



JOINT COMPLIANCE PLAN FOR  
CABRINI OF WESTCHESTER  
AND  
CABRINI CARE AT HOME

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Dear Employee,

Since 1892 the missions sponsored by the Missionary Sisters of the Sacred Heart of Jesus have responded to a need for compassionate service in the metropolitan New York area. Continuing and expanding upon the legacy of St. Frances Xavier Cabrini are Cabrini of Westchester and Cabrini Care at Home and their programs (“Cabrini”), which collectively minister to and aid thousands of elders each year.

Among the Mission Standards of our sponsor are the following:

*Institutions inspired by the indomitable spirit of Saint Frances Xavier Cabrini are places of welcome and compassion where those who work within and those who seek our services experience a genuine hospitality and warmth.*

*The mission and values of the institution as well as good stewardship practices are the foundation of all processes for planning, policy development and fiscal affairs.*

*Organizational management fosters and sustains an environment which supports and values excellence, the development of persons, co-responsibility, collaboration and open communication.*

These values, clearly articulated in the Mission Statements, are grounded in two basic principles: (a) respect for the dignity and intrinsic value of all human life, and (b) a commitment to fundamental Judeo-Christian principles which foster our institutional cultures and focus upon compassion (particularly for the poor and the powerless), upon social justice and upon equality.

Among the overarching obligations of all those employed in these missions to effectively discharge, is a strong commitment to compliance with applicable law and with the fundamental tenets of the Roman Catholic faith. Indeed, the failure to adhere to existing law can seriously damage these institutions, and thereby threaten both the missions we have identified and the communities we seek to serve. The three facilities and associated programs have developed a reputation for honesty and fair dealing in addition to compassion, charity and kindness, and even an inadvertent violation of the law can damage that reputation and diminish our standing in the community and among our peers.

There also are more direct consequences of unlawful behavior. Among these are civil and/or criminal liability on the part of the transgressors and the institutions, and substantial monetary payments in the form of damages, awards and fines. For those who knowingly violate or recklessly disregard this authority the consequences will be swift and severe, up to and including termination.

To assist us in meeting compliance goals, we have developed the Cabrini Code of Conduct, which immediately follows on page 5. In that Code, we have briefly summarized the internal and external provisions that govern various legal and ethical requirements we must meet in order to effectively discharge our obligations to our institutions. In establishing this Code, Cabrini’s Boards of Trustees intend to highlight the commitment that virtually all of us have to

the mission and to personal ideals. The Code is expected to serve as a useful guide to assist us in this ongoing effort, and to help in identifying and addressing those instances when, for whatever reason, one believes we currently may not be in compliance with the law or with other applicable institutional policies.

We recognize that, ultimately, the ability to achieve compliance with the law depends upon the ability to recognize potential problems, the individual decisions to avoid those problems, and our collective effort to identify and remedy existing problems. Our compliance, therefore, depends not only upon a choice to “follow the rules,” but also the obligation to the sponsors, the Missionary Sisters of the Sacred Heart of Jesus, to our missions, our institutions and to one another to assist fellow employees, vendors, consultants and others who serve in any capacity to comply with the laws, and to bring all issues of potential concern to the attention of your supervisors, or in the alternative, to the Cabrini Compliance Officer (see “Discharging Your Obligations”, beginning on page 3). In return, you have our commitment that the issues you raise will be promptly and properly reviewed, and that appropriate corrective action will be taken when necessary. Importantly from your personal perspective, you will not in any way be subjected to any adverse consequences for making such good faith reports; to the contrary, we view a failure to bring appropriate concerns to our attention to be a serious breach of your obligations. Indeed, such a failure to disclose could well constitute independent grounds for disciplinary action, because our efforts to achieve compliance will be most successful if we all strive for that result.

In short, we commend and will support strongly those who make the proper choices at our institutions, and will hold accountable those persons who make inappropriate ones, or those who turn a blind eye toward improper conduct. Through our collective efforts we are confident that we can, and will, enhance our existing reputation for excellence in all facets of our missions, improve our working environment, and better serve the residents, clients, patients and registrants and our communities in the 21st Century.

Respectfully,

The Board of Trustees of  
Cabrini of Westchester

The Board of Trustees of  
Cabrini Care at Home

## **DISCHARGING YOUR OBLIGATIONS**

There may be instances where an employee, contractor or agent discusses or learns of practices at Cabrini of Westchester or Cabrini Care at Home (collectively referred to as “Cabrini”) which may be of concern. While there are numerous ways in which an employee, contractor or agent can seek to address those concerns, the initial choice made in that regard will likely depend upon the relationships with the particular employee(s), vendor(s) or consultant(s) involved in the conduct at issue, upon the relationship you (or those employees) have with supervisors, or upon a person’s familiarity with the substantive area in which the concerns arise. For instance, you may elect to inquire directly about the questionable conduct with the relevant employees, vendors or consultants, or you may choose to bring the situation to your supervisor’s attention. However, we wish to assure you that the Cabrini Compliance Officer exists to help you when you are unable, for any reason, to assure yourself that the conduct in question is in fact appropriate, or if you believe that the problem has not been effectively remedied. In those instances, we fully expect that you will bring the issue promptly to the Compliance Officer located at Cabrini. Those individuals are senior and well-respected employees who, together with such others as may be necessary or appropriate to effectuate a proper resolution of the complaint or concern, are committed to ensuring full compliance with all existing laws, rules, regulations, protocols and policies governing our institutions.

### **The Compliance Officer**

The Compliance Officer may be contacted at:

#### **Cabrini of Westchester**

telephone: 914-693-6800 x 735 hotline: 914-999-5330

e-mail: [snhcompliance@cabrini-eldercare.org](mailto:snhcompliance@cabrini-eldercare.org)

#### **Cabrini Care at Home**

telephone: 914-693-6800 x 735 hotline: 914-999-5330

e-mail: [snhcompliance@cabrini-eldercare.org](mailto:snhcompliance@cabrini-eldercare.org)

The Compliance Officer reports directly to the President and Chief Executive Officer of the Corporations and to the Board Chairs or their designees. The Compliance Officer has been educated, at the direction of the Boards of Trustees, to aid the institutions in identifying any potential areas of non-compliance, to assist in investigating areas of concern raised by our employees or by others, and to remedy any deficiencies detected. The Compliance Officer’s work is intended to be, and will be deemed to be, confidential and privileged. Upon request, the Compliance Officer also will make all reasonable efforts to protect the identity of the reporting employee or individual. Upon completing any necessary investigation, or upon implementing any necessary steps to address the problems detected, the Officer will, whenever possible, inform the reporting employee of the result of the investigation, and of any action taken with regard to the issue presented.

