



CODE OF CONDUCT 2021

A Message from the President

Our Mission

Blythedale Children’s Hospital (“BCH”, the “Institution”, or the “Hospital”)¹ is dedicated to improving the health and quality of life of children in an ethical and professional manner. We change the lives of children with complex medical illnesses and disabling conditions through superb multi-disciplinary care, teaching, research and advocacy programs.

We are the only specialty children’s hospital in New York State that provides the highest level of multidisciplinary medical care and rehabilitation for children with complex medical illnesses and conditions

Working collaboratively in an environment that fosters excellence, our goal is to improve each patient’s overall health, independence and quality of life, as well as provide hope to patients and families through superior outcomes — without regard to religion, race, color, national origin, age, disability, sex or ability to pay.

Our Vision

We are relentless in the pursuit of excellence in everything we do. We are innovators. We constantly challenge ourselves to find better treatment modalities and more effective ways of organizing and delivering services. We act with compassion and respect toward our patients and their families.

We are dedicated to interdisciplinary teamwork which is centered on providing first-class care and service.

We value all those who work for and with us, as they have built BCH’s reputation. We provide a work environment that is respectful and fair, allows management to listen to and communicate with Personnel (defined below) regularly; educates and trains those with whom we work on a regular basis so that they can effectively carry out their responsibilities; and compensates our Personnel fairly. Honesty and integrity characterize all of our actions and decisions.

¹ As used throughout this document, the term “Hospital” or “BCH” includes the Steven and Alexandra Cohen Pediatric Long Term Care Pavilion.

Our Compliance Program

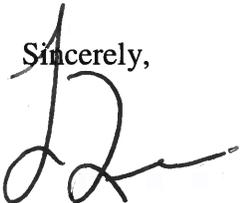
BCH has designed and implemented a comprehensive Compliance Program that sets forth the standards of conduct that all Personnel are expected to follow in their employment or course of dealings with the Hospital. "Personnel" includes all employees, executives, governing body members, and any other person or affiliate who is associated with BCH. This includes, for example, independent contractors, interns, volunteers, vendors and others. One significant element of the Compliance Program is this Code of Conduct (the "Code of Conduct" or "Code"), which has been approved by the Hospital's Board of Trustees (the "Board"). This Code is designed to be consistent with the principles set forth in our Mission Statement, as well as applicable laws and regulations. It is a sign of our commitment to ensuring that our actions reflect our words. In this spirit, we expect all Personnel to adhere, without exception, to these standards.

This document, in addition to setting forth the Hospital's Code of Conduct, highlights some of the key elements at the core of BCH's Compliance Program. This Code of Conduct is supplemented by the more detailed Blythedale Children's Hospital Compliance Manual and Hospital Policies and Procedures pertaining to specific areas. Please familiarize yourself with the contents of this Code and continue to uphold its legal and ethical principles without exception.

Our Compliance Program will continue to operate effectively only if everyone takes the time to be aware of what our Code of Conduct states, abides by its requirements and works to support our dedication to maintaining the highest standard of care in compliance with all applicable laws, rules and standards. In short, we are committed to "doing the right thing."

Thank you for your commitment to providing an ethical and lawful environment in which we can serve our patients. If you have any questions regarding the Hospital's Compliance Program, please refer to the Code of Conduct or speak with the Hospital's Chief Compliance Officer. Remember that violations of legal or ethical requirements jeopardize the welfare of our Hospital, our employees and patients, and the community we serve. Remember too, that standards of conduct mean little without personal commitment. Ultimately, the responsibility for ethical behavior – and thus for our reputation – rests largely in your hands.

Sincerely,



Larry Levine
President and CEO

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OVERVIEW

PURPOSE OF THE CODE OF CONDUCT

As a central part of BCH's Compliance Program, this Code of Conduct sets forth the standards of conduct that all Personnel of the Hospital are expected to follow. Everyone shall adhere to both the spirit and the language of this Code of Conduct in order to deter wrongdoing and promote honest and ethical conduct. BCH has established this Code of Conduct so that all Personnel will know and understand the expectations of proper conduct and behavior. This Code of Conduct is a framework within which all Personnel are expected to function. Responsibility for lawful and ethical behavior is a personal responsibility, and all Personnel will be held accountable for their conduct.

