



HUTCHINSON
REGIONAL HEALTHCARE SYSTEM

CODE OF CONDUCT



To: All Employees, Medical Staff members,
Board Members, and all other persons or
entities that provide services or supplies
to Hutchinson Regional Healthcare System

One of our most valuable assets is our integrity. Protecting this asset is everyone's job. To that end, the Board has established a Compliance Program, which includes a Code of Conduct. Our Code helps us comply with the highest standards of legal and ethical conduct.

The Code does not cover every situation you will face. Our Code sets out basic principles to help guide you. Our reputation depends on your choices, and sense of ethics. We expect our Medical Staff, vendors, and other agents to follow the standards set out in our Code.

Please read our Code carefully. You must understand its contents and apply its principles in everything you do. It emphasizes our commitment to observe the highest legal, moral and ethical standards. If you are ever in a situation you believe violates our Code or the law, you must promptly report it. If you have an issue or concern about safety or quality, you must report it. You can report to your chain of supervision, the Compliance & Ethics Department, external agencies (e.g., The Joint Commission) or our Compliance Hotline.

As you know, our reputation is integral to our success. While acting for us or helping us conduct our business, you need to act in a manner that is consistent with our Code. If you do, we can keep and enhance our reputation for integrity.

Thank you,

Ken Johnson
President & CEO

CODE OF CONDUCT

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CODE OF CONDUCT

DEFINITIONS

“Compliance Program” means our compliance and ethics program, its administration and our Code of Conduct (“Code”). It also includes related policies and procedures, and federal healthcare program requirements and other applicable laws and regulations.

“Hutchinson Regional Healthcare System” means Hutchinson Regional Medical Center, Inc. (HRMC); Hospice and Home Care of Reno County; Health-E-Quip (HEQ); and Horizons Mental Health Center, Inc. (Horizons). “HRHS”, “we”, “us” or “our” means each company, either by itself or together, as the usage requires.

“Covered Persons” mean our employees and anyone else working on behalf of HRHS, *e.g.*, all Board Members, Medical Staff, directors and Administrators. It also includes any persons or entities that provide supplies or other items or services to us. (We refer to Covered Persons individually as “you”).

PURPOSE/OVERVIEW

This Code outlines how you are to conduct yourself. Our patients, clients and consumers (collectively, “those we serve”) deserve your very best. This Code will help you make the right decisions and choose the proper behavior. It sets out how you are to behave.

THIS CODE APPLIES TO EVERYONE

Our Compliance Program (including this Code) applies to everyone, *e.g.*, all Covered Persons. There are no exceptions.

WE CONDUCT OURSELVES ETHICALLY

Our Supervisors. Our supervisory personnel must set an ethical tone. This tone is set by:

- ✓ Encouraging ethical conduct and a commitment to complying with the law.
- ✓ Taking time to listen to you and to answer your questions.
- ✓ Supporting you when you raise or report good faith issues.
- ✓ Establishing an environment free of retaliation.
- ✓ Helping you solve issues. Getting help if needed.

Everyone. Each Covered Person is individually responsible for following our Code and helping build a culture of compliance by:

- ✓ Knowing, following and enforcing our Code.
- ✓ Ensuring your behavior also complies with applicable laws, regulations, and our policies.
- ✓ Being on the lookout for issues or violations.
- ✓ Asking questions. Reporting issues.
- ✓ Knowing that results are never more important than your compliance with this Code.

WE DO THE RIGHT THING

Legal and ethical conduct is everyone’s job. We expect you to do the right thing. In part, this requires you to abide by this Code, report potential issues, identify and correct issues and protect public resources from fraud, abuse and waste. Our Code requires you to always be honest. Never be afraid to say, “*I don’t know*” if you are not sure what we expect (or the law requires). If you have questions, seek help.

WE ACKNOWLEDGE & UNDERSTAND

You must read and understand what this Code requires. This Code is a condition of your employment, privileges, or ability to contract with us (e.g., supplies or services). Your failure to obey our Code will result in “consequences appropriate to the circumstances”. It may also result in civil or criminal penalties against you or us. This Code is not a guarantee of continued employment, privileges or contract. It does not give you any contractual rights against us. Your employment remains “*at will*”.

WE MAY AMEND OUR CODE

At any time, we may amend or revise this Code.