## **The Process**

All employees, attending physicians, vendors and other affiliated parties are expected to bring any and all concerns to the attention of the Compliance Officer, their supervisor, or any member of the Compliance Committee, either directly and immediately upon learning of the potential problem or upon determining through their dealings with their co-employees or supervisors that their concerns have not been satisfactorily and completely addressed. These reports may be made in person, in writing, over the telephone, or by email at the addresses and number designated above. Reports may also be made by calling the hotline at 914-999-5330 or by email to [scnhcompliance@cabrini-eldercare.org](mailto:scnhcompliance@cabrini-eldercare.org). Correspondence and any written communications, relating to these issues, or to the Code in general, should be marked "CONFIDENTIAL" and, if you wish, placed in a sealed envelope. Since a response to the reporting individual by the Compliance Officer is anticipated in virtually all instances, the reporting employee should provide his or her name and work location when the report is made.

All reports and communications received will be deemed to be confidential and privileged. Upon receipt, the communication will be reviewed, and appropriate investigatory steps will be decided upon by counsel, in conjunction with the Compliance Officer and/or other appropriate individuals. The cooperation of the reporting employee or individual may be sought during any investigation that may take place, and such cooperation will be positively noted as part of the employee's personnel review. Conversely, the failure to cooperate with Cabrini will not be considered acceptable. Upon conclusion of the investigation, the Compliance Officer, or other appropriate individuals, will determine the necessary follow-up action to be taken, and will determine which individuals shall have responsibility for such action.

All issues brought to the Compliance Officer will be considered promptly and dealt with appropriately; the charge of the Compliance Officer, directly from the Boards of Trustees, is to ensure, to the maximum extent possible, that all Cabrini employees, attending physicians, vendors and billing or coding consultants are at all times in compliance with existing laws, rules, regulations, protocols and policies. Specifically, the Compliance Officer is directed to focus on compliance with statutes, regulations and guidelines applicable to federal health care programs, including a commitment to prepare and submit accurate bills. It is, of course, grounds for disciplinary action, including termination, to act in violation of existing external or internal legal or ethical provisions, or to knowingly or negligently condone such behavior from others. The Compliance Officer's work, although vital and necessary to our collective well-being, may be perceived by some as threatening or disquieting. We wish to dispel any such concerns, and as a result the Compliance Officer is dedicated to ensuring that all inquiries are handled efficiently, effectively and fairly. Any dissatisfaction with the Compliance Officer's actions or determinations also must be effectively and properly addressed, and may be brought directly to Patricia Krasnauskay, President and Chief Executive Officer of Cabrini of Westchester and Cabrini Care at Home or to the Board Chairs, or to the Chairs' designees.

Questions with regard to the procedures outlined above, or particular issues as they relate to the Cabrini Code of Conduct, may be directed (orally or in writing) to your Compliance Officer, who shall as promptly as practicable provide an appropriate response. Again, all such communications shall be deemed privileged and confidential, and all writings in this regard

should be designated as “CONFIDENTIAL,” although the failure to so designate them in that manner will not affect their confidential status.

## **ELEMENTS OF THE CABRINI CODE OF CONDUCT**

The Code of Conduct, set forth below, is the heart of our Compliance Plan. It summarizes the conduct we expect from all employees and affiliates, and addresses in broad terms certain key areas where the potential for concerns may be particularly significant. This Code is not intended to, nor will it, serve as a substitute for a thorough understanding of your job function or your obligations in your areas of responsibility. It will not dispense with the need to familiarize yourself with the applicable laws and institutional protocols impacting upon your job and upon Cabrini. It will not constitute an excuse to avoid training or in-service presentations in your area. However, it can, and should, provide useful guidance, sensitize you to potential problems you may encounter, and help you to avoid particular pitfalls.

The information in this Code of Conduct is not intended to supersede any other applicable legal or regulatory requirements, or any other federal, state or local government entity.

### **Conduct Generally Expected of Employees and Affiliates**

As a general rule, Cabrini expects employees and affiliated individuals and entities to follow not only the letter, but also the spirit and the intent of all applicable laws, rules and regulations. All employees and agents should fully comply with all statutes, regulations and guidelines applicable to federal health care programs, and prepare and submit accurate bills. All billing or coding consultants are required to comply with all statutes, regulations and guidelines for federal health care programs, including requirements of any corporate integrity agreements that Cabrini is required to enter into with the Office of the Inspector General or the Department of Health and Human Services. Billing and coding consultants are required to report suspected violations of any statute, regulation or guideline applicable to federal health care programs or of Cabrini’s own policies and procedures. All internal policies and protocols will be honored, and employees and staff members will avoid not only improper conduct, but also the appearance of impropriety. We are justifiably proud of our employees and our staff, and we wish to avoid any actions that could injure our fine reputation. We also believe that we must deal fairly and honestly with others, and we must treat all residents, clients, patients, registrants, co-workers, vendors and consultants as we would expect to be treated. We must respect the dignity of all persons, and demand that others in our midst also demonstrate that level of respect toward others.

Certain behavior assists in the pursuit of these laudable objectives and in fostering such an environment. It includes the following:

- We will support and nurture those who obey the applicable laws, rules, regulations, policies or guidelines.
- We expect candor, honesty and fair dealing in our relationships with others.



- We want to create a professional atmosphere and encourage conduct in which we can take pride.
- We will not condone those who act in such a manner as to potentially bring discredit to our institutions or cause injury to their reputation or to the reputation of their sponsor.
- We will not permit behavior that improperly discriminates against others, or that diminishes the dignity of others.
- We will not foster an environment in which inappropriate or unlawful behavior is tolerated, encouraged, supported or is not effectively addressed and eradicated.
- We will not allow employees to ignore, condone, promote or fail to report inappropriate or unlawful behavior if it becomes evident in others.

**Key Areas**

In virtually all of our activities, Cabrini is subject to numerous state, federal and local laws, together with various internal policies and guidelines and certain collective bargaining agreements and contractual relationships. While these provisions affect virtually all aspects of the operations of Cabrini, and while the following is not intended to be an exhaustive recitation of all areas in which compliance issues can or will arise, we have attempted to summarize below, for ease of reference, the general obligations arising in key areas of operations.