Ethics and accountability are central to the core values and mission of the Hospital. The Code of Conduct is intended to be reasonably comprehensive and easily understood. However, it is not meant to answer every question that might arise in your daily activities. This Code of Conduct contains brief descriptions of legal requirements that we believe require particular sensitivity. However, these descriptions of sensitive issues are not a complete list of possible unlawful and unethical acts, and the Code of Conduct should not be interpreted as condoning, by implication or otherwise, any other illegal or unethical conduct. In addition, these standards supplement, and do not replace any BCH or program-specific policies and procedures, and some of the topics described in this Code are covered in detail in other BCH policy documents. You are required to be familiar with these policies, and it is your obligation to read them and refer to them for specific information, and to seek clarification from your supervisor or the Compliance Officer of any questions you may have. In addition, all Personnel should be aware of the basic legal requirements that apply to their responsibilities at BCH. If any Personnel or other individual is ever in doubt as to what is required under the law, this Code of Conduct or other BCH policies, he or she should speak with the Compliance Officer and/or his or her appropriate supervisor, or other BCH management staff. In addition, while this Code of Conduct does provide guidelines, direction and resources you can use to respond to matters and circumstances in the course of your BCH duties, no set of guidelines, including our own, can ever substitute for the sound judgment, common sense and personal integrity required to meet the challenges of your job.

The Board and senior management are committed to compliance and ethical behavior in all of the Hospital's activities. The Code of Conduct is reviewed annually and updated as necessary and appropriate. If anyone has a question about the applicable legal requirements and/or policy or procedural requirements, they should ask their supervisor or the Chief Compliance Officer.

PERSONNEL RESPONSIBILITIES

It is the responsibility of all Personnel to be familiar and comply with all requirements that pertain to their areas of responsibility, recognize and avoid actions and relationships that might violate those requirements, and seek assistance in situations raising legal and ethical concerns. All BCH Personnel are required to:

- Read and abide by this Code of Conduct

- Adhere to the highest ethical standards of conduct in all business and professional activities, abiding by the letter and spirit of all applicable laws.
- Be familiar with, understand and observe the basic legal and regulatory requirements that are relevant to their duties
- Deal fairly and honestly with patients, other employees, vendors, government agencies, third party payers, and others
- Ensure the confidentiality of patient and BCH information
- Respect the cultural values and religious beliefs of patients and family members, co-workers, staff members and visitors
- Prevent and/or refrain from discrimination or harassment of any kind, including racial, ethnic or sexual harassment
- Refrain from conflicts of interest and/or using a position for personal gain
- Report possible or actual violations of law or ethical standards
- Promote relationships based on trust and respect, in an environment where employees may question a practice without fear of adverse consequences
- Require that outside colleagues (e.g., vendors, consultants and others) also adhere to these same standards

BCH is committed to full compliance and expects its Personnel to obey all applicable Federal, State and local laws and regulations, to comply with Hospital policies and procedures, and to follow the guidelines in this Code of Conduct. Compliance is an important aspect of our performance evaluations. A violation of this Code of Conduct, BCH's Compliance Program policies and procedures, or any law or regulation will be handled through normal disciplinary procedures, and may lead to serious disciplinary action, up to and including immediate termination of employment, contract or affiliation.

COMPLIANCE QUESTIONS

Honesty, common sense, and sound judgment are your best guides in determining if your personal actions meet the expected standards for ethical and lawful behavior. However, if you find yourself in a situation where you are unsure, ask yourself these questions:

- Is my action consistent with BCH practices and legal or regulatory requirements?
- Could my action give the appearance (to others) of impropriety or wrongdoing?

- Will the action bring discredit to any Personnel, or to BCH, if disclosed fully to the public?
- Does my action meet my personal code of behavior?

