients' rights;
 - Deliver care and services in a culturally sensitive manner; and
 - Strive for the highest level of patient satisfaction;
- Maintain a respectful, healthy, productive, and safe work environment with the goals of preventing discriminatory and other inappropriate forms of conduct, reducing the likelihood of illnesses and injuries, and helping workforce members realize their full potential;
 - Provide equal employment opportunities to all workforce members and employment candidates regardless of any protected characteristic including, without limitation, race, age, gender, gender identity, sexual orientation, religion, ethnicity, disability or any other any other protected class covered by Federal, State, and/or local anti-discrimination laws;
 - Promptly respond to and address all acts or threats of violence, intimidation, discrimination, harassment or disruptive behavior;
 - Encourage workforce members to realize their full potential;
 - Provide reasonable accommodations to workforce members with disabilities; and
 - Perform initial and periodic health screenings of workforce members as required by applicable law and internal policies;
- Facilitate and promote standards of conduct that detect, reduce, and/or effectively manage conflicts of interest;



- Respect the environment in which we work and our facilities operate;
 - Handle, use, and dispose of all toxic, hazardous, radioactive, and pharmacological agents, materials, instruments, and supplies in a safe manner consistent with applicable law and internal policies;
- Establish mandatory compliance and other training and education initiatives;
- Engage in only fair business practices;
- Maintain an information governance program wherein patient, billing, employment, and other business records are authenticated and maintained in accordance with NYC Health + Hospitals' record management, privacy, and data security policies;
 - Ensure that all business records are kept securely, recorded accurately, authentic when produced, and available when needed;
 - Protect patient and workforce member privacy and confidentiality; and
 - Provide notice to patients and other affected parties as required by applicable law and internal policies in the case of a breach of confidential information;
- Participate in the NYC Health + Hospitals Corporate Compliance and Ethics Program and promptly report compliance concerns;
- As a condition of employment or contract (or other agreement), comply with the POPC and, where appropriate, other NYC Health + Hospitals policies that relate to the types of services, duties, functions, and products that the workforce member and/or business partner provides;
- Prohibit and promptly report to appropriate parties allegations of retaliation, harassment or intimidation in response to workforce member, business partner or other stakeholder participation in the Corporate Compliance and Ethics Program;



- Establish and enforce fair and consistent disciplinary policies and procedures for workforce member and, to the extent applicable, business partner violations of law or NYC Health + Hospitals policies;
- Provide NYC Health + Hospitals/MetroPlus Health Plan members with access to the highest quality, cost-effective health care including a comprehensive program of care management, health education, and customer service;
 - Strive for performance excellence by holding the Plan and its providers to the highest standards to ensure that members receive quality care;
 - Engage in team work, including all human resources and providers, to deliver the highest quality care and services to members
 - Achieve superior provider, member, and employee satisfaction;
 - Be fiscally responsible and ensure that revenues received are used effectively;
 - Foster a culture of respectfulness in the way everyone who is encountered is treated;
 - Protect member rights; and
 - Be accountable to each other, members, and providers; and
- Adhere to all NYC Health + Hospitals/MetroPlus Health Plan’s contractual commitments with Federal and State regulatory agencies;

IV. WHAT ARE THE RESPONSIBILITIES OF WORKFORCE MEMBERS UNDER THE POPC?

All workforce members are required to carry out their functions and duties - whether delivering clinical care, assisting in coding, billing or claims reimbursement activities, providing administrative oversight of NYC Health + Hospitals’ operations, or acting as support personnel - in a professional and ethical manner. This means, each workforce member is responsible for the following:



- Not engaging in any acts, conduct or practice that would be contrary to any of the core objectives listed in Section III above or interfere with NYC Health + Hospitals achieving any of these core objectives;
- Following the POPC and other applicable NYC Health + Hospitals policies and procedures, and applicable law;
- Not engaging in unprofessional conduct, examples of which are provided in Section VI below;
- Completing assigned training and education programs;
- Fully cooperating with any internal or government investigation; and
- Reporting, as outlined in Section VIII below, any event, occurrence, activity or other incident that appears to violate applicable law or NYC Health + Hospitals policies and procedures.

Workforce members must understand and comply with the applicable rules and policies that relate to their particular duties, functions or role. If a workforce member does not know what rules or policies apply to his/her position, that workforce member should talk to his/her supervisor, manager, administrative head or chief of service.

V. WHAT ARE THE RESPONSIBILITIES OF NYC HEALTH + HOSPITALS BUSINESS PARTNERS UNDER THE POPC?

It is the expectation of NYC Health + Hospitals that each entity with which it partners to accomplish its mission: (i) adopts the POPC or their own code of conduct that includes the POPC's core objectives or substantially similar compliance goals; (ii) not violate the POPC or their own similar code; (iii) not engage in unprofessional conduct as described in Section VI below; (iv) timely reports to NYC Health + Hospitals any violation of the POPC of which it becomes aware; and (v) fully cooperates, to the extent applicable, with any investigation by NYC Health + Hospitals or, if required, any governmental agency.