I.C.A.R.E. ENOUGH TO ASK
QUESTIONS & TO REPORT MY
CONCERNS

WE STOP AND ASK

If you are not sure what is the right thing to do, stop and ask. You have the absolute right to *freely discuss or report (good faith)* issues or possible violations. You may do this without fear of retaliation. This right exists even if your concern is mistaken. We encourage you to raise issues.

REPORTING

We require you to report actual or suspected violations of our Compliance Program. *If you see a problem, report it!* Our early detection and resolution of issues and misconduct is critical to our *INTEGRITY* and the effectiveness of our Compliance Program.

Our goal is to resolve concerns or issues. There are many ways to report your concerns or issues. The method you use is up to you. If you choose, you can make oral reports to your chain of supervision (e.g., your supervisor, department director, Administration), Human Resources (HR) or the

Compliance Officer. You can make a written report to the Compliance Officer. If you want to remain anonymous (*i.e.*, not tell us your name), or you need more help, call our Compliance Hotline (“Hotline”).

Our **Hotline** number is **855.998.9907** (English), or **800.216.1288** (Española). You may e-mail our **Hotline at: reports@lighthouse-services.com**.

The Hotline is available 24 hours a day, seven days a week.

The Hotline does not require you to share your name, but the details you give may expose your identity. We will attempt to protect your identity, if asked.

We do not require you to report issues and concerns through your supervisor or chain of supervision. **We simply require you to report your concerns or issues.**

If you are not comfortable reporting matters to us that you think are illegal or unsafe, you can report them externally. For example, report to the Joint Commission, the Office of Inspector General (OIG), or KDHE. Contact information for these agencies is available on our Intranet’s “Corp. Compliance” tab.

See our **Compliance Consults Policy** (SYS:CCE002) and for examples of what to report, our **Compliance Reports Policy** (SYS:CCE003).

WE DO NOT RETALIATE

We do not allow others to retaliate against you for taking part in our Compliance Program. Our *Core Values* require you to speak up when you see any issue or violation. Acting with *INTEGRITY* means you voice concerns or ask questions about your conduct or the conduct of others. ***You may not look the other way!*** We need to prevent misconduct and resolve mistakes.

We will protect you from retaliation if you voice, in

good faith, issue(s), file report(s), assist with investigations, provide testimony, or participate in the government's handling of a false claim. We will protect you from retaliation if you refuse to engage in activity that you think (in good faith) violates the law.

If you feel that retaliation is taking place, you need to report it promptly. You can report to your chain of supervision, or the Compliance Officer. Or, without telling us your name, by calling the Hotline.

SEE IT!

REPORT IT!

CORRECT IT!

*For More Information, see our **Non-Retaliation Policy** (SYS:CCE006)*

HIGH RELIABILITY ORGANIZATION (HRO)

We work in a high-risk industry. Our Core Values require us to anticipate and detect potential harm, and to limit the effects of harm. To avoid tragic results, you must voice your concerns. You have the absolute right and obligation to stop errors/mistakes before they happen.

- ✓ #Zero Errors
- ✓ Your opinions count. Don't ignore your gut feelings.
- ✓ Prevent errors by Speaking Up! Voicing your concerns is the only way to prevent harm and improve our systems and outcomes.
- ✓ Communicate your concerns. Don't wait until it's too late.

Being an HRO is how we implement our Core Values. We need to use systems thinking to evaluate and design for zero errors. We need to anticipate, detect and limit harm with a mindset supported by five characteristic ways of thinking:

- *Preoccupation with Failure.* Everyone is aware of and thinking about the potential for failure.
- *Reluctance to Simplify.* Look beyond surface explanations to find the events that cause errors. Reduce variation in your workflows;.
- *Sensitivity to operations (situational awareness).* You must find hidden threats and help resolve them. How does the current state create risk or threaten safety.
- *Deference to Staff Expertise.* Seek to understand hazards and risks and be open to learning about threats or concerns from the people closest to the work.
- *Commitment to Resilience.* Promote a team approach so that everyone looks to identify threats. By doing this, we can anticipate threats and respond to them before they cause harm.