Name	Contact Information
Compliance Officer: John Flanagan	Ph: (914) 592-7555 ext. 71408 Email: jflanagan@blythedale.org
Confidential Hotline Phone Number	Ph: (833) 656-0413
Confidential Hotline Website:	Visit: www.blythedale.ethicspoint.com

The Compliance Hotline will not be answered by anyone without compliance responsibilities. Certain compliance issues may require further detail and instruction. To that end, the Hospital has adopted specific Compliance Program policies and procedures covering certain areas. Personnel are required to understand and follow all policies and procedures that apply to their work. The Compliance Program policies and procedures are available on the BCH Intranet or by contacting the Chief Compliance Officer.

What to Report:

Report concerns about any legal, ethical, quality, behavioral or practical issue, or any activity that you think may be a problem. Pay particular attention to issues related to federal and state health care programs (i.e. Medicaid). Reasonable belief that a violation is possible is sufficient to initiate a report. To help you determine whether an issue should be reported, consider the following questions:

- Does the matter comply with pertinent BCH policies and procedures?
- Is the action legal? Is it ethical?
- How would the action appear if it were disclosed to the public?

Internal Investigations:

BCH is committed to investigating all reported concerns promptly and confidentially to the extent appropriate in the Hospital’s judgment and consistent with its legal obligations. The Compliance Officer will coordinate any findings and take prompt and appropriate corrective action(s). We expect all Personnel to cooperate with investigation efforts.

Corrective Action:

Where an internal investigation substantiates a reported violation, appropriate corrective measures will be taken, including, but not limited to, notifying the appropriate governmental agency, instituting appropriate disciplinary action and implementing systemic changes to prevent

a similar violation from recurring in the future. Corrective action plans will be shared with all appropriate parties.

Disciplinary Action:

Disciplinary action, up to and including termination, will be determined and depend upon the nature, severity and frequency of the violation. Principles of fairness will apply, including, when appropriate, a review of a disciplinary decision. Discipline may be imposed for:

- Violating this Code of Conduct
- Failing to report a violation of the Code of Conduct or cooperate in an investigation
- Retaliating against an individual for reporting a violation or possible violation of the Code of Conduct
- Deliberately making a false report of a violation of the Code of Conduct

Internal Monitoring and Auditing:

BCH is committed to an ongoing assessment process. Monitoring and audit activities are conducted under the auspices of the Compliance Officer. The audits are designed to address BCH's compliance with laws, regulations and policies governing, among other things, coding, reimbursement, documentation, medical necessity and other areas that may be deemed high risk.

Additional Resources:

While this Code of Conduct provides overall general guidance, there are additional guiding resources to our Compliance Program available to Hospital Personnel. They include Hospital-wide and department-wide specific policies and procedures, the Employee Handbook, as well as consultation with individuals within your chain of command, beginning with your immediate supervisor. Additional resources include periodic informational newsletters and other similar advisory memoranda.

Specific institutional policies and procedures can be found in the Compliance and Human Resources Manuals. Annual hospital training is required via the Relias platform and includes at compliance modules. Additional training opportunities will be communicated when available.

STANDARDS

ORGANIZATIONAL ETHICS:

We recognize our ethical and moral obligation to the patients, families and communities we serve. We treat all patients with respect and dignity and provide a single standard level of care that is both necessary and appropriate. Upon admission, each patient and, as applicable, their parents or other legally authorized representative is provided with the written statement "Patients' Bill of Rights", which all Personnel are required to honor. This document, which is posted in public areas throughout the Hospital, includes the rights of patients and, as applicable, their parents or other legally authorized representatives to make decisions about their medical

care. We respect the rights of patients and, as applicable, their parents or other legally authorized representatives, to be involved in all aspects of their care and obtain informed consent for treatment. Thorough and complete records of patient information will be maintained. Patients may not be discriminated against in any manner on the basis of their race, color, religion, national origin, gender, age, or sexual orientation.

