

**ST. JOSEPH'S REGIONAL MEDICAL CENTER  
POLICIES AND PROCEDURES  
ADMINISTRATIVE**

**Effective Date:** March 11, 2004      **Reference:** 1003      **Page:** 1 of 12

**Supersedes:** November 1, 2000      **Section/Reference:** E/13

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**POLICY**

St. Joseph's Regional Medical Center is committed to achieving high standards of business and personal ethics for itself, and all individuals employed by or doing work for the Medical Center. <sup>1</sup> *As a Catholic institution, the Medical Center has embraced and incorporated, be reference, the Code of Pastoral Conduct of the Diocese of Paterson.* Through performance in accordance with these standards, the Medical Center, its medical staff and all its employees will merit and enjoy the respect of its patients, the public, the business community, and regulatory authorities.

It is the personal responsibility of all employees to acquaint themselves with the legal and policy standards and restrictions applicable to their assigned duties and responsibilities, and to conduct themselves accordingly. Over and above the strictly legal aspects involved, all Medical Center personnel are expected to observe high standards of business and personal ethics in the discharge of their assigned responsibilities.

**LEGAL/REGULATORY CITES**

**JCAHO – RI 1.20  
LD 1.30**

**Employee and Medical Staff Conduct**

It is the policy of the Medical Center that all the business of the Medical Center be conducted in accordance with the highest legal, ethical and professional standards in full compliance with all applicable federal, state and local laws and regulations regarding health care regulatory matters as well as the requirements of governmental and nongovernmental organizations.

All covered individuals must comply fully with all applicable statutes and regulations and are required to deal fairly, honestly and professionally with patients and their families, regulatory authorities, payors, suppliers and the community at large. Every individual must avoid any action, relationship or situation which could jeopardize or impair the

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<sup>1</sup> Individuals employed by or doing work for the Medical Center includes but is not limited to: a. salaried employees; b. contracted employees; c. medical residents; d. attending Medical Staff; e. students; f. volunteers; g. business partners.

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confidence or respect in which the Medical Center is held by its patients and the general public. *Any individual involved in counseling and spiritual direction must always respect the rights and advance the welfare of each patient. Any one who provides pastoral services or counseling to children must fulfill the safe environment requirements as designated by the Diocese of Paterson and attend Virtus training as directed.*

Medical Center as an Equal Opportunity Employer – The Medical Center will not discriminate based on gender, age, race, color, religion, disability, etc. in its employment practice.

New Hire Job Qualifications – The Medical Center shall verify the qualifications of job applicants, including background and criminal checks where applicable by law, prior to the offering of employment by the Medical Center.

Harassment – The Medical Center shall provide a comfortable and secure working environment for its employees, free from physical, psychological, written or verbal intimidation or harassment. In accordance with this policy, harassment of any kind, including sexual and racial harassment, is illegal and will not be accepted nor tolerated by the Medical Center. *Any incident, whether a single event or a persistent pattern of behavior<sup>2</sup>, must be reported immediately to Human resources.*

Individuals under Investigation – Any employee under investigation for a criminal offense related to healthcare must notify their supervisor and the Corporate Compliance Office immediately.

**Conflict of Interest**

St. Joseph's Regional Medical Center expects that all employees exercise the utmost integrity in all transactions related to their duties at the Medical Center and its property. The Medical Center maintains a policy of full disclosure by its employees where a

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<sup>2</sup> Examples of Harassing Behavior includes but is not limited to: a. physical or mental abuse; b. racial insults, c. derogatory ethnic slurs or jokes; c. sexual advances or touching; e. sexual comments or sexual jokes; f. requests for sexual favors used as a condition of employment or to affect other personnel decisions such as promotion or compensation; g. display of offensive materials such as pornography or expressions of hate and discrimination; h. use of the internet to send or solicit sexual or offensive messages, threats, jokes or photos.

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potential conflict of interest exists. The Medical Center has adapted the IRS Sample Conflict of Interest Policy.

Full disclosure of any situation in doubt should be made to the their immediate supervisor and the Corporate Compliance Officer, so as to permit an impartial and objective determination. Disclosure relates to the employee's activities as well as the employee's immediate family. Each employee must complete a Statement of Understanding – Code of Conduct. Every member of management must compete a Conflict of Interest form annually.

