



MEADOWS HEALTH

Code of Conduct

Message from the President and Chief Executive Officer and Chairmen of the Board

Meadows Health's mission is to deliver high-quality, patient-focused healthcare. It is essential that we provide these services ethically and in compliance with applicable laws and regulations in every respect. Integrity in the care delivery to our patients and in the way we conduct business every day is an imperative in today's healthcare environment. More importantly, it is simply the right thing to do for our patients and for everyone we touch through our services.

This Code of Conduct firmly establishes our unwavering commitment to promote ethical and legal business practices as well as our intent to timely and fully respond when areas of non-compliance are identified. The Code of Conduct outlined in the following pages sets the basic standards of conduct we must follow as we fulfill our primary purpose of caring for our patients. It applies to every Meadows Health employee, Medical Staff member, contractor, vendor, volunteer, and Board Member. The Code of Conduct also contains resources to assist you in answering questions about appropriate behaviors in the workplace.

Of course, no document can address every situation which may be encountered. In some instances, common sense, morals, conscience and good judgment must be your guiding forces. If you are unclear about something or believe the Code has been violated, you should immediately contact your direct supervisor, the Chief Compliance Officer, a member of Administration or Human Resources. You can also call the Compliance Hotline at 1-866-326-6759 or visit our website at www.meadowsregional.ethicspoint.com. Your concern will be thoroughly and confidentially reviewed, and actions will be taken to correct any identified unethical or illegal behavior or behavior that is inconsistent with the Code of Conduct contained herein. You have our personal assurance and commitment there will be no retribution for raising concerns or reporting possible improper conduct.

We thank you for your commitment and dedication in caring for our patients and to the betterment of our health system. It is incumbent upon each one of us to ensure that we remain compliant and consistent with current healthcare regulations as well as the values that define our organization. Consequently, we ask that you help ensure the consistent application of our organization's shared values and standards set forth in the Code of Conduct.

J. Alan Kent

Ronnie L. Stewart

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President & CEO

Chairman, MRMC

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Mission, Vision and Values:

The mission of Meadows Health (MRMC) is to provide quality healthcare to our community. Our Vision is to be a regional center of excellence.

Our Values – “STACIES”

- Safety – Your safety is our first priority
- Teamwork - Everything is possible through teamwork
- Accountability - We believe in taking accountability for our actions
- Caring – We are caring & have compassion for others
- Integrity – We are honest and have strong moral principles
- Excellence - We strive for excellence in everything we do
- Stewardship – We take ownership in our roles & responsibilities

Purpose of the Code of Conduct

The Code of Conduct summarizes our organizations policies and beliefs for proper business conduct and supports our Mission and Values.

Meadows Health Code of Conduct applies to every member of Meadows Health—Board members, administration, Medical Staff members, volunteers, employees, vendors, students and independent contractors. All members of Meadows Health must abide by the Code of Conduct. For employees, abiding by this Code of Conduct is a condition of employment. Employees violating the Code of Conduct will face disciplinary action, which may include termination, depending upon the severity of the violation committed. Independent agents violating the standards established in the Code of Conduct will face termination of their business relationship with Meadows Health. Always remember that the Code of Conduct is intended to serve as a guide in directing the ethical and legal conduct of our organization. Because it is impossible to discuss every situation that an individual may face in the course of business, we encourage you to use your personal judgment and common sense in selecting the best course of action. We also encourage you to bring forward all questions regarding the Code of Conduct and other policies, if you believe that a certain policy or practice is not in the best interest of a patient, employee or the Organization.

All members of our system are responsible for seeking additional guidance or direction for business-related ethical issues that may not be covered in the Code of Conduct. To provide additional guidance, we have developed a set of compliance policies and procedures that supplement many of the principles found in the Code of Conduct.

Compliance Oversight and Management

The MRMC Compliance Program foundation rest on the support of multiple individuals and committees. The Chief Compliance Officer (CCO) provides management and oversight for the development and implementation of the Compliance Program. The Compliance Committee is responsible for setting the direction of the Compliance Program, receiving reports regarding

monitoring and auditing within the program and making recommendations. The Board provides guidance regarding the direction of MRMC's Compliance Program and receives regular reports regarding the status and welfare of the Program.

Code of Ethics for Senior Managers

The President and CEO, as well as other Senior Managers, should model all provisions of the Code of Conduct. They shall promptly bring to the attention of the Board any information they may have concerning significant deficiencies in the design or operation of internal controls that could adversely affect the organization. The MRMC Executive Committee shall determine appropriate actions to be taken in the event of suspected or apparent violations of the Code by the President and CEO as well as other Senior Managers.