BCH is also committed to the following:

- Equal opportunity for employment and advancement on the basis of ability and aptitude without regard to race, color, religion, national origin, age, gender, marital or military status, disability or sexual orientation, except where age, gender or physical status is a bona fide occupational qualification;
- Prohibition of sexual harassment in the work place;
- Protection of the health and safety of employees in their work environment;
- Full compliance with all applicable laws regulating the employer-employee relationship;
- Prompt investigation of allegations of all forms of illegal discrimination and sexual harassment.

BCH maintains a human resource policy manual with specific policies governing employment. Employees should be familiar with these policies.

CONFIDENTIALITY / BCH INFORMATION:

The confidentiality of patient records and information must be maintained in accordance with privacy and security laws and regulations that protect patient information, including, but not limited to protected health information (PHI) under the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and the Health Information Technology for Economic and Clinical Health (HITECH) Act of 2009, the Family Educational Rights and Privacy Act (FERPA) and applicable State laws. The Hospital has implemented and maintains a HIPAA Compliance Program that addresses privacy and security. Personnel must adhere to the standards of our HIPAA Compliance Program, including:

- Access to PHI is limited to those permitted by law and BCH policy
- Maintaining computer passwords and access codes in a responsible and confidential manner in accordance with BCH policy
- Ensure patient information is not discussed in public areas, including elevators and cafeteria

Any Personnel who engage in unauthorized or unlawful disclosure of information in violation of the privacy rights of our patients are subject to disciplinary action, up to and including termination. Individuals also may be subject to civil or criminal penalties.

Confidential information acquired by Personnel about the business of the Hospital must also be held in confidence and not used for personal gain, either directly or indirectly. No one shall,

without the written consent of BCH, disclose any confidential information obtained during the course of employment or other engagement with BCH. This includes, but is not limited to, the Hospital's processes, techniques, computer software, equipment, copyrights, research data, patient's medical records, patient lists, financial data and any plans that have not been published or disclosed to the general public. Additionally, Personnel must not make inappropriate modifications to information or destroy or disclose information except as authorized. Documents containing sensitive data, including, without limitation, PHI, should be properly secured at the end of the business day.

BCH Personnel are expected to take all reasonable precautions, in accordance with BCH policies, to ensure the physical security of confidential information and facilities.

All BCH communications systems, electronic mail, Internet access or voice mails are the property of BCH and are to be primarily used for business purposes. Limited responsible personal use of communications systems is permitted in accordance with BCH policies; however, BCH reserves the right to monitor the use of its electronic media resources and to take appropriate disciplinary measures in cases of misuse.

All marketing and public relations materials must accurately and honestly reflect the service available and the applicable levels of licensure and accreditation and must comply with the applicable laws and regulations of truth in advertising and nondiscrimination. These materials, as well as other communications with outside organizations or individuals, may not disparage any patients, employees or competitors (including its facilities and services). Such materials may instead may make fair comparisons of competitors by stressing with factual accuracy the advantages of BCH's facilities and services.

QUALITY OF CARE:

The Hospital is committed to providing patients with the highest quality care and services possible, pursuant to the highest ethical, business and legal standards. As part of this commitment, we will ensure that necessary quality assurance systems and related functions are in place and proceed effectively, that quality related data is collected and reported as required, and that we engage in continuous, pro-active quality improvement processes to address gaps in the current system and identify other areas for improvement. All services provided will be in conformity with applicable Federal and State laws and regulations, and other applicable requirements, regarding the provision of such services.

The Hospital is committed to ensuring that all patients under its care receive prompt access to the full range of medically necessary and clinically appropriate health care services to which the patient is entitled. The Hospital will ensure that patient care conforms to acceptable clinical and safety standards.