Compliance with the provisions in each of these areas is of critical importance, not only for our facilities but also for employees and affiliated parties. Individuals found in violation of applicable law not only will be subject to employment-related sanctions such as suspension or termination, but they also can be exposed to civil money damages, to licensure revocations and, for certain violations (such as antitrust, environmental, fraud and abuse and immigration), to potential criminal sanctions, including imprisonment. Accordingly, any agents or affiliates of Cabrini, including attending physicians, vendors and billing or coding consultants who are found to have violated any statutes, regulations or guidelines of federal or state health care programs, or of Cabrini’s own policies and procedures, may be terminated, or lose attending privileges, or have their contracts terminated. If appropriate, the proper federal or state agency will be notified about the violation by Cabrini’s Corporate Compliance Officer.

The key areas discussed below are:

**Legal and Ethical Standards**

1. Fraud and Abuse
2. Medicare/Medicaid and Third-Party Billing

3. Conflicts of Interest
4. Gifts and Gratuities
5. Investigations
6. Resident/Client/Patient/Registrant Rights
7. Quality of Care and Medical Necessity

Applicable Laws, Regulations and Requirements

8. Antitrust and Unfair Competition
9. Record Retention and Destruction
10. Regulatory Applications
11. Reporting Requirements
12. Reviews and Inspections
13. Political Activity
14. Controlled Substances and Therapeutic Devices

Protection of Confidential Information

15. Resident/Client/Patient/Registrant Confidentiality; Health Insurance Portability and Accountability Act
16. Confidential Information
17. Copyright, Patent and Intellectual Property in General
18. Red Flag Rules

Not-for-Profit Status

19. Not-for-Profit and Tax Exemption Considerations
20. Charitable Contributions

Accounting and Financial Matters

21. Business Expenses
22. Corporate Assets

Human Resource Matters

23. Harassment, Discrimination and Employment
24. Immigration
25. Professional Licensure and Credentialing
26. Union Relationships
27. Wage and Hour Issues
28. Outside Employment
29. Loans and Advances
30. Employee Privacy
31. Use of Alcohol or Illegal Drugs

Environmental Laws and Regulations

32. Environmental Matters
33. Medical Waste
34. Health and Safety

Reporting and Investigations of Violations

The following discussion may not address particular circumstances or issues that arise in a given context, or address specific questions you may have. In such instances, should you have any uncertainty or doubt whatsoever as to the propriety of any particular action, you should seek guidance from your supervisor, or from your Compliance Officer. The time to seek that guidance, moreover, is before the questionable action is taken, or as soon as the questions arise,

so that any potential problems can be avoided before they occur or so that remedial measures may be implemented as early as possible.

## **LEGAL AND ETHICAL STANDARDS**

### **1. Fraud and Abuse**

Various recent federal and state laws have proscribed certain conduct, and certain business arrangements, that health care providers may undertake. These include certain arrangements which provide goods, services or office space for some amount other than fair market value, which include particular resident, client, patient or registrant referral practices, which constitute kickbacks to payors or vendors and other related practices, generally grouped under the heading “fraud and abuse.” While there are numerous practices that are prohibited or restricted, and several exceptions or “safe harbors” that apply under specified circumstances, the most common fraud and abuse issues arise in connection with physician referral practices, and in vendor relationships.

As a general rule, employees and attending physicians must avoid relationships with vendors or other third parties which appear to provide financial inducements for the use of their products, or for the referral of residents, clients, patients or registrants to them. These inducements are not necessarily in the form of cash payments, but may include consulting relationships, lease arrangements with vendors for other than fair market value, gifts and honoraria, advertising benefits, research inducements and the like. A useful guide is to avoid arrangements that confer personal benefits to you over and above that which ordinarily would be provided for your services. You also should clear with our counsel any proposed arrangement with vendors, contractors or suppliers, or any rebate, bonus or volume discount proposals.

Resident, client, patient or registrant referrals to entities in which the referring physician, or a relative, has an ownership interest also are prohibited under statutes commonly known as the “Stark” laws. There are several exceptions to the Stark prohibitions, but the appropriate course of action is to raise all issues in this regard with your supervisor or your Compliance Officer when you have any doubt whatsoever. Moreover, in this area the fact that other institutions have entered into similar arrangements or that vendors, equipment suppliers and the like have assured you that the proposed arrangement is lawful, is not determinative with regard to the lawfulness of the proposed arrangement. The safest practice here is to have any proposed new arrangements cleared before entering into them.

### **2. Medicare/Medicaid and Third-Party Billing**

A substantial number of our residents, clients, patients and registrants are beneficiaries under the Medicaid and Medicare programs; in addition to these governmental payors, we have relationships with many different third-party payors. While each of these payors has established particular billing formats, protocols and practices with which all employees involved in the process must become familiar, there are certain common issues that merit particular mention.

Federal and state laws prohibit the submission of a false claim for payment by any governmental entity, including Medicare and Medicaid. False claims are not only claims for payment which the payee knows are unwarranted, but also those the payee submits with reckless disregard for their accuracy, or “deliberate ignorance” of the applicable guidelines. If established, false claims can result in damages of three times the amount of the actual claim, plus civil penalties of up to

\$11,000 per claim and the costs of the government's lawyers in bringing suit. We are committed to ensuring that all claims for payment are proper, that they accurately reflect the services necessarily delivered, and that they comply with existing billing and coding bulletins, advisories and guidelines. If you are uncertain as to a particular charge or billing practice, or if you believe the documentation supporting a bill may be inadequate, you should contact your supervisor or Finance Department for guidance, or contact your Compliance Officer immediately. If after you seek guidance you remain concerned about any aspect of the billing, you should bring that concern directly to the appropriate Compliance Officer.

While the federal False Claims Act applies only to billing for Medicare, Medicaid and other federal health care programs, it is our intention to comply with all reasonable payor requirements. Where the requirements themselves are unclear, as they occasionally are, you or your supervisor may seek guidance from the payor directly. In order to help establish the advice you were given, you should carefully document that advice, including the name of the payor representative, and the time, date and place of the communication. You should then forward copies of that advice, together with any relevant correspondence, to your supervisor for review, and to your Compliance Officer.

Given the number of resident, client, patient and registrant encounters at Cabrini, and the occasional ambiguous, complex or conflicting rules, there may well be times when you discover an error in a previously submitted bill. You should immediately report that error to your supervisor, so that it may be rectified. If you feel you are unable to make such a report to your supervisor, for any reason, or if appropriate corrective action in your judgment is not taken, you should contact the appropriate Compliance Officer immediately.

Cabrini is committed to compliance with all statutes, regulations and guidelines applicable to federal health care programs, including a commitment to prepare and submit accurate bills. Therefore, employees and billing or coding consultants are expected to comply with all statutes, regulations and guidelines for federal health care programs, as well as the requirements of any existing corporate integrity agreement(s) with the Office of the Inspector General.