VI. WHAT ARE SOME EXAMPLES OF UNPROFESSIONAL CONDUCT?

The following are some examples of unprofessional conduct and are prohibited by NYC Health + Hospitals:

- Submitting false and/or fraudulent claims;
- Improper billing practices, including, but not limited to:
 - Billing for items or services not rendered or those that are not medically necessary;
 - Upcoding - using a billing or DRG code that provides for a higher payment rate than the correct code;
 - Submitting multiple claims for a single service or submitting a claim to more than one primary payor at the same time;
 - Unbundling - submitting claims in a piecemeal or fragmented way to improperly increase payment;
- Failing to promptly report and refund, as required by law, any overpayment;
- Interfering with or otherwise impeding an internal or government investigation;
- Submitting false cost reports;
- Failure to deliver medical care to any individual based on their inability to pay;
- Failure to comply with laws governing workplace safety;
- Engaging in conduct that is discriminatory in nature, amounts to sexual or other harassment, or constitutes intimidation, as well any act or threat of violence;
- Engaging in conduct that is hazardous to the environment;



- Engaging in conflicts of interest;
 - Accepting gifts or services from a patient, vendor or potential vendor;
 - Unlawfully donating hospital funds, services and products, or other resources to any political cause, party or candidate;
 - Failing to comply with the Chapter 68 of the New York City Charter or the NYC Health + Hospitals Code of Ethics to the extent such conflicts of interest policies apply;
- Failure to complete mandated training;
- Failure to maintain accurate, clear, and comprehensive medical records;
- Improperly using, disclosing, accessing, transmitting, and/or storing patient, workforce member or business information;
- Entering into an agreement with a business partner or affiliate the terms of which: (i) do not call for compliance with the POPC; or (ii) provide for activities and services that constitute unprofessional conduct;
- Engaging in business practices and acts that are unfair, deceptive or anti-competitive;
- Conducting unlawful marketing practices to enroll members into NYC Health + Hospitals/MetroPlus Health Plan including, but not limited to, engaging in unlawful beneficiary inducements;
- Failure to promptly report a potential compliance concern or incident;
- Submitting false statements, certifications, qualifications and/or documentation required in any business dealings or one's role;
- Any violation of Federal and State human subject research laws and/or the NYC Health + Hospitals Human Subject Research Protections Program Policies and Procedures;



- Any violation of applicable NYC Health + Hospitals' policies and procedures;
- Other types of unprofessional conduct, including, but not limited to:
 - Misuse or misallocation of World Trade Center Health Program, DSRIP Program, research or grant funds;
 - Engaging in improper or illegal business arrangements;
 - Giving or receiving anything of value to induce referrals for items or services, or for the ordering of items or services;
 - Hiring or contracting with persons or entities excluded from participation in Federal health care programs; and
 - Engaging in any activity or conduct that may result in the imposition of civil monetary penalties.

VII. WHAT HAPPENS IF YOU ENGAGE IN UNPROFESSIONAL CONDUCT OR OTHERWISE VIOLATE THE POPC?

Workforce members or business partners who engage in unprofessional conduct or act contrary to applicable law or NYC Health + Hospitals' policies and procedures, many of which are summarized in the POPC core objectives or other elements of the POPC, shall be subject to disciplinary action up to and including termination of employment, contract, and/or other affiliation with NYC Health + Hospitals, as applicable.

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VIII. HOW TO REPORT ISSUES OR VIOLATIONS.

Workforce members and business partners, as applicable, are responsible for promptly reporting to the Office of Corporate Compliance any suspected unlawful or unethical behavior or incidents and/or violations of the POPC. Reports may be made, by phone, fax or e-mail in the following manner:

NYC Health + Hospitals
Office of Corporate Compliance
160 Water Street, Suite 1129
New York, NY 10038
Telephone: (646) 458-7799
Facsimile: (646) 458-5624
E-mail: COMPLIANCE@nychhc.org
Confidential Compliance Helpline: 1-866-HELP-HHC (1-866-435-7442)

Reports may be made anonymously by using the **CONFIDENTIAL COMPLIANCE HELPLINE** provided directly above. Each report received by will be treated confidentially, fully assessed, and investigated as warranted.

IX. PROHIBITION OF RETALIATION/WHISTLEBLOWER PROTECTION.

NYC Health + Hospitals is committed to protecting whistleblowers. Accordingly, NYC Health + Hospitals strictly prohibits intimidation, harassment, or retaliation, in any form against any individual who in good faith participates in the Corporate Compliance and Ethics Program by reporting or participating in the investigation of suspected violations of law, regulation, policies and/or suspicions of fraud, waste, or abuse. Examples of retaliation include unjustified discharge/termination, demotion, or suspension of employment; threatening or harassing behavior; and/or negative or onerous change in any term or condition of employment.

Any attempt by an individual or entity to intimidate, harass, or retaliate against a reporter or potential reporter will result in action up to and including termination of employment, contract, and/or other affiliation with NYC Health + Hospitals.



X. STAY INFORMED!

Workforce members and business partners are strongly encouraged to familiarize themselves with NYC Health + Hospitals' mission, values, *Guiding Principles*, and to stay informed of the many NYC Health + Hospitals policies related to the POPC's core objectives by visiting its intranet page at: <http://compliance.nychhc.org/>, or NYC Health + Hospitals' public website at: <http://www.nychealthandhospitals.org/hhc/html/about/About-PublicInfo-Compliance.shtml>. Questions regarding these policies or any of the following important topics, may be addressed by contacting the Office of Corporate Compliance as described in Section VIII above:

- NYC Health + Hospitals Corporate Compliance and Ethics Program;
- Stark Law, Anti-Kickback Statute, State and Federal False Claims Acts, Civil Monetary Penalties Law, Exclusion Authorities, Criminal Health Care Fraud Statute, and New York Labor Law §§ 740 and 741;
- Billing, coding, payments, accounting, and record keeping;
- Conflicts of interest;
- Customer and vendor relations;
- Discrimination, sexual harassment, and retaliation;
- Patient rights;
- HIPAA and patient confidentiality;
- Workplace safety and environment of care issues;
- Improper business arrangements (e.g., leases) or referrals; and
- Information governance.

