

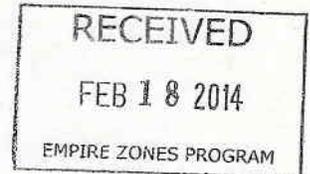


# Albany Medical College

47 New Scotland Avenue, Mailcode 112, Albany, New York 12208-3479  
Kevin M. Leyden  
Senior Vice President for Business Development and Strategic Partnerships

(518) 262-1678  
Email: leydenk@mail.amc.edu

February 10, 2014



Ms. Leslie F. Whatley  
Executive Vice President  
START-UP NY  
633 Third Avenue  
New York, New York 10017

Dear Leslie,

Please find attached the application and campus plan of Albany Medical College to participate in the START-UP NY initiative. We are very excited to offer businesses that have synergy with our mission the opportunity to be part of the Capital Region's only academic medical center, and all it has to offer, to ensure their success. We are in the process of putting together a comprehensive educational and logistical package that will assist and allow them a fast start and easy incorporation into our family. Of note is that we have put forth approximately 2,000 sq. ft. of hooded laboratory space but we are open to expanding that considerably if the need arises as we have access to the various category/type lab spaces that may be requested. If you or your staff has any additional questions please feel free to contact me.

Sincerely,

Kevin M. Leyden

attachments

## **Business Mission**

**Indicate how the business's participation in the START-UP NY program will have positive community and economic benefits.**

*The types of businesses Albany Medical College would locate on its campus in the StartUpNY Program would be those primarily focused on biomedicine, bioengineering, biotechnology and pharmaceutical. Albany Medical College provides an ideal setting to foster relationships with these companies to develop a variety of biomedical equipment, biomedical material products and clinical testing. Ideally, the companies will have mutual biomedical product development interests in the specialty areas of clinical and medical research outlined below.*

*Albany Medical College provides the full range of comprehensive clinical services traditionally provided in the academic medical center setting. These specialty services include, but are not limited to, anesthesiology, emergency medicine, family medicine, medicine, neurology, neurosurgery, obstetrics & gynecology, ophthalmology, pediatrics, physical medicine and rehabilitation, psychiatry, radiology and surgery. In addition, most of these specialties offer sub-specialty services that include, but are not limited to, cardiology endocrinology, critical care surgery, gastroenterology, HIV medicine, maternal fetal medicine, orthopedic surgery, otolaryngology surgery, pediatric critical care, pediatric endocrinology, pediatric gastroenterology, pediatric neonatology, pediatric infectious disease, pediatric oncology, pediatric surgery, pulmonary, renal, rheumatology, thoracic surgery, trauma surgery, urogynecology, urology surgery and vascular surgery. Albany Medical College employs over four hundred clinical physician faculty with specialty and sub-specialty clinical expertise in each of these areas. The Clinical Faculty at Albany Medical College receive on average approximately \$2M - \$3M on an annual basis in clinical trial funding from the pharmaceutical industry to develop new drugs and treatments for patients.*

*Albany Medical College houses four interdisciplinary research centers in the areas of cardiovascular science, cell biology and cancer, immunology and microbial disease and neuropharmacology & neuroscience. There are approximately sixty basic scientist research faculty who with expertise in these research center fields. Together these basic scientists receive an average of \$12M - \$14M of external federal or state grant funding on an annual basis to support their research initiatives.*

*Albany Medical College shares the same mission as Albany Medical Center as the two are inexorably linked. The mission of Albany Medical College/Center is included in the attached "2013 – 2015 Strategic Plan" document (attachment). This mission is to provide excellence in patient care, medical education and biomedical research. Albany Medical College/Center has the responsibility to:*

- *Provide a broad range of patient services to the people of eastern New York and western New England, including illness-prevention programs, comprehensive care, and the highly complex care associated with academic medical centers.*
- *Educate medical students, physicians, biomedical students, and other health care professional from demographically diverse backgrounds in order to meet the future primary and specialty health care needs of the region and nation.*
- *Foster biomedical research that leads to scientific advances and improvement of the health of the public.*

*It is also important to note that Albany Medical College's culture is shaped by its vision and values. These vision and values are formally tied to the College's mission in its "2013 – 2014 Strategic Plan".*

### **Vision**

*We at Albany Medical College/Center will continue to develop as a nationally recognized academic health science center. In collaboration with the community, we will provide excellence in patient care programs, education, and research.*

*Our vision for the future includes a commitment to working with other providers to make comprehensive and advanced clinical services available to the public while emphasizing quality and service. We will be a leader in developing an innovative health care delivery system and educational consortium that respond to the needs of the community.*

*Albany Medical College/Center will sustain a working and learning environment that fosters teamwork and commitment to shared values and goals. Through sound fiscal management, the College/Center will be able to enhance its teaching and research programs to be on the forefront of medical knowledge and innovative patient care.*

### **Values**

#### *Quality and Excellence*

- *Assure continuous quality improvement in all aspects of our mission*
- *Commit to excellence in all we do*

#### *Service*

- *Provide excellent service to patients, students, staff, and all others who use, work in, or visit our facility*
- *Recognize and value the contributions and potential of the entire College/Center community*
- *Seek and be sensitive to the advice of our constituents*

#### *Collaboration*

- *Collaborate in a way that enhances the health of our region*

#### *Integrity*

- *Maintain the highest standards of ethical and professional conduct*
- *Assure that relationships are open, honest, and fair*

#### *Compassion*

- *Recognize an individual's basic rights to respect, privacy, dignity, understanding, and spiritual guidance*

#### *Fiscal Responsibility*

- *Manage all resources in a fiscally responsible and prudent manner*
- *Meet our charitable responsibilities*

*The businesses aligning with Albany Medical College for StartUpNY initiatives are expected to directly contribute to one component of our mission, "foster biomedical research that leads to scientific advances and improvement of the health of the public." While the focus of these relationships will be the biomedical research piece of our mission, we also anticipate benefits to the other two components of our mission that apply to patient services and educating students. We would also anticipate these businesses share our approach to vision and values.*

*Lastly, Albany Medical College currently participates in the NY CAP Research Alliance with Rensselaer Polytechnic Institute (RPI) and the University at Albany (SUNY). Recently, through the Capital Region Economic Development Council (CREDC), the NY CAP Research Alliance has received awards of \$950K and \$500K respectively. These awards were based on fostering research collaborations between the three participating institutions. Currently, ten (10) specific projects have been funded that required collaborative participation of faculty from at least two of the participating institutions. The NY CAP Research Alliance is expanding by involving other institutions that include Wadsworth / NY State Department of Health and potentially other biomedical corporations.*

## **Business Mission**

**Describe how the mission and activities of the business aligns with or furthers the academic mission of the campus, college or university sponsoring the Tax-Free Area**

*As noted in both Albany Medical College vision statement and "2013 -2015 Strategic Plan" document, community development is a priority. As noted in our "2013 – 2015 Strategic Plan",*

### **Community Service:**

- *Continue to offer opportunities for faculty, residents and students to assist with community initiatives, particularly in underserved areas.*
- *Continue to provide and support a wide range of student internship opportunities in the Albany Medical College biomedical research labs.*
- *Further develop partnerships with regional businesses, institutions and state and local governments to support community development and projects.*
- *Sustain and grow global relationships outside the immediate Albany Medical College region to aid underdeveloped areas with clinical and academic expertise.*

*The primary community and economic benefits would relate to traditional economic development pipelines. Investment in biomedical research and development leads to entrepreneurship of product development. Both biomedical research and development and the resulting product development increases employment opportunities resulting in high salary jobs and support staff jobs. These new jobs allow for increased spending at regional businesses. The end result is regional economic growth.*

*By combining our traditional medical school setting with corporate venture capital initiatives, there will likely be enhanced graduate learning and new internship opportunities, not only for our students but potentially for students from the University at Albany, Rensselaer Polytechnic Institute, etc.*

# Campus Plan for Albany Medical College

1. **Campus Name:** Albany Medical College

**Contact:** Kevin M. Leyden

Senior Vice President, Business Development and Strategic Partnerships  
Albany Medical College  
47 New Scotland Ave  
Albany, New York 12208  
(518) 262-1678  
[leydenk@mail.amc.edu](mailto:leydenk@mail.amc.edu)

2. **Identification of the space and/ or land. (see attached)**

3. **A description of the type of businesses that the campus is intending to be located on the area to be designated.**

The types of businesses Albany Medical College would locate on its campus in the StartUpNY Program would be those primarily focused on biomedicine, bioengineering, biotechnology and pharmaceutical. Albany Medical College provides an ideal setting to foster relationships with these companies to develop a variety of biomedical equipment, biomedical material products and clinical testing. Ideally, the companies will have mutual biomedical product development interests in the specialty areas of clinical and medical research outlined below.

Albany Medical College provides the full range of comprehensive clinical services traditionally provided in the academic medical center setting. These specialty services include, but are not limited to, anesthesiology, emergency medicine, family medicine, medicine, neurology, neurosurgery, obstetrics & gynecology, ophthalmology, pediatrics, physical medicine and rehabilitation, psychiatry, radiology and surgery. In addition, most of these specialties offer sub-specialty services that include, but are not limited to, cardiology endocrinology, critical care surgery, gastroenterology, HIV medicine, maternal fetal medicine, orthopedic surgery, otolaryngology surgery, pediatric critical care, pediatric endocrinology, pediatric gastroenterology, pediatric neonatology, pediatric infectious disease, pediatric oncology, pediatric surgery, pulmonary, renal, rheumatology, thoracic surgery, trauma surgery, urogynecology, urology surgery and vascular surgery. Albany Medical College employs over four hundred clinical physician faculty with specialty and sub-specialty clinical expertise in each of these areas. The Clinical Faculty at Albany Medical College receive on average approximately

\$2M - \$3M on an annual basis in clinical trial funding from the pharmaceutical industry to develop new drugs and treatments for patients.

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- Educate medical students, physicians, biomedical students, and other health care professional from demographically diverse backgrounds in order to meet the future primary and specialty health care needs of the region and nation.
- Foster biomedical research that leads to scientific advances and improvement of the health of the public.

It is also important to note that Albany Medical College's culture is shaped by its vision and values. These vision and values are formally tied to the College's mission in its "2013 – 2014 Strategic Plan".

### Vision

We at Albany Medical College/Center will continue to develop as a nationally recognized academic health science center. In collaboration with the community, we will provide excellence in patient care programs, education, and research.

Our vision for the future includes a commitment to working with other providers to make comprehensive and advanced clinical services available to the public while emphasizing quality and service. We will be a leader in developing an innovative health care delivery system and educational consortium that respond to the needs of the community.

Albany Medical College/Center will sustain a working and learning environment that fosters teamwork and commitment to shared values and goals. Through sound fiscal management, the College/Center will be able to enhance its teaching and research programs to be on the forefront of medical knowledge and innovative patient care.

### Values

#### Quality and Excellence

- Assure continuous quality improvement in all aspects of our mission
- Commit to excellence in all we do

#### Service

- Provide excellent service to patients, students, staff, and all others who use, work in, or visit our facility
- Recognize and value the contributions and potential of the entire College/Center community
- Seek and be sensitive to the advice of our constituents

#### Collaboration

- Collaborate in a way that enhances the health of our region

#### Integrity

- Maintain the highest standards of ethical and professional conduct
- Assure that relationships are open, honest, and fair

#### Compassion

- Recognize an individual's basic rights to respect, privacy, dignity, understanding, and spiritual guidance

#### Fiscal Responsibility

- Manage all resources in a fiscally responsible and prudent manner
- Meet our charitable responsibilities

The businesses aligning with Albany Medical College for StartUpNY initiatives are expected to directly contribute to one component of our mission, "foster biomedical research that leads to scientific advances and improvement of the health of the public." While the focus of these relationships will be the biomedical research piece of our mission, we also anticipate benefits to the other two components of our mission that apply to patient services and educating students. We would also anticipate these businesses share our approach to vision and values.

Lastly, Albany Medical College currently participates in the NY CAP Research Alliance with Rensselaer Polytechnic Institute (RPI) and the University at Albany (SUNY). Recently, through the Capital Region Economic Development Council (CREDC), the NY CAP Research Alliance has received awards of \$950K and \$500K respectively. These awards were based on fostering research collaborations between the three participating institutions. Currently, ten (10) specific projects have been funded that required collaborative participation of faculty from at least two of the participating institutions. The NY CAP Research Alliance is expanding by involving other institutions that include Wadsworth / NY State Department of Health and potentially other biomedical corporations.

**4. A description of how participation by the types of businesses sought to occupy space in the campus tax-free zone would generate positive community and economic benefits.**

As noted in both Albany Medical College vision statement and "2013 -2015 Strategic Plan" document, community development is a priority. As noted in our "2013 – 2015 Strategic Plan",

**Community Service:**

- Continue to offer opportunities for faculty, residents and students to assist with community initiatives, particularly in underserved areas.
- Continue to provide and support a wide range of student internship opportunities in the Albany Medical College biomedical research labs.
- Further develop partnerships with regional businesses, institutions and state and local governments to support community development and projects.
- Sustain and grow global relationships outside the immediate Albany Medical College region to aid underdeveloped areas with clinical and academic expertise.

The primary community and economic benefits would relate to traditional economic development pipelines. Investment in biomedical research and development leads to entrepreneurship of product development. Both biomedical research and development and the resulting product development increases employment opportunities resulting in high salary jobs and support staff jobs. These new jobs allow for increased spending at regional businesses. The end result is regional economic growth.

By combining our traditional medical school setting with corporate venture capital initiatives, there will likely be enhanced graduate learning and new internship opportunities, not only for our students but potentially for students from the University at Albany, Rensselaer Polytechnic Institute, etc.