Billing or coding consultants shall report suspected violations of any statute, regulation or guideline applicable to federal health care programs or the Cabrini's policies and procedures.

Possible consequences of any evidence of non-compliance may include termination for employees and cancellation of agreements with contractors. All contractors and agents of Cabrini may also use the confidential disclosure program of Cabrini to report any suspected violations.

### **3. Conflicts of Interest**

All board members, employees and attending physicians should avoid placing him or herself in a situation in which his/her personal interests might conflict with the interests of Cabrini. Cabrini recognizes and respects the individual's right to invest or participate in activities outside of one's employment provided that these in no way conflict with the Agency's interest or welfare, and do not interfere with the individual's responsibilities to the Agency, or the effectiveness of one's job performance. Employees are asked to disclose any potential conflicts of interest, using the Conflict Disclosure Statement Form.

Although it is difficult to set forth all possible situations which might be considered as conflicting with Cabrini's interest, the following are examples of situations which employees, must avoid:

1. No employee should perform any outside employment or engage in any outside activities that interfere with the efficient performance of one's duties as a Cabrini employee.
2. No employee should have a financial interest in a firm that is doing, or seeking to do business with Cabrini, or which is a competitor of Cabrini. However, ownership of less than one percent of the securities of a publicly traded Agency shall not be considered significant or contrary to Agency policy.
3. No employee should render services in any capacity, such as a director, officer, employee or consultant, to any person or firm that is competitive with Cabrini. This provision does not include the caregiver staff, as it is understood that caregivers may accept similar work with health care companies.
4. No officer, manager, or supervisor should accept a position as an outside corporate director without the approval of the Chief Compliance Officer.
5. No employee should use Agency positions for personal gain such as by soliciting or accepting for personal benefit business opportunities that might otherwise accrue to the benefit of Cabrini.
6. No employee should use for his or her personal benefit or disclose to unauthorized persons, any confidential or proprietary information about Cabrini or its operations.
7. No employee should borrow money from individuals or firms (other than banks or other lending institutions) doing, or seeking to do business with Cabrini.
8. No employee should compete with Cabrini by selling or offering to sell services or products similar to services offered by Cabrini.
9. No employee should purchase services or products for Cabrini from their family members, or from business organizations with which they or their family are associated, without first obtaining written permission from the Chief Compliance Officer, or designee.
10. No employee or member of their immediate families should accept significant gifts, discounts or other preferred personal treatment from any person associated with a present or prospective customer, competitor or supplier of Cabrini.

#### **4. Gifts and Gratuities**

You should be aware that the receipt or giving of gifts by Cabrini personnel may raise questions about relationships with our vendors, governmental officials, or others who interact with Cabrini. We must always refrain from activities that could possibly be construed as an attempt to improperly influence these relationships. You should not offer or receive a gift in circumstances where it could appear that the purpose of the gift is to improperly influence Cabrini's relationship with a vendor, regulator, or other person or entity.

It is Cabrini's policy to pay a salary to Cabrini employees for their work at Cabrini, and to reimburse its employees and agents for all reasonable expenses, including meals, entertainment, and travel, that are appropriately incurred while conducting Cabrini business off campus. Rarely, therefore, will justification exist for you to permit someone else to pay for such items.

We are confident that if you follow Cabrini's policy, as explained on Page 26 of the Employee Handbook, and exercise reasonable judgment and common sense with respect to gifts and gratuities, you will avoid situations that might bring you or Cabrini's integrity into question, or violate Cabrini's policy concerning gifts or gratuities. If you have any questions in connection with the receipt or offer of gifts or entertainment, you should consult the applicable Cabrini policy and your supervisor.

## **5. Investigations**

Various federal, state and local officials may have occasion to conduct investigations of Cabrini, their employees, vendors, consultants, residents, clients, patients or registrants. While we wish to ensure cooperation with these officials when performing their investigations, we need to do so in an orderly manner, and in a way that does not violate the privileged and confidential relationship we have with our residents, clients, patients, registrants or with others.

Accordingly, upon receipt of any subpoena, civil investigative demand, summons or letter request for information or documents (other than routine requests for medical records and imaging documents pursuant to a properly executed consent, release or subpoena), we expect that you will contact the appropriate administrative staff immediately, and forward the relevant subpoena or request for review. Similarly, if contacted by any representative of any regulatory or law enforcement agency in connection with a pending investigation, or with regard to questions about a particular resident, client, registrant, nursing home or home care practice or employee (excepting routine contact with such individuals in connection with your job function), you should refer the inquiries to the appropriate administrative staff, or the administrator on-call.

You are not, with certain limited exceptions, obligated to speak with law enforcement officials, even if they are insistent that you do so, and you may always seek the assistance of counsel in order to determine whether you must respond to any particular inquiry. Similarly, resident, client, patient and registrant information is strictly confidential, and must never be released absent consent, or absent the approval of counsel. There are certain state and federal laws that afford even greater protection to information regarding particular residents, clients, patients or registrants (e.g., alcohol and/or drug use/abuse, certain psychiatric conditions, HIV-positive residents, clients, patients or registrants). Even in those limited instances where regulatory agencies, by statute, are authorized to review resident, client, patient and registrant records and other information absent consent or legal compulsion, you still should contact legal counsel for guidance before releasing any such information. In that way, we can be certain that the request for information is appropriate, and that our response is complete and satisfactory.

You are never permitted, under any circumstance, to lie to or intentionally mislead an investigator, nor may you destroy or delete documents or information that is the subject of a pending investigation. Such behavior could well result in termination, and can result in criminal sanctions, including imprisonment.

## **6. Resident, Client, Patient and Registrant Rights**

Each resident, client, patient and registrant is entitled to receive ethical treatment in accordance with accepted standards of care. It should be the express goal of all personnel to treat all residents, clients, patients, registrants, their families and visitors with courtesy, compassion and

dignity, while recognizing and honoring their rights to privacy and confidentiality. In this connection, all personnel shall fully familiarize themselves with the New York State Residents' Bill of Rights, posted prominently throughout the facilities, and conduct themselves at all times in a manner that comports with these rights. In addition, all staff that are involved in resident, client, patient and registrant care activities shall attend periodic in-service training sessions dealing with these issues.

## **7. Quality of Care and Medical Necessity**

Cabrini is committed to providing the care and services necessary to attain or maintain residents and patients highest practicable physical, mental and psycho-social well-being. In order to achieve this high level of care, Cabrini will

1. Perform a comprehensive, accurate assessment of each resident's functional capacity and a comprehensive care plan that includes measurable objectives and timetables
2. Provide adequate staffing levels of trained and supervised staff at all times.
3. Implement an on-going quality-improvement effort.