Supervision of Subordinates – It is the policy of the Medical Center that all employees are properly supervised and that their job performances are evaluated fairly and objectively by their respective superiors. In accordance with this policy, a conflict of interest arises when a Medical Center supervisor is in a position to supervise and/or evaluate an immediate family member<sup>3</sup> who also works for the Medical Center. If this type of situation arises, the relationship must be disclosed to the Compliance Officer and the supervisor's superior and alternative arrangements must be made with regard to the supervision and evaluation of the subordinate, including a possible transfer of that individual to another department in the Medical Center

Employment of Relatives – It is the policy of the Medical Center to hire the most qualified individual for an employment position in the Medical Center. In accordance with this policy, the Medical Center and its Human Resources Department gives no preference to relatives of Medical Center employees who seek employment at the Medical Center.

### **Gifts to or by Employees**

It is the policy of the Medical Center that the practice of accepting gifts or gratuities is not only unnecessary and undesirable, but also contrary to the service interests provided by the Medical Center.

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<sup>3</sup> Immediate family member includes: spouse, child, parent, significant other, domestic partner, sibling, niece/nephew (if living with employee), grandparent

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No employee may accept payment from any patient, family or physician for work performed either on his/her scheduled time or on overtime. Impersonal gifts are expected to be shared by a work unit (example: boxes of cookies or candies).

Certain business courtesies, such as payment for a lunch or dinner in connection with a business meeting normally would not be a gift within the context of this policy. However, such activity shall be limited in frequency. Under no circumstance shall an employee solicit favors for personal use. Tickets to sporting events, Broadway shows, etc. shall be donated to the Foundation. Any question as to whether a gift might appear to be improper or questionable should be addressed to their immediate supervisors.

Continuing Education and Training – Vendors and suppliers of goods and services to the Medical Center may offer education or training programs without cost. Personnel may attend such training programs, but may not accept payment from the vendor or supplier for travel and lodging. If an employee attends such programs, they are encouraged to balance the perspectives of the vendor with the perspective of competing vendors.

Kickbacks and Rebates – It is the policy of the Medical Center to neither offer nor receive any payment of monies, supplies or services regarding the referral of patients, purchase of supplies and/or the performance of services. Purchase or sales of goods and services must not lead to personnel or their families receiving kickbacks or rebates. Kickbacks and rebates can take many forms and are not limited to direct cash payments or credits. In general, if you or your immediate family stand to gain personally, directly or indirectly, through the transaction, it is prohibited. Such practices are not only unethical but are illegal in many cases.

**Political Contributions**

No funds or assets of the Medical Center shall be used for federal, state or local political campaign contributions.

The above prohibitions apply only to the direct or indirect use of corporate funds or assets for political purposes and are, of course, not intended to discourage employees from making personal contributions to the candidates, parties or committees of their choice, or through the Medical Center's Political Action Committee. Under no circumstances shall employees be reimbursed in any way for personal contributions.

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### **Confidential Information**

Employees frequently have access to confidential information concerning the Medical Center, the Medical Center's patients, and other employees and members of the Medical Center's medical staff. Safeguarding confidential information is essential to the conduct of our business. Caution and discretion must be exercised in the use of such information, which should be shared only with those who have a clear and legitimate need and right to know.

No employee shall disclose confidential information of any type, to anyone, except persons who need to know in the performance of their job as is required by a government agency or third party. Information regarding a patient or a member of the Medical Center's medical staff may not be released to third parties, government, or other organizations, without the consent of the person involved.

Any requests for information arising through a legal process (e.g., subpoena or court order) must first be referred to legal counsel before the release of information. Any other information requests, such as from the press, should be referred to the Public Relations Department.

### **Patient Service and Concerns**

The mission of the Medical Center is to provide high quality services to all our existing and prospective patients. All appropriate requests should be honored. When adjustments are warranted due to billing or administrative errors, employees will make them promptly and courteously. Equally important, we seek to continuously improve policies, procedures, services and products that contribute to patient satisfaction.

All patient complaints require a response, either verbally or in writing, by the President or his designee. Patient complaints and comments will be incorporated into the Patients Relations database.