Leadership Expectations and Responsibilities

We expect all employees with supervisory responsibility to exercise their responsibilities in a kind, sensitive, thoughtful and respectful manner. We expect each leader to create and foster a culture of safety, integrity and compliance where healthcare workers are able to candidly approach each other with concerns and or ideas. We expect leadership to ensure all department members have sufficient information to comply with laws, regulations and policies. We also expect our leaders to adopt, emulate and develop our values enthusiastically throughout their areas of responsibility.

Patient Services

Patient Safety and Quality of Care

We must provide compassionate, high-quality healthcare services in a cost-effective manner to those we serve. We compare our performance against benchmarks and best practices to measure the quality of patient care. Those benchmarks and best practices include, but are not limited to: the Conditions of Participation of the Centers for Medicare and Medicaid Services (CMS), DNV standards and the principles of the Leapfrog Group for Patient Safety. Any lapses in patient safety or quality of patient care should be immediately reported to your supervisor at your care site or to the Quality Department.

Patient Rights

We must treat all patients with dignity, respect and courtesy. In all circumstances, we must treat patients in a manner giving respect to their background, culture, religion and heritage. Cultural and religious beliefs of employees involved in patient care areas will be respected as well. Patients (and/or those involved in their care) will be involved in decisions regarding the care that we deliver to the extent that such involvement is practical and possible. We will ensure all patients are informed about medical alternatives and the risks associated with the care they are seeking. Each patient is provided with a written statement of these patient rights and privacy practices. This statement includes the patient's right to make decisions regarding medical care. In addition, patients are provided information regarding their right to make advance directive decisions.

Admission and Treatment

We provide services only to those patients to whom care can safely be provided with the resources available to the organization. We will consistently follow well-designed standards of care based upon the needs of the patient. Patient admission, transfer and discharge decisions are made as a result of an integrated care planning effort including the patient and a multi-disciplinary healthcare team. We provide care that is of comparable quality regardless of the setting in which that care is provided. We must always protect the integrity of clinical decision-making regardless of how the hospital/MRMC is compensated.

Workplace Conduct and Employment Practices

Conflicts of Interest

We recognize that the potential for conflicts of interest exists at all levels within the organization. It is our policy that all Medical Staff, Senior Management, leadership, Board members and others in a position to make purchases for the organization submit a conflict of interest disclosure form or questionnaire. In the event a potential conflict of interest has a direct implication for patient care, disclosure policies will be followed. Employees should avoid conflicts of interest that occur when the employee's position with Meadows Health personally benefits the employee or a member of their family, at the expense of Meadows Health. Additionally, no one should enlist the assistance of an individual or company in agreement or exchange for special favors. Physicians, employees and Board Members must avoid personal involvement with an enterprise that is a vendor or business associate of Meadows Health. Such involvement is defined as a material financial investment or a significant, decision-making position within the enterprise such as owner, official or Board director. Rules governing involvement in outside enterprises apply also to family members residing in the physician, employee or Board Member's household. Involvement with such an enterprise must be fully reported to management. We encourage employees to be involved in community, civic and professional activities; however, employees participating in these activities must ensure that no actual or perceived conflict of interest exists between their employment and their involvement in community affairs, whether appointed, elected, paid or voluntary. Any employee called upon by an outside group to make a decision, which affects our organization, should abstain from voting or making the decision. (For additional information, refer to the Conflicts of Interest Policy located on the electronic policy system)

Social Media

Meadows Health recognizes that many employees use social media. Social media includes all types of postings on the Internet such as Facebook®, Instagram®, Snapchat® or LinkedIn®; blogs and other on-line journals and diaries; bulletin boards and chat rooms; "micro blogging" such as Twitter®; the posting of videos on YouTube® and similar media. Employees may not engage in social media using any of Meadows Health electronic resources such as computer work stations, unless authorized to do so. Use of social media is subject to all policies concerning patient confidentiality, all organizational policies, and Meadows Health Code of Conduct. Those who engage in social media should be mindful that their postings, even if done off premises and while off duty, could affect, either positively or negatively, Meadows Health interests or

reputation. You are specifically prohibited from disclosing any information about Meadows Health patients, including the fact that a particular individual is a patient at Meadows Health.

Outside Employment

Employees must first obtain approval from their supervisor before accepting a second job with another healthcare provider, an outside company that conducts business with Meadows Health or before providing any type of expert testimony or other consulting work. This policy includes an employee's involvement as a consultant or member of a competing organization's board of directors. Employees are not allowed to ask for additional personal work from patients, suppliers or other individuals and groups with whom Meadows Health does business.