It is expected that all personnel, regardless of responsibility, participate as appropriate in our quality improvement efforts. As part of the overall quality improvement plan, it is the responsibility of each of us to familiarize ourselves with the quality improvement activities applicable to our positions and to fully participate in and cooperate with the goal of total quality improvement.

To obtain copies of or information about the overall quality improvement plan and activities or about your Department's plan and activities, please contact the person in your Department with quality improvement responsibility or your supervisor.

## **APPLICABLE LAWS, REGULATIONS AND REQUIREMENTS**

### **8. Antitrust and Unfair Competition**

The antitrust laws are a series of state and federal statutes designed to promote competition, to prevent unreasonable restraint of trade and to limit the ability of an entity, in particular circumstances, to dominate a particular market. While occasionally intricate in their application, as a general rule antitrust considerations prohibit us from agreeing with competitive providers (be they non-affiliated facilities or other individuals or entities) to allocate residents, clients, patients or registrants or services, to restrict or limit operations in defined specialties or geographic areas, or to take steps which would create an unlawful monopoly in a particular market or for a particular service. All antitrust concerns should be brought, immediately, to your supervisor, to your Compliance Officer or to Cabrini's counsel directly. Violations of these laws can result in criminal as well as civil liability, and blatant violations have led to imprisonment of individuals and to steep fines.

### **9. Accuracy, Retention and Destruction of Records**

Accuracy and reliability in the preparation, maintenance and submission of all patient documentation and business records, whether, in hard copy, or contained in computer files is required by law as well as Cabrini policies. At all times, documents, including patient's notes, route sheets, nurse time cards, claims for reimbursement, and invoices must be prepared

accurately, in accordance with Cabrini policies and procedures and must honestly reflect the facts of the matter. Also, all assets and funds must be recorded in accordance with proper accounting procedures and Cabrini policies.

- No false or misleading entries shall be made in Cabrini's books or records.
- No payment on Cabrini's behalf shall be made without adequate supporting documentation or for any purpose other than as described in the documentation.
- No undisclosed or unrecorded Cabrini account or fund shall be established for any purpose.
- No Cabrini resources shall be used for any unlawful or improper purpose, whether or not disclosed.
- All records are maintained and kept pursuant to Cabrini policy

Cabrini is required by law to maintain certain types of medical and business records for a specified period of time. Cabrini has established controls to assure retention for required periods and timely destruction of retrievable records, such as hard copies and records on computers. These guidelines are located in Cabrini's policies and procedures. Personnel are expected to comply fully with the records retention and destruction schedule for his or her department.

#### **10. Regulatory Applications**

New York State law requires Cabrini to obtain prior approval of the Department of Health before purchasing major medical equipment, significantly expanding or reducing the scope of the services it provides or embarking upon other significant capital expenditures. Absent this approval, the Department of Health can sanction us, or refuse to permit the expenditures to be eligible for reimbursement. Before undertaking any such activity in this area, you should contact senior administration at Cabrini. Questions with regard to the process can be directed to administration or to Cabrini counsel to discuss the required review and approval process.

#### **11. Reporting Requirements**

Health care institutions and providers must adhere to myriad reporting requirements under state and federal law, and it is the policy of Cabrini to comply with all reporting requirements. It is important that you be aware of any reporting requirements applicable to your job responsibilities. Without limitation, reports to various governmental bodies are required to be made in certain circumstances in connection with the following:

1. Medical incidents;
2. Medical devices;
3. Environmental incidents;
4. Professional misconduct by licensed health care professional;
5. Outbreaks of infection;
6. Diversion or loss of narcotics;
7. Resident or resident-related (or client or client-related , patient or patient-related, or registrant or registrant-related) criminal activity, including gunshot wounds, stabbing and sexual assaults;
8. Suspected child abuse or neglect;
9. Threats to community safety; and
10. Resident, client, patient or registrant abuse or neglect issues.



If you are aware of any incident or situation which may require reporting to a governmental agency, you should take all steps necessary to bring it to the attention of the person or Department with responsibility to make such a report, and to our counsel. If any employee intentionally fails to make a required report to a governmental body or attempts to cover up facts that would warrant such a report, he or she will be subject to internal disciplinary action, including termination, and could also face criminal charges.

## **12. Reviews and Inspections**

The Department of Health, through relevant detailed regulations, imposes numerous recordkeeping and reporting obligations on us, in addition to those discussed elsewhere in this Code. You are expected to become familiar with these requirements as they affect your area, and to ensure compliance with them. Our failure to comply can lead to monetary penalties, to the implementation of detailed plans of correction, and in extreme circumstances to the restriction of licensed programs and services.

## **13. Exclusion List**

On a monthly basis, Cabrini will check all employees and vendors against the General Services Administration (GSA) Excluded Parties List System (EPLS), Office of the Inspector General (OIG) List of Excluded Individuals/Entities (LEIE), OIG Most Wanted, Specially Designated Nationals – Office of Foreign Assets Control (SDN-OFAC) and the New York Office of the Medicaid Inspector General (OMIG). These federal and state lists maintain information regarding entities debarred, suspended, proposed for debarment, excluded or disqualified under the nonprocurement common rule, or otherwise declared ineligible from receiving Federal or State contracts, certain subcontracts, and certain Federal assistance and benefits.

## **14. Political Activity**

Federal and state laws limit the nature and extent to which we as institutions may participate in the political process. For example, as institutions we are expressly prohibited by law from contributing to political candidates or officeholders. Our employees, of course, may participate in the political process if they desire to do so. Such participation, to the extent it includes campaigning or soliciting political support or contributions, must take place off grounds, unless specifically authorized. Our assets also cannot be used to support political activity or political candidates. Unless authorized, you should not use your affiliation with Cabrini in such a way as to suggest or imply that those institutions, as opposed to you personally, support a particular candidate, party or issue.

As a concerned and interested member of the community, we may advocate particular positions or support particular legislative initiatives. Senior management and the Boards develop our policies in this area, and they further determine how to implement those policies.

## **15. Controlled Substances and Therapeutic Devices**

Drugs and medications dispensed by the vendor pharmacy are restricted by law to use for residents of the nursing homes and their programs only, clients of Cabrini Care at Home or registrants of the Adult Day Health Care Programs. The pharmacy may not provide drugs to be used by non-residents, non-clients or non-registrants or by Medical staff members in their private practices without specific prior approval.

