

University
HEALTH CARE
ADVANTAGE

University Health Care Advantage, Inc.

Code of Conduct

Approved by Board of Directors on August 11, 2014

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A Message from our President & CEO

As an organization, we are committed to honest and ethical behavior, conducting our business with integrity, and complying with all applicable Federal and State laws and regulations. The practice of behaving honestly, ethically and with integrity is an individual responsibility. We make decisions about how to conduct ourselves every day as we go about our work. Each of us is accountable for the actions that we decide to take.

University Health Care Advantage, Inc.'s *Code of Conduct* is the keystone of its corporate integrity philosophy and communicates its ethical business standards. The *Code of Conduct* serves as a cultural compass for employees, management, vendors and others who interact with the health plan. It is an essential element of our Medicare Compliance Plan. The Medicare Compliance Department was created to oversee our compliance program and to demonstrate our commitment to conducting our business with integrity. The compliance program is a partnership among all of us to make the right business choices.

The *Code of Conduct* is a vital part of how we achieve our mission and vision. It provides guidance to ensure that our work is accomplished in an ethical and legal manner. It emphasizes our common culture of integrity and our responsibility to operate with the highest principles and ethical business standards as we provide services for our members and each other with respect, honesty, compassion, teamwork and excellence.

At University Health Care Advantage, we are each guardians of our reputation for ethical business practices and compliance with laws and regulations. We are committed to delivering high quality services in compliance with our *Code of Conduct*.

Amir Dan Rubin
President and Chief Executive Officer
University Health Care Advantage

Our Medicare Compliance Plan

The *Code of Conduct* is a vital part of how we achieve our mission and vision. University Health Care Advantage has adopted the mission and vision of our parent entity, Stanford Health Care:

The mission of University Health Care Advantage is to care, to educate and to discover.

Our vision is healing humanity through science and compassion, one patient at a time.

University Health Care Advantage, Inc. (UHCA) is committed to compliance with all applicable Federal and State laws, rules and regulations. This commitment permeates all levels of the organization. Our Medicare Compliance Plan was created to ensure that we conduct our business with integrity and in accordance with applicable laws and our policies, as well as to provide a safe environment for raising compliance concerns and questions. The Medicare Compliance Committee oversees the Medicare Compliance Plan and ensures compliance with our *Code of Conduct*. Our Medicare Compliance Plan outlines what we do as an organization to comply with legal and ethical requirements, including the following:

- Setting standards through written policies, procedures and our *Code of Conduct*;
- Communicating standards through awareness, education and training programs;
- Providing a process for reporting potential violations of laws, policies or our *Code of Conduct*;
- Conducting ongoing auditing and monitoring activities;
- Identifying, investigating and responding to potential compliance problems;
- Performing routine sanctions checking to ensure that we are not conducting our business with individuals and entities ineligible to participate in federal healthcare programs;
- Enforcing integrity standards and disciplining non-compliant actions;
- Maintaining an organizational structure that supports the furtherance of the Compliance Integrity Program, including establishment of a Medicare Compliance Committee and appointment of a Chief Compliance Officer who have an independent reporting relationship with the UHCA Board of Directors.

The standards set forth in our *Code of Conduct* apply to UHCA employees, directors, vendors, and subcontractors engaged to provide products or services. The *Code of Conduct* standards require us to follow all applicable laws, rules, regulations as related to the scope of our duties and responsibilities and to maintain a business environment that is committed to integrity and ethical conduct.

Our *Code of Conduct* is the keystone of our Compliance Plan and guides us in carrying out our daily activities within appropriate ethical and legal standards. Our *Code of Conduct* standards are mandatory and must be followed. Anyone who violates laws, policies or our *Code of Conduct* may be disciplined, up

to and including termination. Our *Code of Conduct* is an evolving document that will be updated periodically to respond to changing conditions and to reflect changes in law.