Health and Safety

Meadows Health complies with applicable government regulations and rules relative to workplace health and safety. Together, we are responsible for maintaining a safe, healthy work environment. It is important that employees immediately report workplace injuries to their supervisor. Situations presenting a potential workplace hazard should be reported to the safety officer or the area's immediate supervisor as quickly as possible so that corrective actions can be implemented. We comply with all environmental laws, regulations and requirements for the proper handling of hazardous waste material. Employees are required to immediately alert supervisors of unsafe situations related to hazardous substances or the improper disposal of medical waste. Meadows Health is a Tobacco-Free Environment. Using tobacco products inside our facilities or on adjacent grounds is prohibited. Anyone violating this policy will be subject to disciplinary action or termination of the business relationship with Meadows Health.

Equal Employment Opportunity and Diversity

It is Meadows Health policy to provide equal employment opportunities to all qualified applicants without regard to race, color, religion, sex, national origin, age, marital status, sexual orientation, handicap, veteran status or other factors that are unrelated to the organization's business operations. Meadows Health provides a work environment that allows mutual success and respect for both the organization and its employees. All employees are expected to comply with this policy and treat each other with respect in terms of privacy, physical differences, racial differences, religious differences and personality differences.

Former Employees

Former employees of our organization now working with vendors or other business associates of Meadows Health must receive no special or favorable treatment when they are representing the other party. Confidentiality rules governing the sharing of information about Meadows Health or patients must be strictly adhered to.

Controlled Substances and Substance Abuse

Employees and vendor representatives are expected to perform their work assignments free from the influence of drugs or alcohol. Reporting to work while under the influence of drugs or alcohol, having these substances in one's possession or using or selling such substances during work hours or while on Meadows Health property, is strictly forbidden. Prescription and over-the-counter drugs can, at times, alter a person's judgment. If an employee or vendor

representative feels a medication they have taken is affecting their ability to perform their job duties, that person should immediately notify their supervisor. Additionally, it is unlawful for employees with access to pharmacy supplies to remove drug supplies for any unauthorized purpose. Prescription and controlled medications must be handled by authorized individuals only. If you become aware of inappropriate handling or security of drugs or controlled substances, this must be reported to your supervisor immediately. Management reserves the right to conduct random drug tests on its employees. In addition, MRMC has implemented other drug screening programs to detect and deter the inappropriate use of drugs in the workplace.

Workplace Violence and Harassment

Meadows Health does not tolerate harassment of any kind specifically including religious, gender and racial harassment. Harassment includes physical, mental and verbal abuse, in addition to sexual harassment. Sexual harassment includes, but is not limited to, sexual advances or request for sexual favors that can be in conjunction with employment decisions or physical actions of a sexual nature that are inappropriate or uncomfortable for another individual. Harassment also includes work place violence which is defined as theft, stalking, terrorism and hate crimes. Anyone who experiences or observes any form of harassment should report this to their supervisor, HR Director or CCO immediately. Meadows Health will not tolerate employees making threats to other individuals, exhibiting violent behavior, destroying the property of the organization or of another individual, or possessing a weapon of any type not authorized by Meadows Health.

Hiring Practices

It is Meadows Health policy and the responsibility of Human Resources to fill every job opening with the best available, most qualified applicant. The organization encourages promotion from within before soliciting applications from the general public. Extreme care, fairness and respect will be used in recruiting and hiring.

MRMC supports the principles of the Equal Employment Opportunity Commission and Section 1557 of the Patient Protection and Affordable Care Act and will not discriminate with respect to race, color, religion, sex, national origin, age, sexual orientation, disability, or any other basis prohibited by Federal, State, or local laws. MRMC will not tolerate harassment of its employees or agents by other employees or agents.

Ineligible Persons

MRMC may not contract, employ or credential any Ineligible Person or any individual or entity currently excluded on a federal or state exclusion list or who are listed on the U.S. Department of the Treasury Specially Designated Nationals and Blocked Persons List. Additionally, pending the resolution of any criminal charges or proposed debarment or exclusion, individuals and entities with whom MRMC currently contracts, employs or credentials who are charged with criminal offenses related to health care, or proposed for debarment or exclusion, must be removed from direct responsibility for or involvement in any federally-funded health care Program. If resolution results in conviction, debarment or exclusion of the individual or entity, MRMC must immediately cease contracting, employing or credentialing that Ineligible Person.

The Human Resources Department, Materials Management and the Medical Staff Office is responsible for screening all potential contractors, employees and credentialed individuals prior to contracting, employing or credentialing to determine their eligibility. The Compliance Office is responsible to assure screening of all contractors, employees and credentialed individuals occurs on a monthly basis. Vendors and privileged practitioners are required to report to MRMC if they become excluded, debarred or ineligible to participate in Federal healthcare programs.