Cabrini is also required to scrupulously follow various requirements in connection with the handling, distribution and administration of controlled substances such as drugs, medications and pharmaceuticals as well as therapeutic devices to residents, clients or registrants. Applicable laws include prohibitions against distribution of these substances to any unauthorized individual or entity. Such distributions are prohibited strictly by federal and state laws, and frequently will constitute felonious criminal activity for which imprisonment is mandated. Needless to say, violations of our policy in this area also can lead to termination, and to potentially adverse licensure actions.

Care should be taken at all times to safeguard the supply of controlled substances and therapeutic devices and employees will be expected to discharge their obligations scrupulously in this regard.

## **PROTECTION OF CONFIDENTIAL INFORMATION**

### **16. Resident/Client/Patient/Registrant Confidentiality/HIPAA**

In accordance with HIPAA, all patient information named by Cabrini from any source is protected and is held confidential. Records will be maintained in a safe and secure area with specific access availability to ensure confidentiality. Access to confidential information in the patient record is permitted only to personnel involved in planning, or providing patient care, evaluating, the quality of care and those responsible for payment for care on behalf of the patient, and as required by law. Cabrini is committed to preventing inappropriate or unauthorized disclosure of the patient record or any other information that is patient-related, including upholding the legal prohibition against unauthorized disclosure of any medical or HIV-related patient information. Any Cabrini personnel engaging in unauthorized disclosure of information or in violation of the privacy rights of Cabrini patients or others, may be subject to immediate termination, in addition to possible civil or criminal sanctions. Any personnel who becomes aware of such unauthorized disclosure, should report it immediately to their supervisor or the Corporate Compliance Officer.

### **17. Confidential Information**

One of our most valuable assets is our body of confidential information. Our confidential assets include valuable ideas, business plans, and other information about Cabrini's business. As an employee of Cabrini, you are responsible and accountable for the integrity and protection of business information that is used by you in connection with your job duties. Employees should not divulge to unauthorized persons, either during or after their term of employment, any information of a confidential nature connected with the business of Cabrini or any of its customers or affiliates. Examples of confidential information include:

1. Business information, such as patient/client/resident lists, marketing, financial, contract information and development plans;
2. Personnel information, such as job titles, levels, duties, skills or salaries;
3. Any information disclosure of which could adversely affect the interests of Cabrini

All personnel are required to protect, to the best of their capabilities, such information from unauthorized disclosure. Employees shall not during the term of employment or any time after termination, without the prior written consent of Cabrini, disclose to any person, corporation, business or other legal entity; or use for any purpose whatsoever, any business, financial,

technical, or other information of Cabrini of a confidential nature, or not generally or publicly known. Employees shall not endeavor to entice away from Cabrini with the use of such information, any customer or any person, firm or corporation employed by or doing business with Cabrini.

Documents containing sensitive data, including information concerning residents, clients, patients or registrants must not be left in public view, or in an unsecured location. You also must pay particular attention to the manner in which you enter, secure and store computer data. Terminals and computers with access to confidential information should not be left unattended. Password locks should be used at all times. If you observe individuals whom you do not recognize using terminals in your area, immediately report this to your supervisor, to Human Resources, to a security officer or to your Compliance Officer. Particular attention should be paid to the E-Mail policies at the institutions, and use of the E-Mail system is limited to appropriate business purposes.

### **18. Copyrights, Patents and Intellectual Property in General**

Staff physicians and employees may engage in medical research, and we may occasionally be asked to test or evaluate the results of the research of others. The writings and inventions, which are the result of original thought, painstaking effort, and not occasionally inspiration and genius, are protected by the copyright and patent laws. Among the greatest “assets” of the researcher and the inventor are his or her intellectual properties, and adequate steps must be taken to prevent their misappropriation and misuse. As a general rule you therefore should ensure that all original written work created with the support of Cabrini and intended to be presented or disseminated publicly is copyrighted; the failure to do so, timely, could lead to a forfeiture of the right to claim a proprietary interest in the work.

In certain cases, Cabrini obtains grants for research purposes from various grantors. Employees must also respect confidentiality rules related to research and development projects. Prior to initiation of any research project/development project by any employee there must be an explicit statement in writing regarding ownership of the data, patents, rights etc. If the data derived from research projects does not specifically belong to Cabrini, the Administrator should sign off on the appropriate ownership.

Conversely, it is unlawful for anyone to use or reproduce copyrighted work without permission, or to misappropriate, usurp or disseminate patented or trademarked properties, products or developments without a license to do so.

### **19. Red Flag Rules**

Cabrini will comply with the “Red Flag” Rule of the Fair and Accurate Credit Transactions Act of 2003 (“FACT”) in order to help ensure that Cabrini identifies, detects, prevents, and mitigates incidences of identity theft. Detailed policies and procedures related to Red Flag rules are located in the respective entity’s policies and procedures. Personnel are expected to comply fully with the Red Flag Rules policies for his or her facility.

## **NOT FOR PROFIT STATUS**

### **20. Not-for-Profit and Tax Exemption Considerations**

Cabrini and their affiliates are exempt from taxation as not-for-profit entities. To maintain this exemption, we cannot act for the benefit of a particular individual or entity. Such conduct, commonly referred to as “private inurement”, is illegal under the not-for-profit and tax laws. Private inurement issues can arise in a variety of ways, but issues meriting particular attention are the wages or benefits conferred by Cabrini on particular persons or entities. Generally speaking, we cannot authorize or pay compensation and benefits in excess of the “fair market”; similarly, we must receive fair market value for things such as space rented by particular individuals, services or materials purchased by particular individuals, and the like. If fair market value is not paid or received, the not-for-profit and tax provisions at issue will deem us to have allowed our exempt assets to inure to the benefit of a private individual, and a violation can be established. Sanctions include civil liability, including personal liability of our Board members, senior officers and the recipients of the “excess” amounts, as well as the potential loss of our tax-exempt status. It is therefore crucially important that private inurement issues be avoided.

### **21. Charitable Contributions**

Our facilities are not-for-profit entities that depend upon charitable contributions to support their clinical, research and educational objectives. You must be careful that any fundraising activities you conduct are approved by and coordinated with our Fund Development personnel at Cabrini.

Solicitation of monies or goods from vendors to Cabrini may raise significant issues relevant to various federal and state laws that prevent kick-backs or payments for preferred treatment. Therefore, all donations should be referred to the attention of the Fund Development Department. All monetary donations or other items of value received on behalf of Cabrini, either as gifts or donations, should be deposited immediately in an appropriate institutional account. Donations or contributions should never be used for personal benefit, or for the benefit of any person or entity other than Cabrini; violations of this policy constitute grounds for termination.