Our *Code of Conduct* is not intended to cover every possible situation that may be encountered. We must comply with all applicable laws, regulations and our policies whether or not specifically addressed in our *Code of Conduct*. In some cases, a subject discussed in our *Code of Conduct* involves such complexity that additional guidance may be needed. In these cases, you should consult with your manager or the Compliance Department for additional guidance.

All employees, officers and directors of University Health Care Advantage must read this entire *Code of Conduct* when you are first hired or appointed, and annually thereafter. Each year, you will be asked to:

- Acknowledge that you have read and understand the *Code* and comply with it,
- Disclose any possible conflicts of interest, and
- Raise concerns you may have about possible *Code* violations.

Our Responsibilities

Our *Code of Conduct* is to be used as a guide if you are confronted with a situation that raises questions about ethical business conduct. If you think a law, policy or our *Code of Conduct* is not being followed, you must report it to our Compliance Department. You should also report it to your supervisor. If you feel uneasy talking to your supervisor, voice your concern to the next supervisory level, up to and including the highest level of management. University Health Care Advantage encourages open and honest discussion of issues with management. We are committed to providing an environment that allows reporting in good faith and without fear of retaliation.

Reporting Concerns

It is very important, as well as required, that you immediately report perceived violation of compliance law, policy, or our *Code of Conduct*. Failure to report may result in disciplinary action, up to and including termination. Our Compliance Department will evaluate all reports promptly, completely and fairly.

You can report compliance concerns in one of the following ways:

- Contact your manager or supervisor. Your manager or supervisor knows you and your job and can often apply his/her business experience to help you make the right decision.
- Contact the Compliance Department directly by calling 510-662-3449. The Compliance Department can help with concerns related to business conduct, integrity, or compliance.
- Email your concern to the Compliance Department at ichow@stanfordmed.org or
- Call the UHCA Compliance Hotline at 1-855-454-9246. The Hotline is available 24 hours a day, and you can make your report anonymously.

If you report a compliance concern, be sure to include information so that the Compliance Department can follow up; such as the location where your concern occurred or is occurring (for example, the office location and department name), the date or dates of any incident, the names and job roles of individuals involved in the concern, a description of your concern, and your name if you are comfortable letting us know. If you are not comfortable leaving your name, you may make an anonymous report by calling the Hotline number above.

Investigation and Resolution Process

Anyone reporting a compliance issue is assured that it will be treated as confidential. The findings of a compliance investigation are confidential to protect all involved in the investigation process. As a result, details and specific findings of a compliance investigation will be shared only on a need-to-know basis. The Compliance and Quality Director ensures that all reports will be thoroughly and fairly investigated and that appropriate action will be taken.

All reported issues are promptly investigated. Investigations are coordinated by the Compliance and Quality Director, and include interviews of pertinent individuals and review of applicable documentation. The Compliance and Quality Director consults with HR and/or management as necessary to conduct the investigation and determine appropriate disciplinary and/or corrective action. In situations where employee misconduct is confirmed, disciplinary action is taken and may include warnings, performance improvement monitoring, and/or other sanctions including termination of employment. In situations where business practices or operations lead to non-compliance, management corrective action plans are required, and may include repayment or reprocessing of impacted claims.

Non-Intimidation and Non-Retaliation Policy

No adverse actions will be taken against someone for good faith participation in the compliance program, including but not limited to reporting potential issues, investigating issues, conducting self-evaluations, audits and remedial actions, and reporting to appropriate officials. University Health Care Advantage has a policy that protects against intimidation or retaliation for reporting a compliance concern in good faith or cooperating with a compliance investigation with good intentions. The non-retaliation policy ensures that no one is penalized for reporting what is honestly believed to be a compliance problem or for honestly participating in a compliance investigation. However, if someone purposely falsifies or misrepresents a report or makes false statements during an investigation, that person will not be protected under this policy. False accusations or statements made in a report or during an investigation, including those made with the intent of harming or retaliating against another person, may result in disciplinary action up to and including termination. Although we have a policy that does not permit retaliation for reporting or cooperating in good faith, it is important to understand that no policy can protect you from applicable consequences if you have broken the law or violated our policies. Breaking the law or violating our policies may result in disciplinary action, up to and including termination, as well as possible state and federal actions and penalties.