Copyright Laws

We respect and follow copyright laws regarding the copying and distribution of books, articles, music, videos, software and other materials.

Personal Use of Company Resources

The Organization's assets are to be utilized for business-related purposes. As a general rule, the personal use of company assets is prohibited. However, occasional incidental use of readily available resources such as telephones and copy machines is left to management's discretion for their employees. Any community or charitable use of the Organization's resources must be approved in advance by a member of senior management. It is expressly forbidden to use the Organization's resources for personal or financial gain unrelated to Meadows Health business.

License and Certification

Employees, independent contractors and credentialed practitioners who require professional licenses, certifications or other credentials are responsible for maintaining a current status of their credentials and shall comply with federal and state requirements applicable to their specific disciplines. No employee or contractor requiring professional licenses, certification or other credentials will be allowed to perform his or her job without meeting this requirement.

Electronic Media and Equipment

All communication systems including but not limited to computers, electronic mail, intranet, internet access, telephones and voice mail are the property of Meadows Health and are to be used for business purposes. These forms of communication should be used for exchanging information related to business operations and not for the exchange of gossip, entertainment, personal ads or social purposes.

Users of Meadows Health computer and telephone systems have no right to privacy concerning anything communicated, created, stored, sent or received on these systems. In accordance with Meadows Health policies, the Organization reserves the right to monitor and or access communications usage and content. It is unlawful for software purchased by or maintained on Meadows Health equipment to be copied and distributed when in violation of copyright and licensing laws.

Research, Investigations and Clinical Trials

Meadows Health must comply with all federal and state laws regarding research, investigation and clinical trials conducted by our physicians and professional staff. There will be no tolerance for misconduct such as incorrect billing, fabricating or changing results, failing to identify and

appropriately deal with investigators or institutional conflicts of interest, or conducting research without Institutional Review Board (IRB) and the MRMC Medical Executive Committee approval. Patient safety and rights are of primary concern during research and maintenance of accurate written and oral communication is required.

Physicians and Other Healthcare Providers

Federal and state laws govern the relationship between Meadows Health and physicians and other healthcare providers who may refer patients to Meadows Health. It is important that those employees who interact with physicians and other healthcare providers, particularly those employees involved in making payments for services rendered, providing space or services, recruiting to the community and arranging for physicians and other healthcare providers to serve in leadership positions, are aware of and follow these laws, regulations and policies.

Any arrangement with a physician must be structured to ensure compliance with legal requirements, policy and procedures. Such arrangements must be in writing and a review by the Legal Department and/or Compliance Department is required prior to incurring any obligation resulting in payments being made.

Meadows Health does not pay for referrals. We accept patient referrals based on the patient's medical needs and our ability to render services. We do not take into account the volume or value of the referrals that a provider makes when making patient referrals to another healthcare provider. We do not accept payment for referrals Meadows Health makes to other healthcare providers.

Extending Business Courtesies & Tokens of Appreciation to Referral and Potential Referral Sources: Physicians & Other Healthcare Providers

This section is applicable to any entertainment, benefit/gift or token of appreciation involving physicians or other persons who are in a position to refer patients to Meadows Health (Referral Sources). We prohibit the use of benefits/gifts to influence another party with whom business is currently done or being sought. Members of management interested in extending a token of appreciation are required to request permission and identify recipients, in advance through the CCO and/or CEO. Any approved benefit/gift is tracked by the Compliance Department.

Benefits/gifts cannot be cash or cash equivalent such as gift certificates or cards that can be exchanged in whole or in part for cash. Vouchers that may be exchanged only for a particular item or service are not considered cash equivalent (e.g. voucher for a car wash). The benefit/gift may not be solicited and each occurrence must be less than \$35.00 and the total annual value of all benefits/gifts must be less than \$416.00 per year, unless approved in writing by the CCO. These amounts includes benefits/gifts to their immediate family members. A tracking mechanism is maintained by the CCO to track benefits/gifts to potential and current Referral Sources and their immediate family members.

Anyone giving a benefit/gift to one or more potential Referral Sources must submit a completed Physician Non-Monetary Benefit/Gift Disclosure Form detailing information such as date given, purpose of the benefit/gift, benefit/gift's value, recipient's name and name of the Meadows Health Senior Executive approving the benefit/gift, in addition to other information, to the CCO. If you are not sure if your benefit/gift, when added to all the other benefits/gifts received by a Referral Source will exceed the annual limit, call the CCO before buying or giving the benefit/gift. Meadows Health may provide Physicians with certain limited incidental benefits such as those specified in the physician's employment agreement or typically provided to Referral Sources regardless of whether they make referrals to Meadows Health or generate other business with Meadows Health. In addition, MH may provide incidental benefits in the form of items/services (not including cash or cash equivalents) to a member of the medical staff when the item/services meet all the following conditions:

- The item/service is provided to all members of the medical staff practicing in the same specialty without regard to the volume or value of referrals.
- Except with respect to identification of medical staff on a hospital Web site or in hospital advertising, the item/service is provided only during periods when the medical staff members are caring for patients or on other hospital business.
- The item/service is provided by the hospital and used by the medical staff members only on the hospital's campus.
- The item/service is reasonably related to the provision of, or designed to facilitate directly or indirectly the delivery of, medical services at the hospital.
- The item/service is of low value, i.e. \$34.00.
- The item/service is not determined in any manner that takes into account the volume or value of referrals or other business generate between the parties.
- The item/service does not violate the federal Anti-kickback statute, section 1128B of the Social Security Act or any federal or state law or regulation governing billing or claims submission.

Vendors & Other Business Associates

Receiving and Extending Business Courtesies & Tokens of Appreciation to Referral and Potential Referral Sources: Vendors & Other Business Associates (non-referral sources such as vendors and other business associates that do not refer patients.)

General

Meadows Health requires prior approval for all agreements involving vendors and other non-referral sources. Contact your supervisor for further information. Employees should use sound

judgment in avoiding the offering or receiving of money, goods, services or favors. The purpose of receiving or extending business courtesies must not be to induce any favorable business advantage or actions and should never be solicited.

Employees Receiving Business Courtesies

Gifts: As a general rule, employees are discouraged from a current or potential business associate. Gifts of a personal nature, including cash, should never be accepted or solicited from patients or their family members. Perishable or consumable gifts, such as a cookie tray and floral arrangements given to a department or group, are not subject to any specific dollar limit. (Please see Human Resources Policy: Prohibition against Gifts, Gratuities and Tips & Compliance Policy: Business Gifts and Entertainment Policy for more details.)

Meals and Entertainment: The \$75.00 limit does not apply when accompanying a current or potential business associate or a potential Referral Source to events. When accepting an invitation to an event, topics of a business nature must be discussed and, as a general rule, this event should not exceed \$150.00 per event, per person. Such business entertainment per individual must be infrequent. Infrequent is generally defined as not more than three times per year. Never accept lodging or travel without prior written approval from senior management.

These limits do not apply to employees participating in company-sponsored events such as Sweet Onion Classic and other MRMC sponsored fundraising events.

Employees Extending Business Courtesies to Others

Benefits/Gifts: Management may provide Benefits/Gifts to volunteers or current or potential business associates (cannot be a government employee) must not exceed \$75.00 per year, per recipient. The manager may give gift certificates but may never give cash. There may be occasional exceptions to the \$75.00 limit in recognition of the efforts of those who have spent significant amounts of volunteer time on behalf of Meadows Health. These exceptions must be approved in advance, in writing by a member of senior management.

Meal and Entertainment: There may be occasions when a member of management wishes to extend to a current or potential business associate an invitation to attend a social event. During these events, topics of a business nature must be discussed. These events must not include expenses paid for any travel cost or overnight lodging. The cost must be reasonable and appropriate which, as a general rule, will not exceed \$150.00 per event, per person. Such business entertainment must be infrequent which, as a general rule, means not more than three times per year. Departures from the \$150.00 guideline are highly discouraged.

When giving recovery benefits/gifts in an effort to improve customer relations, any benefits/gifts to a Medicare or Medicaid beneficiary must not exceed \$15.00 per item nor total more than \$75.00 per year per recipient.

Laws, Regulations and Standards

Fraud and Abuse Prevention and Whistleblower Protection

The Medicare/Medicaid fraud and abuse provisions make it a crime for a person to offer or pay someone else an incentive for referring Medicare or Medicaid patients. These provisions also make it illegal to file a false claim for Medicare or Medicaid reimbursement. No employee should ever receive, offer or pay funds, incentives or anything of value to another person or medical facility in exchange for a patient referral. Meadows Health is committed to complying with the False Claims Act and to detecting and preventing fraud, waste and abuse. The first step in the prevention of fraud, waste and abuse is to ensure that all documents submitted by Meadows Health to any government entity are truthful and accurate. Individuals responsible for preparing, reviewing and submitting such documents must exercise due diligence and take all actions reasonably necessary to ensure that government submissions are truthful and accurate, to the best of their knowledge. Employees, officers, directors, contractors and all other Meadows Health members must never make a deliberate misrepresentation concerning Meadows Health or its business operations. No employee, officer, director, contractor or any other Meadows Health member may create, or assist another in creating, a false or misleading statement in a document submitted to a government entity. If you believe that a document Meadows Health intends to submit or previously has submitted to the government is inaccurate, you have a duty to disclose this information and discuss your concerns with your supervisor. In some situations, it may not be appropriate or possible to speak with your supervisor or you may not feel comfortable doing so. In these situations, you should discuss your concerns with Human Resources or the CCO. Meadows Health will investigate all complaints of fraud, abuse or waste promptly and determine appropriate corrective action. Meadows Health will not retaliate against any employee, officer, director or other Meadows Health member who raises legitimate concerns of fraud, abuse or waste in an appropriate manner. If you believe that you have been retaliated against, you should provide a written or verbal complaint to your immediate supervisor, Human Resources or Compliance Officer as soon as possible. If Meadows Health determines that an individual has suffered retaliation, Meadows Health will take immediate, effective remedial action to remedy the retaliation. Meadows Health will also take action to deter any future retaliation.