5. A description of the process the campus or college will follow to select businesses to participate in the Tax-Free NY Program.

The starting point of the selection process will begin with a general business plan to serve as a Request for Proposal (RFP). The business plan RFP will require the following elements:

- **Business Description**  
A general description of the business which identifies key services, products/equipment, and other elements essential to the particular business.
- **Goals and Objectives**  
Typically includes a mission statement, and then an outline of primary goals and objectives to be achieved in proceeding with the business.
- **Operation Plan**  
A summary of how goals and objectives planned to be achieved.
- **Market Analysis**  
A review of local, national, and international market trends for the particular business.
- **SWOT Analysis**  
An outline of strengths, weaknesses, opportunities and threats involved with proceeding with the particular business.
- **Implementation Plan**  
A timeline that includes brief summaries of important milestones with target dates for completion.
- **Financial Plan**  
Typically, a three-year financial analysis with budget calculations for specific areas of income and expenditures.

Business Plan RFP's will be reviewed by the College's Scientific Advisory Board. A priority will be given to Business Plan RFP's that have higher level of clinical and basic science expertise match and/or greater potential for collaboration with Faculty at Albany Medical College. After their review, the Albany Medical College Scientific Advisory Board will provide its recommendation to the Dean of Albany Medical College. The Dean of Albany Medical College will then decide the appropriate course of action to pursue as it relates to each Business Plan RFP.

6. (see attached)

## **Albany Medical College StartUpNY Application**

Question 5. A description of the process the campus or college will follow to select businesses to participate in the Tax-Free NY Program.

### **Part 1. Application / Request for Proposal (RFP)**

*The starting point of the process will begin with a general business plan to serve as a Request for Proposal (RFP). Each business requesting consideration will be required to complete an RFP with the following elements:*

- **Business Description**  
*A general description of the business which identifies key services, products/equipment, and other elements essential to the particular business.*
- **Goals and Objectives**  
*Typically includes a mission statement, and then an outline of primary goals and objectives to be achieved in proceeding with the business.*
- **Operation Plan**  
*A summary of how goals and objectives planned to be achieved.*
- **Market Analysis**  
*A review of local, national, and international market trends for the particular business.*
- **SWOT Analysis**  
*An outline of strengths, weaknesses, opportunities and threats involved with proceeding with the particular business.*
- **Implementation Plan**  
*A timeline that includes brief summaries of important milestones with target dates for completion.*
- **Financial Plan**  
*Typically, a three-year financial analysis with budget calculations for specific areas of income and expenditures.*

### **Part 2: Selection Decision Process:**

*There will be a two phased decision approach to the selection process. The first phase will comprise a scientific review, and the second phase will be a business review process. Both are outlined below with current and proposed membership.*

**Phase 1 - Scientific Review Process.** *Business Plan RFP's will be reviewed by the College's Scientific Advisory Board (see attached list for current membership). A priority will be given to Business Plan RFP's that have higher level of clinical and basic science expertise match and/or greater potential for collaboration with Faculty at Albany Medical College. After their review, the Albany Medical College Scientific Advisory Board will provide its recommendation to the Dean of Albany Medical College.*

**Current College Scientific Advisory Board:**

Richard Blinkhorn, MD, Department of Medicine  
David Conti, MD, Department of Surgery  
John DePaola, Dean's Office  
Michael Falzano, Dean's Office  
Stanley Glick, MD, PhD, Center for Neuropharmacology & Neuroscience  
Michael Gruenthal, MD, Department of Neurology  
Paul Higgins, PhD, Center for Cell Biology & Cancer Research  
Jeffrey Kennedy, MD, Translational Medicine  
Christopher King, MD, Department of Emergency Medicine  
Paula McKeown-Longo, PhD, Center for Cell Biology & Cancer Research  
Dennis Metzger, PhD, Center for Immunology and Microbial Disease  
Jeffrey Ross, MD, Department of Pathology  
Hal Singer, PhD, Center for Cardiovascular Disease  
Steven Stain, MD, Department of Surgery  
Vince Verdile, MD, Dean's Office  
Peter Vincent, PhD, Center for Cardiovascular Disease

**Phase 2 – Business Review Process.** *Business Plan RFP's will be reviewed by the Business Selection Committee. This Committee will be comprised of business leaders both within the Capital Region and throughout the state of New York (see attached list of current membership). Based on its diverse business background, the Business Selection Committee will provide an appropriate business opportunity score as a recommendation to the Dean of Albany Medical College.*

*Based on recommended scoring received from both the Scientific Advisory Board and the Business Selection Committee for each Business Plan RFP, the Dean of Albany Medical College will then decide the appropriate course of action to pursue as it relates to each Business Plan RFP. The Dean of the Albany Medical College will propose the course of action related to each Business Plan RFP to the Board of Directors of Albany Medical Center for approval to proceed.*

**Proposed Business Selection Committee Membership:**

John DePaola, Albany Medical College  
Joseph DeVivo, Angio Dynamics  
Jon Dordick, Rensselaer Polytechnic Institute

Dick Frederick, Autotask / RPI Incubator Program  
Amy Johnson, Capstone  
Kevin Leyden, Albany Medical College  
John Nigro, The Nigro Companies  
Robert Samson, International Business Machines (Retired)  
Omar Usmani, Aeon Nexus  
Vincent Verdile, MD, Albany Medical College

\*Note, membership of the proposed Business Selection Committee may change related to business opportunities.

Location	UniqueID	Owner	PropertyType	StreetAddress	City	ZipCode	Building	SpaceType	Sqft	Description	onCampus	Latitude	Longitude	Note
City of Albany	AMC 001	Albany Medical Center	1	43 New Scotland Ave	Albany	12208	S Building	A	7859	First Floor	Yes	42.6540000	73.7770000	
City of Albany	AMC 002	Albany Medical Center	1	43 New Scotland Ave	Albany	12208	ME Building	C	1050	First Floor	Yes	42.6540000	73.7770000	ME106 /108
City of Albany	AMC 003	Albany Medical Center	1	43 New Scotland Ave	Albany	12208	ME Building	C	950	First Floor	Yes	42.6540000	73.7770000	ME110/112

\* 1= on campus  
 2= 1 mile off campus  
 3= State Asset

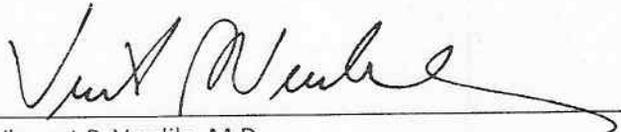
\*\* A=entire building  
 B=floor within building  
 C=Room within building  
 D=land on campus  
 E= land off campus  
 F=entire building off campus  
 G=partial building off campus  
 H=state asset

## STARTUP-NY ATTESTATION AND CERTIFICATION

I, Vincent P. Verdile, M.D., as Dean and chief executive officer of Start-Up NY sponsorship applicant Albany Medical College ("College"), hereby attest and certify as follows:

1. No space and/or land which is proposed for designation as a Tax-Free NY Area in the College's Tax Free NY Area Plan and application, to which this document is attached, has been financed with any tax-exempt bonds; nor will any such space and/or land jeopardize or conflict with any existing tax-exempt bonds used to finance any property of the College.
2. The College has not relocated or eliminated any academic program, administrative program, office, housing facility, dining facility, athletic facility, or any other facility, space or program that actively serves students, faculty or staff in order to create vacant land or space to be designated as a Tax-Free NY Area.

The above attestation and certification, as well as the information contained in the Tax Free NY Area Plan and application to which this document is attached is, to the maximum extent possible and to the best of my knowledge, accurate and complete.

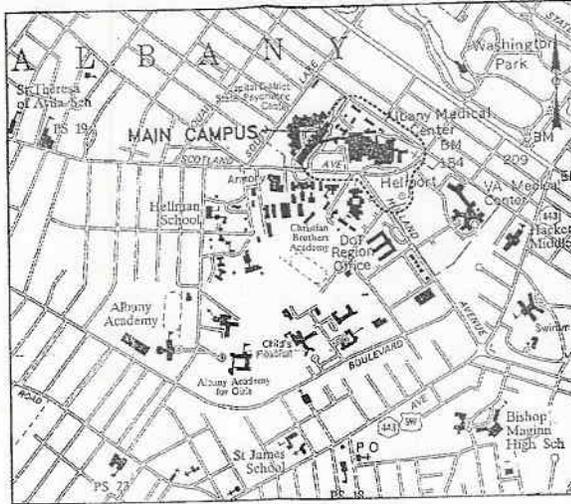


Vincent P. Verdile, M.D.

2/7/14

Date





PROJECT LOCATION MAP  
N.T.S.

**CLARK PATTERSON LEE**  
 LICENSED PROFESSIONAL ENGINEER  
 540 BROOKHOLM BLVD FLOOR 2000  
 ALBANY, NEW YORK 12207  
 TEL: (518) 274-9500  
 FAX: (518) 282-5224  
 www.clarkpattersonlee.com

NO.	DATE	BY	DESCRIPTION
1	12/27/10	JM	ISSUED PERMITTER WITH REVISIONS TO ORIGINAL PLAN
2	12/27/10	JM	ISSUED PERMIT

Albany Medical Center  
 Albany Campus and  
 South Campus Complex  
 COUNTY OF ALBANY  
 CITY OF ALBANY



ALTA / ACSM SURVEY  
 FOR  
 ALBANY MEDICAL CENTER HOSPITAL

DATE	04/30/10	DRAWN	JM	CHECKED	GFC
SCALE	NONE				
SHEET TITLE	TITLE SHEET				

PROJECT NUMBER  
**11286.05**

DRAWING NUMBER

# Albany Medical Center Albany Main Campus

IN THE COUNTY OF ALBANY  
 STATE OF NEW YORK

## ALTA / ACSM SURVEY FOR ALBANY MEDICAL CENTER HOSPITAL

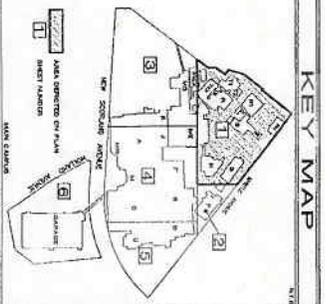
I hereby certify to the U.S. Department of Housing and Urban Development (HUD), Albany Medical Center Hospital, 524 E. Lodge St., Montrose, Bedford, Vermont American Title Insurance Company of New York and its successors and assigns, that:

I made in on the ground survey per recordation of the land shown located at 99, 119, 131, 139, 150 and Ave. 411 Maple Ave., 23 Mackin Blvd. and Rte 25 Hackley Blvd., on April 30, 2010, and that it and this (this) map was found true in accordance with the ALTA/ACSM Survey Inspection and Certificate, Form HUD-2487, and meet the requirements for a Land Title Survey, as defined in the "Minimum Standard Detail Requirements for ALTA/ACSM Land Title Surveys," dated 2002.

To the best of my knowledge, belief and information, except as shown herein, there are no encroachments either way on the property shown, all lines and lines of equal precedence are the same, and the premises are located in a FEMA designated Zone C (Areas of Minimal Flooding) and are free of any 100-year flood return frequency flood hazard, and such flood free condition is shown on the Federal Flood Insurance rate map, Community Plan No. 70001 0067 C (Applicable to Main Campus and South Campus Complex).

**GARY F. CHIDWARD P.E., N.Y.S.**  
 Registered Land Surveyor  
 License No. 4926

I, CLARK PATTERSON LEE, LICENSED PROFESSIONAL ENGINEER, NO. 12345, STATE OF NEW YORK, DO HEREBY CERTIFY THAT THE SURVEY AND THIS MAP WERE MADE BY ME OR UNDER MY CLOSE PERSONAL SUPERVISION AND I AM A PERSONAL MEMBER OF THE PROFESSIONAL SOCIETY OF PROFESSIONAL ENGINEERS OF THE STATE OF NEW YORK.



**CONSTRUCTION**

1. THE GENERAL CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING UTILITIES AND STRUCTURES TO REMAIN.

2. THE GENERAL CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING UTILITIES AND STRUCTURES TO REMAIN.

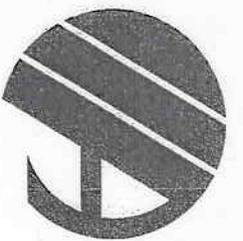
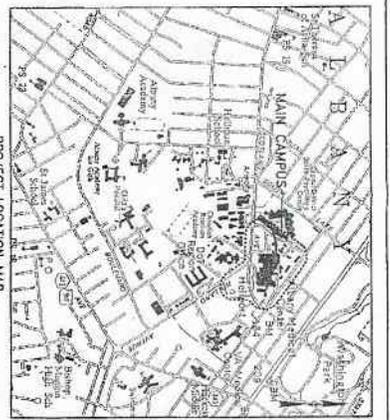
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5. THE GENERAL CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING UTILITIES AND STRUCTURES TO REMAIN.

