

## Code of Conduct

Approved by: ECMCC Board of Directors  
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### MILLENNIUM COLLABORATIVE CARE, PPS (Millennium)

#### CODE OF CONDUCT

It is the policy of Millennium Collaborative Care, PPS to comply with all laws and regulations that govern or apply to the DSRIP initiatives.

#### **Our Leadership, Mission, Goals and Values**

Our mission is to build a high-performing integrated delivery system and transform health care delivery in the region to achieve DSRIP goals. More specifically, Millennium seeks to enhance the capacity of our Participants and Participating Providers and the region to prevent acute illnesses, reduce the morbidity associated with chronic illness, coordinate care, and improve the effective use of health care resources. Our commitment to our communities and patients can only be achieved by conducting ourselves consistent with the highest ethical, business and legal standards.

#### **We value:**

- **Excellence and Innovation:**
  - We are committed to promoting the delivery of high quality patient care in accordance with evidence-based standards and facilitating innovation in care coordination and system transformation;
- **Patient-Centered Care:**
  - We aim to enhance the capacity of our Participants and Participating Providers and the health care delivery system in our region to provide care that is delivered at the right time and the right setting to best meet patients' needs and to improve the patient's experience of care;
- **Patient Engagement and Activation:**
  - We are committed to educating and counseling Medicaid beneficiaries and uninsured individuals to enhance their ability to access the health care services they need effectively and efficiently;
- **Collaboration:**
  - We are committed to collaboration among our Participants and Participating Providers to overcome fragmentation in the health care delivery system and share solutions and ideas;
- **Workforce Engagement:**
  - We are committed to training and development to prepare the workforce for anticipated changes in services, skill requirements, and opportunities; and
- **Respect and Diversity:**
  - We value and respect the differences among the patients and families cared for by our Participants, Participating Providers, the communities we serve, and our workforce members.

Our success in achieving our mission and vision is dependent upon maintaining our commitment to honesty, integrity, quality, and excellence. As a central part of the Millennium Compliance Program, the Code of Conduct

sets forth the standards of conduct that all participants are expected to follow.

### **Purpose and Scope of Code of Conduct**

Millennium is comprised of health care, social service providers, and community-based organizations across the continuum of care committed to working together to implement the Delivery System Reform Incentive Payment (DSRIP) Program and the Millennium Project Plan submitted to the New York State Department of Health (DOH).

Among other major goals, we seek to build an effective integrated delivery system by educating and aligning participants, participating providers and community-based organizations to provide a new model of coordinated, evidence-based care.

DSRIP requires each PPS to implement an effective compliance program related to compliance issues arising from PPS operations and performance. We have designed this Code of Conduct and the Millennium Corporate Compliance Program to set a high standard of integrity and to prevent, detect, and address compliance matters relating to Millennium operations, projects, and performance throughout Millennium.

This Code of Conduct will be carried out in accordance with the Millennium Compliance Plan and the Millennium Compliance Policies and Procedures. The Millennium Code of Conduct and Corporate Compliance Program do not replace or diminish the obligation of each Participants and Participating Providers within Millennium to maintain and enforce a code of conduct and compliance program in relation to its governing body, staff and operations, consistent with the requirements of federal and state law and regulation and Millennium Compliance Policies and Procedures.

Millennium, Participants and Participating Providers are responsible for adhering to the Millennium Code of Conduct which is designed to guide Millennium and its Participants and Participating Providers on a day-today basis as they carry out PPS projects and operations in a manner consistent with strong ethical standards and prevailing legal and regulatory obligations. The principles outlined in this Code of Conduct govern the conduct of the Millennium Board of Managers, staff, Participants and Participating Providers in relation to PPS operations, projects, and performance. As used throughout this Code, Participants and Participating Providers includes the governing bodies, and staff.