Identity Theft (Red Flags Rule)

Meadows Health has specific procedures to detect and prevent identity theft. If you work with information that is subject to theft, such as social security numbers, birthdates, driver's license numbers, etc., you should be familiar with Meadows Health identity theft policies and procedures. Possible "Red Flags" which may indicate an identity theft include but are not limited to, a photo ID that does not match the person, family members or friends calling the patient by a different name than was provided at registration, personal information that does not match information given on a previous admission (i.e. social security number, date of birth, etc.) or a person presenting an identity that has been flagged in the system. All employees need to be aware of these Red Flags and report suspected activity to a supervisor or the Chief Privacy Officer.

HIPAA (Patient Information and Confidentiality)

Meadows Health is committed to protecting the privacy of our patients' Protected Health Information (PHI); providing for the physical and electronic security of PHI; simplifying billing and other transactions with standardized identifiers, code sets and electronic transactions; and supporting the rights of patients to access their PHI and to have some control over the uses of their PHI. We must never disclose confidential information that violates the privacy and rights of our patients. In compliance with HIPAA, we do not disclose or discuss patient information unless necessary for patient care or required by law. Consistent with our privacy and security policies and procedures, no employee, affiliated physician or other business associate has the right to any patient information other than what is necessary to perform his or her job. Meadows Health will follow the guidelines for tracking and reporting any breach. Meadows Health members are limited in their ability to use the MHR to access their own PHI*. They must request their records through the same process as any other patient, by contacting Release of Information in the Health Information Management (HIM) Department. Employees should not access PHI of their spouse, family members*, friends, church members, coworkers, neighbors, etc., unless they are directly involved in an authorized business activity for the organization. *Please see the Compliance Policy: Employees/Workforce Members Viewing Their Own Medical Records/Billing Record for detail.

Accreditation and Surveys

Meadows Health will deal with all accrediting bodies in an open and honest manner. Employees must respond to government agency inquiries by providing accurate information. Any Meadows Health member who has concerns about the safety or quality of care provided by the Organization is encouraged to notify a supervisor. Leadership is committed to addressing these concerns; however, if a Meadows Health member so chooses, he/she may report this concern to The DNV-GL or any other appropriate regulatory agency. The individual reporting the concern is assured that no disciplinary action will be taken because they reported a safety or quality of care concern.

EMTALA

Meadows Health follows the Emergency Medical Treatment & Labor Act (EMTALA) to ensure public access to emergency services regardless of ability to pay. Section 1867 of the Social Security Act imposes specific obligations on Medicare-participating hospitals that offer emergency services to provide a medical screening examination (MSE) when a request is made for examination or treatment for an emergency medical condition (EMC), including active labor, regardless of an individual's ability to pay. Hospitals are then required to provide stabilizing treatment for patients with EMCs. If a hospital is unable to stabilize a patient within its capability, or if the patient requests, an appropriate transfer should be implemented. Please see the Administration Policy: Emergency Medical Treatment & Labor Act (EMTALA) for more detail.

Business and Financial Services

Coding and Billing for Services

Employees and contractors responsible for coding and billing must adhere to all official coding and billing guidelines, rules, regulations, statutes and laws. They are prohibited from knowingly causing or permitting false or fraudulent claims. Furthermore, employees and contractors shall not engage in any intentional deception or misrepresentation intended to influence any entitlement or payment under any federal healthcare benefit program. Coding of diagnosis and procedures will be in accordance with CMS recognized coding guidelines, such as those provided in the most recent AHA Coding Clinic. Claims must only reflect the actual services ordered, documented and performed. No employee or contractor should falsely certify that a service was medically necessary when it was not. Employees and contractors involved in the billing process, either by providing billing information, preparing statements or submitting claims, must exercise care in ensuring that statements released are accurate and that proper billing standards are being followed. Employees and contractors are expected to follow all billing policies and report and reconcile overpayments, refunds and credit balances in accordance to revenue management, billing policies.