A HRO requires everyone to speak up and report concerns. To encourage reporting, we have adopted Just Culture principles. In a Just Culture, we focus on system improvements, and will only discipline individuals when they (i) choose to engage in "reckless behavior", or (ii) engage in repetitive behaviors without changing their conduct.

For more information about HRO & Just Culture principles, go to the Intranet's HRO tab and view our "Response to Events – Just Culture & HRO" policy #SYS:HRO001 and related Algorithms (which show how we respond to events).

OUR MISSION & CORE VALUES (Legal & Ethical Decision Making)

OUR MISSION

“Enhancing the quality of life through integrated healthcare.”

It takes a team! Our Mission requires you to cooperate with others. No single person is more important than any other member of our team. Our **top priority** is enhancing the lives of those we serve. It is not about you or us. Rather, it is about joining together to improve the quality of life for those we serve.

OUR VISION STATEMENTS

Your decision-making process should also promote the vision statement (or goal) of the company, you work for or with.

HRMC: Become the leading wellness-focused medical center through collaboration, efficiency and outcomes.

HEQ: Our vision is to be the region's first choice for home medical equipment and services.

Hospice and Home Care of Reno County: Become the leading, all-encompassing community health provider through innovative services, products and relationships.

Horizons: To become the behavioral health treatment center of choice through access, integration, and outcomes.

OUR CORE VALUES

Our *Core Values* are the foundation of our culture. You must use them every day. If you do, it will help ensure that we operate legally and ethically. While you are acting for us, especially when dealing with those we serve, your *decisions* and *behavior* should ALWAYS reflect our *Core Values*.

Our Core Values:

- Integrity
- Compassion
- Accountability
- Respect
- Excellence

If the right course of action is not clear or you feel uneasy, ask yourself:

- ✓ Do my intended actions follow our *Core Values*?
- ✓ Do my intended actions comply with the rest of our Compliance Program including applicable policies, procedures and laws?
- ✓ Do they advance our Mission and your company's vision statement?
- ✓ Do they comply with the ethical standards specific to your profession?

If any answer is “no”, you must stop and seek help. If you suspect a violation, report it. Report to your chain of supervision, or the Compliance Officer. Or, if you prefer, call the Hotline.

In general, our *Core Values* require you to be kind, to do your best, to accept responsibility and to do what's right.

The following *examples* help explain how you are to apply our *Core Values*.

INTEGRITY

Integrity requires you to always act ethically, honestly and fairly. You may not take advantage of others.

We prohibit illegal, dishonest, unethical or fraudulent conduct. To avoid this type of conduct, ask yourself:

- ✓ *Is it something you would tell your spouse/children/mother?*
- ✓ *How would it look in the newspaper?*
- ✓ *Would I be proud or ashamed of my conduct?*
- ✓ *Is it a valid use of the public's resources?*
- ✓ *Is it fair to HRHS, or those we serve?*

Always do what is right! At times, it will be difficult. Nothing worthwhile is easy. Doing the "right thing" may go beyond obeying the law. It may require you to make difficult or unpopular choices.

We care about how you obtain results. *You must complete your tasks and our business by ethical and legal conduct.* Share your concerns.

- ✓ Be open and honest in what you say and do.
- ✓ Act without hidden purpose or design.
- ✓ Keep your promises (even when it is not easy or convenient).

Take charge and do what needs to be done. Commit yourself to the success of the organization.

COMPASSION

***"Our prime purpose in this life is to help others. And if you can't help them, at least don't hurt them."* – Dalai Lama**

Compassion requires empathy and sympathy. EMPATHY [empəTHĕ] is "the ability to share in another's emotions or feelings." SYMPATHY [sɪmpə-thĕ] is "the feeling that you are sorry about someone else's trouble, grief, condition." For example, when helping others put yourself in their shoes, or think - *How would I feel if this was happening to me? What if this was my mother or father?* Remember, it is likely they are suffering and afraid. Look out for them.

One kind word or deed can make a difference in someone's day. It is not about us – it is about those we serve. Put others first.

Hostile, rude, or threatening behavior is contrary to this Code.

- ✓ Be courteous. Anticipate needs.
- ✓ Before you speak or take action, consider how it may affect others.
- ✓ If someone offends or mistreats you, be forgiving and tolerant.
- ✓ Be cheerful.
- ✓ Care for, and comfort, those we serve and their families.
- ✓ Be polite and kind to everyone.
- ✓ Greet everyone with a smile.
- ✓ Show appreciation.
- ✓ Look out for others.

