

MAIMONIDES MEDICAL CENTER

CODE: COMPL-020 (Reissued)

DATE: March 5, 2024

ORIGINAL ISSUE DATE: as AD108 November 1, 1993

CONFLICT OF INTEREST

1. POLICY

It is Maimonides Medical Center's policy to conduct business free from the influence of Conflicts of Interest so that all of our decisions are made fairly, objectively, and in the Medical Center's best interest without favor or preference based on personal considerations. Consistent with our Code of Conduct, any person employed by or otherwise associated with MMC is expected to perform their duties and responsibilities free from the influence of Conflicts of Interest and devote their professional loyalty, time and energy to patient care, research, teaching, and other services on behalf of the Medical Center. This policy describes the process for disclosing potential Conflicts of Interest.

2. SCOPE

This policy applies to anyone employed by or otherwise associated with MMC. Throughout this policy, Maimonides Medical Center ("MMC" or "Medical Center") includes Maimonides Research and Development Foundation, MMC Holding of Brooklyn, Inc., Maimonides Health Resources, Inc., and any subsidiaries or affiliated entities, such as M2 Medical Community Practice, P.C. and New York Community Hospital.

3. DEFINITIONS

Associated Individuals: All individuals employed by or otherwise associated with MMC (e.g., trustees, directors, officers, employees, medical staff, volunteers, students, trainees, physician office staff, contractors and any other person performing work for or at MMC).

Competitor: Any individual, corporation or other entity that sells, provides or supplies items or services that also are offered by MMC.

Conflict of Interest: A situation in which an Associated Individual is in a position to influence the business or other decisions of MMC in a manner that could lead, or appear to lead, to the personal gain or advantage of the Associated Individual, a Family Member of the Associated Individual or a Related Business Entity (Family Member and Related Business Entity are defined below). A Conflict of Interest with respect to any entity of the Medical Center is a Conflict of Interest with respect to all entities of the Medical Center.

Family Member: Any spouse, domestic partner, brother or sister (whether whole- or half-blood), child (whether natural, adopted, or foster), grandchild, great grandchild, or spouse or domestic partner of a brother, sister, child, grandchild or great grandchild of an Associated Individual.

Financial Interest: A direct (including as owner, partner, officer, director, participant, licensee, shareholder, consultant or as the recipient of wages, salary, commission, bonus, fees, stocks, bonds, stock options or other securities that are not sold on a national stock exchange, royalties, patents, consulting fees, honoraria or other compensation of value) or indirect (as a family member, silent partner, etc.) ownership or investment interest in any entity that sells or provides goods and/or services, financing or facilities to the Medical Center or its patients (e.g., home care agency, dialysis center, etc.) or which has any other business or financial relationship with the Medical Center (including a research sponsorship relationship) or which is a Competitor of the Medical Center, or which regulates or licenses the Medical Center. A Financial Interest does not include mutual funds or certificates of deposits and other depository accounts at financial institutions. A Financial Interest is not necessarily a Conflict of Interest; however, Associated Individuals should disclose such Financial Interests for analysis.

Manager: An MMC employee, other than a trustee, director or officer, who holds a director title or above, an employed physician, or any other individual so identified by the Chief Compliance Officer.

Related Business Entity: Any entity in which an Associated Individual or a Family Member of an Associated Individual: (1) is a director, trustee, officer, employee, member, or partner; or (2) has a Financial Interest in the entity, which could include ownership, investment, income or any similar right or interest which could benefit the Associated Individual or the Family Member of the Associated Individual.

4. CONFLICT OF INTEREST DISCLOSURE & REVIEW PROCESS

A. Disclosure of Conflict of Interest

If you become aware that you may have a potential or actual Conflict of Interest,¹ you must promptly disclose the material facts of the Conflict of Interest to the appropriate person(s) as indicated below. Once you have disclosed a potential or actual Conflict of Interest and until advised otherwise by the appropriate person(s), you must immediately recuse yourself from participating in the matter that relates to the Conflict of Interest, including refraining from attempting to influence deliberations or, if applicable, voting on the matter. In addition, until advised by the appropriate person(s), you may not be privy to any non-public information related to the matter.