Fair Billing Practices

Meadows Health will bill patients and third parties only for services actually provided to patients and will provide assistance to patients seeking to understand the charges relative to their care. The billing process is conducted accurately based on documentation and in compliance with federal and state laws. Billing statements are released on an accurate and timely basis and describe the services received by the patient, the provider of the services, the exact charges for the services and other important information relating to the patient. Adequate medical documentation must be provided for all services rendered to patients. Confirmed credit balances will be refunded in a timely manner. Disclosures of overpayments to federal and/or state health programs will be reported per policy: Correction of Errors Related to Federal and/or State Healthcare Program Reimbursements.

Waiver of Co-Payments and Deductibles

Co-payments and deductible amounts to be paid by the patient cannot be routinely waived, except as outlined in written billing policies. For Medicare Part B services (outpatient services), such routine waivers are illegal and must not be done.

Financial Record Keeping and Reporting

All financial and accounting records must provide an accurate, timely and full reporting of activities involving Meadows Health assets. No “off-the-books” transactions are allowed. Financial records will conform to established accounting procedures. No employee should knowingly make a false entry in the financial records. Errors should be identified and corrected in a timely manner. In all relationships, we must maintain strict corporate compliance with all federal and state laws, rules, and regulations and generally accepted ethical standards.

Improper Use of Funds

Meadows Health funds may not be used for improper activities where payment could be viewed as a bribe, kickback or inducement for referrals. Employees are forbidden from soliciting gifts or tips from parties associated with Meadows Health.

Cash and Bank Accounts

Meadows Health members share responsibility for protecting and preventing the theft, loss or unauthorized use of cash, bank accounts and other company property. The general rule of thumb is to handle petty cash, change funds, bank accounts, and checks and purchase cards so that there is no question of illegal or improper activity. Cash receipts should be reported and deposited in a timely manner. Petty cash and change funds cannot be used to cover routine office supplies, luncheon costs or other general operating costs.

Tax Exempt Status

Employees must not involve Meadows Health in business activities which would be in direct violation of the Organization's tax-exempt status. Tax-exempt laws prohibit those activities which benefit a private individual. Employees may purchase approved items at retail pricing, when available.

Record Retention and Disposal of Documents (to include electronic forms of communication)

All Meadows Health employees are expected to comply with regulatory and legal requirements of record retention. Medical and business documents include paper as well as computer based (e.g. emails) and other electronic forms of communication (e.g. files on tape or removable drives) and any other medium that contains information about the organization or its business activities. Documents faxed to another party should be accompanied by a transmittal (cover) form identifying the recipient. Records must never be destroyed in an effort to deny governmental authorities that which may be relevant to a government investigation.

Safeguarding Information and Assets

Medical records, Board meeting minutes, financial and billing statements, and other legal documents are the property of Meadows Health. Neither original medical records nor paper or electronic copies of medical records should be removed from the facilities except under direction of the Legal Department. Employees are not allowed to obtain patients' medical information through the computer, another employee, nor by hard copy if the employee does not need the information for purposes within the scope of his/her job. Employees using or possessing company information or equipment are responsible for the security of those assets while entrusted to them. Per policy, employees possessing passwords or security codes must not reveal their personal passwords to other employees, friends or family members.

Government and Political Activity

Government Inquiries

Because Meadows Health participates in Medicare and Medicaid programs, it is not unusual to receive requests for information from the government. Meadows Health policy is to respond in a timely manner to government inquiries, with safeguards of protection for the legal rights of the

organization and its employees. Information provided by Meadows Health or provided to Meadows Health should be well documented. Employees should contact their supervisors immediately if they are approached by a government agency, attorney, law firm, consulting firm or other outsider seeking information about Meadows Health. You are not required by law to respond to questioning without first conferring with Meadows Health Legal Department.

Political Activity and Contributions

Meadows Health supports employee participation in civic affairs and political activities; however, these activities must occur on the employee's personal time and not on Meadows Health premises. When employees speak on public issues, they must not imply to the audience that their comments and views are supported by Meadows Health. No employee shall be authorized to contribute cash or an employee's work time on behalf of Meadows Health to a political office holder, party or campaign of any candidate, without corporate approval. Employees routinely communicating with government officials as part of their job duties must be familiar and comply with all regulatory constraints. Guidance from the Legal Department is available as needed.

Marketing and Competitive Activities

Insider Information

Meadows Health members should never disclose corporately owned intellectual property or trade secrets; employee, customer or consumer information; marketing and other corporate data bases; marketing plans, business proposals and strategies which are not available to the general public (Insider Information) for personal gain, to aid a competitor, or to benefit anyone associated with the employee. Examples of insider information are unannounced new services, pending contracts, budgets and strategic plans. Confidentiality of such information also applies to Meadows Health employees who do not have a need to know in order to carry out their assignments.