BCH does not do business with, hire, bill for services rendered by, or accept referrals from individuals or entities that are excluded from, debarred from or otherwise ineligible to participate in Federal Health Care Programs.² Personnel must report to their supervisor or the Human

Resources Department immediately if they become excluded, debarred or otherwise ineligible to participate in any Federal Health Care Program, including Medicare and Medicaid, or become aware that anyone doing business with or providing services for, BCH has become excluded, debarred or otherwise ineligible. In furtherance of this policy, Personnel shall also regularly be checked against applicable government sanctions lists, such as the NYS Medicaid Exclusion List, to help ensure that Personnel are not individuals or entities that have been convicted of criminal offenses related to health care, or that are excluded, debarred or otherwise ineligible for participation in Federal Health Care Programs.

In addition to the Standards set forth in this Code of Conduct, Personnel are expected to have and maintain all required licenses, registrations and/or certifications and to follow the ethical and professional standards dictated by their respective professional organizations and licensing boards. The Hospital will take steps on a regular basis to ensure compliance with all applicable Federal and State credentialing requirements.

Both federal and state laws regarding the promotion of occupational safety and the avoidance of job related hazards are designed to ensure that work environments are safe. Due regard and attention must be paid to those laws and regulations, as well as to institutional safety policies.

The illegal use, sale, purchase, transfer, possession or presence in one's system of illicit drugs is strictly prohibited. Consumption or presence in one's system of alcoholic beverages while on duty is also strictly prohibited.

The proper distribution and handling of pharmaceutical products is governed by various federal, state and local laws. In addition, these laws prohibit the diversion of any prescription drug or controlled substance, in any amount for any reason to an unauthorized individual or entity. The distribution of adulterated, misbranded, mislabeled, expired or diverted pharmaceuticals is also a violation of federal and state law.

² "Federal Health Care Program" generally means any plan or program that provides health benefits, whether directly, through insurance, or otherwise, which is funded directly, in whole or in part, by the United States Government or any State health care program. For example, some of the better known Federal Health Care Programs include, but are not limited to, Medicare, Medicaid, TRICARE and veterans' programs.

All employees must be diligent and vigilant in carrying out their obligations to handle and dispense prescription drugs and controlled substances in accordance with all applicable laws, regulations, and institutional procedures.

BUSINESS CONDUCT AND CORPORATE STANDARDS:

BCH Personnel are expected to perform their duties in good faith to the best of their ability and to not engage in any illegal, unethical, unfair or deceptive conduct relating to business practices. All business records must be accurate, truthful and complete, with no material omissions. Similarly, all reports submitted to governmental agencies, insurance carriers, or others will be accurately and honestly made.

The Hospital will forgo any business transaction or opportunity that can only be obtained by improper or illegal means, and will not make any unethical or illegal payments to induce the use of our services.

The Hospital has adopted a Conflict of Interest Policy that, among other things, requires all trustees, officers and key employees to disclose potential conflicts and related party transactions on an annual basis and as conflicts arise. All institutional decisions must be made solely to promote the best interests of BCH without favor or preference based on personal consideration, and all employees are expected to conduct themselves ethically in all institutional matters and activities. Employees must at all times discharge their duties and responsibilities in the best interests of BCH and use its resources only in furtherance of institutional goals. The theft of institutional assets or the use of an employee's position or confidential information gained from personal advantage will not be tolerated.

Any contact with representatives of city, county, state or federal governments to explain and advocate for the Hospital's position on issues must abide by applicable laws at all times. In addition, lobbyists or lobbying firms may be periodically engaged to help promote institutional interests and internal controls have been established to assure that all such activities are appropriate. Authorization must be obtained prior to engaging any lobbyist, outside legal counsel or consultant to lobby for or otherwise promote institutional interests on any legislative, regulatory or other governmental issue.

Participation in the political process is a basic right of our employees. It is important, however, to distinguish between personal and institutional political activities. Federal and state laws limit the nature and extent to which an organization may participate in political activities.

OVERSIGHT OF BCH/PATIENT ASSETS:

BCH Managers, Officers and Directors are responsible for establishing appropriate internal controls within their area(s) of purview to safeguard BCH assets, ensure the accuracy of financial records and reports, and maintain accurate reporting of all transactions. Personnel are expected to observe BCH's rules and practices for safeguarding not only BCH's assets but also the property entrusted to us by our patients.