The needs of others come first. Be thoughtful, considerate and heartfelt. Make lasting impressions.

ACCOUNTABILITY

***"In the long run we shape our lives and we shape ourselves...and the choices we make are ultimately our own responsibility."* – Eleanor Roosevelt**

We are a team. Our success depends on you making good choices. Don't be a burden. *Be a positive and productive difference!* You own every choice you make. Accountability also means you have a responsibility to us and your peers.

If someone acts contrary to our Code, you must question it. Take steps to see that improper conduct is properly corrected.

- ✓ You are responsible for your actions.
- ✓ Use good judgment.

- ✓ Make sound decisions, even when no one is around.
- ✓ Do not act or make decisions lightly.
- ✓ Treat every decision as if you are making it for your family or business.
- ✓ Your reputation is at risk too.
- ✓ Your conduct has a direct influence on our reputation and success.
- ✓ Be direct, but polite.
- ✓ Address issues directly with the person(s) responsible for them.
- ✓ Own and resolve issues immediately.

Take ownership and be committed. You are always right when you follow this Code.

RESPECT

Attitude is Everything. Pick a Good One!

Being Respectful Brings out a Person's Full Potential!

We honor diversity, and *RESPECTFUL* disagreements. *Your attitude directly affects everything!*

We will not always agree with each other. But *respect* requires you to listen, and be forgiving of others. Open and respectful communication will resolve most issues.

Respect requires us to treat others with dignity and courtesy. Create meaning and purpose in everything you do.

- ✓ Have a positive attitude.
- ✓ Act with humility.
- ✓ Be Kind. Be Good.
- ✓ Be Aware.
- ✓ Listen carefully. Understand and then proceed.
- ✓ Do not raise your voice.

- ✓ Give your undivided attention to others.
- ✓ Slow down.
- ✓ Take time to care.
- ✓ Connect with people. Make a difference for them.
- ✓ Make eye contact.
- ✓ Listen to understand, not to argue.
- ✓ Treat others how you like to be treated.
- ✓ Value and recognize the skills, talents and contributions of others!

EXCELLENCE

Excellence is not about being the best; it is about *doing* your best.

Excellence requires you to seek constant improvement. *Collaborate with others to achieve better results!* Try to leave everything and everyone better off than when you found them.

Share your ideas, knowledge and experiences with others. Provoke thoughtful and candid conversations about important matters. Do not be content.

Look for ways to improve the experiences of those we serve. Do not be task driven.

- ✓ Desire and seek constant improvement.
- ✓ Inspire others.
- ✓ Meet or exceed the needs or expectations of others.
- ✓ As you weigh choices, ask, "*Does this help?*" "*Does this make a positive difference?*"
- ✓ Be proactive and vigilant.
- ✓ Look for better ways to serve.
- ✓ Do it right the first time.
- ✓ Strive to be people focused.

- ✓ Offer a solution if you identify a problem.
- ✓ Learn from your mistakes. Report and help us correct them.
- ✓ Focus on improving the details, and excellence will follow.

Improvement and change can start with anyone. Eliminate problems and conflict. Always strive to do your best.

What Do the CORE VALUES Mean to You?

- They require you to always:
 - (a) act with *Integrity, Compassion, and Respect*;
 - (b) hold yourself and others *Accountable*; and
 - (c) try for *Excellence*.
- You are responsible for your choices and for doing the right thing.
- You raise issues, especially if they are inconsistent with our *Core Values*.
- You use our *Core Values* when the right choices are not clear.
- You solve problems.
- You comply with all laws.
- You must know, follow and enforce our Code and Compliance Program.

LAWS & REGULATIONS

You work in a highly regulated industry. Everyone is responsible for complying with applicable laws and regulations. We expect you to understand the laws and regulations that apply to your job and specific areas. If you do not know what is required, ask for help.

No one can ask (or require) you to take part in illegal or unethical conduct (for any reason).

WE COMPLY WITH OUR POLICIES

- ✓ You must obey our policies, procedures and controls.
- ✓ It is your job to be aware of (and to follow) our policies, procedures and controls that relate to you and your job.