## **ACCOUNTING AND FINANCIAL MATTERS**

### **22. Business Expenses**

Similar to the receipt of or giving of gifts or entertainment, improper use by Cabrini personnel of business accounts for expenses may present potential conflicts of interest. All purchases should be made through the Purchasing Department, and are subject to the appropriate approvals. In regards to other expenses, such as meals, all business expenses must be reasonable and be purchased through a corporate card. Employees should not use personal credit cards for business expenses. All business expenses must be supported by appropriate documentation and properly recorded on Cabrini’s records.

### **23. Corporate Assets**

All employees are required to promote responsible use of, and control over, all corporate assets and resources employed or entrusted, and not use corporate assets, information, or position for personal gain.

## **HUMAN RESOURCE MATTERS**

### **24. Harassment, Discrimination and Employment Issues**

Consistent with its mission values, Cabrini is committed to equal opportunity and to the respect for human dignity. Unequal treatment or discrimination based upon gender, color, race, national origin, age, religious affiliation or belief, disability, sexual orientation or other non-performance or ability related ground is inconsistent with that mission, and unacceptable. We will hire, promote and retain individuals based upon their ability to meet bona fide occupational qualifications, and to effectively and efficiently discharge the obligations of their job. Similarly, we do not condone, and will not tolerate, conduct which demeans or undermines the residents, clients, patients and registrants and our employees, or which creates or encourages a hostile or oppressive working environment.

Harassment of any sort is not tolerated, including such behaviors as violence, intimidation, sexual advances, exploitation and derogatory conduct that reflect bias. In relationships where there is unequal power, such as those between supervisor and their direct report, the person in the position of authority is obligated to avoid potential conflicts of interest, abuse of power, sexual or romantic relationships, or exploitation of any type of those they supervise.

### **25. Immigration**

We are not permitted to employ anyone who is not a citizen or permanent resident of the United States, or who holds an appropriate visa or work authorization which allows him/her to work in the United States. It is our policy to fully comply with the immigration laws and, therefore, no person shall be permitted to work without providing documentation of their citizenship or immigration status to our Human Resources Departments. Visa holders must provide updated documentation upon expiration of status. Audits will be performed on Human Resource files to ensure all documentation is current.

### **26. Professional Licensure and Credentialing**

All health care professionals providing resident, client, patient and registrant care services must be fully capable of discharging their clinical responsibilities. No health care professional will be permitted to provide resident, client, patient and registrant care services at or on behalf of Cabrini unless it has been demonstrated that he or she possesses the required education, licensure and experience necessary to perform his or her clinical responsibilities. All health care providers shall be properly credentialed, and Cabrini will check the status of the practitioner's credentials on a monthly basis.

In credentialing practitioners, we should take steps necessary to obtain the information and documentation required to evidence the practitioner's education, licensure and competency. In doing so, we must comply with all applicable laws and with relevant Department of Health regulations. All personnel involved in the credentialing of health care providers should diligently adhere to such requirements.

### **27. Union Relationships**

Many of our employees are members of labor unions. It is our policy to comply with all of the laws governing our relationships with labor unions, and to honor the provisions of any collective bargaining agreements we may enter into with these unions. It is our intention that no employee shall be subject to adverse employment action for exercising his or her right to participate in a

union, or in concerted protected activity. Questions with regard to union activity may be directed to our Human Resources Department, or to the Compliance Officer.

### **28. Wage and Hour Issues**

As an employer, we are required to comply with all applicable wage and hour laws, and other laws governing the employment relationship. You are entitled to receive fair and equitable wages and benefits in connection with your services, and you may receive overtime pursuant to applicable policies or collective bargaining agreements. You are encouraged to bring any concerns or dissatisfaction in this regard to Human Resources or to the Compliance Officer.

### **29. Outside Employment**

Full-time employees are strongly discouraged from holding outside employment. In the event that outside employment or activity might: encroach on regular working hours, interfere with the employee's regular duties, or necessitate that the employee work such long hours as to affect that individual's productivity, the employee will be asked to withdraw from this outside employment. In no event will the outside employment be considered as an excuse or serve to bar disciplinary action for any of the performance or attendance issues which result from it.

### **30. Loans and Advances**

Loans to, or guarantees of obligations of, directors, executive officers, or members of their families are specifically prohibited to the full extent required by applicable law or regulation.

### **31. Employee Privacy**

Cabrini will collect personal information about Employees for various purposes, primarily relating to establishing and managing the employment or other work relationship between Cabrini and its Employees. Cabrini shall identify the purposes for which personal information is collected at or before the time the information is collected. Cabrini may also collect personal information from other sources including previous employers, personal references or other third parties to whom the employee has given permission to disclose the information. The collection of personal information will be limited to the amount and type of information required specifically for an identified purpose.

Consent requirements may vary depending upon circumstances and upon the type of personal information that Cabrini intends to collect, use or disclose. When determining whether an employee's consent is required, Cabrini will take into account both the sensitivity of the personal information and the purposes for which Cabrini will use the information. Consent may be expressed, implied or deemed and may be obtained in person, by phone, by fax, by mail or via the Internet. Cabrini may, from time to time, seek an Employee's consent to collect, use or disclose personal information for a new purpose.

Cabrini shall not use or disclose personal information for purposes other than those for which it was collected, except with the consent of the Employee or if the use or disclosure is authorized by law.

Cabrini may disclose personal information about its Employees for human resources and benefits administration and in the context of providing references regarding current or former employees in response to requests from prospective employers. Cabrini will compile and disclose certain

information about Employees to a limited number of third parties and those we are obliged to do so by law in order to administer staffing, compensation and benefits programs.

Although Cabrini will protect and limit the use of personal information about Employees that is disclosed to third parties, Cabrini is not responsible for the subsequent uses or disclosure of the subject personal information by the third-party recipient such as government agencies.

### **32. Use of Alcohol or Illegal Drugs**

Cabrini is committed to a workplace that is free from the influence of alcohol and illegal drugs.

As a general rule, you may not consume alcohol while on duty, including lunches and overtime meals. Do not use, possess, sell, purchase, provide, or be under the influence of alcohol or illegal drugs while on duty.

## **ENVIRONMENTAL LAWS AND REGULATIONS**

### **33. Environmental Matters**

As a conscientious member of the community, we recognize our responsibility to strictly adhere to the laws and regulations governing the generation and disposal of hazardous materials. The laws in this area mandate that Cabrini obtains and complies with all necessary permits for discharges of particular substances, contract with and adequately document deliveries of such substances to responsible and licensed transporters, and guard against the inadvertent discharge of pollutants into the environment. Suspected leaks or spills, particularly of heating oils, hydrocarbons or hazardous matter, should be reported immediately pursuant to appropriate Cabrini personnel, and appropriate care should be taken in the handling, storage and disposal of any radioactive or hazardous material generated in connection with research or treatment activities.

