

TITLE: HEALTH CARE INDUSTRY REPRESENTATIVES (HCIR)

PURPOSE:

- To prevent the activities of Health Care Industry Representatives (HCIR) as defined below from inappropriately influencing medical education or patient care.
- Maintain a single business standard for access to the New York-Presbyterian Hospital (Hospital) by HCIR.
- Maintain security access points, registration, and credentialing standards to protect Hospital buildings, patients, and staff.
- Facilitate appropriate interaction between the HCIR, health care personnel, and Hospital staff and the proper dissemination of information without causing disruption to the care of patients or interfering with the performance of the Hospital staff.
- Require that marketing of products and services be consistent with applicable policies, regulations and guidelines established by Hospital, applicable regulatory agencies, and the Medical Board.
- Require that appropriate background and health screening has been accomplished before entry by HCIR onto Hospital sites.

POLICY:

Access to NewYork-Presbyterian Hospital by Health Care Industry Representatives (HCIRs), is a privilege offered to vendors and other third parties including but not limited to clinical trial monitors to allow mutually beneficial interactions. All HCIRs are expected to adhere strictly to this Policy as well as to regulations of the Food and Drug Administration (FDA), the New York State Health Department, the policies and guidelines of the American Medical Association (AMA), and the Pharmaceutical Research and Manufacturers of America (PhRMA). Violation of these laws, regulations, guidelines, policies or procedures may result in adverse action up to and including termination of privileges of the HCIR.

To be eligible to conduct business transactions with Hospital, HCIRs and other third parties must complete the HCIR credentialing process through Symplr (formerly VCS). *Exceptions to this Policy will only be made if: an agreement between the third party and NYPH prescribes alternative procedures or the HCIR is eligible to sign an HCIR Attestation under this Policy.*

Definitions:

Vendor: Any commercial entity, agency, or person not employed by the Hospital with the intent to sell, rent, lease, license or broker a product or service, or provide a service, on behalf of another organization.

Health Care Industry Representatives (HCIRs): Any non-employee individuals representing an outside organization including, but not limited to: Any person who promotes on behalf of a vendor or other third party (hereafter organization) pharmaceutical products, medical supplies, equipment, or other products, or is a field service representative who provides information and/or services to health care providers, staff or patients on behalf of manufacturers, suppliers or other third parties. This definition covers positions including, but not limited to, Medical Service Representatives, Educators, Pharmaceutical Representatives, Drug Company Representatives, Vendor Employees, Service Technicians, Clinical Trial Monitors, Independent Representatives, Language Service Providers, Training Contractors, Retail Vendors, Pet Therapists, Managed Care Organization Representatives, Contract Workers, Orthotics and Prosthesis Representatives, Onsite Service Providers, Marketing Associated Representatives, IT Consultants, and Remote Access Contractors.

QUESTIONS:

Any questions regarding this shall be referred to Purchasing and Strategic Sourcing or, as applicable, the Office of Legal Affairs (OLA) for review.

APPLICABILITY:

This Policy is applicable to all individuals seeking access to Hospital sites for business purposes unless they are exempt pursuant to this Policy. Pharmaceutical representatives and representatives who will be working in procedure areas will be held to the expectations set forth in this policy as well as those expectations as described in policies specific to those areas

PROCEDURES:

Vendor Credentialing:

Each HCIR and the organization he/she represents must be registered and credentialed through the Hospital's HCIR credentialing partner, Symplr, unless previously agreed to by contract or if they qualify for use of the Attestation Form as described in Section 4. The registration process, if applicable, must be completed on line at www.symplr.com.com before a HCIR may be granted access to any NYPH Hospital facility for the purpose of conducting business. The HCIR and/or their employer are responsible for maintaining an active membership and current credentials with Symplr to be able to access Hospital property. Should a vendor or other organization be sold, or change its name, the organization and all of its registered HCIRs' shall update their registration information with Symplr within 30 days of such change, or HCIRs will not be permitted access to Hospital property. If a HCIR vacates their position with their employer, the employer is responsible for notifying Symplr of such change within 10 days. HCIRs who are credentialed

through Symplr for an employer that is different from the company that they are representing during a visit to NYPH will not be permitted entry.

HCIRs Who are Required to Register with Symplr:

Regular Medical Sales and Service Representatives, Educators, Pharmaceutical Representatives, Vendor Employees, Embedded and/or contracted Service Technicians, Facilities & Engineering Project Managers & Professional Staff, Independent Representatives, Language Service Providers, Training Contractors, Retail Vendors, Pet Therapists, Managed Care Organization Representatives, Contract Workers, Orthotics and Prosthesis Representatives, Onsite Service Providers, Marketing Associated Representatives, IT Consultants, Business Consultants, and Remote Access Contractors.