**LEGEND**

Symbol	Description
---	Proposed Construction
---	Existing Construction
---	Proposed Utility
---	Existing Utility
---	Proposed Road
---	Existing Road
---	Proposed Sidewalk
---	Existing Sidewalk
---	Proposed Landscape
---	Existing Landscape



**Albany Medical Center**  
Albany Main Campus

CITY OF ALBANY  
STATE OF NEW YORK  
COUNTY OF ALBANY

**ALTA / ACSM SURVEY  
FOR  
ALBANY MEDICAL CENTER HOSPITAL**

James J. L. Thompson, No. 113  
Professional Engineer  
State of New York

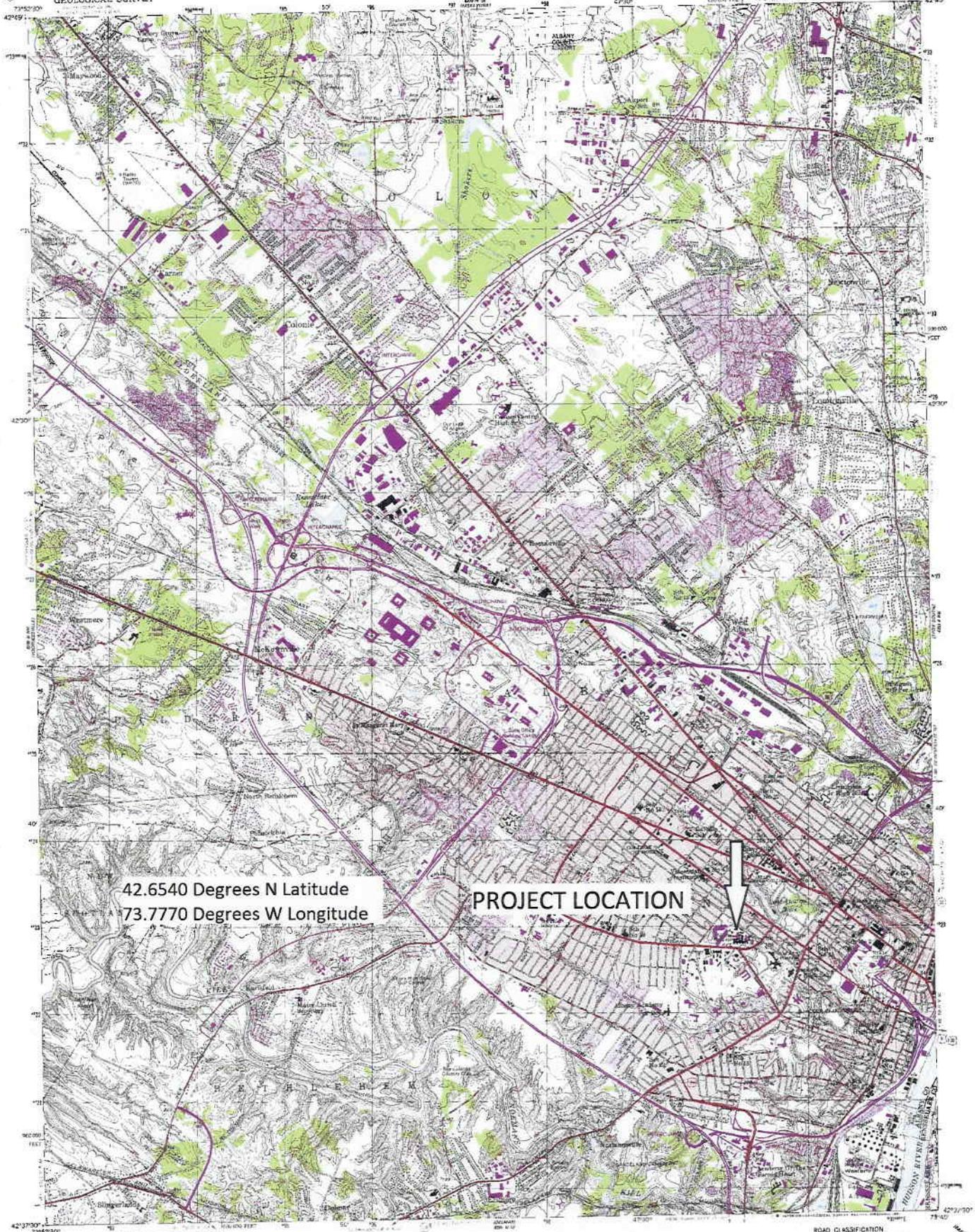
ALTA / ACSM SURVEY  
FOR  
ALBANY MEDICAL CENTER HOSPITAL

TITLE SHEET

ALTA / ACSM SURVEY  
FOR  
ALBANY MEDICAL CENTER HOSPITAL

Albany Medical Center  
Albany Campus and  
South Campus Complex

NO.	DATE	DESCRIPTION
1	10/27/10	Issue Sheet

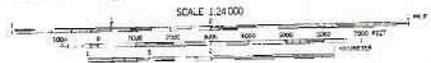


42.6540 Degrees N Latitude  
73.7770 Degrees W Longitude

PROJECT LOCATION



Mapped, edited, and published by the Geological Survey  
Control by UNCS and NOS/NOAA  
Topography by photogrammetric methods from aerial photographs taken 1952; field checked 1953  
Hydrography from NOS chart 284 (1947)  
Projections: elevation - 10,000-foot grid based on New York coordinate system, east zone; 1000-meter Universal Transverse Mercator grid SCS, zone 18, 1927 North American Datum. Its place on the projected North American Datum 1983 moves the projection lines 5 meters south and 30 meters west as shown by dashed center lines  
Red tint indicates areas in which only landmark buildings are shown  
Projections shown in purple obtained from aerial photographs taken 1978 and other source data. This information not field checked. Map dated 1980  
Isopleths from 1:250,000 edition of USGS 7.5'



CONTOUR INTERVAL 10 FEET  
NATIONAL GEODESIC METHOD, PARTIAL OF 1929  
BENCH MARKS AND MEASUREMENTS IN FEET -202.16 IN MEAN LOW WATER  
THE BOUNDARY BETWEEN THE TWO SYSTEMS IS UNKOWN  
SOMEWHERE NEAR THE APPROXIMATE LINE OF MEAN HIGH WATER  
THE MEAN RANGE OF TIDE IS 4.4 FEET  
THIS MAP COMPLETES WITH NATIONAL MAP AGENCY STANDARDS  
FOR SALE BY U.S. GEOLOGICAL SURVEY  
DENVER, COLORADO 80206, OR RESTON, VIRGINIA 20192  
A 1:25,000 BENCHMANNED TOPOGRAPHIC MAP AND SYMBOLS AS APPEAR ON THE SHEET

ROAD CLASSIFICATION  
Primary highways: Light duty rural, hard or improved surface  
Secondary highways: Unimproved road  
Interstate Route U.S. Route State Route

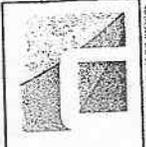
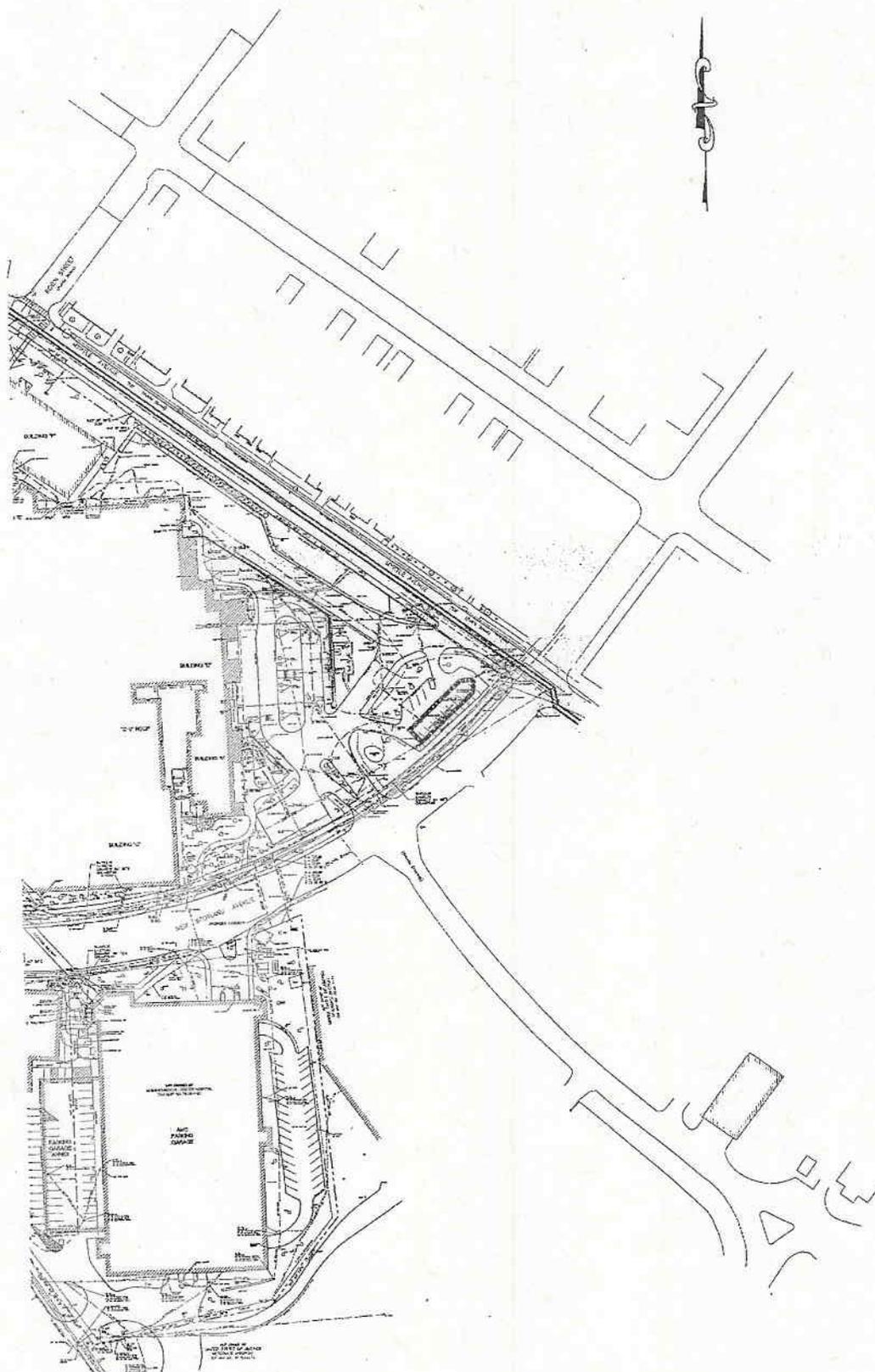
ALBANY, N.Y.  
NEW ALBANY QUADRANGLE  
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PHOTOREPRODUCED FROM  
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MAP REFERENCES

- 1.) MAP TITLED, "BOUNDARY AND TOPOGRAPHY SURVEY OF THE ALBANY MEDICAL CENTER NEW SCOTLAND AVENUE, CITY OF ALBANY, COUNTY OF ALBANY, STATE OF NEW YORK, DATED APRIL 23, 1960, SHEETS 1 THROUGH 8, BY SMITH AND MAHOEY, P.C. 79 NORTH FEARL STREET, ALBANY, NEW YORK.
- 2.) MAP TITLED, "ALBANY MEDICAL CENTER, PARKING GARAGE, ALBANY, NEW YORK, UTILITY AND GRADING PLAN" DATED APRIL, 1994, REVISED 6/17/94, SHEET 5 OF 8, GRADING 80'-0" BY CLOUGH HARBORON & ASSOCIATES, 71 WINNERS CIRCLE, ALBANY, NEW YORK, 12202.



CLARK PATTERSON LEE  
 ARCHITECTS  
 240 BROADWAY 20TH FLOOR SUITE 200  
 ALBANY, NEW YORK 12207  
 TEL (518) 235-2400  
 FAX (518) 235-2424  
 www.cplarchitects.com

NO.	DATE	BY	CHKD	DESCRIPTION
1	12/15/10	JAM	GFC	ASBIL COGN LANE (PANEL & SHEET REVISIONS)
2	10/12/10	JAM	GFC	SHEET NUMBER

Albany Medical Center  
 Albany Campus and  
 South Campus Complex  
 COUNTY OF ALBANY  
 STATE OF NEW YORK




ALTA / ACSM SURVEY  
 FOR  
 ALBANY MEDICAL CENTER HOSPITAL

DATE	DRAWN	CHECKED
04/30/10	JAM	GFC
SCALE	1" = 60'	
SHEET TITLE		

OVERALL PLAN  
 MAIN CAMPUS

PROJECT NUMBER  
 11266.05

**C**  
 001

DRAWING PLASTER

I, CLARK PATTERSON LEE, ARCHITECT, DO HEREBY CERTIFY THAT I AM THE ARCHITECT OF RECORD FOR THE PROJECT AND THE SCALE OF THIS DRAWING AND THE DATE OF THIS DRAWING ARE AS SHOWN ON THIS DRAWING. I HAVE REVIEWED THIS DRAWING AND I AM NOT PROVIDING ANY GUARANTEE OR WARRANTY OF ANY KIND FOR THE ACCURACY OF THE INFORMATION CONTAINED HEREIN. I AM NOT PROVIDING ANY GUARANTEE OR WARRANTY OF ANY KIND FOR THE ACCURACY OF THE INFORMATION CONTAINED HEREIN.

11. THE DESIGN, CONSTRUCTION AND MAINTENANCE OF THE ALBANY MEDICAL CENTER CAMPUS SURVEY SHALL BE THE RESPONSIBILITY OF THE ARCHITECT. THE ARCHITECT SHALL BE RESPONSIBLE FOR THE ACCURACY OF THE SURVEY DATA AND FOR THE INTEGRITY OF THE SURVEY DOCUMENTS. THE ARCHITECT SHALL BE RESPONSIBLE FOR THE PROTECTION OF THE SURVEY INSTRUMENTS AND FOR THE SAFETY OF THE SURVEY PERSONNEL. THE ARCHITECT SHALL BE RESPONSIBLE FOR THE OBTAINING OF ALL NECESSARY PERMITS AND FOR THE COORDINATION OF THE SURVEY WITH ALL OTHER PROJECTS ON THE CAMPUS. THE ARCHITECT SHALL BE RESPONSIBLE FOR THE PROVISION OF ALL NECESSARY INFORMATION TO THE SURVEYOR AND FOR THE REVIEW OF THE SURVEY RESULTS. THE ARCHITECT SHALL BE RESPONSIBLE FOR THE PROVISION OF ALL NECESSARY INFORMATION TO THE SURVEYOR AND FOR THE REVIEW OF THE SURVEY RESULTS.