Disciplinary Action

Whether you are an employee, manager, supervisor, or officer, you may be disciplined or lose your job if you:

- Do not follow this Code or other University Health Care Advantage policies.
- Break any laws or regulations that apply to University Health Care Advantage.
- Tell an employee to violate the Code, a University Health Care Advantage policy, or a law or a regulation.
- Fail to share information, or provide false information in connection with an investigation, about a violation of the Code, a law or a regulation.
- Retaliate against an employee who reports a suspected violation – regardless of whether the report is made within University Health Care Advantage or to an outside law enforcement or government agency – or who cooperates or helps with an investigation.

External Reporting

Sometimes, University Health Care Advantage may be required to report, or choose to self-report, certain compliance issues to state or federal agencies (including CMS) or a law enforcement agency. When this is the case, the Compliance Department will evaluate the situation and will notify the appropriate state, federal, or law enforcement agencies when applicable. University Health Care Advantage is committed to correcting wrongdoing, whether intentional or inadvertent, wherever it may occur in the organization, and to cooperating fully with government investigations.

Integrity in Business Conduct

Not-For-Profit Tax Exempt Status

University Health Care Advantage is a not-for-profit tax exempt organization under the Internal Revenue Code. Therefore, we are not organized or operated for the benefit of private interests. No organizational earnings may financially benefit any private individual.

Use of Resources and Assets

Our organizational assets and resources are to be used for the purpose of our not-for-profit missions. Physical assets including space, furniture, vehicles, equipment, machinery and supplies may only be used by private individuals and for-profit organizations on a restricted basis with University Health Care Advantage approval in compliance with all federal and state laws. These restrictions include your personal use of organizational assets. Contact the Compliance Department for additional guidance regarding appropriate use of our not-for-profit facilities and assets.

Anti-Trust Laws

University Health Care Advantage competes fairly and complies with Anti-Trust Laws. We do not engage in activities or negotiate agreements that restrain or obstruct competition or illegally share proprietary information with competitors. The illegal obtainment or use of proprietary information from competitors is also strictly prohibited.

Antitrust violations may subject our organization to severe civil and criminal monetary fines, civil liability for treble damages, and injunctions that could impair our ability to compete effectively. Anti-Trust violations may also subject us individually to imprisonment, personal liability, and substantial monetary fines.

We are required not only to comply with the law but also to avoid activities which, though not illegal, may pose unnecessary risks of litigation, government investigation, or injury to our reputation. The following limitations on information exchanges with competitors are designed to aid compliance with Anti-Trust laws and protect our competitive, financial, ethical, and reputational interests.

Except with prior approval from the Compliance and Quality Director, we do not communicate with a competitor, either directly or indirectly, about the following:

- We do not communicate about prices charged for goods or services, including physician services;
- We do not communicate about costs of goods, supplies, equipment, or services, including physician reimbursement rates;

- We do not communicate employee salaries, wages, or benefits, compensation policies, staffing policies, employment contracts or severance agreements;
- We do not communicate terms of equipment, supply or service contracts;
- We do not communicate allocation of customers, services or territories among competitors;
- We do not communicate exclusion of any existing or potential competitor or supplier from the market; and
- We do not communicate joint bidding or joint venture arrangements.

Preventing Fraud, Dishonesty, and Criminal Conduct

Each of us has a responsibility to do our job honestly and in compliance with applicable laws, regulations, and ethics rules. Fraud, dishonesty or criminal conduct by anyone doing work for, or business with, University Health Care Advantage is not allowed. Examples of conduct that is not allowed include:

- Stealing employee or UHCA property.
- Misusing company resources.
- Making false records or reports, such as signing another person's name or altering a document.
- Destroying, changing, falsifying or hiding evidence of any activity that violates this *Code of Conduct*.