HCIRS Not Required to Register with Symplr (Must use Attestation Form – Refer to Section 4 – Attestation Form):

- Infrequent visitors (less than 5 individual visits per year), including: Temporary educators, Emergency/On-Call Service Technicians, Facilities & Engineering contractors, Delivery Persons, On Call/Fill-in Representatives, Clinical Trial Monitors.
- Guests of HCIRs – Company representatives who visit Hospital property infrequently for meetings or to provide services, which include but is not limited to company executives (CEO, COO, Local Territory Vice Presidents, etc.), Engineers, and Product Research & development staff.
- Supplemental Staffing/Temporary Labor who are managed by Human Resources and shall complete the credentialing process through Human Resources. Supplemental Staffing/Temporary Labor are not required to complete the vendor credentialing process through Symplr.
- Agency Nurses are monitored by the Hospital Division of Nursing and shall complete the credentialing process through the Hospital Division of Nursing. Agency Nurses are not required to complete the vendor credentialing process through Symplr.
- Anyone seeking access to Hospital sites for single or limited access not to exceed a continuous 30 day span, must complete an Attestation Form.

1. Registration

To initiate a business relationship with the Hospital, HCIRs must register themselves and the organizations they represent with the Hospital's current credentialing vendor, Symplr, at www.symplr.com.

- A. All HCIRs must register and become credentialed through Symplr before entrance onto Hospital sites will be allowed.
- B. A "Vendor Guide," containing information necessary for registering with Symplr along with information necessary to maintain a business relationship with Hospital is available on both the "For Vendors" section of the www.nyp.org website as well as the Symplr website.
- C. The requirements for vendor credentialing include:
 - Provide proof of appropriate vaccinations and a specific drug screen
 - Read All Relevant Hospital Policies and Procedures supplied on line
 - Complete all Hospital required Educational Training Courses
 - Provide documentation of education/certification on each service or equipment provided by HCIR (different for each level)
- D. It is the responsibility of each organization to ensure that the names of its registered HCIRs are accurate in Symplr and that the HCIR accounts are kept current.
- E. All costs to register with Symplr and to complete the credentialing process are the responsibility of the HCIR and/or their employer. NYPH will not reimburse or pay for any fees associated with Symplr membership or for completion of a HCIR's credentialing.

2. Access to NewYork-Presbyterian Hospital Buildings

- A. HCIRs must enter the Hospital through an entrance designated for HCIRs. These entrances are:
 - NYP/The Allen Hospital at 5141 Broadway
 - NYP/Morgan Stanley Children's Hospital at 3959 Broadway
 - NYP/Columbia University Medical Center -The Vivian & Seymour Heart Center at 173 Fort Washington Avenue
 - NYP/Weill Cornell Medical Center Security Office ID Unit -Annex Building at East 70th Street
 - NYP/Weill Cornell - Weill Greenberg Center at 1305 York Ave
 - NYP/Payne Whitney Westchester -Facilities Office - Main Building
 - NYP/Ambulatory Care Network Practice sites
 - NYP/Lower Manhattan - Gold Street entrance
 - NYP/Lawrence - 55 Palmer Avenue, Bronxville, NY
 - NYP/Hudson Valley Hospital - 1980 Crompond Road, Cortlandt Manor, NY
 - NYP/Queens - 56-45 Main Street, Flushing, NY
 - NYP/Brooklyn Methodist - 506 6th Street, Brooklyn, NY

Permission for access to particular areas in Hospital facilities shall be determined based upon the HCIR's level of access. HCIRs will be permitted access only to those areas for which they have been approved.

Access levels:

All Access: This level provides HCIRs access to any and all areas in a facility including procedure areas like OR and Cath Lab.

Patient Care Access: This level enables HCIRs to enter patient care areas or where PHI is available. You cannot access procedure areas.

Administrative Access: This level enables HCIRs to access all general areas of a facility but no procedure or patient care areas.

Provider Access: This level is for pharmacy reps accessing Physician offices but not patient care areas.