	<p><b>ALTA / ACSM SURVEY FOR ALBANY MEDICAL CENTER HOSPITAL</b></p>		<p><b>Albany Medical Center</b> Albany Campus and South Campus Complex</p> <p><small>CITY OF ALBANY    COUNTY OF ALBANY STATE OF NEW YORK</small></p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>NO.</th> <th>DATE</th> <th>BY</th> <th>DESCRIPTION</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>10/27/10</td> <td>JM</td> <td>ALTA / ACSM SURVEY FOR ALBANY MEDICAL CENTER HOSPITAL</td> </tr> </tbody> </table>	NO.	DATE	BY	DESCRIPTION	1	10/27/10	JM	ALTA / ACSM SURVEY FOR ALBANY MEDICAL CENTER HOSPITAL	
NO.	DATE	BY	DESCRIPTION										
1	10/27/10	JM	ALTA / ACSM SURVEY FOR ALBANY MEDICAL CENTER HOSPITAL										
<p><b>OVERALL PLAN MAIN CAMPUS</b></p>													



DEPARTMENT  
OF

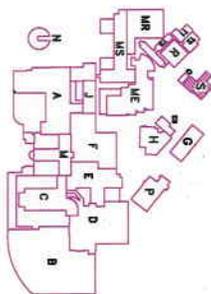
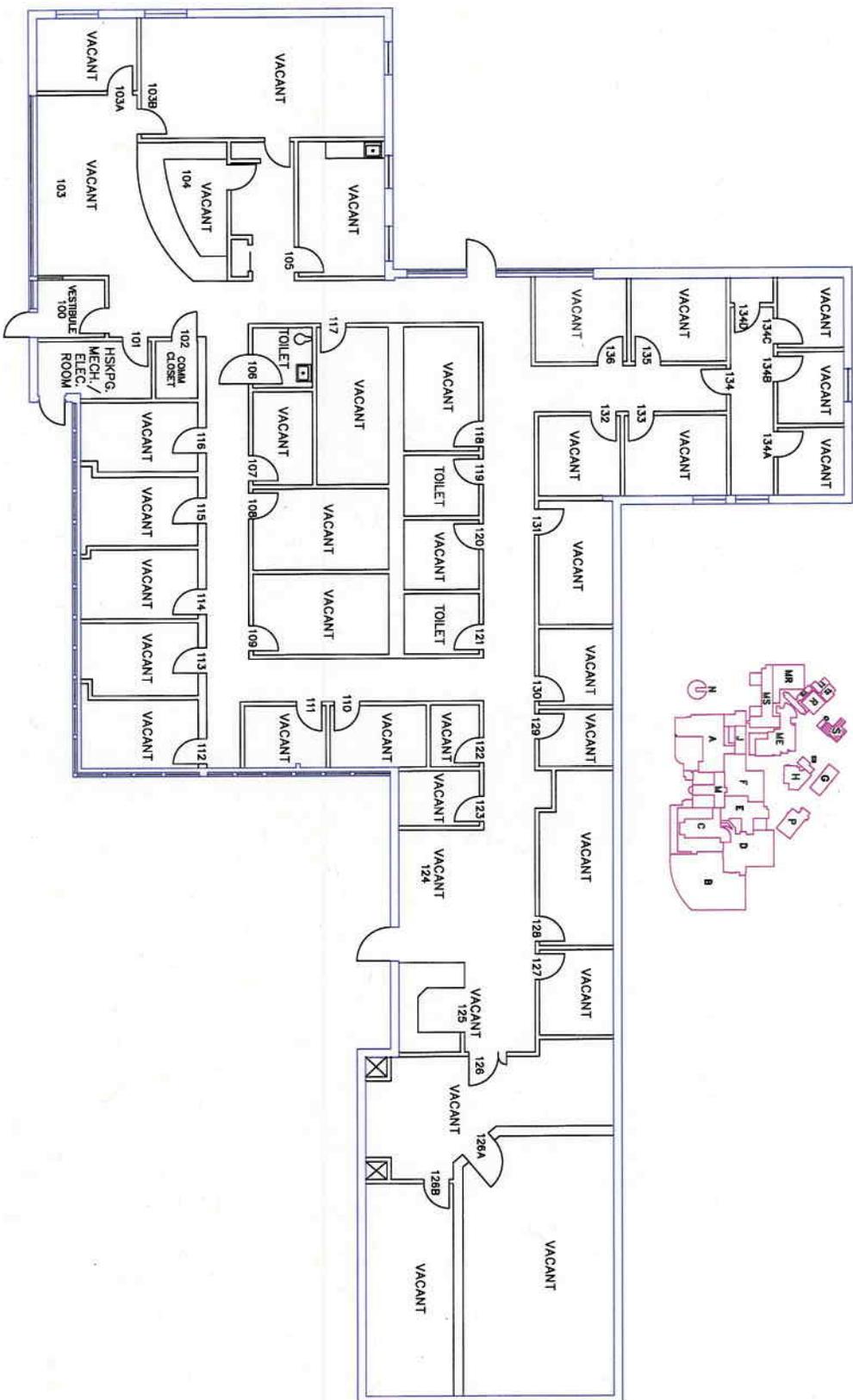


BUILDING:	S	FLOOR:	1
DATE:	Feb 6, 2014		
SCALE:	1" = 12' +/-		

## S BUILDING FIRST FLOOR OCCUPANCY PLAN

DRAWN BY: D. Michael

ALBANY MEDICAL CENTER  
43 NEW SCOTLAND AVE  
ALBANY, NY 12208



DEPARTMENT  
OF

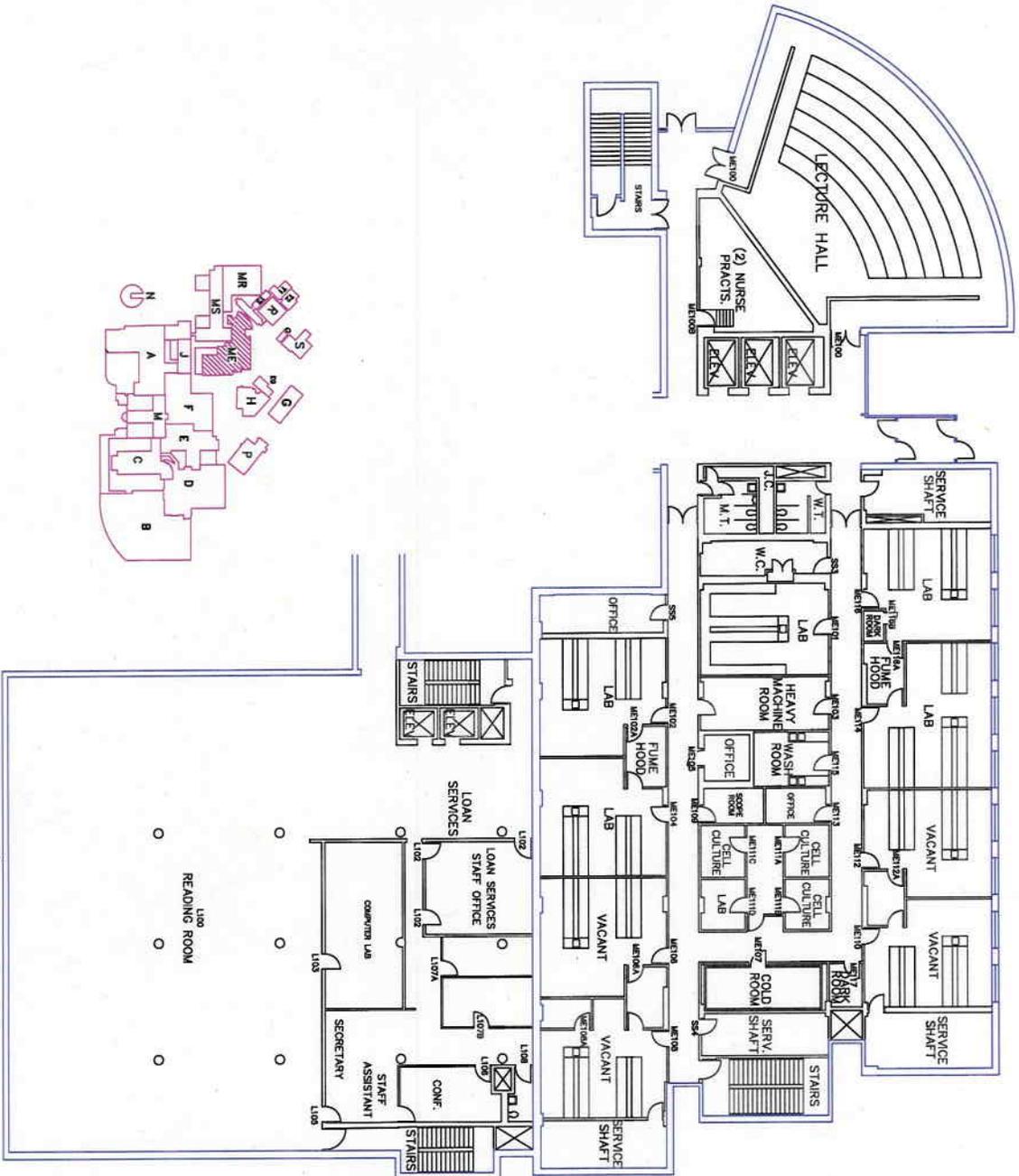


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SCALE: 1" = 21' 4"

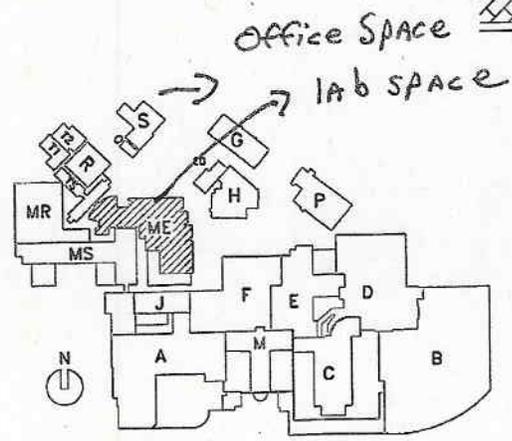
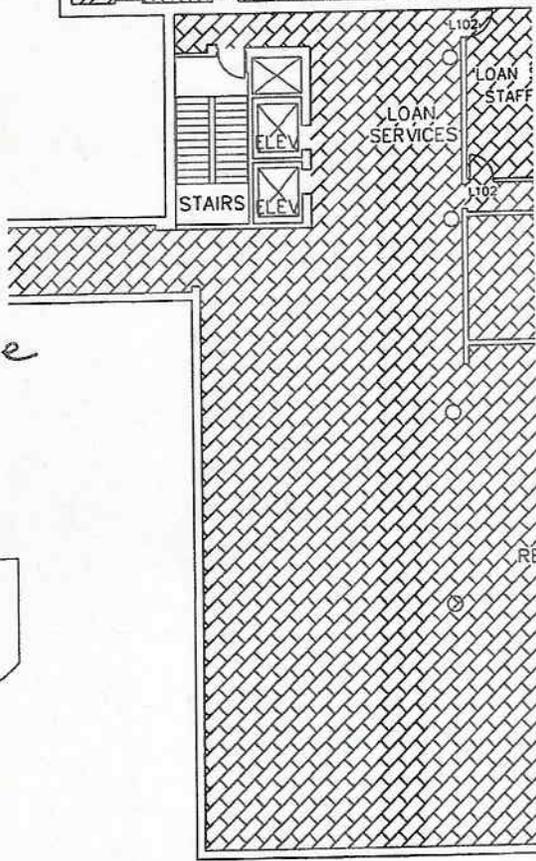
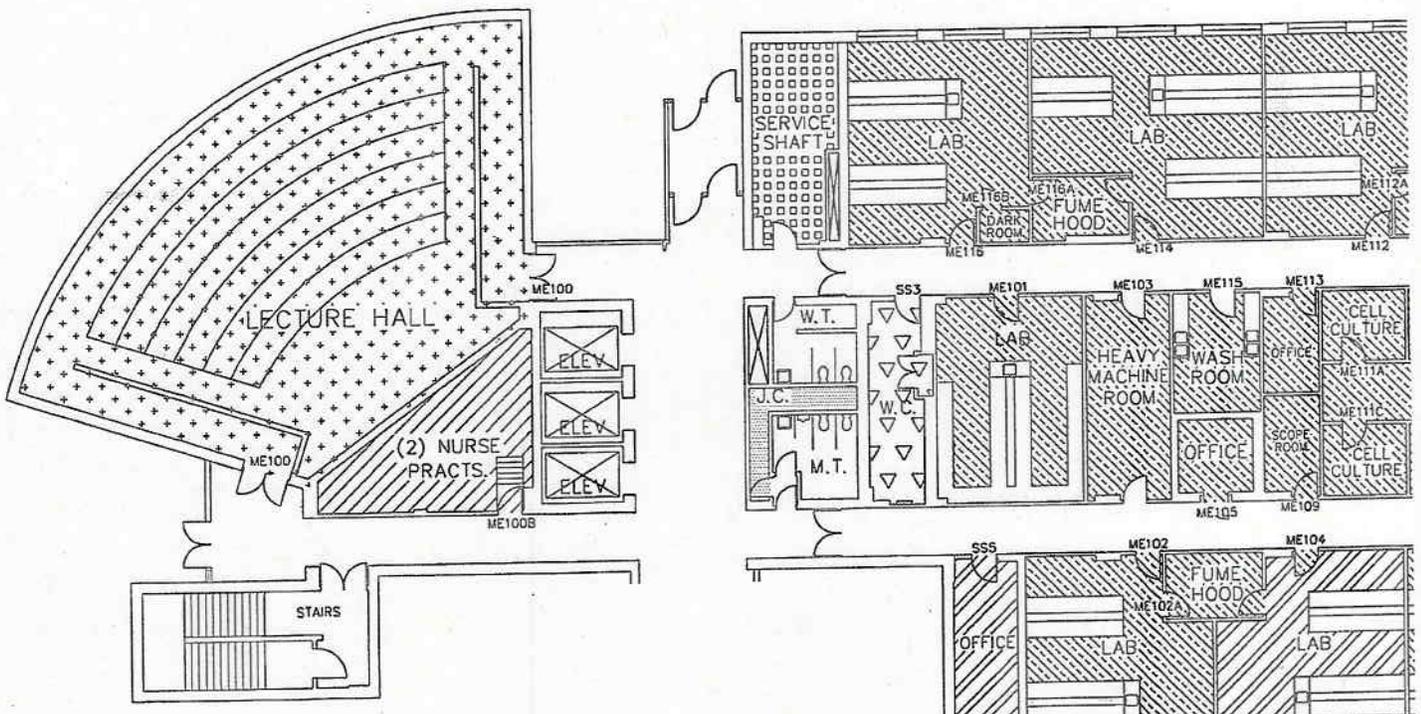
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DRAWN BY: D. Michael

