

St. Mary's Healthcare Standards of Conduct

Mission, Vision, and Values

Our Mission, Vision, and Values provide a strong foundation and guidance for the work we do in transforming healthcare. They serve as a framework that expresses our priorities in responding to the care of those most in need and demonstrate our commitment to our patients and our community.

MISSION

Rooted in the loving healing ministry of Jesus and inspired by the legacy of the Sisters of St. Joseph of Carondelet, we serve all with compassion and excellence.

VISION

St. Mary's Healthcare will be a strong, independent, Catholic Health Care Ministry dedicated to improving the health and well-being of our community and beyond with special attention to the poor and underserved. Our compassionate care will inspire confidence, evident through our reputation for excellence, service, and our commitment to safety and quality.

VALUES

We have a common vision and are called to act upon the following ideas and beliefs:

Care for poor and vulnerable persons; special attention to
persons living in poverty

Reverence: holistic and gentle care that respects the
sacredness of every individual

Joyful Service: inspired service by a flourishing community of associates

Integrity: truthful and humble servant leadership and stewardship

Advocacy: acting and speaking to promote human dignity and justice

Creativity: leading with vision and courageous innovation

The purpose of this Code of Conduct is to establish a clear framework that guides all associates, contractors, vendors, and other affiliates in conducting their duties in an ethical, legal, and compliant manner. This Code ensures that the St. Mary's Healthcare adheres to all relevant regulatory requirements, including those outlined by the U.S. Department of Health and Human Services Office of Inspector General (OIG) and the New York State Office of Medicaid Inspector General (OMIG).

The St. Mary's Healthcare is committed to full compliance with all applicable federal, state, and local laws, as well as regulations such as the federal False Claims Act, the Anti-Kickback Statute, Stark Law, and the Health Insurance Portability and Accountability Act (HIPAA). Associates and stakeholders are expected to follow the standards set forth by the OIG and OMIG, particularly in relation to proper billing, coding, and documentation practices. To ensure compliance, the St. Mary's Healthcare will conduct ongoing audits, reviews, and monitoring, and will maintain a reporting system to address any non-compliance.

The St. Mary's Healthcare expects all associates to act with integrity, honesty, and transparency, especially when it comes to billing and coding, patient care, and business transactions. It is essential that associates refrain from engaging in upcoding (billing for higher-level services than actually provided) or unbundling (separately billing services that should be packaged together). All claims submitted for payment, reimbursement, or any other form of compensation must be accurate, complete, and truthful, reflecting the services that were actually rendered and appropriately documented.

Associates are encouraged to report any suspected violations of laws, regulations, or St. Mary's Healthcare policies, particularly regarding healthcare fraud, waste, or abuse, without fear of retaliation. The St. Mary's Healthcare has established mechanisms, including anonymous and confidential channels, for associates to report concerns. Retaliation against individuals who report in good faith is strictly prohibited and will result in disciplinary action. Associates and contractors must also adhere to their obligation to report any potential violations of the law or St. Mary's Healthcare policy.

The St. Mary's Healthcare is committed to preventing, detecting, and responding to fraudulent or abusive practices. To support this, all associates, contractors, and affiliates must complete annual training on the prevention of fraud, waste, and abuse, as well as comply with the OIG and OMIG's requirements. This training ensures that staff members are fully aware of their responsibilities to avoid engaging in any activities that could be considered fraudulent or unethical.

Patient confidentiality and privacy are paramount. Associates must protect patient information in compliance with HIPAA regulations, ensuring that sensitive data is only shared with authorized individuals for legitimate healthcare purposes. The unauthorized use or disclosure of patient information for personal or professional gain is strictly prohibited.

The hospital also expects all associates to act in accordance with ethical business practices in their relationships with third-party vendors, contractors, and other business partners. The acceptance of gifts, kickbacks, or any other form of bribery or improper influence is strictly prohibited. Associates must disclose any potential conflicts of interest and refrain from participating in business transactions where personal interests could be perceived to influence their professional actions.

The hospital will take disciplinary action against any associate, contractor, or vendor who violates the Code of Conduct. Consequences for non-compliance may include termination, legal action, immediate termination of contracts, or other corrective measures, in accordance with applicable laws and hospital policies. The hospital enforces a zero-tolerance policy for fraud and abuse, and will actively pursue remedies under the law in response to violations.

Reference Section

1. **U.S. Department of Health and Human Services Office of Inspector General (OIG).** (2023). *Compliance Program Guidance for Individual and Small Group Physician Practices*. Available at: <https://oig.hhs.gov/compliance/compliance-guidance/index.asp>
2. **Office of Medicaid Inspector General (OMIG).** (2023). *OMIG Compliance Program Requirements*. Available at: <https://omig.ny.gov/compliance>
3. **The False Claims Act.** (2023). U.S. Department of Justice. Available at: <https://www.justice.gov/civil/false-claims-act>
4. **Anti-Kickback Statute.** (2023). U.S. Department of Health and Human Services. Available at: <https://oig.hhs.gov/compliance/program-guidance/>

Health Insurance Portability and Accountability Act (HIPAA). (2023). U.S. Department of Health and Human Services. Available at: <https://www.hhs.gov/hipaa/index.html>

5. **Stark Law (Physician Self-Referral Law).** (2023). Centers for Medicare & Medicaid Services. Available at: <https://www.cms.gov/medicare/fraud-and-abuse/physician-self-referral>
6. **New York State Public Health Law.** (2023). Available at: <https://www.nysenate.gov/legislation/laws/PBH>

By signing below, I acknowledge that I have received, read, and understood the hospital's Code of Conduct and agree to adhere to its principles and comply with the applicable laws and regulations set forth by the OIG, OMIG, and other relevant authorities.

Signature: _____

Date: _____