- B. HCIRs shall be permitted access to Hospital buildings only when they have an appointment with a member of the attending staff, a nurse practitioner, a management employee in an applicable area, a member of the procurement staff, or some other designated Hospital representative. HCIRs are prohibited from setting up appointments with students, house staff, nursing staff, pharmacy staff, or laboratory staff. Unannounced visits to any area of the Hospital shall not be allowed.
- C. HCIRs shall present their Symplr ID badges to Security or swipe in at a Symplr kiosk to check in and out at designated hospital entrances, to receive a "Day Pass" for the period of their visit. If a HCIR has not yet received a Symplr ID badge, the HCIR must present a valid government issued ID, Vendor Company issued ID, and a business card for Hospital Security to verify Symplr registration.
- D. All HCIRs must wear a Photo ID and carry a paper day pass, issued by Security or at a Symplr kiosk, between the neck and waist at all times while on Hospital property.
- E. An entry in the Symplr database will be completed automatically when the HCIR signs in at a designated Symplr access point. The names and locations of all individuals that the HCIR is scheduled to visit and the purpose of his/her visit must be pre-established for the HCIR to be allowed access to the building. Visitation by a HCIR to any area not included in the Visitation Log is prohibited and will constitute a violation of this Policy.
- F. All HCIRs will be issued a Symplr ID card after registration and completion of a background check by Symplr.

3. Issuance of Hospital ID Cards

An HCIR may be issued a Hospital "Contractor" ID card only when approved by a Hospital Director or above AND the nature of the services that they are contracted to perform on Hospital property requires them to access locked areas, or if they are contracted to provide services directly to patients as representatives of NYPH. Any Hospital ID cards issued to HCIRs not meeting the aforementioned criteria shall be

considered expired as of their printed expiration date and shall be returned to or confiscated by Hospital Security.

4. Attestation Form

An Attestation Form may be utilized for those HCIRs visiting the Hospital for: single visits totaling less than five visits per year, or a limited visit not to exceed 30 continuous days, or for HCIRs as they are otherwise described in this policy.

- A. The department hosting the HCIR is responsible for the proper completion and processing of applicable Attestation Forms in accordance with this Policy.
- B. By signing the Attestation Form, the host department is acknowledging that they trust that the information provided by the HCIR is correct, and that are responsible for the HCIR while they are on Hospital property.
- C. Attestation Forms are available at all designated HCIR entrances, on the NYP infonet, or by contacting HCIR Credentialing Administration in Procurement and Strategic sourcing (PSS) via e-mail to: vendorcred@nyp.org.
- D. The Attestation Form must be completed by the HCIR and returned to the host department, which will sign the form and submit it to the HCIR Credentialing Administrator.
- E. Completed and signed forms will be reviewed by HCIR Credentialing.
- F. Hospital Security retains the right to examine copies of the completed forms while HCIR are on site.
- G. Completed Attestation Forms are to be retained by the host department, according to current hospital policies for document retention.

4. Visitation Hours

HCIRs shall conduct business at the Hospital between 8 AM and 5 PM on weekdays, unless a duly authorized Hospital representative specifically requests visitation or if Hospital determines there is a particular need to conduct business during alternative hours of the day or on weekends (i.e. in-service training, delivery of a product required to address an urgent patient need or emergency, etc).

5. Areas of Visitation

- A. HCIRs are only allowed to visit those areas permitted, pursuant to their authorized access level.
- B. Meetings with HCIRs shall be held only in public or administrative areas unless otherwise determined by Hospital management staff.
- C. HCIRs may be present but shall not utilize common Hospital areas (such as building lobby areas, eating areas, parking areas, public telephone areas,

etc.) for the purpose of initiating unsolicited contact with health care professionals or detailing hospital staff on HCIR's products without specific permission by Hospital.

6. Patient Confidentiality and Privacy

HCIRs shall only have access to any patient specific information required to perform business transactions for their organization, so long as they comply with the applicable laws and Hospital policies including, if applicable, executing a Business Associate Agreement in a form approved by NYPH.

- A. HCIRs shall not enter any patient care area or attend meetings or functions where patient specific information is discussed, unless directed or escorted by Hospital staff.
- B. Training may be conducted by HCIRs of Hospital personnel or medical staff regarding equipment or devices that involves exposure to patients only if permitted by a contract between Hospital and the HCIR's organization. Before a HCIR may conduct training that involves exposure to a patient or information about a patient, approval from the Attending Physician and patient consent, documented in the patient's chart, is required. The Operating Room has specific policies (Policy: PERIOP/BUS14) related to training provided by HCIRs which must also be followed.
- C. If a HCIR is permitted to have access to patients' personal health information in accordance with applicable law and/or a Business Associate Agreement, such HCIR shall have access only to electronic or paper information including patient charts, laboratory information, patient bills, etc. that is patient specific, or could be associated with a particular patient, unless additional information is required to perform business transactions between organization and Hospital as permitted by applicable contract, Hospital policy or law.