Q: *Where do I find our policies and procedures?*

A: *They are found on our Intranet under the tab labelled "Corp. Compliance".*

If you have questions, please ask your supervisor or the Corporate Compliance & Ethics Department.

CARING & BILLING WITH INTEGRITY

We are committed to full compliance with all federal health care program requirements. You must comply with these requirements – whether you are providing care, coding or preparing and submitting claims. *We must protect the public's resources from fraud, abuse and waste. You must report violations of federal healthcare program or private health plan requirements.*

MEDICAL NECESSITY

Clinical Covered Persons may only perform or order medically necessary services. We require our clinical Covered Persons to base their care, treatment and services upon medical necessity and good clinical practices, rather than compensation.

CHART DOCUMENTATION

You must be honest in what you write, say and do. Thorough and accurate charting is essential for coding and billing compliance.

- ✓ Medical record entries must be clear, complete and accurate. If you provide clinical experiences, your entries must reflect the exact level of care, services or treatment provided.
- ✓ We require clinical Covered Persons to make entries at (or near) the time they render care, treatment or services, or as soon as possible thereafter.
- ✓ All medical record entries must be *legible, complete, and dated, timed and authenticated* by the ordering practitioner or person responsible for giving the care.
- ✓ Your entries must also comply with all applicable laws, rules and our policies and procedures. their medical providers.

FRAUD, WASTE & ABUSE

We are committed to detecting and preventing fraud, waste and abuse involving federally funded health care programs. The federal False Claims Act (FCA) and the Federal Deficit Reduction Act protect government health care programs from fraud and abuse. The FCA prohibits us from submitting claims for payment that we know or should know are false. Examples of false claims include duplicate billing; falsely certifying services are medically necessary; billing for services not provided; up-coding; claiming unallowable costs; or taking part in kickbacks.

*See our [Fraud, Waste and Abuse Policy](#)
(SYS:CCE012).*

OVERPAYMENTS

We will timely refund all identified overpayments. If you find a billing error, you must report it. We do not keep payments unless we are legally entitled to retain them.

If you suspect the filing of a false claim or false cost report, tell your chain of supervision, or the Compliance Officer. Or, you may call the Hotline, OIG or KDHE.

I.C.A.R.E. FOR THOSE
WE SERVE

INDIVIDUAL RIGHTS & CHOICES

We devote the necessary time and resources to protect the rights and dignity of our patients, clients and consumers.

We:

- (i) Allow those we serve to freely choose their providers.
- (ii) Treat those we serve with care, concern and respect.
- (iii) Provide economical care while retaining quality. Our consumers, clients and patients are entitled to see our charges. We provide financial assistance to eligible individuals.
- (iv) Inform them of their right to self-determination. We allow competent adults to join in and make their own healthcare decisions. A competent adult has the right to accept or refuse medical care or treatment, to enter advanced directives, make choices about their care and treatment, and to know what may happen if they refuse it.
- (v) Provide impartial access to treatment or accommodations including in the case of

our hospital, emergency care.

- (vi) Obtain informed consent from those we serve, as required by law.
- (vii) Protect their right to privacy and the confidentiality of their medical records.
- (viii) Report abuse or neglect.

We do not discriminate against those we serve for any reason (*e.g.*, because they exercise their right to self-determination, as a result of their specific health-care decisions, or based on race, ethnicity, color, religion, gender, sexual orientation, national origin, socio-economic background or disability).

QUALITY OF CARE & SAFETY

Everyone is responsible for addressing conduct that undermines a Culture of Safety¹. A Culture of Safety requires us to place our patients' and consumers' needs before our own. Safety and quality are our shared responsibility and priority.

We provide the highest quality of care. The health and safety of those we serve are your primary concerns. We encourage teamwork across all disciplines to resolve safety or quality issues.

You must report all errors or other behaviors that might undermine a Culture of Safety or be a deviation from the standard of care. You can report these events without giving us your name via RL6 or the Hotline.

HEALTH INSURANCE PORTABILITY & ACCOUNTABILITY ACT (HIPAA)

Privacy is a fundamental right. You may not use or

¹ A Culture of Safety means the product of individual and group beliefs, values, attitudes, perceptions, competencies, and patterns of behavior that determine our commitment to quality and safety.

disclose protected health information except as permitted or required by HIPAA.