News Media Relationships

Employees should refer all media requests for comment concerning any event or subject relative to Meadows Health to the Marketing and Public Relations. This includes speaking to the public in any format or venue about events or occurrences associated with Meadows Health.

Antitrust

Governmental antitrust laws are designed to foster fair and honest competition and eliminate practices which interfere with free competition, thereby allowing for a variety of products at competitive prices. Employees responsible for making purchasing or pricing decisions for Meadows Health should become familiar with antitrust laws which can affect their decisions. Contact between competitors does not have to be written for the government to view the information exchange between competitors as an antitrust act, particularly if a specific course of action follows the exchange of information. Meadows Health cautions its employees about providing specific information regarding pricing, salaries, services, strategic plans, contracts or market share to a competitor.

Meadows Health Compliance & Ethics Program

PURPOSE

MMRMC has adopted a Compliance Program (“Compliance Program”) and is committed to establishing and observing high standards and ethical conduct in its business and operational practices conforming to the standards set forth in the Federal Sentencing Guidelines. The Compliance Program shall be a Meadows Health corporate-wide Program, applicable to MRMCMC and all of its subsidiaries, and structured to encourage collaborative participation at all levels. The Compliance Program shall focus on the detection and prevention of violations of federal, state and local laws. The Compliance Program shall foster an environment in which employees and affiliated professionals comply with all relevant laws and regulations and report any concerns about business practices as set forth under this Program. The Compliance Program has been developed in consideration of Meadows Health vision, mission and values.

CORPORATE INTEGRITY AGREEMENT

In conjunction with settling a federal investigation on November 16, 2017, MRMCMC entered into a Corporate Integrity Agreement (CIA) with the U.S. Department of Health and Human Services’ Office of Inspector General. The CIA, which will be in effect for five years, requires the organization to maintain our Ethics and Compliance Program and to report certain potential violations of federal healthcare program laws to the government. The CIA subjects certain aspects of our Ethics and Compliance Program to internal and external audits and requires reports regarding our Program to be submitted to the federal government. The full text of the CIA and accompanying information is available on our Intranet and Internet sites.

CORE ELEMENTS

The Compliance Program reflects the organization's commitment to identify and reduce risk, to improve internal controls, and to establish system-wide standards. As such, Meadows Health has adopted the following principles of compliance:

1. Developing and distributing a written Code of Conduct, as well as written policies and procedures promoting our commitment to compliance, providing general and specific operational guidance, and identifying specific areas of risk.
2. Designating a CCO and Compliance Oversight Committee charged with the responsibility of operating and monitoring the Compliance Program.
3. Developing and implementing regular, effective education and training programs for all MH employees, officers, the Board of Directors and medical staff members.
4. Maintaining an effective and well-publicized disclosure program to provide guidance and receive complaints about potential Compliance Program violations without fear of retaliation.
5. Developing disciplinary standards and appropriate employment, contracting and credentialing criteria to respond to allegations of improper or illegal activities, and

carrying out the equitable enforcement of these standards on associated individuals who have violated laws, regulations, other federal health care program requirements or the Compliance Program standards.

6. Maintaining effective auditing and monitoring systems and protocols to evaluate compliance with applicable laws, regulations, other federal healthcare program requirements and the Compliance Program standards; to assist in the prevention of Compliance Program violations; and to maintain the efficacy of the Compliance Program.
7. Investigating, responding to and preventing identified compliance problems, including establishing appropriate and coordinated corrective action measures.
8. Incorporating an incentive program to recognize and reward compliant behaviors within Meadows Health through the MPMC Compliance Program.

WRITTEN STANDARDS

A core principle of the Compliance Program is the development, distribution and implementation of written standards that address principle risk areas. These standards reflect a commitment to compliance with all applicable legal duties and to fostering and ensuring ethical conduct. These written standards shall consist of the **Code of Conduct and Compliance Policies**. It is the expectation for all, that compliance with the written standards that pertain to their respective areas of responsibility, recognize report and avoid actions and relationships that might violate those requirements.

For additional information, please see the Compliance Policies on PolicyStat.

Chief Compliance Officer - Contact Information

You have access 24/7 to our Compliance Hotline at **1-866-326-6759** or visit our website at www.meadowsregional.ethicspoint.com. If you have questions or concerns relating to our Code of Conduct, please feel free to contact:

Sandra Kate Ellington

Chief Compliance Officer

Meadows Regional Medical Center, Inc.

skellington@meadowsregional.org

(912) 538-5898

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