If you see or suspect fraud, dishonesty, or criminal conduct, immediately report the situation to the Compliance and Quality Director. You may also report your concern anonymously via the Hotline.

False Claims Act and Deficit Reduction Act

The Federal False Claims Act and Deficit Reduction Act protect government programs such as Medicare, Medicaid, and Tricare from fraud and abuse. It is a violation of the False Claims Act to knowingly submit, or cause another person or entity to submit, false claims for payment of government funds. Additionally, the False Claims Act contains provisions that allow individuals with actual knowledge of alleged false claims to sue on behalf of the government, as well as provide protections against retaliation for individuals taking a false claims action.

It is illegal to submit claims for payment to government programs that we know or should know are false or fraudulent. No specific intent to defraud the government is required for a claim to qualify as a false claim. The False Claims Act defines "knowing" to include not only actual knowledge, but also instances of deliberate ignorance or reckless disregard of the truth or falsity of a claim. Filing false claims may result in damages of up to three times the amount of the government program's loss, fines, imprisonment, entering into a Corporate Integrity Agreement and exclusion from participation in federal and state health care programs.

We are committed to submitting claims that are accurate and truthful. If you know of a false claim, contact our Compliance Department immediately, or call the Hotline to notify the Compliance

Department anonymously. Failure to notify the Compliance Department may lead to disciplinary action, up to and including termination.

Conflicts of Interest

A conflict-of-interest involves any circumstance where your personal activities or interests are advanced at the expense of University Health Care Advantage. These circumstances may be financial or involve some other type of personal interest that conflicts with your professional responsibilities. Since our members and regulators expect us to make decisions that are not biased by personal interests, actual or perceived conflicts of interest may compromise our ability, and the ability of our organizations, to conduct business. They may also pose a risk to the operations and reputation of University Health Care Advantage and our parent organization.

Conflicts-of-interest can often be avoided or mitigated when University Health Care Advantage is aware of potential conflicts. We are required to disclose at the time of hire, promotion or transfer, and no less than annually thereafter, all information about any actual or perceived conflict-of-interest using our Conflict-of-Interest Disclosure Statement form.

We are also required to submit an updated Conflict-of-Interest Disclosure form within ten business days of a material change in our situations that may create an actual or perceived conflict-of-interest. All reported actual or perceived conflicts-of-interest are reviewed on a case-by-case basis. Failure to disclose a conflict of interest may result in disciplinary action, up to and including termination.

You may have a conflict of interest if you, a family member, or a member of your household:

- Has a financial interest in any business, nonprofit, or government entity that is a customer or supplier, or that otherwise does business with University Health Care Advantage, or is one of our competitors.
- Performs work (as an employee, officer, director, consultant or agent) for any of the above entities.
- Benefits personally from opportunities or resources that came to you as a result of your work at University Health Care Advantage.
- Uses company time or assets for personal use or outside activities.
- Has an outside job or interest that interferes with your ability to do your job.

If you believe that you have an actual or potential conflict of interest, report it to your manager and seek guidance from the Compliance and Quality Director.

Gifts and Entertainment

We maintain high ethical standards regarding the offering and acceptance of gifts. Offering or accepting personal gifts may influence our decisions or the decisions of others and may constitute a conflict-of-interest.

The appropriateness of offering or accepting gifts depends on the specific circumstances of the gift and who is offering and receiving it. Never give or take a gift that could be perceived as a bribe or an attempt to influence business decisions. Bribery is illegal and prohibited under University Health Care Advantage policy.

In general, gifts valued at more than \$25 to or from an employee are not appropriate. We may accept perishable items of modest value, such as food or flowers, provided that it is shared with our entire department or unit. Do not accept gifts of cash, cash equivalents, or gift cards from members, providers, or vendors.