It is important that everyone:

- ✓ Take steps to protect the health information of those we serve by, *e.g.*, complying with our data access and security practices.
- ✓ Only access health information if your job requires it and, if required, only use or disclose the information that is minimally necessary to accomplish the intended purpose.

For more information about HIPAA, you can call our *System Privacy Officer*, or the *System Security Officer*.

DRUG DIVERSION

Only authorized personnel may access and handle prescription drugs, controlled substances and other medical supplies. The misuse or diversion of these items violates our Code.

BOUNDARIES - NO DUAL RELATIONSHIPS

You must avoid situations or relationships that interfere with your objectivity. You must remain unbiased and objective in treating those we serve. You may not enter into any relationship that could impair your competence or effectiveness or that risks exploitation or harm to those we serve.

HOW WE CONDUCT OTHER BUSINESS ACTIVITIES

NON-PROFIT STATUS

Except for HEQ, we do not operate for the financial benefit of private individuals or interests. You may not use the assets of our not-for-profit companies for any private benefit.

POLITICAL ACTIVITY & CONTRIBUTIONS

Various laws restrict the use of our not-for-profit funds for political lobbying activities. You may not use our resources – e.g., time, email, phones or personnel – to fund or engage in political activities.

USE OF OUR ASSETS

You have a duty to protect our assets. These assets include more than just equipment, inventory, or supplies. They include concepts, business strategies and plans, financial data and other information about us. You cannot use our assets for personal gain or for the personal gain of others.

FAIR DEALING

We only use fair and ethical means to conduct our business. You may not take unfair advantage of others. We require you to deal fairly and honestly with those we serve, and with our vendors and payers.

ANTITRUST LAWS

We compete fairly. We comply with all antitrust laws. We do not engage in unfair or illegal competition. We do not restrict competition.

ACCURACY OF OUR RECORDS & REPORTING

You must make accurate, clear and complete records and reports (including paper and electronic documents). You may not alter, falsify, or purposefully omit information from our records or reports. All financial records must fairly and accurately represent actual transactions and conform to generally accepted accounting principles.

You may not create or keep any secret or unrecorded funds, expenditures or other assets. You must enter all transactions in our records. You may not engage in any activity that requires the making of incomplete or fictitious entries or that results in us making any misleading report.

RETENTION OF OUR RECORDS

We retain our records for specific times. Once the retention period expires, you may destroy records unless we need to keep them. For example, you may not alter or destroy records if we are aware of an existing or potential governmental inquiry. We will not destroy these records until the matter is closed. Destruction of records to avoid their discovery in a legal proceeding may constitute a criminal offense.

INELIGIBLE PERSONS

We do not contract with, employ, or bill for services provided by persons or entities that are excluded from participating in government health care programs. Before working with certain vendors, we look into their background to confirm they are not excluded from federal health care program participation. You must promptly tell our HR Department if you have been debarred, excluded, suspended or suffered some other event that would make you an excluded party.

VENDORS

We require our vendors to follow our Code. Vendors include suppliers, contractors, independent contractors, consultants and all other persons or entities with whom we do business, or may do business. They must comply with applicable laws. *We require all vendors and their staffs to register with us when they enter our properties or facilities.* We may terminate our contracts with vendors who do not register or obey our Compliance Program.

USE OF ELECTRONIC MEDIA

Our assets include anything sent or received via our electronic or telephone systems. Electronic data such as emails, instant messages, and voice mail are never private, confidential or personal. We may monitor and access any electronic data stored or sent via our hardware, storage devices, or systems.

See our **Conflicts of Interest Policy**
(SYS:CCE010)

CONFIDENTIAL INFORMATION

You must prevent improper access to or disclosure of our confidential information, *e.g.*, non-public information. Examples include medical staff credentialing, quality measurements, peer review, risk management activities, financial data, projections, passwords, emails, projects, lists of suppliers, wage and salary data, projected revenues, or contracts with health care payers. You may only use this information to do your job. You may not share it with outsiders, or with other internal staff who have no need to know.

Protect this information by:

- ✓ Properly securing your work area, computer, laptop, telephone.
- ✓ Never share your passwords or allow others to log onto your computer.
- ✓ Do not discuss sensitive or confidential information in public places.

