

To Advocate. To Educate. To Empower. Together.

CODE OF CONDUCT

One of the requirements of this policy is that employees, contractors, and agents of the Association for Mental Health and Wellness (formally known as Clubhouse of Suffolk Inc.), and its affiliate agencies, Suffolk County United Veterans and the Mental Health Association in Suffolk County (all hereafter referred to as the Association) adhere to a Code of Conduct. To this end, the leadership and management of the Association have developed a Code of Conduct for its employees, contractors, and agents.

The mission of the Association of Mental Health and Wellness is:

"To assist people who are affected by mental illness to lead healthy, productive, addiction-free, and socially-satisfying lives."

The purpose of this Code is not intended to replace any other policies or Standard Operating Procedures that are in effect, but rather to clearly define the Association's position regarding issues related to integrity and ethics, and to provide information that will assist employees, contractors, and agents in utilizing good judgment when dealing with integrity and ethics issues that may arise in the course of their duties. It is expected that all will adhere to the Code of Conduct and to the policies, standards and procedures outlined in this program when they act on behalf of the Association.

The Association requires that all employees, contractors, and agents conform to the highest ethical standards, and takes pride in its long tradition since its founding in 1990, of ethical and responsible conduct in its programs and services. All employees, contractors and agents are expected to adhere to our most current policies, practices and procedures as outlined in the following administrative documents:

- Statement of Corporate Compliance
- Employee Handbook
- ❖ Program Manuals for our PROS and Care Management Program

The Association's Employees, Contractors, and Agents will:

- ❖ Be fair and honest in all matters, with no attempt made to misinform or mislead. Any errors occurring with clients, other agencies, members of the public or others will be rectified as soon as possible;
- ❖ Take responsibility to resolve any uncertainty they may have relating to ethical questions that arise in the course of their duties. Our senior management will assist you by providing access to supervisors and administrators as well as a confidential Compliance Helpline;
- ❖ Adhere to both the letter and spirit of all applicable Federal, State and Local Laws and regulations.
- * Keep accurate records. All records must be truthful, prepared accurately, and retained in accordance with our standards and requirements of applicable regulation.
- ❖ Adhere to high ethical standards and behavior when acting on behalf of the Association.
- Avoid conflicts of interest. He or she will not use a position for personal gain, and will not engage in activities that may conflict with the mission, business or operations of the Association.
- Report possible violations. Everyone is expected to report any possible violations of law or ethical standards in accordance with the procedures set forth in this document. The Code of Conduct provides resources for reporting without fear of reprisals.

Quality of Care

The Association staff works as a team to ensure the satisfaction of clients, employees, contractors, agents and the community, following a belief in our clients' potential and creating an environment where our clients are provided with quality care and their rights are respected and protected. Our agency is committed to providing the care and services necessary to attain or maintain each person's highest possible physical, mental and psychosocial well being. We recognize that all citizens have the right to comment about care and services without fear of reprisal. Furthermore, the Association's management recognizes all concerns, and will

appropriately investigate and resolve all complaints as soon as possible. Professional staff conducts their practice within the scope of their license and the privileges accorded to them by their appointment and credentialing process (when applicable).

Compliance with all Laws

Guided by our mission and our pursuit of the highest standards of service, staff of the Association exercises sound judgment, care and diligence in all matters relating to our duties and responsibilities. All agency business is conducted with respect for all applicable Federal, State and Local Laws and regulations.

Honesty

Representatives of the Association do not make statements that are known to be false, inaccurate, or misleading. Proper steps are taken to learn the facts, when necessary, and/or consulting supervisory or management staff before information is provided.

Confidential Information

Confidentiality is protected for all persons receiving care from our agency as well as confidentiality for the Association business records and processes. Information is only provided to those authorized to receive it; unauthorized disclosures are prevented. Confidential agency business or financial information is only provided in a manner consistent with HIPAA and other pertinent regulations.

Billing and Coding Integrity

Billing, coding and reimbursement procedures are preformed in compliance with all applicable contracts, regulatory, and legal requirements. Services are billed, using billing codes that accurately describe the services that were provided, and supported by accurate documentation in the medical record. Those who perform billing and/or coding of claims on behalf of the Association will take every reasonable precaution to ensure their work is accurate, timely, and in compliance with Federal, State and Local laws/regulations.

- ❖ Billing Codes: Payment claims for services are prepared using only billing codes that reflect the services provided and supported by appropriate documentation. The Association or its contractors do not use billing codes that provide a higher payment rate than the billing code that actually reflects the service furnished (upcoding). The Association or its contractors will not improperly bill services separately that are required to be billed together (unbundling).
- * Actual and Medically Necessary Services: Only necessary services that were actually preformed by appropriate practitioners are billed.
- ❖ *Documentation of Services*: All patient services are documented in a proper, accurate, legible and timely manner, and all billing is supported by this documentation.
- No Duplication of Billing: The Association does not submit duplicate bills, and does not bill for items or services that are covered by another primary payer.
- * Communication to Assure Correct Billing: Effective and accurate communication between clinical and billing staff ensures correct billing of services. The Association does not knowingly bill for inadequate or substandard care.

Accurate Cost Reporting

Departmental cost reports are prepared in compliance with third-party payers', legal and regulatory requirements.

Questions/Inquiries

If you have any questions about this Code of Conduct, please feel free to direct them to Paula Fries, COO and Compliance Officer (631-471-7242 x1414).