Never give or agree to give anything of value to government customers, employees, or third parties to influence the award or renewal of a government contract. No gifts, entertainment, meals, lodging, or travel may be provided to a government official or employee without prior approval.

Consult with the Compliance and Quality Director for specific advice if you are offered a gift or are considering giving a gift.

Excluded Parties

University Health Care Advantage does not hire employees or contract with individuals or organizations excluded from participating in federal healthcare programs. We check all new employees, directors, and FDRS against the Department of Health and Human Services (DHHS) Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) and the General Services Administration (GSA) Excluded Parties Lists System (EPLS), and routinely thereafter.

You have a duty to immediately report any change in your eligibility status to the Compliance Department.

Contact with the Media

All media inquiries should be directed to the Stanford Hospital and Clinics Office of Communications. Additionally, communications with media involving patient information must comply with federal and state privacy laws in order to fulfill our legal and ethical duty to protect patient privacy.

Contracting

University Health Care Advantage negotiates and enters into fair and equitable contractual arrangements with reputable vendors and individuals that meet the needs of our organization. All arrangements must comply with applicable federal and state laws. Prior to executing arrangements for items and services, we verify that all contracted parties are eligible to participate in federal healthcare programs.

Accuracy of Records, Document Retention and Destruction

It is our duty to create and maintain accurate and complete records, as well as to only destroy organizational records, in compliance with federal and state laws and applicable policies.

We keep books, records, and accounts in a way that shows a fair, complete and accurate accounting of all business transactions and use of assets. Our records reflect reasonable detail to show the true nature of expenses and other transactions, who was involved, and any affiliation to University Health Care Advantage or third parties, such as government entities.

We will never alter or falsify a company record. Officer and managers are expected to build and maintain an internal accounting system with controls that:

- Prevent unauthorized, unrecorded or inaccurately recorded transactions.
- Result in preparation of financial statements based on generally accepted accounting principles.

When information is no longer needed, dispose of it in a way that keeps the contents safe and private until the document can be destroyed properly.

University Health Care Advantage policies provide guidance on the proper creation, amendment, maintenance, retention and destruction of organizational records and documents. Contact the Compliance Department for additional guidance.

Privacy of Member Information

Members and their families trust us with highly personal and sensitive information regarding their medical conditions. We maintain member information, including demographic data (such as name, address, date of birth, gender, member ID number) as well as non-public information such as health and/or financial information that must be safeguarded. We recognize the sensitive nature of this information and are committed to protecting member privacy. We do not access member information, internally use member information, or disclose member information outside the organization except as necessary to perform our jobs. We are committed to complying with state and federal privacy laws and to assisting members with exercising their privacy rights.

Complying with our privacy policies includes the following:

- We access, use and disclose only the minimum necessary amount of patient information needed to perform individual job functions;
- We do not discuss member information with others who do not have a job-related need to know reason, including co-workers, colleagues, family and friends;
- We do not share our user IDs or passwords to our electronic systems and we log-off when we step away from our computers; what is done under your ID/password is your responsibility;
- We assess our surroundings when speaking with or about members, and speak quietly;
- We do not mention or make reference to any members whatsoever on personal social networking sites or blogs;
- We verify written member information to ensure that we do not mix one member's information with another's, that fax numbers are accurate and entered correctly before sending, and that address labels are correct;

- We dispose of written member information in confidential disposal bins and we contact IT for proper disposal of electronic member information;
- When sending member information via email we do not put patient information in the subject line and we encrypt the email;
- We only use UHCA-approved personal devices, flash drives or cameras to store, download or capture member information, including photographs;
- We report all privacy concerns or potential privacy policy violations immediately to our Compliance Department.