### **Responsibilities of Millennium Collaborative Care, PPS**

We at Millennium Collaborative Care are responsible for

- Leading by example by complying with the Code of Conduct at all times;
- Overseeing compliance with the Code of Conduct and implementation of the Millennium Corporate Compliance Program;
- Providing appropriate resources to support the Corporate Compliance Program;
- Creating and maintaining an environment in our network that encourages collaboration, cooperation, and professionalism;
- Promptly reporting compliance concerns and violations to the Millennium Compliance Officer;
- Promoting open communication and compliance reporting without fear of retaliation or intimidation;
- Overseeing compliance training about the Millennium Compliance Program for Board members, officers, and staff at Millennium, Participants and Participating Providers;
- Investigating reports of violations of the Code of Conduct and compliance violations and devising appropriate corrective action in conjunction with Participants and Participating Providers, as needed;

- Conducting regular audits and data review to detect compliance violations and concerns; and
- Enforcing compliance with the Code of Conduct and the Compliance Program with appropriate discipline of Millennium staff and appropriate sanctions for Participants and Participating Providers when violations occur.

### **Responsibilities of Participants and Participating Providers**

- Understanding and adhering to the principles and terms of the Code of Conduct in relation to your organization's participation in PPS activities and projects;
- Behaving in a way that is consistent with the Code of Conduct and participating in good faith in the Millennium Compliance Program;
- Providing information and training to your governing body and staff about the Millennium Code of Conduct and Millennium Compliance Program;
- Informing governing body members, staff and the patients you serve about how they can report compliance violations and complaints about PPS operations, performance and projects to Millennium;
- Reporting violations of this Code of Conduct and compliance concerns to the Millennium Compliance Officer;
- Promoting open communication and reporting about compliance concerns and complaints without fear of retaliation or intimidation;
- Maintaining and enforcing your own code of conduct and compliance program to provide compliance with applicable laws and regulations in the operation of your programs and facilities; and
- Enforcing compliance with this Code of Conduct and the Millennium Compliance Program with appropriate discipline of your staff when violations occur.

### **Commitment to Medicaid Beneficiaries and the Uninsured**

We seek to improve the delivery of health care services in the Millennium region by increasing the capacity to coordinate care, reduce inefficiencies, and enhance population health management. We embrace the value of treating every patient with dignity and respect through the delivery of health and social services by our Participants and Participating Providers. We are committed to working with Participants and Participating Providers and assisting patients to access health care that is appropriate for their medical needs and patient-centered.

We provide education, activation counseling, and illness prevention programs to Medicaid beneficiaries and the uninsured to improve access to care and the health of our communities.

Participant and any other individually or entity performing functions or services for Participant related to DSRIP activities is prohibited from providing gifts or other remuneration to beneficiaries as inducements.

### **Commitment to Our Participants and Participating Providers**

We realize that the continued contribution, engagement, and expertise of our Participants and Participating Providers are integral to Millennium success. We are committed to supporting a high level of participation by

Participants and Participating Providers in our activities and decision-making through transparency in our governance, representation on the Board of Directors, governance committees, and the Project Advisory Committee. The Millennium Board of Managers, staff and contractors (Staff) will treat Participants, Participating

Providers and their staff and representatives in a professional and collegial manner.

### **Confidentiality of Medical and Beneficiary Information**

We collect medical and other information about patients treated by our Participants and Participating Providers and about the Medicaid population of our region in order to improve care coordination and manage population health (collectively, “Protected Health Information”). We are committed to maintaining the confidentiality and security of Protected Health Information that we collect and the Medicaid information to which we have been granted access, in accordance with all applicable federal and state privacy laws and the Medicaid Data Exchange

and Application Agreement (DEAA) between Millennium and the DOH. To ensure that Millennium its Participants and Participating Providers maintain the privacy of Protected Health Information, its Participants and Participating Providers are required to:

- Provide their patients with a notice of privacy practices that includes information about Millennium and its practices to share Protected Health Information with and among Partner Organizations, at such time that PPS data exchange practices require such notice;
- Comply with all applicable federal and state laws and Millennium Privacy and Security Policies and Procedures to protect the privacy and security of Protected Health Information;
- Comply with the requirements imposed by the DEAA with respect to data accessible through the Medicaid Analytics and Performance Portal (MAPP); and
- Report violations of confidentiality and security breaches promptly to the Millennium Security, Privacy or Compliance Officer.