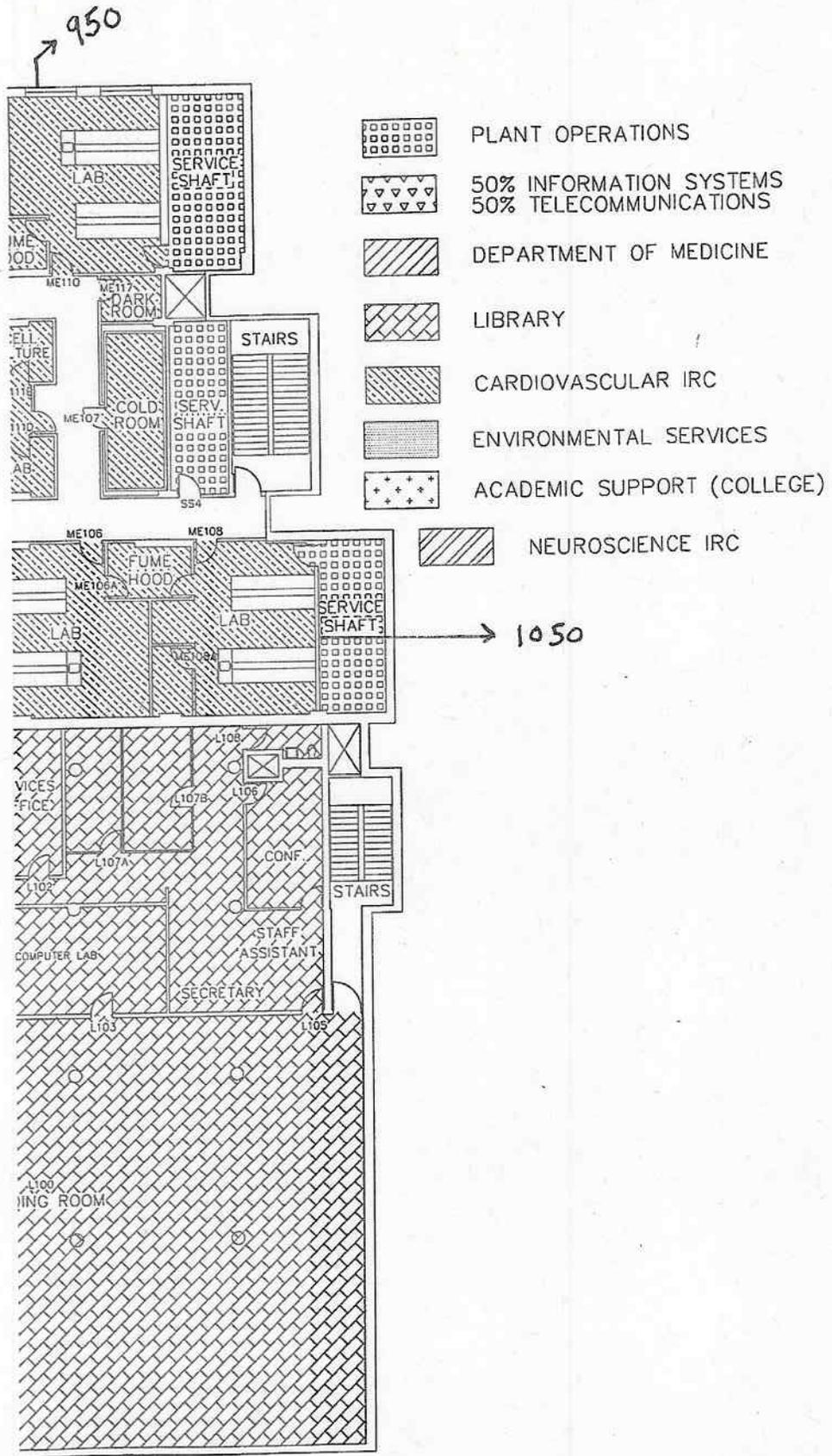
ALBANY MEDICAL CENTER  
43 NEW SCOTLAND AVE  
ALBANY, NY 12208



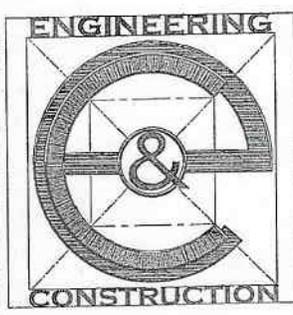
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ACE



DEPARTMENT OF

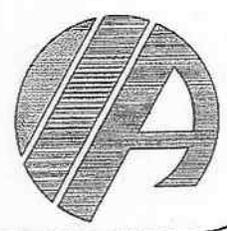


BUILDING:	FLOOR:
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DATE:	SCALE:
June 30, 2013	1" = 21' +/-

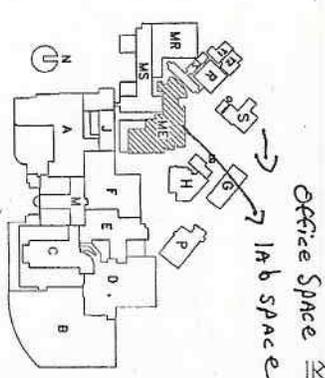
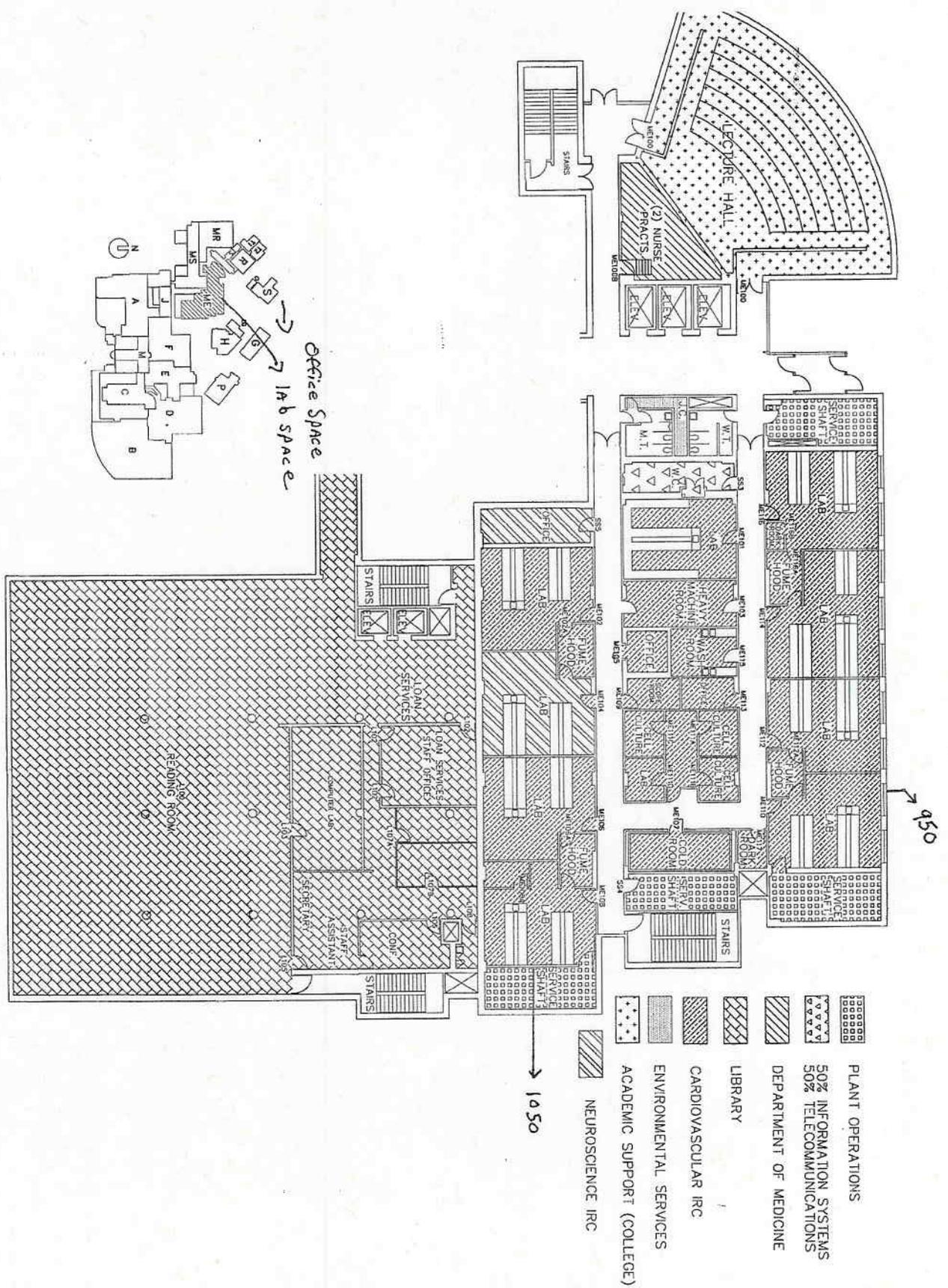
ME BUILDING FIRST FLOOR  
OCCUPANCY PLAN

DRAWN BY: D. Michael

ALBANY MEDICAL CENTER  
43 NEW SCOTLAND AVE  
ALBANY, NY 12208



LAB Space



- PLANT OPERATIONS
- 50% INFORMATION SYSTEMS
- 50% TELECOMMUNICATIONS
- DEPARTMENT OF MEDICINE
- LIBRARY
- CARDIOVASCULAR IRC
- ENVIRONMENTAL SERVICES
- ACADEMIC SUPPORT (COLLEGE)
- NEUROSCIENCE IRC

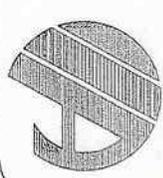
DEPARTMENT OF ENGINEERING CONSTRUCTION



BUILDING: ME  
 FLOOR: 1  
 DATE: June 30, 2013  
 SCALE: 1" = 21'

### ME BUILDING FIRST FLOOR OCCUPANCY PLAN

DRAWN BY: D. Michael  
 ALBANY MEDICAL CENT  
 43 NEW SCOTLAND AVE  
 ALBANY, NY 12208



## ALBANY MEDICAL CENTER Conflict of Interest Policy

### PURPOSE

Albany Medical Center and all entities under its direction and control exist to serve the major health care needs of surrounding communities by providing medical education, biomedical research, patient care and charitable services.

Many activities undertaken in service of the Center's mission require that the public rely on the competence, professionalism and diligence of the Center and its people to safeguard and promote the well-being of the community. To deserve the community trust, all Individual's acting on behalf of the Center must avoid situations or relationships that may or may reasonably be perceived to hinder or bias our efforts due to the introduction of inappropriate or undisclosed personal benefit.

### POLICY

Conflicts of Interest are any action or relationship involving some value (beyond compensation from the Center) accruing to an Individual, whether direct or indirect, which could reasonably have the result or give the impression that the Individual's conduct may be affected by the potential for personal benefit. Conflicts of Interest include relationships and conduct that would lead a reasonable independent observer to conclude a Conflict of Interest may exist.

At Albany Medical Center we recognize that events or relationships that may create the potential for a Conflict of Interest are an inevitable aspect of conducting our activities. This policy will guide each Individual and the Center in avoiding, eliminating, or mitigating to an acceptable level, potential Conflicts of Interest. Every Individual is expected to educate themselves regarding potential Conflicts of Interest that may affect the performance of their duties on behalf of the Center.

To aid in managing potential Conflicts of Interest the Center has adopted a three tiered structure depending on the value and nature of the event. The three tiers include *Nominal Events*, *Incidental Events*, and *Reportable Events and Relationships*.

However, in no instance should an Individual accept a gift or inducement in the form of cash or cash equivalents.

**Nominal Events** – are those events where the value received by an Individual was not solicited either expressly or implicitly, and the amount received is reasonably estimated to be less than or equal to \$150.00

- These events should be managed by the Individual taking care to be aware of any patterns that may create the potential for a perception that a Conflict of Interest exists. The Individual should maintain a record of these events, but no additional reporting is expected unless required as part of an investigation.

**Incidental Events** – are those events where the value is received incident to required activities in the performance of an Individual's duties to the Center. Any such event and value should be minor relative to the business purpose involved and cumulatively less than \$1,000.00 from a person or entity in a calendar year.