Confidential Business Information

Confidential information about our organization's strategy and operations is a valuable asset. Although you may use confidential business information as a necessary tool to perform your job, it must not be shared with others outside the organization or internally with those who do not need to know about the information to perform their jobs. Confidential and proprietary business information covers anything related to our business or operations that is not publically known, such as personnel files, wage and salary information, financial information, billing and pricing information, cost data, strategic plans, marketing strategies, projected earnings, techniques, employee lists, information related to investigations, disciplinary actions, supplier and contractor information, information related to acquisitions or joint ventures, policies and procedures, clinical and patient information, computer and system login IDs and passwords, emails, and proprietary computer software.

Requests for Information Pursuant to an Investigation or Legal Proceeding

We promptly and appropriately respond to requests for information pursuant to a government investigation or legal proceeding. These requests may come in the form of a subpoena, summons, warrant, letter or verbal request. Only certain people are authorized to accept them on behalf of the organization.

Accepting or acting on these requests may expose the organization, and sometimes you as an individual, to significant fines or other types of criminal, civil or administrative penalties. If you are asked to accept a legal document or to share information of any kind for any reason, immediately consult with your supervisor or the Compliance and Quality Director.

Political Contributions and Activities

As a not-for-profit organization, University Health Care Advantage is restricted in the amount of political lobbying activities that we conduct. We are not permitted to influence legislation that is not directly related to our mission. In addition, we may not endorse or intervene on behalf of any candidate for public office, and they may not solicit funds or endorsements from us in support of political issues or causes.

As individuals, we may exercise our civil liberties by participating, advocating or supporting the political candidates and causes of our choice outside of the workplace. We never engage in or promote the

following activities while at University Health Care Advantage or while representing our organization at off-site events and activities, unless those activities are directly related to our mission:

- We do not use company time or assets to perform political activities;
- We do not speak on behalf of our organizations supporting political candidates or causes;
- We do not use either organization's name or logo on letters or other written materials supporting political candidates or causes;
- We do not distribute political literature; and
- We do not wear political campaign clothing, buttons or symbols representing a political candidate or cause, excluding health initiatives or those defined as "protected activities" by the National Labor Relations Board.

Integrity in the Workplace

Diversity and Equal Employment Opportunity

We promote diversity in our workforce at all levels of the organization. We are committed to providing an inclusive work environment where everyone is treated with fairness, dignity and respect. We make ourselves accountable to one another for the manner in which we treat one another and for the manner in which people around us are treated. We strive to create and maintain a setting in which we celebrate cultural and other differences and consider them strengths of the organization.

University Health Care Advantage is an equal opportunity workforce and no one shall discriminate against any individual with regard to race, color, religion, sex, national origin, age, disability, sexual orientation, veteran status or any other classification protected by law, with respect to any offer, term or condition, of employment. We make reasonable accommodations to the known physical and mental limitations of qualified individuals with disabilities. In all of our personnel actions, we comply with applicable laws and regulations related to nondiscrimination.

Workplace Harassment

As an organization, we are committed to maintaining an environment that is free of unlawful harassment and intimidation. Harassment includes any behavior or conduct that is based on a protected characteristic and that unreasonably interferes with an individual's work performance or creates an intimidating, hostile or offensive work environment.

Some examples of harassment are:

- Disparaging or abusive words or phrases;
- Persisting in the use of any name or term which you know may be offensive to that individual; or
- Sabotaging someone's work.

Harassment includes sexual harassment. The determination of what constitutes sexual harassment may vary with the particular circumstances. In general, unwelcome sexual advances, requests for sexual favors, and other verbal, visual or physical conduct of a sexual nature may constitute sexual harassment when:

- Submission to such behavior is made a term or condition of employment;
- Submission to or rejection of such behavior is used as a basis for making employment decisions;
- or
- Such conduct unreasonably interferes with someone's work performance or creates an intimidating, hostile, or offensive work environment.