ACCURACY, RETENTION AND DISPOSAL OF DOCUMENTS AND RECORDS:

All BCH Personnel are responsible for the integrity and accuracy of our business documents and records in order to comply with regulatory and legal requirements, as well as to ensure that records are available to defend our business practices and actions. No one may alter or falsify information on any record or document.

All records must be fully and accurately completed and maintained consistent with proper business practices. Medical records serve as a basis for treatment decisions for patients as a record of historical courses of treatment and support the billing for services. Consequently, the proper and timely creation of fully accurate and complete records is a duty of all employees.

In addition, the law requires the maintenance of certain types of medical and business records, usually for a specified period of time. Even if a document is retained for the minimum period, legal liability could still result if it is destroyed before its scheduled destruction date.

Accordingly, policies have been established in specific areas to assure retention for required periods.

Employees are expected to comply fully with the records retention and destruction schedule for the department in which they work. Questions about document retention beyond the applicable retention period should be addressed to department management and the Compliance Officer.

TRADE PRACTICE/ANTITRUST ISSUES:

We are required to comply with all antitrust laws, which are designed to preserve and foster fair and honest competition within the free enterprise system. These laws could be violated by discussing BCH business with a competitor, such as how our patient charges are established or disclosing the terms of a supplier relationship. In general, avoid discussing sensitive topics with competitors or suppliers.

PHYSICIAN RELATIONSHIPS:

Any business arrangements with a physician or a physician group must be structured to ensure compliance with legal requirements. Such arrangements must be in writing and subject to approval under BCH's policies and procedures.

ANTI-KICKBACK AND REFERRALS:

Federal and state laws prohibit any form of kickback, fee-splitting, bribe or rebate (cash or in-kind) to induce the purchase, recommendation to purchase, reduction or limitation of services, or referral of any kind of health care goods and services or items, including as paid for by the Medicare and Medicaid programs. BCH does not offer or receive inducements or create situations in which the Hospital appears to be offering or receiving an improper inducement. Federal fraud and abuse laws also generally prohibit health care providers from offering or providing inducements to Federal Health Care Programs beneficiaries to encourage the use of any particular health care provider or item or service. Personnel may not, in violation of applicable laws or BCH policies, offer free or below fair market value items or services to patients to attract their business (including gifts, gratuities and other things of value).

In addition, Personnel may not offer, pay, solicit or receive any remuneration (i.e., anything of value) to or from any person or entity that would compromise the Hospital's integrity (or even create an appearance that compromises the Hospital's integrity), or under circumstances where the remuneration is offered, paid, solicited or received with a purpose of inducing or rewarding business between the parties. Cash or cash equivalents may not be given or accepted under any circumstances.

The Hospital will verify that its relationships are in compliance with applicable Federal and State antireferral laws, including but not limited to the Anti-Kickback Statute and the Prohibitions on Physician Self Referrals (commonly known as the “Stark” law).

CODING AND BILLING INTEGRITY:

Personnel must comply with all applicable Federal and State laws and third party payer rules and regulations governing the submission of billing claims and related statements. BCH will ensure that all billings to governmental and third-party payers are true and accurately reflect only medically necessary services and other necessary data provided to our patients. Staff is prohibited from knowingly presenting or causing to be presented claims for payment or approvals that are false, fictitious or fraudulent. For example, Personnel are required to comply with the Federal False Claims Act and similar State laws that, among other things, prohibit the knowing submission of false claims and that are aimed at deterring fraud and abuse in Federal Health Care Programs. A detailed description of these laws can be found in BCH’s separate policy entitled, “Compliance with Federal and State False Claims Laws.” Appropriate training is provided to Personnel involved in the billing, coding and claim submission process.

Only medically necessary services that are consistent with accepted standards of medical care may be billed. Billing and coding must always be based on adequate documentation of the medical justification for the service provided and the bill submitted, and such medical documentation must be accurate, truthful and comply with all applicable laws, rules and regulations and other requirements.