- These events should be managed at the department level by the Individual and their manager. Normally preapproval by the manager is required. The Individual is responsible for demonstrating the event furthers Center goals to a sufficient degree to warrant participation. Written documentation should be maintained by the Individual and their manager.

**Reportable Events and Relationships** – are all other events or relationships that may create real or potential Conflicts of Interest for an Individual or for a member of an Individual's Immediate Family.

- All Individuals must fully comply with the system administered by Corporate Compliance and Audit to provide the Committee on Audit and Compliance of the Board with the assurance that all real and potential Conflicts of Interest have been identified, eliminated or mitigated as appropriate to safeguard the Center, its related entities and their missions.
  - **Disclosure Requirements:** Selected Individuals, due to their roles and responsibilities, will be required to complete an Annual Disclosure for themselves and on behalf of all members of their Immediate Family. In addition, all Individual's must report all potential Conflicts of Interest for themselves or any member of their Immediate Family if not previously reported or if the related facts and circumstances change.
  - **Determination of Conflicts:** Completed Conflict of Interest Questionnaires will be forwarded to Corporate Compliance and Audit. In those instances where a Conflict of Interest is determined to exist, notice will be provided the Individual notifying him/her of that determination.
  - **Resolving Conflicts:** The Chief Compliance Officer (CCO) or his designee will work with Individuals in eliminating or reducing the impact of a Conflict to an acceptable level. A Conflict of Interest Advisory Committee will assist the CCO in developing appropriate responses to Conflict of Interests. In those instances where an established institutional response does not exist, the CCO will be aided by the Center Compliance Committee in resolving individual situations. Final determination of the information required and the appropriate resolution of Conflicts of Interest is vested in the Chief Compliance Officer of the Center.

- Reporting/Recordkeeping: Corporate Compliance and Audit will maintain a system necessary to report at least annually to the Center Compliance Committee, the Chief Executive Officer of Albany Medical Center, and the Board Committee on Audit and Compliance on the identification and resolution of potential Conflicts of Interest. The Individual's manager is responsible for monitoring compliance with the Resolution of Conflict memoranda and reporting any noncompliance to the CCO.

**Special Situations and Duties** – in most instances reflect heightened sensitivity to the potential harm caused by certain conflicts of interest common to a healthcare or educational environment. Additional requirements relating to these and other special situations are contained in the Appendices to this Policy.

- Gifts are defined as anything of value that is given, directly or indirectly, to an Individual or group of Individuals for which the Individual or group does not give consideration of equal or greater value in return. See Appendix 4-a.
  - Gifts should never be accepted if in the form of cash or cash equivalents. In all other instances, gifts should not exceed a *Nominal Event*.
  - Gifts should never be accepted from a government employee agent representative or official, a vendor or vendor representative, or a single student or their representative.
- Individuals involved in the design, conduct, oversight, or reporting of research are required to comply with additional requirements intended to ensure that all Financial Interests are properly disclosed, managed, reduced or eliminated, and reported consistent with federal requirements at 42 CFR part 50 and 45 CFR Part 94. See Appendix 4-f for more specific direction.
- Individuals involved in third-party sponsored educational events, in procurement or development of Center policy directing prescribed use of products or services, or in the receipt or distribution of pharmaceutical samples should comply with the additional requirements described in Appendix 4-b, 4-c and 4-d respectively.
- Individuals acting in the capacity of Board members, corporate officers, or an Interested Party as defined by the Internal Revenue Service governing Excess Benefit Transactions are also subject to additional requirements described in Appendix 4-g.
- In the event a Conflict of Interest relates to the Chief Compliance Officer, the Chief Executive Officer of Albany Medical Center will replace him in administering this policy and the Chief Compliance Officer's involvement will be restricted to only those activities involving the CCO as the Individual.

#### **Education**

Corporate Compliance and Audit will develop education to increase general awareness and understanding of regulatory expectations of institutions and individuals in eliminating the detrimental effects of conflicts on interests. Corporate Compliance and Audit will assist entities and departments in the development and delivery of education specific to the unique circumstances of that unit.

**Albany Medical Center Foundation, Inc.**

This Policy is not intended and shall not be construed to limit or constrain the Albany Medical Center Foundation, Inc. from soliciting and accepting those gifts or charitable donations which it is legally authorized to solicit and accept. Individuals may assist the Foundation in the identification and solicitation of gifts or grants to the extent the terms of the gift or grant are not so narrowly defined as to convey unfair advantage to the Individual in benefiting from the gift. The management and disposition of gifts to the Foundation are at the sole discretion of Center management in compliance with relevant laws and policies.

**Sanctions**

Employees of any Albany Medical Center Entity who violate any aspects of this Policy will be subject to the Albany Medical Center Human Resources Policy #5.007 – *Non-Faculty Corrective Action Procedure*, or to disciplinary procedures under the Albany Medical College Operational Policy COL-DO-001 (Faculty Disciplinary Policy) as appropriate. Non-employee members of the Medical Staff are subject to corrective action consistent with the provisions of the Medical Staff By-Laws. All others will be subject to appropriate sanctions, as determined by the Chief Compliance Officer taking into account the facts and circumstances surrounding the violation, including possible termination of their relationship with the Center.

**Effect on other policies**

This Policy does not preclude more restrictive policies which may be adopted by the Center or any Albany Medical Center Entity including as required by law or regulation, or in the interest of effective patient care or other components of the Center's mission.

Approved by the Board of Directors of Albany Medical Center: July 1, 2009  
*Revisions to Appendix 1 and Appendix 4-f approved by Committee on  
Audit and Compliance August 15, 2012*

Policy Effective Date: January 1, 2010

## APPENDICES

<u>Appendix</u>	<u>Description</u>
1.	Definitions
2.	Illustrative Examples of Selected Concepts
3.	By-law Procedures Affecting Board Members and Officers
4.	Special Events or Relationships
	4 - a. Gifts
	4 - b. Participation in Sponsored Educational Events
	4 - c. Procurement and Prescribed Use Activities
	4 - d. Pharmaceutical Samples
	4 - e. Conflict of Commitment
	4 - f. Research
	4 - g. Excess Benefit Transactions

**DEFINITIONS**

**Albany Medical Center Entities (the "Center")** – means collectively, Albany Medical Center and the following entities over which Albany Medical Center has direction and control: Albany Medical Center Hospital, Albany Medical Center - South Clinical Campus, Albany Medical College, Albany Medical Center Foundation, Inc., Albany Medical Center Auxiliary, Albany Medical Center Kidskeller, Albany Medical College Funding Corporation, Albany Medical College Alumni Association, The Center for Donation and Transplant, and Madison Avenue Services Corporation. An Albany Medical Center Entity shall mean an entity included within the Center.

**Board** – means the Board of Directors of Albany Medical Center.

**Board Members** – means members of the Board, non-director members of Board committees, and all members of the governing boards of the Center.

**Cash or cash equivalent** – includes currency, coins, money orders, checks, travelers' checks, credits, gift cards, or value in an equivalent form that would be readily accepted as an accepted means of consideration in the conduct of commerce.

**Chief Compliance Officer** – means the Chief Compliance Officer of Albany Medical Center.

**Conflict of Interest ("COI", "Conflict")** – means any potential or existing relationship or activity involving some value accruing to an Individual (including but not limited to a Financial Interest), whether direct or indirect, which could reasonably have the result, or could reasonably give the impression, that the Individual may be unable to conduct themselves in accordance with the following Center expectations:

- All Individuals shall commit the time and effort necessary to perform their institutional duties and responsibilities with excellence;
- All Individuals shall conduct their duties and responsibilities in the best interests of the Center, its patients, its students, its research subjects, its customers, and for the advancement of knowledge without favor or prejudice;
- Individuals shall use his/her institutional position or confidential information gained from such position, solely in the performance of Center duties and only as authorized in accordance with the Center Authority to Act document;
- All Individuals shall ensure that any interest, activity or relationship, does not impair or appear to impair their judgment in the discharge of their institutional duties;
- All Individuals shall fully disclose and manage all affiliations, relationships and activities which may give rise to Conflicts of Interest in accordance with the requirements of this Policy.

**Faculty Member** – means a person who holds an academic appointment to the general faculty, including the voluntary faculty, of Albany Medical College

**Financial Interest** – means an interest that does or likely could result in a monetary benefit, in cash or in kind, directly or indirectly, to the Individual now or in the future. Examples of a Financial Interest include, but are not limited to:

- Ownership of stock, stock options, or other financial instruments providing the possibility of a financial return in relation to a direct ownership interest;
- Salary or other payment for services from other than an Albany Medical Center Entity;
- Income from service on advisory committees or review panels for public, non-profit, or for-profit entities;
- Funds obtained through lending or mortgage and/or arrangements providing the forgiveness or forbearance from debt (other than arrangements with commercial banking or lending institutions at terms available to the general public);
- Gifts, royalties, patents, pending patents, copyrights, consulting fees, honoraria, other payments or promises of payment whether immediately determinable or dependent on a future occurrence;
- Promises of ownership or other relationships offering the potential for monetary returns.

**Individual** – means all Board Members, employees, credentialed physicians, licensed independent practitioners, Faculty Members, as well as those agents, independent contractors and volunteers with recurring involvement in and influence over the goals and activities of the Center.

**Individual's Immediate Family (Immediate Family)** – means spouse, domestic partner, children, parents (including in-laws), siblings, any person living in the Individual's household or who is dependent on the Individual for on-going financial support, and any person whom the Individual is dependent on for on-going financial support.

**Investigator** – means the project director or principal investigator and any other person, regardless of title or position, who is responsible for all or part of the design, conduct, or reporting of research. Investigator includes the investigator's spouse and dependent children, significant contributors such as contractors, subcontractors, sub-grantees, collaborators or consultants and any other person regardless of title and/or position, who is named on the grant application and has a high degree of autonomy with responsibility for all or part of the design, conduct or reporting of research.

**Officer** – means the president or similarly entrusted chief executive officer, and any corporate or administrative officers duly elected or approved by action of the governing body or similarly designated by the Chief Executive Officer of an Albany Medical Center Entity.

**Pharmaceutical Sample** - is defined as any free prescription medication product supplied by a pharmaceutical firm or any of its agents directly to any non-pharmacy personnel for general use or use in specifically identified patients. The product does not need to be labeled as a "professional sample" to be considered a Pharmaceutical Sample. Medications provided at no cost to Center prescribers for use as part of an approved clinical trial, and controlled through the Albany Medical Center Hospital pharmacy are not considered Pharmaceutical Samples.

**Policy** – means this Conflict of Interest Policy and Procedure including all attached appendices.

**Principal Investigator/Project Director** – is the Individual ultimately responsible for the overall research project and for ensuring that disclosure forms are submitted for all Investigators in accordance with the Policy.

**Research** – means a systematic investigation, study or experiment designed to develop or contribute to generalizable knowledge relating broadly to public health, including behavioral and social-sciences research. The term encompasses basic and applied research and product development. As used here, research includes any such activity for which research funding is available from any funding source (both internal and external) including but not limited to the Public Health Service (PHS), including NIH and any other PHS Components, the National Science Foundation (NSF), industry sponsored clinical studies or research funding from private Foundations and institutional sources within the Center.

**Resolution of Conflicts of Interest ("Resolved")** - means a Conflict of Interest is eliminated, reduced or otherwise managed in accordance with the terms and intent of this Policy.

**Vendor** –means any individual or entity that has entered into, or has signified the intention to enter into, a contractual or other commercial relationship with an Albany Medical Center Entity.

Managing Potential Conflicts of Interest

Managing potential Conflicts of Interest depends on the value received and the circumstances surrounding each event or relationship. The Conflict of Interest Policy provides an escalating means of accommodating the unique facts of each case. Examples of potential Conflicts of Interest include:

Nominal Amounts  
(Individual Level)

- A practitioner receives a box of candy and flowers from a grateful patient at discharge

Incidental Amounts  
(Department Level)

- A vendor offers to cover the cost of accommodations for a team of individuals from the Center to visit other sites using vendor products under consideration.
- A member of an evaluation team receives a reusable portfolio during a vendor presentation one month and travel expenses during a site visit the following month.

Reportable Events and Relationships  
(Institution Level)

- In return for expert advice a practitioner receives the rights to share in future returns on an innovative medical device.
- In appreciation for lending support to a study a practitioner is promised support in gaining appointment to a prestigious board.
- As thanks for a department's patience in working through some vendor implementation problems, the supervisor is offered accommodations for a professional development weekend sponsored by the vendor.

The examples above are summarized. The Policy should be consulted to understand the specific requirements of each approach to managing potential Conflicts of Interest.

**BY-LAW PROCEDURES AFFECTING BOARD MEMBERS AND OFFICERS**

Section 5.2 - Conflicts of Interest:

(a) No director or person serving as a member of any committee of the corporation, officer, or employee of the Corporation, nor any such person's spouse, child, parent, sibling or spouse's parent, shall have an interest in any purchase, sale or other financial transaction with the Corporation, any affiliate of the Corporation, or any corporation or enterprise having such an interest, except upon the prior disclosure to the Board, and then only if the Board, directly or through the Committee on Audit and Compliance, determines, after examination of all material facts and through a majority vote of disinterested directors (1) that there is no substantial or material conflict, or (2) that the arrangement is fair, reasonable and consistent with the Corporation's best interests. Unless a majority of the disinterested directors present has earlier determined that the conflict is not material, a director or committee member with such an interest shall not be present at meetings of the Board during any discussion and vote upon such a transaction. The Board may subsequently excuse failure to bring the transaction before the Board and approve the transaction, if the Board is satisfied that the nondisclosure was inadvertent and in good faith, and if the Board also makes either of the determinations described in (1) or (2) above. As long as the provisions of this Article are followed, the interested director, committee member or officer shall not be liable to the Corporation or to any creditor of the Corporation for any loss derived from the existence of such a conflict and incurred by reason of the contract, transaction, or other business, nor shall the interested director, committee member or officer be accountable on account of the conflict to the Corporation for any gains or profits realized by reason of the contract, transaction, or other business.