CONFLICTS OF INTEREST

You must avoid situations where others may question if you are acting for our benefit or your personal gain. You may not use your position or our property or information to compete against us.

When outside activities or personal interests influence – or appear to influence – you, we require you to remove yourself from the decision-making process (even if you feel you can still make objective

business or clinical decisions). All transactions must be in our best interests, negotiated at arms-length and for fair market value. If a conflict exists, or may exist, or if you need help to avoid one, you must promptly contact the Corporate Compliance and Ethics (CCE) Department.

To avoid conflicts of interest, you should disclose outside activities, financial interests or relationships that are (or give the appearance of) a conflict of interest. Your disclosure must be in writing.

GIFTS

Gifts and other business courtesies (*e.g.*, entertainment, meals, travel) can easily create conflicts of interest. Your business dealings may not be influenced by gifts, rebates, kickbacks, or the like. While acting for us, you should base all of your decisions and dealings on what is best for the organization (not what is best for you or your family).

We do not allow you to accept money or cash equivalents (*e.g.*, gift cards) from anyone. Nor do we allow you to accept or solicit non-monetary gifts or perks. You may not accept or allow close family members to accept gifts, services, or special treatment from others in exchange for a past, current or future business relationship or opportunity. Except in *limited cases*, you may not accept items such as discounts, prizes, tickets, gratuities, transportation, or other personal benefits or favors.

To know when you may accept gifts or other courtesies, consult our policies or the CCE Department.

*See our **Business Courtesies & Vendor Relations Policy** (SYS:CCE008)*

CONTACT WITH AGENCIES OR MEDIA

We only allow certain people to speak with governmental agencies and the media. If a reporter contacts you, refer them to our Director of Communications. If a government official contacts you, promptly call the Chief Executive Officer or Compliance Officer. Only these persons may speak to public officials. It is your choice whether to speak to them on your own behalf.

We cooperate with all lawful requests made by official investigations or audits. We do not withhold, tamper with or fail to provide relevant (non-protected) information.

DEALING WITH REFERRAL SOURCES

- ✓ You may not offer, give or receive anything of value to induce referrals, or to reward any referrals from others.
- ✓ We never offer, give or accept bribes or kickbacks.
- ✓ You may not accept, give or offer anything of value in exchange for any referrals, or in return for buying services or supplies.
- ✓ We require all agreements with referral sources to be in writing.

See also our policies: **Compliance with the Federal Anti-Kickback Statute and Stark Law; Focus Arrangements; Non-Monetary Compensation & Medical Staff Incidental Benefit; and Marketing Physicians.**

OUR WORKPLACE

We are committed to providing you with a workplace that is safe and healthy.

We are committed to diversity, and to a workplace that is free from unlawful discrimination and

harassment. Our commitment to diversity goes beyond race and gender and includes culture, age, sexual orientation, ethnicity, socio-economic background, religion, gender identity, experiences, and disability or other protected classifications. We are committed to diversity because we understand it promotes different perspectives, ways of thinking and problem-solving and it honors each person's unique abilities and experiences.

We require you to be fair, inclusive and respectful to each other.

EMPLOYEE RELATIONS

We are an equal opportunity employer. We conduct our business and provide our services without regard to race, sex, religion, national origin, age, disability, or other classifications prohibited by law.

We do not allow you to engage in illegal or disruptive conduct.

ENVIRONMENT

We protect the environment. We will lessen the impact of our operations on the environment. Each of you must obey safe operating procedures. We must retain and properly dispose of hazardous or contaminated materials.

CONCLUSION

We require you to actively join in and follow our Compliance Program. You must report any conduct that may or does differ from this Code. You may do so without fear of retaliation. This Code sets out acceptable conduct. No person may act (or direct you to act) contrary to our Code. You must obey its standards. To stress its importance, we require you to certify (in writing or electronically) that you have read it, and that you will obey its terms.

If you have questions about our Compliance Program, talk to your chain of supervision, or the Compliance Officer. Or, without giving your name, you may call our Hotline.

The CCE Department is on the first floor of our hospital, across from the HR Department. You can call the Compliance Officer at 665-2203 or 665-2009.

Additional Resources:

Enforcement & Response Policy, SYS:CCE011;
COC Certification

On March 23, 2022 the Board of Directors approved this Code.