Document Services and Coding – It is the policy of the Medical Center to diligently, accurately and timely record medical services provided to its patients which information is used for billing purposes. The Medical Center will prepare accurate bills for services

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using proper billing codes utilizing the information documented in each patient's medical record.

Medical Center Cost Report – The Medical Center shall diligently and accurately prepare and submit its Medicare Cost Reports in full compliance with current laws and regulations.

Additionally, it is a violation of the Code to:

- Deliberately file or submit a false, fictitious or erroneous claim to any payor;
  - File a claim with reckless disregard for the falsity of the information;
  - Reassign a code that has been originally assigned by medical record coders.
- Changes must always be substantiated by documentation found in the patient's medical record;
- Delay the prompt repayment of funds which St. Joseph's received in error.

### **Patient Rights**

The Medical Center is committed to promoting consideration of patient values and preferences, and protecting the rights of all patients. In providing services to patients, the Medical Center does not discriminate on the basis of race, age, religion, national origin, sex, sexual preferences, handicap, or source of payment. The Medical Center shall transfer a patient to another facility only if it is unable to provide the type or level of medical care appropriate for the patient's needs or if transfer is requested by the patient, and the patient's condition is appropriate for transfer.

### **Patient Care**

Providing quality patient care is the primary objective of the Medical Center. Decisions regarding the clinical care of patients are made separately from any payment issues in order to protect the integrity of the clinical decision making. The Medical Center has implemented policies and procedures addressing this issue that are available to all patients, clinical staff, licensed independent practitioners and Medical Center personnel upon request. The Medical Center will ensure that the professionals who are rendering medical care and treatment to its patients are properly credentialed and licensed.

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### **Integrity of Records and Compliance with Accounting Procedures**

Accuracy and reliability in the preparation of all business records is mandated by law. It is of critical importance to the corporate decision-making process and to the proper discharge of the Medical Center's financial, legal and reporting obligations. All bills rendered to patients, their representatives or third parties must accurately reflect the services provided, and the patients' medical records shall properly and accurately record those services. All business records, expense accounts, vouchers, payroll and service records and other reports are to be prepared with care and honesty. False or misleading entries are not permitted in the books and records of the Medical Center or any affiliated company. All corporate funds or assets are to be recorded in accordance with applicable corporate procedures. Compliance with accounting procedures and internal control procedures is required at all times. It is the responsibility of all employees to insure that both the letter and the spirit of corporate accounting and internal control procedures are strictly adhered to at all times. Any employee should advise the responsible person in their department or the Corporate Compliance Officer of any shortcomings they observe in such procedures. Such reporting also may be accomplished by use of the confidential Medical Center reporting mechanism as set forth in this code of conduct policy. Reports may be made anonymously.

### **Marketing**

The Medical Center conducts its marketing activities in an honest, trustworthy and ethical manner. When providing information about its services to the public, the Medical Center strives to communicate clearly and accurately. The Medical Center takes necessary measures to ensure that its marketing activities conform to the requirements of applicable federal and state law. In particular, the Medical Center's marketing activities shall not offer financial incentives to increase referrals.

Dealing with Ineligible Companies – No contracts may be executed with companies that have been convicted of a criminal offense related to healthcare or that are debarred, excluded or otherwise ineligible for participation in governmental healthcare programs.

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### **Administration of the Code**

The Code of Conduct will be administered by formal and informal means. Certain aspects of the Code will be administered and enforced through the Medical Center's Compliance Program and other Medical Center policies. The Medical Center will hold education sessions periodically to explain and discuss the Code of Conduct and the Compliance Program. Employee attendance at these education sessions is mandatory.

Employees also are encouraged to seek guidance regarding the application or interpretation of this Code of Conduct and are expected to cooperate fully in any investigation of a potential violation. The statement set forth in this Code of Conduct are intended as guidelines for employees. Routine questions of interpretation regarding the Code shall be directed to the employee's supervisor or to the Corporate Compliance Officer. If any employee believes the Code, or particularly the Compliance Plan, may have been violated, the employee promptly shall report the potential violation to the Corporate Compliance Officer or make use of the confidential hot-line at Ext. 2017. Violations of the Code of Conduct and the Compliance Plan may be disciplined by the Medical Center, up to and including dismissal. However, the Code of Conduct and the Compliance Plan do not set forth all of the reasons or situation in which employees may be disciplined.