(b) Upon the recommendation of the President or the Committee on Audit and Compliance, the Board shall periodically review and amend a written policy to require the disclosure and to evaluate potential conflicts of interest. Such policy shall (1) be consistent with paragraph (a) above; (2) require the disclosure by interested persons, including without limitation persons who would be considered "disqualified" for purposes of the Internal Revenue Code, of potential conflicts and all related material facts; (3) establish procedures for determining whether the interests of the disclosing person may result in a conflict, including prohibiting an interested director from participating in the discussion and vote on a potentially conflicting matter; and (4) include appropriate procedures for addressing a conflict of interest after having determined that it exists. The conflict of interest policy shall be administered in connection with the Corporate Compliance Plan.

### SPECIAL EVENTS OR RELATIONSHIPS

Special Events or Relationships define additional policies and procedures that apply to specific situations or individuals in addition to the general requirements of the Conflict of Interest Policy.

In most instances these additional policies reflect heightened sensitivity to the potential harm caused by certain conflicts of interest common to a healthcare or educational environment. These policies will affect individuals or segments of the Center depending on the persons or activities covered by each policy. The policies are intended to apply in all instances covered by each policy meaning that an Individual may be covered by one or several of the specific policies contained here.

In addition to the specific policies appended as part of Appendix 4: educators, physicians, licensed independent practitioners, researchers, and other Individuals serving in positions of trust within educational, research, and clinical environments should have a heightened awareness of the role that trust of their students, research subjects, or patients has in the performance of their duties. Consequently those same Individuals should remain vigilant to the potential harm done from real or perceived conflicts of interest.

While this Conflict of Interest Policy and the specific directives added as part of Appendix 4 attempt to adhere to the objectives of The Joint Commission and other appropriate guiding organizations; any attempt to identify all possible areas where Conflicts of Interest may arise will be incomplete. It is incumbent therefore on each Individual to be alert to avoid those Conflicts of Interest that are clearly identified within this policy and those Conflicts of Interests, which while less defined, are equally inconsistent with the delivery of the Center's mission in a manner deserving of community trust.

## GIFTS

### **Covered persons and activities:**

All Individuals or groups of Individuals who receive or are offered a “gift” that could reasonably be attributed to the performance of their duties or their position with the Center are covered by this policy.

A “gift” is defined as anything of value that is given, directly or indirectly, to an Individual or group of Individuals for which the Individual or group does not give consideration of equal or greater value in return.

### **Requirements:**

- a) **General** – As a general rule gifts should not be encouraged. An Individual or group of Individuals may accept a gift that is Nominal and is not in the form of cash or cash equivalents. All other gifts should be handled as follows.
- b) **Prohibited gifts** – An Individual or group of Individuals is prohibited from accepting any gift from:
  - a. A government employee, agent, representative or official
  - b. Any person where the gift is made in connection with a Center business transaction
  - c. A single student where the gift is made to a Faculty Member or other Individual involved in the education of that student
  - d. A Vendor unless receipt of the gift is specifically allowed under another provision of this Conflict of Interest Policy.
- c) **Directed Gifts** – any gifts offered or received that are neither Prohibited or acceptable under the General rule defined above:
  - a. Offers from a potential donor should be directed to representatives of the Albany Medical Center Foundation, Inc. or instructed to adhere to the guidelines of the Grateful Patient Program.
  - b. Received gifts should be administered according to the requirements of Incidental Amounts or Reportable Events and Relationships accordingly. Individuals should be aware that the receipt of a gift that doesn't meet the General Requirements of this appendix may result in the return of the gift or equivalent value by the Center, the redirection of the gift to other Center services, or the expectation of personal reimbursement by the Individual benefiting from the gift. The determination of the actions required to remedy potential Conflicts of Interests caused by the receipt of gifts is at the sole discretion of the Center.

## PARTICIPATION IN SPONSORED EDUCATIONAL EVENTS

### **Covered persons and activities:**

Educational events include all activities that expressly or implicitly purport to advance participants knowledge or skills beyond the implementation of a single product or service. *(Presentation of single products or services are typically considered sales presentations and covered by the guidelines for Procurement and Prescribed Use Activities described in Appendix 4-c.)*

Individuals who participate in a variety of educational programs that have been sponsored in whole or in part by a third-party are covered. This may include aiding in the development or promotion of a program of education, developing materials in support of the program, presenting as part of the program or attending as a participant. Some examples of these programs include events at other academic institutions, professional conferences, government sponsored expert panels or review committees, seminars, symposia, expert training or presentations in the use of new technologies or products/services, and presentations to lay audiences. Any educational program resulting in continuing education credit must comply with the regulations of the educational accrediting body.

### **Requirements:**

- a) **Value of the Event:** The Individual and their manager are required to determine that the program and content are primarily educational in intent, design and implementation providing legitimate educational value for the participants. Further, both the Individual and supervisor must conclude that the program is relevant to the performance of duties at the Center, of appropriate rigor, at a level necessary to advance the participants knowledge in this area, and sufficiently balanced in presentation to avoid the introduction of unwarranted bias. Elements of this evaluation include:
  - a. The program and the content should be predominantly directed towards the advancement of knowledge required in the performance of duties at the Center.
  - b. The program should strive at all times to present a balanced representation of available options or perspectives. In those instances, where a reasonable person may conclude an unbiased presentation can't or won't be provided, full disclosure of the factors contributing to the perception of unwarranted bias should be disclosed prior to beginning the program.
  - c. The program should limit whenever possible the introduction of commercial content or labeling. Exceptions to this limitation are when the introduction of commercial content is required to accomplish the legitimate educational goals of the program. In all instances where the introduction of commercial content occurs, an equal effort should be made to introduce alternative solutions or methods in order to preserve a balanced presentation.
  - d. Program developers and presenters should demonstrate sufficient expertise through credentials or degrees, and relevant experience to conclude that the

program participant's knowledge will be significantly advanced by their attendance at this program.

- b) **Disclosure by Program Planners or Presenters to Participants:** The preservation of an unbiased educational setting requires honest and full disclosure of all potentially influencing factors. Program planners and presenters should disclose all circumstances involving real, potential, or perceived support from third-party sources to safeguard the integrity of the program:
- a. The participating Individual should timely disclose clearly, completely and prominently the nature, source and amount of all external support received. The participating Individual should insure that all support, whether financial or in-kind, received from third-party sources is disclosed to program participants prior to the beginning of the educational activity.
- c) **Compensation to Individuals:**
- a. Individuals should only lend their name or expertise to those types of activities that serve to enhance the reputation of the Center. To this end an Individual should only participate in or otherwise allow his/her affiliation with these activities when the Individual has determined that the program and his/her participation meet the expectations of legitimate educational purpose and:
    1. All activities resulting in remuneration or financial benefit are supported by written agreements documenting all terms, conditions, and purposes of the agreement between the sponsor and the Individual.
    2. The compensation paid is consistent with fair market value for the Individual's services, and such services are both meaningful and substantive,
    3. The Individual has disclosed in advance, all relevant Financial Interests directly or indirectly related to their involvement.
- d) **Support from Vendors:**
- a. Support for Center sponsored events must be in the form of a general educational grant paid directly to a Center fund.
  - b. The Center shall retain exclusive responsibility for all aspects of educational events/activities.
  - c. Sponsors may not display commercial exhibits or distribute promotional materials in the space where the program is offered. Further the inclusion of company representatives in the program cannot be a requirement for support of any type. Vendor representatives, displays and promotional materials may be present in an adjoining space if agreed to ahead of time.
  - d. Support can never be made directly to or earmarked specifically for an individual or individuals.
  - e. Vendors may be acknowledged in printed materials, but specific products should not be mentioned.
  - f. Refreshments, study materials and promotional items should be limited to those directly contributing to the stated educational objectives of the program. The provision of food should be modest, appropriate to the event and provided infrequently.
  - g. A letter of agreement outlining expectations and restrictions will be signed by the Department Head and the Vendor.

- e) **Single Product/Service Presentations** – should prominently disclose the inherent limitations of the approach and the resulting limitations on program content and applicability

**PROCUREMENT AND PRESCRIBED USE ACTIVITIES**

**Covered persons and activities:**

Individuals involved in the evaluation, recommendation or authorization of products or services, or of policies and procedures that create an institutional incentive to use particular products or services need to be aware of the potential for bias introduced by potential Conflicts of Interest.

The commitment of Center resources, directly or indirectly, requires all Individuals involved to maintain an "arms-length" independence from Vendors in both appearance and fact, and to utilize rigorous decision-making practices that insure all decisions are made in the best interests of the Center.

**Requirements:**

a) The following actions are required:

- a. **Personal Incentives:** Occasionally, Vendors offer an incentive if a buyer agrees to purchase the company's goods or services. Personal incentives, e.g., merchandise, tickets to special events, food, vacation trips, etc. are considered Prohibited Gifts as described in GIFTS above and cannot be accepted under any circumstances.
- b. **Visits by Vendor Representatives:** Individuals must act to ensure compliance with the following requirements.
  - i. All Vendor representatives must be registered with Albany Medical Center and be issued an identification badge by the Albany Medical Center Security Office. The ID badge must be worn at all time when on the premises of any part of the Center campus.
  - ii. Vendor representatives from pharmaceutical, biotechnology and other industries may visit healthcare providers, researchers, and other Individuals to talk about and demonstrate their new products only upon appointment and at the request of the Individual being visited. An appointment is always required; generally representatives are not permitted on campus on a drop-in basis or in any clinical patient diagnostic or treatment area including waiting rooms. However, nothing in this policy is intended to prohibit the involvement of trained technical representatives in clinical areas necessary for the effective delivery of patient care. Scheduled appointments are also required for Vendor visits to train physicians, researchers or others in device use or new technologies.
- c. **Placement of Vendor Equipment at the Center:** Individuals must act to ensure compliance with the following.

- i. Vendors may offer to place a new device or piece of equipment on-campus on a trial basis. Such arrangements require notice to Albany Medical Center Purchasing Department in advance of accepting the trial use and are required to be terminated if in the opinion of the Purchasing Department the trial basis arrangement results in an unfair advantage in a procurement decision.
  - ii. The Vendor will be expected to deliver and retrieve the item within the designated time period not to exceed three months.
- d. **Site Visits to View Vendor Products and/or Services:** Site visits to Vendors to evaluate and compare Vendor products and/or services are sometimes necessary to assist Center staff in making the best purchasing decision. All Individuals must comply with the requirements of this Policy in responding to and managing these activities.

**PHARMACEUTICAL SAMPLES**

Albany Medical Center Hospital Policy: Medication Monitoring & Storage –  
Pharmaceutical Samples, is incorporated into this Policy and shall be followed by all  
Individuals as amended from time to time in accordance with AMC Hospital governance  
practices.

## CONFLICT OF COMMITMENT

### **Covered persons and activities:**

All Individuals are potentially affected by a Conflict of Commitment. Conflicts of Commitment are a type of Conflict of Interest where the presence of another commitment impacts the Individual's ability to conduct their duties and responsibilities in the best interests of the Center. They may arise with respect to the distribution of effort between an Individual's obligations and responsibilities to the Center, and his/her commitment to outside professional activities.

### **Requirements:**

Activities such as consulting, involvement with professional societies, or private practice, or educational opportunities in the Individual's area of interest or profession may be appropriate as they promote the professional development of the Individual and enrich the Individual's contributions to the Center, to his/her profession, and to the various Center activities and communities that the Individual serves. However, an Individual shall not participate in any activity that involves a conflict of commitment unless such activity has been approved in advance in writing by his/her manager. If such approval has been given, any terms or conditions regarding such activity will be monitored by the manager to ensure they are satisfied.

## RESEARCH

Albany Medical Center (AMC) has adopted this policy and the accompanying procedures in order to promote objectivity in the performance of research by establishing standards to ensure there is no reasonable expectation that the design, conduct, or reporting of research will be biased by any conflicting financial interest of an "Investigator."

### **Covered persons and activities:**

Individuals involved in the design, conduct, or reporting of research are covered by this policy. These requirements are intended to ensure that all Financial Interests are properly disclosed, managed, reduced or eliminated and reported consistent with federal requirements at 42 CFR Part 50 and 45 CFR Part 94. The requirements for Funded Research are in addition to the general requirements of the Center Conflict of Interest Policy.

Institutional Responsibilities of the Investigator under this policy apply to:

1. The Investigator's professional responsibilities on behalf of Albany Medical Center and all entities under its direction and control as defined by the Conflict of Interest Policy.
2. All research (including basic science and human subject research) regardless of funding source performed or proposed to be performed at the Center or with the support of the Center.
  - a. All "Investigators" which means the principal investigator/project director, co-investigator(s), and any other person responsible for all or part of the design, conduct, or reporting of research.
  - b. "Investigator" includes the investigator's spouse and dependent children.
  - c. "Investigator" also include significant contributors such as contractors, subcontractors, sub-grantees, collaborators or consultants
  - d. "Any other person" regardless of title and/or position, who is named on the grant application and has a high degree of autonomy with responsibility for all or part of the design, conduct or reporting of research.
3. All Financial Interests that would reasonably appear to be affected by the research or in entities whose financial interests would reasonably appear to be affected by such research activities including:
  - a. Salary or other payments for services (e.g., seminars, lectures, teaching engagements, consulting fees or honoraria, gifts, paid authorship);

- b. Income from service on advisory committees or review panels for public, nonprofit, or for-profit entities.
- c. Equity interests (e.g., stocks, stock options or other ownership interests), and intellectual property rights and interests (e.g. patents, copyrights, and royalties from such rights), upon receipt of income related to such rights and interests.
- d. Any occurrence of reimbursed travel. This includes any sponsor funded travel which is paid on behalf of the investigator and not reimbursed to the investigator.