- **Trustees, directors, and officers** must promptly disclose the potential or actual Conflict of Interest to the Chair of the Board. As appropriate, the Chair of the Board will notify one or more of the following individuals: the President and Chief Executive Officer, the Chair of the Compliance and Governance Committee of the Board, the Chief Compliance Officer, and/or the Executive Vice President & General Counsel. In the event that any Conflict of Interest requires assessment by the Board of Trustees,

¹ In the case of a possible conflict of interest related to the conduct of a research study, the Conflict of Interest in Research Committee will also review the potential or actual conflict of interest (see RES-021 – Conflicts of Interest in Human Research & PHS Funded Research for additional information regarding the disclosure process as it relates to research).

then such review will be handled by the Compliance and Governance Committee.

Prior to any deliberations or voting concerning a potential Conflict of Interest disclosed by a trustee, director or officer, the Chair of the Compliance and Governance Committee may request additional information from the trustee, director or officer. In the course of the review, the Chair will consider how the Conflict of Interest might be mitigated or eliminated. A trustee, director or officer may only proceed with the transaction, arrangement or relationship that is a potential Conflict of Interest if it is approved by a majority vote of trustees present at the Compliance and Governance Committee meeting where the matter is discussed. The Compliance and Governance Committee will document its decision concerning the transaction, arrangement or relationship in the minutes of the meeting where the matter is discussed and include the basis for the approval, including consideration of any alternatives and/or safeguards. The Compliance and Governance Committee shall confirm that the trustee, director or officer with the potential or actual Conflict of Interest was recused from any deliberations and/or voting on the matter.

- **Managers and all other Associated Individuals** must promptly disclose the potential or actual Conflict of Interest to the Chief Compliance Officer, who may request additional information. Any determination by the Chief Compliance Officer concerning the Conflict of Interest will be documented in the Corporate Compliance Department's files and/or noted in the Associated Individual's file. Depending on the nature and scale of the potential Conflict of Interest, the Chief Compliance Officer may ask the Compliance and Governance Committee to review the potential Conflict of Interest and the Compliance and Governance Committee shall conduct its review and decision making in the same manner as set forth above for trustees, directors and officers.

Depending on your role or affiliation with MMC, failure to disclose a potential or actual Conflict of Interest may result in disciplinary and corrective action, which may include Board removal (in the case of a trustee), termination from the Medical Center (in the case of an employee), and/or removal under the applicable provisions of the medical staff bylaws (in the case of a member of the medical staff).

B. Annual Conflicts of Interest Disclosure Form ("COI Form")

The Corporate Compliance Department may require you to complete a COI Form at the start of your employment or affiliation with MMC and annually thereafter. If you are required to complete a COI Form, you must provide all requested information and promptly report any changes to the information you submitted in your last completed COI Form to the appropriate person(s) as described in Section 4A above.

The Chief Compliance Officer will collect and review all COI Forms and provide the Executive Vice President & General Counsel and the Chair of the Compliance and Governance Committee with a summary of the findings and, upon request, copies of all such COI Forms. The Chief Compliance Officer will oversee the review of all COI Forms for possible Conflicts of Interest and will refer those potential Conflicts of Interest disclosed by a trustee, director, or officer to the Compliance and Governance Committee, which, with the assistance of the Chief Compliance Officer and Executive Vice President & General Counsel will oversee the review consistent with

the process set forth above in 4A.

C. Reporting

If you become aware of any Conflict of Interest that impacts the Medical Center, you should report it to your supervisor, the Chief Compliance Officer, or call the confidential Compliance Hotline at 800-585-7970, which is available 24 hours day, 7 days a week or by visiting www.maimo.ethicspoint.com.

5. CONTROLS

The Corporate Compliance Department, Office of Legal Affairs and the Compliance and Governance Committee shall implement and monitor compliance with this policy.



Kenneth D. Gibbs
President & CEO

REFERENCES: TJC Accreditation Manual RI.1.20 TJC
Standard LD 04.02.01
New York Not-For-Profit Corporation Law §§ 715, 715-a.
CMS Medicare Enrollment Form 855A
IRS Form 990 and Accompanying Regulations

INDEX: Conflict of Interest, Ethics, Gifts, Business Relationship

DEPARTMENT
RESPONSIBLE: Corporate Compliance Department & Office of Legal Affairs

RELATED POLICIES: COMPL-004 – Political Activities
COMPL-013 – Gifts, Gratuities, and Business Courtesies
COMPL-016 – Referral Source Financial Relationships
RES-021 – Conflicts of Interest in Human Research & PHS
Funded Research