Millennium Participants and Participating Providers shall take appropriate disciplinary action in relation to any of their staff or contractors that engage in the unauthorized use or disclosure of Protected Health Information, and shall immediately report to Millennium any conduct that comprises or poses a risk to the privacy or security of Protected Health Information provided by any Participants, Participating Providers or Millennium or accessible from the MAPP. Any Millennium Participants or Participating Providers that engages in the unauthorized use or disclosure of Protected Health Information in violation of the privacy rights of individuals cared for in the Millennium Network will be subject to sanction, as appropriate, which may include removal from the Millennium network.

Millennium shall take appropriate disciplinary action in relation to individuals or contractors employed by or affiliated with Millennium for any conduct that compromises the confidentiality of Protected Health Information of patients cared for in the Millennium Collaborative Care PPS.

### **Confidentiality of Business Information**

In addition to patient and beneficiary information, other information that is confidential may be collected or disseminated by Millennium. This may include information about other Participants, Participating Providers or Millennium itself. No Participants or Participating Providers, without the prior written consent of Millennium shall disclose any confidential information obtained during the course of participating in Millennium operations and

projects, except as required by law. This includes, but is not limited to: Millennium or Participants and Participating Providers processes, care protocols, techniques, computer software, copyrights, research data, marketing and sales information, personnel data, beneficiary medical records, beneficiary lists, financial data and

records of any business or strategic plans or other information which is designated as confidential or has not been published or disclosed to the general public.

### **Physician Relationships**

Any business or other financial arrangements with a physician or a physician group must be structured to ensure compliance with legal requirements. Such arrangements between Millennium and physicians and other health care professionals must be in writing and may be subject to prior review and approval under Millennium compliance or other policies and procedures.

### **Anti-Kickback and Patient Referral Laws**

Federal and state laws prohibit any form of kickback, bribe, or rebate of any 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 paid for by the Medicare and the Medicaid programs. We do not solicit, offer or receive

inducements or create situations in which Millennium appears to be soliciting, offering or receiving an improper inducement to any individual or organization related to patient referrals to the Millennium Collaborative Care PPS.

We do not pay for referrals to the Millennium, Participants or Participating Providers. Our Participants and Participating Providers are expected to have policies and procedures to assure that they accept referrals and admissions based solely on patients' clinical and care coordination needs and their ability to render needed services. No Staff or any other individual acting on behalf of Millennium is permitted to solicit or receive anything of value, directly or indirectly, in exchange for the referral of patients into the Millennium. All DSRIP activities and protocols will conform to these laws about patient referrals.

### **Financial Records and Management of DSRIP Funds**

Millennium is committed to full compliance with all DSRIP program requirements, and federal and state laws and regulations relating to management, disbursement and expenditure of DSRIP and Capital Restructuring Financing Program (CRFP) funds. Millennium Staff and Partner Organizations are prohibited from knowingly presenting or causing to be presented to any organization or individual, including, but not limited to, Millennium, Participants, Participating Providers and DOH, documents or records regarding PPS financial transactions, operations, or performance that are false, fictitious or fraudulent.

Millennium operates internal and external audit systems to assure that DSRIP funds are received and expended:

- i. in accordance with all DSRIP Program requirements, DOH approvals, and policies and agreements with its Participants and Participating Providers;
- ii. only for authorized DSRIP purposes; and
- iii. for services actually rendered or capital and other costs of DSRIP project implementation actually expended.

Millennium Staff, Participants and Participating Providers are required to report promptly to Millennium if errors occur, and to address any such errors in a timely and appropriate manner as required by law.