Compliance Program and HIPAA CODE OF CONDUCT

As a central part of White Plains Hospital and off sites (the "Hospital") Compliance Program this Code of Conduct sets forth the standards of conduct that all personnel of the Hospital are expected to follow. Everyone should adhere to both the spirit and the language of this Code in order to avoid any conduct that might violate HIPAA or give the appearance of violating HIPAA.

A. MISSION AND VALUES

The Hospital is committed to providing patients with quality health care, in a confidential and private manner in accordance with the wishes of its patients and the requirements of applicable law. These standards apply to the Hospital’s interactions with its patient, other health care providers, consultants, vendors, the government entities to whom the Hospital reports, public and private third party payors (e.g. Medicare, Medicaid, managed care companies and HMOs), and any other persons and entities with whom the Hospital interacts. In this regard, all the Hospital personnel and any other persons and entities must act in compliance with all applicable legal rules and regulations.

The Hospital does not, and will not, tolerate any form of unlawful behavior by anyone associated with the Hospital. We expect and require all personnel and any other persons and entities to maintain the confidentiality and security of our patients’ health information in accordance with HIPAA standards. To ensure that these expectations are met, the Compliance Program will become an integral part of the Hospital’s corporate mission and business operations.

B. GENERAL STANDARDS

1. Compliance with Applicable Law and Hospital Policies. All personnel and any other persons and entities are expected to comply specifically with all of the requirements of HIPAA regarding the privacy and security of health information. If personnel and any other persons and entities are unsure whether a use or disclosure of health information complies with HIPAA, they should bring the matter to their supervisor or the Hospital’s Privacy Officer or Security Officer or their designee.

In addition, all personnel and any other persons and entities must comply with the policies and procedures developed by the Hospital in connection with its Compliance Program. Strict compliance with these and HIPAA compliance standards is a condition of employment and/or affiliation with the Hospital, and a violation of any of these standards of conduct may result in discipline being imposed, which can include termination of employment, loss of clinical privileges, termination of contract, legal action for monetary damages or injunction, or both, or any other remedy available to White Plains Hospital.

2. Cooperation with the Compliance Program. Because of the importance of the Compliance Program, we require that each member of the Hospital’s workforce cooperate fully with this effort. The Compliance Program will work effectively only if everyone works together to ensure its success.
Therefore, Hospital personnel and any other persons and entities must understand what is required under the law and must adhere to the Compliance Program standards. In particular, all personnel and any other persons and entities must cooperate with all inquiries concerning the use, disclosure, transfer, security, release, sharing, utilization, examination, access to, or analysis of an individual's health information and actively work to correct any improper practices that are identified. Furthermore, it is imperative that all personnel and any other persons and entities report suspected Compliance and HIPAA violations to their supervisors, the Privacy Officer or Security Officer, or the Compliance Officer or their designee. Ignoring suspected Compliance or HIPAA violations may subject personnel to disciplinary proceedings by the Hospital.

3. **Retaliation.** The Hospital expressly forbids any intimidation, threats, coercion, discrimination or retaliation against individuals who report in good faith suspected Compliance or HIPAA violations.

C. **SCOPE AND APPLICATION OF STANDARDS TO PERSONNEL AND OTHERS**

1. **Personnel Covered.** The Hospital’s Compliance and HIPAA Program, including the standards set forth in this Code of Conduct, applies to all personnel employed by or associated with the Hospital (including health care practitioners with clinical privileges), all of its affiliated companies and any other persons and entities. Each of these entities is fully committed to following the mandates of the Hospital’s Compliance and HIPAA Program, and working with the Hospital to ensure mutual compliance with HIPAA. As a result, this Code of Conduct applies to the health care practitioners and personnel of all affiliated entities in the same manner that it applies to the Hospital’s own personnel and affiliated practitioners.

2. **Contractors and Other Providers.** To the extent practicable, all persons and entities with which the Hospital contracts will be asked to cooperate with the Hospital’s Compliance and HIPAA Program. If persons or entities electronically creates, receives, maintains or transmits Protected Health Information from or on behalf of Covered Entity (Hospital), then such entities will be required to enter into business associate agreements with the Hospital as required by HIPAA. This requirement will apply to, among others, various vendors, and contractors with whom the Hospital exchanges health information or who provide services to or on behalf of the Hospital.