CODE OF CONDUCT

It is the policy of Southampton Hospital (the “Hospital”) that all Hospital trustees, officers, administrative staff, employees, volunteers, and professional staff (collectively, the “Hospital Staff”), in their activities for and on behalf of the Hospital, will comply with and abide by relevant governmental laws, rules and regulations, and appropriate standards of ethical conduct, and that they will have a working knowledge of the legal and ethical requirements affecting their activities for and on behalf of the Hospital. Members of the Hospital Staff will report to the Southampton Hospital Corporate Compliance Officer or call the Corporate Compliance Hotline with potential violations of applicable laws, rules and regulations or standards of ethical conduct of which Hospital Staff members become aware.

Failure to follow applicable laws, rules, regulations, and standards of ethical conduct, or to report violations of which they become aware, may subject Hospital Staff members to disciplinary action, which may include dismissal and or suspension of privileges. If, at any time, a Hospital Staff member has any questions concerning the application of this policy to a specific situation, the appropriate Department Head, Vice President of Patient care Services, Vice President/Chief Medical Officer or the Corporate Compliance Officer should be contacted.

STANDARDS OF CONDUCT

1. Honest and Lawful Conduct: All Hospital Staff (including affiliated physicians) must be honest and lawful in all their business dealings and avoid doing anything that could create even the appearance of impropriety. They must comply with the Code of Conduct, report any action they think may be unlawful, cooperate with compliance inquiries from the compliance staff, and work to correct any improper practices that are identified.

2. Billing, Coding and Documentation of Services: All federal and state regulations governing billing, coding and documentation will be followed for all physician, hospital, or other medical services billed by the Hospital. Thus, all billing and coding for services must be accurate and truthful, and no personnel should ever misrepresent charges or services to, or on the behalf of, a patient or third party payor. Deliberate or reckless misstatements to government agencies or other payors will expose the personnel involved to termination and criminal penalties.

Only those medical services that are consistent with accepted standards of medical care may be billed. In this regard, billing and coding must always be based on adequate documentation of the medical justification for the service provided and for the bill submitted, and this medical documentation must comply with all applicable regulations. Only those codes that correspond to the service rendered and documented should be selected.
Finally, whenever the Hospital has learned or knows that it has received payments for which it was not entitled from a governmental or private payor, the payments will be refunded to the appropriate payor as soon as possible

3. **Business Practices:** All business records must be accurate, truthful and complete, with no material omissions. Such records include tax and financial reports, institutional documents, and reports submitted to government agencies. Moreover, the Hospital will forgo any business transaction or opportunity that can only be obtained by improper or illegal means.

4. **Compliance with State and federal Anti-Referral Laws:** In compliance with the State and Federal anti-referral laws, the Hospital does not pay incentives based on the number of persons admitted for treatment or referrals for medical service. The Hospital also does not give or accept any form of remuneration in return for making referrals for others. Rather, when discharging and referring a patient to other providers, the patient’s right to choose a provider is respected and the referral is based on the documented medical need of the patient and on the ability of the referred provider to meet the need.

5. **Emergency Medical Treatment:** Southampton Hospital follows the Emergency Medical Treatment and Active Labor Act ("EMTALA") in providing emergency medical treatment to all patients, regardless of ability to pay. In an emergency situation, financial and demographic information will be obtained only after the immediate needs of the patient are met and the patient is stabilized. The Hospital does not admit or discharge patients based on their ability to pay. Appropriate medical screening and treatment to stabilize an emergency medical condition will be provided in a non-discriminatory manner, regardless of the patient’s payment status, race, sex, national origin or other suspect classification. In compliance with applicable federal regulations, a patient will be transferred to another hospital only at his or her request or if the medical benefits expected as a result of transfer outweigh the risks. Patients may only be transferred after they have been stabilized and are formally accepted by the alternate facility.

6. **Confidentiality of Patient Information:** In compliance with federal and state laws, all Hospital Staff will keep patient information confidential, except when disclosure is authorized by the patient or permitted by law.

7. **Duty of Loyalty:** All personnel owe a duty of loyalty, honesty and fidelity to the hospital. This duty requires:
   - **Conflict of Interest** – All Hospital personnel are to disclose to the Corporate Compliance Officer any conflicts of interest in outside companies, entities or concerns. Conflicting interest can include both financial interest and non-financial relationship with entities that compete or do business with the Hospital, and include any interest that otherwise could create and appearance that the personnel’s conduct on behalf of the Hospital might be compromised in some way by the competing interest. Conflicts must be reported even if the conflict arises because an immediate family member has the interest in the other entity.
   - **Gifts and Hospitality** – Personnel may not accept gifts and hospitality from patients, patient family members, vendors or contractors doing business with the Hospital if doing so would create an appearance that the gift or hospitality is being provided to
induce the personnel to act in his or how own benefit (over the Hospital’s). Personnel may accept business entertainment consistent with what is reasonable under the circumstances, as long as the offered entertainment is not for the purpose of improperly influencing the personnel’s business behavior. Items of nominal value, such as holiday cookies or candy that are tokens of appreciation may be accepted.

If you have any questions or concerns whether the acceptance of an offer of a gift or hospitality may be improper, you should immediately raise your concern with the Corporate Compliance Officer.

8. **Responsibilities:** All personnel, including employees, officers, and supervisors have the following responsibilities under the Corporate Compliance Program:

- Employees must know and follow the federal and state laws, rules and regulations that apply to their jobs; comply with standards set forth in the Hospital’s Code of Conduct and any applicable department compliance protocols; and recognize that any violation of these standards of conduct will result in disciplinary action.

- Department Heads, Supervisors and Managers must create and maintain a work environment in which ethical concerns can be raised and openly discussed. They also must ensure that staff understands the importance of the Corporate Compliance Program.

**Corporate Compliance Program Contacts:**
Corporate Compliance Officer:
Fredric I. Weinbaum, MD
Executive Vice President, CMO/COO
(631) 726-8300

Corporate Compliance Hotline:
“Healthcare Values Line”
(800) 273-8452

All reports received by the Corporate Compliance Officer or the Hotline are appropriately investigated.