### **Reporting Mechanisms**

One of the key ingredients of an effective compliance program is the development of a system which employees can use to report questionable behavior without fear of retaliation. We have established **extension 2017** as the Corporate Compliance Hotline for this purpose. The Hotline will put you in touch with our Internal Auditors who report directly to the President. Some examples of behavior that should be reported include the following:

- A serious breach of patient or employee confidentiality by a co-worker
- Accepting bribes or kickbacks from a vendor
- Unethical or illegal activities by any co-worker

Employees are expected to bring these types of issues or concerns to their immediate supervisor. The supervisor should then evaluate the situation and address it. If an

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employee feels their concerns are not properly resolved or if the problem involves their supervisor, employees must contact the next level of management or the Corporate Compliance Hotline.

When calling the Hotline, please be sure to provide as much information as possible to enable the Compliance Officer to research the issue. They will begin a detailed investigation and provide the results of that directly to the President. Calls can be made anonymously from an outside phone. However if you want a response to your inquiry, you will need to provide your name and department. All Hotline calls will be kept confidential to the extent possible and still permit investigation.

If you have access to e-mail either at work or home, we have also established the following e-mail address for Corporate Compliance issues:

**[CorporateComplianceHotline@SJHMC.org](mailto:CorporateComplianceHotline@SJHMC.org)**

If you decide to use e-mail to report an issue, your identity will be known to the Compliance Officer through your e-mail address.

The Code of Conduct is not an employment contract, and the Medical Center may at any time modify the provisions of this Code of Conduct as it deems appropriate.

March 11, 2004  
Date

Signed Original in Administration  
Kevin Slavin  
Executive Vice President/COO

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**STATEMENT OF UNDERSTANDING**

**ST. JOSEPH'S REGIONAL MEDICAL CENTER  
CODE OF CONDUCT**

I certify that I have read and understand the Code of Conduct for the Corporate Compliance Program and agree to abide by it during the entire term of my employment. I acknowledge that I have a duty to report any alleged or suspected violation of the Code of Conduct or the Corporate Compliance Program to the Compliance Officer.

I understand that any violation of the Corporate Compliance Program, the Code of Conduct or any other corporate compliance policy or procedure is grounds for disciplinary action, up to and including discharge from employment.

Please check applicable box:

- This is my first review of the Corporate Compliance Program, Code of Conduct and Conflict of Interest Policy.
- This is an annual review of the Program, Code of Conduct and Conflict of Interest Policy.
- There has been a change of information previously provided. See attached explanation.

Your signature certifies that you have read and understand the Corporate Compliance Program Code of Conduct and Conflict of Interest Policy and agree to abide by them.

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Signature

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Print/Type Name

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Position

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Date

The original of this document signed during the new hire processing will be maintained in the employee's Human Resources personnel file. Subsequent annual documents signed by the employee will be maintained in the employee's departmental file.

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**St. Joseph's Regional Medical Center  
CORPORATE COMPLIANCE PROGRAM**

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**Certification of Compliance with the  
Conflict of Interest Policy**

I have no interest that may be deemed a conflict of interest under the Code of Conduct or Conflict of Interest Policy. I understand that any material misstatement or omission made by me in this certificate or my failure to adhere to the terms of the Code of Conduct and Conflict of Interest Policy may subject me to disciplinary action, including termination of employment.

I have violated no federal, state or local rule or regulation in connection with the business of the Medical Center and I am not aware of any actions of any other individual or of the Medical Center that violates the Code of Conduct or Conflict of Interest Policy except as follows:

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Neither I, nor any member of my family is a director, officer, partner or employee, nor do I or any member of my family have any other official position or business relationship with any business or professional enterprises including nonprofit business from which the Medical Center secures goods or services or that provides goods or services competitive with the Medical Center except as follows:

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I am employed solely by the Medical Center. I have no other employment except: \_\_\_\_\_

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Please list any other information that may be perceived as a conflict of interest.

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\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print/Type Name

\_\_\_\_\_  
Position

The original of this document signed during the new hire processing will be maintained in the employee's Human Resources personnel file. Subsequent annual documents signed by the employee will be maintained in the employee's departmental file. For all copies with handwritten notations concerning potential conflicts of interest please furnish a copy to the Compliance Officer.

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