### **34. Medical Waste**

Through their operations, Cabrini generates infectious wastes. There are stringent statutory and regulatory provisions governing the handling, transportation and disposal of such material, and there are severe sanctions, both criminal and civil, for the failure to do so. In addition, accurate and complete records of the handling of infectious wastes, and the disposal of that matter in an approved facility is mandated. Care should be taken to carefully review and understand our policies in this regard.

### **35. Health and Safety**

Cabrini aims to have an injury and illness-free work environment for the benefit of employees and residents/clients/patients/registrants. In various resident, client, patient and registrant encounters and during routine care efforts, we occasionally come into contact with potentially harmful substances such as blood-borne pathogens, radioactive materials and the like. We expect that employees will, at all times, adhere to the various precautionary measures instituted to help assure their safety, and will avail themselves of appropriate safety equipment, or request such equipment if it is not otherwise readily available. Our environs are subject to numerous federal and state statutes and regulations related to workplace safety, and we further expect compliance with all relevant provisions in this area.

## **REPORTING AND INVESTIGATIONS OF VIOLATIONS**

All Cabrini personnel that believe that this Code of Conduct may have been violated are encouraged to promptly report the matter to their supervisor, Human Resources, or to the Corporate Compliance Officer. An attempt will be made to keep all reports confidential to the extent possible. All investigations shall be conducted under the direction of the Director of Internal Audit and Corporate Compliance.

The following issues should be reported immediately:

- Breach of Confidentiality
- Unethical relationships with vendors or contractors
- Fraudulent or false actions
- Improper billing practices
- Unethical staff behavior
- Unethical/inappropriate care of patients or equipment
- Bribes or kickbacks

Because failure to report criminal conduct can itself be understood to condone the crime, the importance of reporting is stressed. Failure to report knowledge of wrongdoing may itself result in disciplinary action against those who fail to report. Any manager/supervisor receiving a report of a potential Code violation must likewise immediately advise their supervisor. There will be no reprisals or retaliation for reporting of actual or possible violation (whistle blowing), unless it is determined that personnel intentionally reported false information. In the event that a manager/supervisor has been found to retaliate against personnel for good faith reporting of a violation, the supervisor will be subject to appropriate discipline. Where appropriate, the identity of the employee making the report must be kept confidential. If the result of the investigation indicates that corrective action is required, Cabrini will decide what steps should be taken to rectify the problem and prevent the likelihood of its recurrence.

## **DISCIPLINE FOR CODE VIOLATIONS**

Disciplinary actions may be taken for:

- Authorization of, or participation in actions that violate the Code.
- Failure to report a violation of the Code or to cooperate in an investigation.
- Failure by a violator's supervisor/manager to detect and report a violation of the Code, if such failure reflects inadequate supervision or lack of oversight.
- Retaliation against an individual for reporting a violation or possible violation of the Code.

Employees who violate the Code of Conduct may be disciplined, based on the facts of the case, up to, and including termination of their employment, referral for investigation by licensing boards, if applicable and referral for prosecution, when appropriate.



## CONCLUSION

This Plan and our Code provide useful and effective guidance for all employees, physicians, agents and contractors of Cabrini of Westchester, and Cabrini Care at Home. We are committed, at all levels, to ensuring that Cabrini of Westchester, and Cabrini Care at Home comply with existing federal and state statutes and regulations and ethical provisions, and we thank you for your cooperation and ongoing vigilance in this important effort.

June, 1998 St. Cabrini Nursing Home, Inc. and Cabrini Center for Nursing and Rehabilitation  
Updated: November 1, 1999  
Updated: June 5, 2000 (St. Cabrini Nursing Home, Inc.)  
June 20, 2000 (Cabrini Center for Nursing and Rehabilitation)  
Updated: June 18, 2001 (St. Cabrini Nursing Home, Inc.)  
September 25, 2001 (Cabrini Center for Nursing and Rehabilitation)  
Corrected: June 1, 2002 (St. Cabrini Nursing Home, Inc. and Cabrini Center for Nursing and  
Rehabilitation)  
Updated: September 30, 2002 (St. Cabrini Nursing Home, Inc.)  
Updated: October 3, 2002 (Cabrini Center for Nursing and Rehabilitation)  
Corrected: November 28, 2003 (St. Cabrini Nursing Home, Inc. and Cabrini Center for  
Nursing and Rehabilitation)  
Updated: June 12, 2006 (Cabrini of Westchester, Cabrini Center for Nursing and  
Rehabilitation and Cabrini Care at Home)  
Updated: March 10, 2010 (Cabrini of Westchester, Cabrini Center for Nursing and  
Rehabilitation and Cabrini Care at Home)  
Updated: November 8, 2012 (Cabrini of Westchester and Cabrini Care at Home)  
Updated: February 18, 2014 (Change of Corporate Compliance Officer)  
Updated: November 11, 2016 (Change of Corporate Compliance Officers)  
Updated: April 22, 2017 (Change of Corporate Compliance Officers and Hotline telephone  
number; addition of email address for contact)

**EMPLOYEE VERIFICATION**

I verify and affirm that I have received a copy of the Cabrini Joint Compliance Plan. I further verify that I have received annual training in Corporate Compliance, that I understand it, and that I agree to be bound by and to comply with it. I specifically agree not only to discharge my responsibilities to the best of my ability and in a manner consistent with applicable laws, rules, regulations, policies and protocols, but to inform the appropriate supervisory personnel in the event that I learn of conduct in violation of the Joint Compliance Plan. I recognize that the Cabrini Joint Compliance Plan constitutes an important part of my job responsibility, and that it is my obligation to comply with it.

Employee:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

Witness:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

## **ADDENDUM A**

### **CABRINI OF WESTCHESTER LIST OF CORPORATE COMPLIANCE COMMITTEE MEMBERS**

Mary O'Mara, Corporate Compliance Officer

Bonita Burke, Vice President Operations, Administrator

David Arditti, Vice President Finance, CFO

Gregorey Runey, Director of Rehabilitation

Joseph Bisaccia, Assistant Administrator, Director of Food and Nutrition, Purchasing

Tess Francisco, Coordinator, Health Information

Velma Haye, Director of Nursing

Patricia Hull, Director of Patient Services, Cabrini Certified Home Care Program

Simone Smith, Director of Human Resources and Volunteers

Dr. Jeffrey Gold, Medical Director