Some examples of sexual harassment may be:

- Making sexual comments about a person's body;
- Repeatedly asking for a date after that person has said no;
- Discussing someone's sex life, including your own;
- Staring at someone;
- Making facial expressions, like winking, throwing kisses, licking lips; or
- Looking a person up and down.

The organization will take appropriate action to prevent unlawful harassment, including sexual harassment. People who engage in such behavior will be subject to corrective action, up to and including termination. If you believe you are being harassed, or witness behavior you feel is harassment, you should contact one of the following:

- Your immediate supervisor or, in cases involving behavior of your immediate supervisor, the next level supervisor or manager;
- The Human Resources Department; or
- The Compliance Hotline, including reporting concerns anonymously.

Workplace Violence and Workplace Safety

University Health Care Advantage has zero tolerance for threats or acts of violence in the workplace. Workplace violence includes physical assaults or actions or statements that give us reasonable cause to believe that our personal safety or the safety of others may be at risk. Employees who engage in physically abusive and/or violent behavior (even those made in jest) shall be subject to disciplinary action up to and including removal from the facility, termination of employment and/or referral to appropriate law enforcement agencies. If you perceive a certain behavior as physically threatening or intimidating, you should immediately report it to:

- Your immediate supervisor or, in cases involving behavior of your immediate supervisor, the next level supervisor or manager;
- The Human Resources Department; or
- The Compliance Hotline, including reporting concerns anonymously.

In the event of an emergency situation, call 911. In cases of imminent danger of bodily harm, call 911 and then call a second person to assist as needed. Reported events will be investigated and, if warranted, appropriate support will be provided to the victim(s).

As part of our overall commitment to maintain a healthy and safe environment for our employees and others, we strive to keep our facilities physically secure. We are issued photo ID badges that must be worn above the waist at all times. It is your responsibility to keep your badge in your possession and not let any other person borrow it. If it is lost or stolen, notify your supervisor immediately. In addition, be aware of your surroundings and report any suspicious person or activity to your supervisor.

Workplace Health and Safety

The use of illegal drugs and abuse of controlled substances in the workplace is prohibited. As a condition of employment, any involvement in the unlawful use, sale, manufacture, distribution or possession of controlled substances, illicit drugs and/or unauthorized use of alcohol in the workplace or working under the influence of such substances is prohibited. We encourage employees with alcohol or drug dependencies to seek treatment and/or rehabilitation.

Hiring of Current and Former Government Employees

Complex legal and ethical limitations exist in the recruitment and employment of current or former federal government employees. If we hire former Fiscal Intermediary, Carrier, or Medicare Administrative Contractor personnel, we are required in certain instances to notify the U.S. Department of Health and Human Services within 30 days of the first day of employment. Each situation should be evaluated on an individual basis to ensure that we comply with this and other U.S. Government Conflict-of-Interest laws. Human Resources should be consulted before any discussions of employment with these individuals may occur.

Guidance for Ethical Decision-Making

Our *Code of Conduct* helps us to make ethical business decisions. However, it is not designed to address every possible issue. You may face a situation where the right course of action is unclear. Ask yourself the following questions when you are unsure of what to do:

- Is it inconsistent with our mission and values?
- Is it illegal?
- Is it unethical?
- Could it harm members?
- Could it harm our co-workers, colleagues, or physicians?
- Could it harm government programs?
- Could it harm our financial health?
- Would our organization be compromised or embarrassed if it became public knowledge?
- Would we be uncomfortable reading about it in the newspaper?
- Is it unfair or inappropriate?
- Could it adversely impact our organization if everyone did it?
- Is it inconsistent with our policies or our Code of Conduct?

If you are still unsure what decision to make or what action to take, talk to your supervisor or consult with the Compliance Department.

It is critical that our Compliance Integrity Program is effectively communicated throughout all levels of the organization. Compliance is the responsibility of each of us. The Compliance Department welcomes constructive input regarding its Compliance Integrity Program and our *Code of Conduct*.