



The Care Management Company™
200 Corporate Boulevard South
Yonkers, NY 10701

October 27, 2008

New Policy Guiding the Activities of Representatives from Medical Device, Durable Medical Equipment and other Companies at CMO in effect October 15, 2008

Montefiore Medical Center has developed a new policy to establish guidelines for contracted vendors including pharmaceutical companies, DME, nursing home and other company liaisons accessing the Montefiore Medical Center healthcare delivery system.

Registering as a Medical Vendor Representative (MVR):

According to this policy, all Medical Vendor Representatives must be approved and pre-registered prior to seeking access to any Montefiore site. Any MVR seeking access should complete the attached ***Request for Medical Vendor Representatives Access Form*** and submit to the appropriate department indicated below (MVRs are responsible for signing and submitting this attestation to the appropriate department annually):

- Medical Device Vendors: The Acquisition Department will screen and approve medical device representatives;
- Durable Medical Equipment and Nursing Home Vendors: The Care Management Organization (CMO) will screen for approval of the DME representatives.

Prior to coming on site, the MVRs must present to the Security Office at 3324 Rochambeau Ave., Bronx, NY, with their signed access form to receive their vendor identification badge. *In no circumstances is the expiration date of the badge to exceed one year from date of issuance.* You are required to wear your ID at all times when on Montefiore premises and must also wear a Photo ID issued by your employer. As a Medical Vendor Representative, you are required to return your Montefiore ID badge to Security in the event they leave their job or are no longer required to access to Montefiore premises for any reason.

Vendor Obligations and Authorized Activities:

- MVRs are not permitted to promote medications, supplies or equipment contrary to Montefiore policies or guidelines as approved by medical center committees.
- Sample medications and/or devices are not permitted at all and may not be distributed or left in any area within Montefiore Medical Center or CMO.
- MVRs are not permitted to solicit business via displays or organize gatherings of the professional staff for the purpose of presenting their products; nor may a representative post any brochures, notices, or promotional material in any part of Montefiore.
- No food shall be provided by a MVR at any educational program offered at Montefiore.
- No gifts or inducements of any kind, even of nominal value, may be distributed by Medical Vendors Representatives on Montefiore premises.
- No expenses for travel or attendance at lectures or conferences of any type may be provided by MVRs. MVRs may not purchase any meals in connection with presentations or meetings, except as set forth below:
- Vendors seeking to provide grant money for trials should coordinate through the Office of Sponsored Research.

Enclosed please find our **Medical Vendor Representative Access Form Application**. If you have questions regarding these guidelines or wish to review this policy in detail, please contact the CMO Provider Relations Department at 914.377.4477.

MONTEFIORE MEDICAL CENTER
Medical Vendor Representative (MVR) Access Application

All Medical Vendor Representatives (MVRs) must apply for and receive prior authorization to be permitted on designated Montefiore premises. As per Montefiore's MVR Policy and Procedure, any MVR seeking access must complete this application and submit to Pharmacy, Acquisitions, or the Network Care Management as appropriate. Please select type of MVR:

- Pharmaceutical Medical Device Durable Medical Equipment Nursing Home Representative
 Home Health Agency Representative Other _____

Name: _____

Position/Job Title: _____ Credentials: _____
(i.e., MBA, MD, RN, etc)

Company: _____

Address: _____

Bus. Phone: _____ Cell phone/pager: _____ Email: _____

Rationale for access: _____

Department(s) contacted: _____

Department	Contact person(s)	Telephone
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Do you need access to patient care areas? Yes No

If yes, indicate areas and rationale: _____

Note: A completed health form from the MVR Employer indicating MMR vaccination or equivalent and PPD testing, as well as a signed confidentiality agreement is required and must accompany this form.

To be completed by the MVR:

I, _____, as a representative of (company) _____, attest that I have obtained and read the Montefiore MVR Policy and Procedure and agree to abide by it when visiting MMC. I understand that I 1) will wear my ID badge at all times on Montefiore premises, 2) am not allowed in patient care areas (unless by permission) and will not loiter in common Medical Center areas 3) am not permitted to promote medications, supplies or equipment contrary to the Montefiore policies or guidelines and 4) will comply with all policies related to the privacy and security of protected health information. I understand that violations of this policy will result in disciplinary action, up to and including suspension or termination of access privileges at Montefiore.

Signature of Representative: _____ Date: _____

Name and Signature of Manager: _____ Date: _____

For MMC Management:

- The above MVR has been approved and should receive a designated ID badge with an expiration date of _____ in order to have access to MMC premises as regulated by the Administrative Policy and Procedure that they have read and agreed to abide by. I have contacted the MVR of the approval, expiration date and directions on how to obtain the ID badge.

The above MVR application is not approved.

Authorized Department (select one): Pharmacy Acquisition Network Care Management

Name: _____ Date: _____

Signature: _____