7. Marketing Activities

HCIRs are authorized to promote their organization's products and disseminate information subject to the following parameters:

- A. HCIRs shall confine their promotional activities within the Hospital to attending medical staff, nurse practitioners, pharmacy management staff, management staff in areas where the particular Vendor's supplies and equipment could be used, and the Procurement & Strategic Sourcing Department.
- B. HCIRs will comply with all decisions of the Medical Board and its subcommittees, such as the Formulary and Therapeutics Committee. HCIRs

are not permitted to promote medications, supplies or equipment contrary to applicable Hospital Policies or Guidelines.

- C. Food may not be provided by a HCIR within the Hospital except as part of an educational program that meets the criteria outlined in Section [7] of this policy.
- D. Gifts, such as pens, notepads, or any other promotional item bearing the Vendor's logo or information, may not be distributed within the Hospital.
- E. HCIRs may not post any notices in the Hospital that promote their products or any program that they sponsor. Program notices only may be posted by a Hospital representative responsible for that program in accordance with Hospital policies for posting notices. Promotional materials may only be given to an individual during an appointment and may not be left in Hospital areas, including public areas.

12. Compliance and Enforcement

It is the responsibility of every member of the professional staff and employees of Hospital to comply with this Policy.

- A. Hospital staff who witness violations of these policies and procedures shall report possible infractions to NYPH Security and the HCIR Credentialing Administrator(s). Any alleged infraction will be reviewed by the HCIR Credentialing Administrator(s), their departmental leadership, and if necessary, the Chairs of the appropriate Hospital Committee(s) to determine if disciplinary action is warranted.
- B. If a HCIR violates this Policy or any other applicable Hospital Policies pertaining to their work in or with the Hospital, the Hospital will take appropriate disciplinary action. Hospital Administration and HCIR Credentialing Administration may develop an appropriate course of action up to, and including, immediate and/or permanent suspension of access, if deemed appropriate. Progressive disciplinary action for discretionary offenses, including but not limited to violating Hospital policies for access or inappropriate presentation of products or medications to medical or hospital staff will include:
 - a. First offense: Suspension of access privileges for 30 days
 - b. Second offense: Suspension of access privileges for 90 days
 - c. Third offense: Permanent suspension of access privileges

Disciplinary action for more severe offenses, including but not limited to, creating a situation where a patient or staff member are put at risk or are physically or emotionally harmed, making an unauthorized decision or error that financially impacts the hospital, or threatening an employee or patient, will result in immediate permanent suspension of access privileges.

- C. Suspension of access: If the Hospital deems that a HCIR's privileges are to be suspended, either for a defined period or permanently, the HCIR Credentialing Administrator will add that individual to the "Denied Access" list in Symplr and document the reason for suspension as appropriate. When the HCIR is denied access in Symplr, the HCIR Credentialing Administrator will communicate the suspension and terms of the suspension to PSS Directors Hospital departments, as appropriate. When a HCIR is suspended in Symplr, Symplr will notify that HCIR and the HCIR's supervisor of record of such action.

14. Maintenance

The Hospital's HCIR Credentialing Administrator(s) will perform regular maintenance and audits on the credentialing system process and HCIR registrations.

Maintenance:

- a) Inactive HCIR accounts will be purged quarterly. This will include accounts that are non compliant for 180 days or who have not signed in to a NYPH location for 180 days
- b) All required credentials and policies will be reviewed for updates annually, at minimum
- c) All policies will be reviewed and updated with current versions quarterly, at minimum. Any renewed or updated policies that are identified and presented to HCIR Credentialing Administration will be updated within five business days

Audits will include:

- a. Review of HCIR's who are denied access
- b. Confirmation that Denied HCIRs have not created new accounts in VCS

- c. Review five HCIR accounts to confirm that all required credentials for each account's access level have been appropriately reviewed and approved by VCS

REFERENCES: P230A – Attestation Form, R130 – Record Retention Policy, PERIOP/BUS14 – NYP Periop Vendor S300 – Sourcing Policy

RESPONSIBILITY:

Vice President Procurement & Strategic Sourcing

POLICY DATES:

Reviewed: May 2002 (Previously Policy #P190.1)

Revised: January 2003 (**Formerly named "Purchasing: Monitoring Sales Representatives"**)

May 2008, May 2010, February 2011; August 2012

Reviewed: February 2011; October 2014; October 2016

Revised: August 2018

Approvals:

Executive Committee:

NYP/CUMC: 11/12/02, 12/17/02

NYP/WCMC: 12/19/02

Medical Board: 1/9/03; 3/15/15