Personnel and others associated with the Hospital are strictly prohibited from knowingly engaging in any form of up-coding of any service(s), or any other billing practice that violates any applicable law, rule, regulation or other requirement. In addition, all documentation, regardless of any legal requirements, must be sufficient to satisfy the Hospital’s own internal standards for quality assurance as to the services rendered.

BCH is committed to complying with federal and state laws requiring the submission of complete and accurate cost reports related to the Hospital’s operations. Those laws and regulations define what costs are allowable and outline the appropriate methodologies to claim reimbursement for the cost of services provided to program beneficiaries. All billing practices, including without limitation, the preparation and submission of billing claims and related statements, the preparation and filing of cost reports must comply with all Federal and State laws and regulations, all other applicable requirements, and BCH’s policies and procedures. Cost reports are subject to internal and/or external audit to ensure that any identified issues are corrected in a timely manner.

If any errors or mistakes occur, they are reported to a manager promptly and corrected in a timely and appropriate manner. BCH will timely report, return and explain any identified overpayments received from a Federal Health Care Program or other payers in accordance with applicable law, regulation and/or contractual obligation.

MEDICAL RECORDS:

BCH strives to ensure medical records are accurate and provide information that fully documents the treatment provided and supports the claims submitted. Tampering with or falsifying medical records, financial documents or other business record of BCH is strictly prohibited.

MANDATORY REPORTING:

BCH will ensure that all incidents and events that are required to be reported under Federal and State mandatory reporting laws, rules and/or regulations are reported in a timely manner.

BCH is committed to ensuring all Personnel, including physicians, management, consultants and vendors and contractors who provide services, comply with all applicable laws and regulations and internal policies and procedures designed to prevent and deter fraud, waste or abuse, false claims and statements and ensure for whistleblower protections. The President and CEO will ensure that the Hospital complies with all certification requirements regarding the adoption, implementation and maintenance of an effective Compliance Program, as well as requirements under the Deficit Reduction Act of 2005.

Moreover, the Hospital will make use of the appropriate self-disclosure or refund process whenever appropriate, and with the advice and assistance of legal counsel or others, as necessary.

LICENSURE/ACCREDITATION:

BCH is licensed by the State of New York and accredited by the Joint Commission. These and other entities that regulate the Hospital have numerous requirements determining how BCH shall deliver its services. Personnel are expected to be familiar with the regulations governing their area and to stay abreast of new developments.

GOVERNMENT INQUIRIES:

It is the Hospital's policy to comply with the law, properly respond to all governmental investigations or inquiries, and to ensure that government agencies are provided promptly with all necessary and appropriate information. Any Personnel approached by any federal or state law enforcement or regulatory agency (i.e. Medicare, Medicaid) official seeking information about any aspect of BCH shall immediately notify their supervisor and the Compliance Officer. In addition, any request for documents or a subpoena should be promptly provided to the Compliance Officer, to coordinate our response and ensure it is accurate and complete. Any action by Personnel to destroy, alter, or change any Hospital records in response to a request for such records is prohibited and shall subject the individual to appropriate disciplinary action, including immediate discharge, as well as to possible civil and/or criminal penalties, government inquiries and investigations.

Blythedale Children's Hospital

ATTESTATION AND ACKNOWLEDGMENT OF RECEIPT OF CODE OF CONDUCT

I acknowledge that I have received and read the Blythedale Children's Hospital Code of Conduct.

I affirm the following:

I will follow the standards set for the in the code of Conduct. I will ask questions if I don't understand my responsibilities under the Hospital's Compliance Program.

If I become aware of any possible violations of the code of conduct, or if I have concerns or questions about the appropriateness of any practices at the Hospital, I will report such issues to the Chief Compliance Officer, or to my supervisor, or through the Compliance Hotline.

I understand that I may be subject to discipline or other corrective action, up to and including termination of employment, termination of contract, or loss of privileges, if I violate the standards and requirements of our Compliance Program, including those set forth in the Code of Conduct or any related applicable Compliance Program policies and procedures.

Signature

Date

Print Name