**Investigator and Institution Requirements:**

- **General Disclosure Requirements**

In addition to annual disclosures required by the Center Conflict of Interest Policy, Investigators must make a complete disclosure of Financial Interests:

- Prior to submission of a research proposal;
- And if funded, disclose within 30 days:
  - When there is a change in the previously disclosed Financial Interest during the period after submission of the proposal through the period of the research
  - When a new reportable Financial Interest arises at any time during the period after submission of the proposal through the period of the research

All Investigators must disclose their Financial Interests utilizing the Investigator Financial Interest Disclosure Form. The completed Form and all supporting documentation must be submitted with the proposal and the Sponsored Programs Review and Approval Form (Form A) to the Office of Research Affairs/Research Administration and Compliance.

- **Travel Disclosure Requirements**

Details of travel disclosure must include at a minimum, the purpose of the trip, the identity of the sponsor/organizer, the destination and the duration. The institutional official (s) determines if further information is needed, including a determination or disclosure of monetary value, in order to determine whether the travel constitutes an FCOI with any PHS/NSF funded research.

- **Determination of a Conflict of Interest**

All research related disclosures of Financial Interest will be reviewed by the AMC Research Integrity Officer (RIO). If the Research Integrity Officer believes a potential Conflict of Interest may exist the RIO will forward the Investigator Financial Interest Disclosure Form, all supporting documentation and a recommendation to the Center Chief Compliance Officer for review.

- **Managing a Financial Conflict of Interest (FCOI)**

Management of an identified research related financial conflict of interest requires development and implementation of a management plan in accordance with the requirements of 42 CFR Part 50 and 45 CFR Part 94. Whenever the Center

implements a financial interest management plan, it will monitor the investigator's compliance with the plan on an ongoing basis until the completion of the research project.

Examples of conditions or restrictions that might be imposed to manage research conflicts of interest include but are not limited to:

- Public disclosure when presenting or publishing the research
- For research involving human subjects, disclosure of financial conflicts directly to subjects/participants addressed at a minimum within the informed research consent document
- Monitoring of research by independent reviewers
- Modification of the research plan
- Change in personnel or personnel responsibilities
- Disqualification from participation on all or a portion of the research
- Divestiture or reduction of financial interest
- Severance of relationships that create actual or potential conflicts

In addition to the above conditions or restrictions that might be imposed, the Center may require other actions to mitigate or eliminate Conflicts of Interest, as it deems appropriate.

• **Reporting/Recordkeeping Requirements:**

If the research includes or proposes to include Federal funds (partial or total funding by the Public Health Service (PHS), including NIH and any other PHS Components to which the authority involved may be delegated) or if the Federally funded research is in any way reportable to FDA, the Center will comply with the following Federal reporting requirements:

- Prior to spending any funds under a Federal award, the Center will report to the Federal sponsor, the existence of any conflicting financial interests (as defined in 42 CFR Part 50 and 45 CFR part 94) and ensure a management plan has been implemented such that the interest has been managed, reduced, or eliminated in accordance with these regulations. The Center will make information available to the Federal sponsor regarding all financial Conflicts of Interest identified in accordance with these regulations; and,
- For any new Financial Interest that the Center identifies as posing a Conflict of Interest as defined in 42 CFR Part 50 and 45 CFR Part 94 subsequent to the Center's initial report under the award, a report will be made and the Conflict of Interest managed, reduced, or eliminated; at least on an interim basis, within sixty days of the determination that a Conflict exists.
- Whenever a financial interest was not disclosed timely by an Investigator or was not previously reviewed or managed by the Center in a timely manner during an ongoing PHS-funded research project, the Center will, within sixty days, review the financial interest and if a financial Conflict of Interest exists, implement a management plan at least on an interim basis. If a Conflict of Interest exists, within 120 days of the determination, the Center will complete a retrospective review to determine whether any Federally funded research was biased in the design,

conduct or reporting of the research. The Center will document the retrospective review and if bias is found, will promptly notify the awarding sponsor and submit a mitigation report.

- In addition to the reporting of financial Conflicts of Interest, the Center may report other conflicts, as it deems appropriate.
- For any financial Conflict of Interest reported to the Federal sponsor, the Center will monitor the management plan and provide annual updates for the duration of the research project period.

Prior to the expenditure of any funds under a PHS-funded research project, the Center will ensure public accessibility of information concerning any significant financial interest that meets the criteria as defined in 42 CFR Part 50 and 45 CFR Part 94. The information will remain available for at least three years from the date the information was most recently updated.

Records relating to all Investigator disclosures of financial interests and the Center's review of and response to such disclosures and all actions taken under this Policy will be maintained for at least three years from the date the final expenditure report is submitted to the funding agency.

The Center will maintain its COI Policy via a publicly accessible Web site.

**AMC Institutional Research Committee/Board Requirements:**

Institutional Research Committee Members include Institutional Officials, Committee/Board Chairs, Committee/Board Vice-Chairs and Members of the following research review committees:

- Institutional Review Board (IRB)
- Institutional Animal Care and Use Committee (IACUC)
- Institutional Bio-safety Committee (IBC)
- Controlled Substances Governing Board (CSGB)

• **Disclosure Requirements:**

Institutional Research Committee/Board Members must disclose:

- Any Financial Interest in entities that sponsor research
- Any relationship (including non financial relationships) or issues that would appear to impact the Committee/Board member's objectivity in the performance of his/her Committee/Board duties reviewing, commenting and voting on research protocols and Institutional Committee/Board standard operating policies and procedures
- Any conflict of commitment that interferes with their ability to effectively perform their responsibilities as a Committee/Board Member

Additional Disclosure Process for Institutional Committee /BoardMembers:

- Institutional Committee/Board Members shall complete a Committee/Board Disclosure Questionnaire annually and amend same at any time there is a new reportable conflict.
- Institutional Committee/Board Members are responsible for immediately reporting any protocol specific conflicts to the Institutional Committee/Board Chair prior to review and discussion of the protocol.

- **Resolving a Committee/Board Conflict of Interest:**

The Institutional Committee/Board Chair will determine and document any protocol specific conflict, whether the member will be able to participate in the discussion and voting, that the conflict was communicated to the Committee/Board and any related action taken as part of the meeting minutes. All potential Conflicts of Interest must be reported to the Research Integrity Officer and the Chief Compliance Officer.

Questions concerning compliance with any of the requirements included in Appendix 4-f should be directed to the Dean's Office, Research Integrity Officer (RIO) of the Albany Medical College. The Dean's Office/RIO will conduct or provide training of researchers on this policy applied to research activities prior to engaging in PHS-funded research at least every four years, and as otherwise required by federal regulation.

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## EXCESS BENEFIT TRANSACTIONS

### **Covered persons and activities:**

In order to safeguard the Center's tax-exempt status increased scrutiny is required to insure relationships and transactions involving persons or parties (Interested Parties) having the potential to influence the actions of the Center and its entities do not result in excess benefit to those parties beyond what would have been received at fair market value.

For purposes of this section Interested Parties include:

- Any director, principal officer or member of a committee with governing board delegated powers
- Any employee:
  - with responsibilities, powers or influence over an entity as a whole that is similar to those of officers, directors, or trustees, or
  - who manages a discrete segment or activity of an entity that represents 5% or more of the activities, assets, income, or expenses of that entity, or
  - has or shares the authority to control or determine 5% or more of an entity's capital expenditures, operating budget, or compensation for employees, and
  - has annual reportable compensation that exceeds \$150,000.
- Any person who was in a position to exercise substantial influence over the affairs of an entity at any time during the five-year period ending on the date of the transaction by virtue of a substantial ownership or investment interest, or a compensation arrangement in any entity, trust or venture with which the Center has a business relationship, is contemplating a transaction or arrangement, or has been the beneficiary of a substantial level of gifts from that person, family members or related entities.

### **Requirements:**

Preservation of the tax-exempt status of Center entities requires all activities and relationships further the tax-exempt purposes of the organization and do not unduly benefit an individual or group of individuals.

This requires that all relationships and transactions by the Center be on the basis of fair market value defined as the price at which property or the right to use property would change hands between a willing buyer and a willing seller, neither being under any compulsion to buy, sell, or transfer property or the right to use property, and both having reasonable knowledge of relevant facts. For purposes of this standard; compensation includes all forms of cash and non-cash payments or benefits provided in exchange for services or goods, direct and indirect remunerations, gifts or favors. Examples include

salary and wages, bonuses, severance payments, deferred payments, retirement benefits, fringe benefits, and other financial arrangements or transactions such as personal vehicles, meals, housing, personal and family educational benefits, below-market loans, payment of personal or family travel, entertainment, and personal use of the organization's property.

• **Disclosure Requirements:**

Any Interested Party has a duty to disclose all material facts and circumstances for review by the Compliance and Audit Committee of the Albany Medical Center prior to soliciting or engaging in any activities that may result in the exchange of financial assets between any entity of the Center and the individual, related entities or members of their family. In addition to those persons included in the definition of Immediate Family of this policy, for the purpose of this section family members also include ancestors, grandchildren, great grandchildren, and spouses of brothers, sisters, children, grandchildren, and great grandchildren.

*Annual Statements* – Each person covered by this section is required to annually sign a statement which affirms such person:

- Has received a copy of the Conflicts of Interest policy,
- Has read and understands the policy,
- Has agreed to comply with the policy, and
- Understands the Center entities are charitable and in order to maintain their federal tax exemption each entity must engage primarily in activities which accomplish one or more of its tax-exempt purposes.

• **Resolving a Conflict of Interest**

*Excess Benefit Transactions* – In those instances where a transaction or arrangement results in economic benefit to a Interested Party beyond the consideration that would be paid under like facts and circumstances between disinterested parties with sufficient knowledge to engage in an arms length exchange; an excess benefit transaction is deemed to have occurred.

When an excess benefit transaction occurs the Interested Party that benefits beyond the fair market value will be expected to return the compensation in excess of fair market value to the Center. In all instances, the terms of the transaction or arrangement will be amended to comply with the rules and regulations of the U.S. Internal Revenue Service requiring the avoidance of transactions or arrangements resulting in excess benefit transactions prior to any future exchange or encumbrance of the finances of the Center.

• **Reporting/Recordkeeping Requirements:**

*Proceedings* – The minutes of the Audit Committee of the Albany Medical Center shall contain:

- The names of persons who disclosed or otherwise were found to have a potential conflict of interest under this section, the nature of the potential conflict, any action taken to determine whether a conflict of interest was present, and the committees decision as to whether a conflict of interest in fact existed.

- The names of all persons present for discussions and votes relating to the transaction or arrangement, the content of the discussion, including any alternatives to the proposed transaction or arrangement, and a record of any votes taken in connection with the proceedings.
- Notice to all other committees with board delegated powers of identified conflicts of interest and actions taken or required to be taken.

*Periodic Reviews* – At least annually a periodic review will be completed of selected transactions and arrangements involving the Center and Interested Parties which shall, at a minimum, include:

- Whether the compensation and benefits are reasonable based on comparison to reliable sources of transactions or arrangement of like facts between disinterested parties and as the result of arm's length bargaining.
- Whether partnerships, joint ventures, or other arrangements conform to the Center's written policies, relevant laws and regulations are properly recorded, reflect reasonable investment or payments for goods and services, further charitable purposes and do not inure impermissible private benefit or in an excess benefit transaction.

**START-UP NY Program**

**Addendum**

Pursuant to designation as a Tax-Free Space under the SUNY Tax Free Areas to Revitalize and Transform Upstate New York Program (START-UP NY Program) the Conflict of Interest Policy is amended for all activities related to the START-UP NY Program at Albany Medical College, and for all Individuals involved in or who participate in the administration of any transaction governed by START-UP NY program requirements in accordance with Econ. Dev. L. § 439 and 5 NYCRR § 220.20.

In addition to the requirements of the Conflict of Interest Policy the following amendments are made to policies and procedures covering the administration of and involvement in the START-UP NY Program:

1. No official who is a vendor or employee of a vendor of goods or services to Albany Medical College, or who has a business interest in such vendor, or whose relative has a business interest in such vendor, shall vote on, or participate in the administration by the Albany Medical College of any transaction with such vendor in any activity related to the START-UP NY Program.
2. The Office of the Dean will maintain a written record of all disclosures of actual or potential conflicts of interest made pursuant to the START-UP NY Conflict of Interest Guidelines, and shall report such disclosures, on a calendar year basis, by January 31<sup>st</sup> of each year, to the auditor for Albany Medical College. The auditor shall forward such reports to the Commissioner, who shall make public such reports.
3. For all persons participating in any activity of or administering any part of the START-UP NY Program at Albany Medical College, the definition of Immediate Family is amended to include “any person who is a direct descendant of the Individual’s grandparents or the spouse of such descendent” in addition to any spouse, domestic partner, children, parents (including in-laws), siblings, ancestors, grandchildren, great grandchildren, ancestors, spouses of brothers, sisters, children, grandchildren, and great-grandchildren. In addition any person living in the Individual’s household or who is dependent on the Individual for on-going financial support, and any person whom the Individual is dependent on for on-going financial support are also included.

Questions concerning the interpretation and administration of conflict of interests under the START-UP NY Program will be resolved in accordance with Econ. Dev. L. § 439 and 5 NYCRR § 220.20. Any person having questions regarding this policy should contact the Senior Vice President and Chief Compliance Officer at (518) 262-4692.