Our Mission
To improve the health of those we serve.

Our Vision
Where people want to work, where physicians want to practice, and—most importantly—where patients want to go when they need healthcare services.

Our Values
Compassion  
Excellence  
Stewardship  
Integrity

Our Cardinal Value
To honor the dignity and worth of each person.

Our Pledge
We honor the dignity and worth of each person. We believe our first responsibility is to the patients we serve. We respect the physical, emotional and spiritual needs of our patients and their families, and we strive to maintain a balance in providing healing and wholeness. We believe our patients and their families deserve the best possible healthcare experience. We are committed to the pursuit of excellence in all that we do. Teaching and learning are fundamental in our efforts. We believe we are accountable to our communities for our stewardship. We have a special concern for the poor, and we are committed to making quality healthcare available to all. Our decisions will serve our communities in the present and preserve our mission into the future.

We believe our actions and decisions must reflect a faithful balance of our core values. We will act with absolute integrity and expect the same of those who work with us.

We believe our values are the source of our raison d’être. Our organization must reflect the rich diversity of our communities. We will respect, embrace and derive strength from our differences. We are committed to providing a work environment that enables our associates to fulfill their professional, family and community responsibilities.

We believe our people are the source of our success. Our organization must reflect the rich diversity of our communities. We will respect, embrace and derive strength from our differences. We are committed to providing a work environment that enables our associates to fulfill their professional, family and community responsibilities.

We believe our actions and decisions must reflect a faithful balance of our core values. We will act with absolute integrity and expect the same of those who work with us.

We believe that spiritual diversity within our organization must be respected and celebrated. Our relationship with the United Methodist Church grounds us in a strong moral and ethical foundation. Throughout the organization, we exist to serve others.

Our every action must advance our mission: To improve the health of those we serve.

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A Faith-Based, Not-for-Profit Healthcare System
Riverside Methodist Hospital + Grant Medical Center + Doctors Hospital + Grady Memorial Hospital
Dublin Methodist Hospital + Hardin Memorial Hospital + Marion General Hospital + Rehabilitation Hospital
O’Bleness Hospital + MedCentral Mansfield Hospital + MedCentral Shelby Hospital + Westerville Medical Campus
Health and Surgery Centers + Primary and Specialty Care + Urgent Care + Wellness + Hospice + Home Care
28,000 Physicians, Associates & Volunteers
OUR MISSION
To improve the health of those we serve.

OUR VISION
Where people want to work, where physicians want to practice, and most importantly, where patients want to go when they need healthcare services.

OUR VALUES
n Compassion
n Excellence
n Stewardship
n Integrity

OUR CARDINAL VALUE
To honor the dignity and worth of each person.

OUR PLEDGE
We honor the dignity and worth of each person. We believe our first responsibility is to the patients we serve. We respect the physical, emotional and spiritual needs of our patients and their families, and we practice compassion, accountability, fairness, honesty and integrity.

We believe our patients and their families deserve the best possible healthcare experience. We are committed to the pursuit of excellence in all that we do. Teaching and learning are fundamental in our efforts.

We believe we are accountable to our communities for our stewardship. We have a special concern for the poor, and we are committed to making quality healthcare available to all. Our decisions will serve our communities in the present and preserve our mission into the future.

We believe our actions and decisions must reflect a faithful balance of our core values. We act with absolute integrity and expect the same of those who work with us.

We believe our people are the source of our success. Our organization must reflect the rich diversity of our communities. We will respect, value and celebrate our differences.

We are committed to providing a work environment that enables our associates to fulfill their professional, family and community responsibilities.

We believe that spiritual diversity within our organization must be respected and celebrated. Our commitment to the United Methodist Church grounds us in a strong moral and ethical foundation. Throughout the organization, we exist to serve others.

Our every action must advance our mission: To improve the health of those we serve.

© OhioHealth Inc. 2014. All rights reserved. FY15-013-763. REV 11/14.
Dear OhioHealth Associate,

As you are no doubt aware, today’s healthcare environment has become increasingly complicated. In order to continually further our commitment to provide compassionate and high-quality care, we implemented a comprehensive, values-based Ethics and Compliance Program more than a decade ago. The Program is our opportunity to pay as much attention to the business side of Healthcare as we do to the caring aspects of Healthcare. Our Program rests on our core values of compassion, excellence, stewardship, and integrity, and a deep respect for the dignity and worth of each person we serve.

Included within the Program is OhioHealth’s Code of Conduct, which reflects our unwavering commitment to provide care with absolute integrity. The Code is meant to offer guidance to ensure the highest level of ethical and legal conduct. It highlights our more than 100 year tradition of shared common values, high ethical standards and superior business practices. It also contains numerous resources to assist you in making decisions about appropriate conduct in the workplace. Please review this document carefully; your adherence to the Code of Conduct is imperative to the continued success of our organization.

If you have questions concerning this Code or encounter any situation which you believe violates any provision of this document, you should immediately contact your supervisor, another member of management at your specific workplace, the OhioHealth Ethics and Compliance Line (1-866-411-6181), or the Ethics and Compliance Department. You can be assured that there will be no retribution for asking questions, raising concerns about the Code, or for reporting potential questionable conduct.

The Code of Conduct is not a substitute for your good judgment, integrity and personal values. It is simply an additional resource to help you find the right answers when faced with difficult situations. We greatly appreciate your willingness to abide by our Code and respect the fact that you have chosen to make this commitment. We believe our actions reflect our values and OhioHealth’s rich heritage of ethical behavior. Finally, we firmly believe that our culture is sustained and strengthened by the commitment of each associate to our values and principles that are critical to our tradition of improving the health of those we serve.

Sincerely,

David P. Blom
President and Chief Executive Officer
Jessica L. Quinn, JD
Senior Vice President and Chief Compliance Officer

-----

OUR PLEDGE

We honor the dignity and worth of each person.

We believe our first responsibility is to the patients we serve. We respect the physical, emotional and spiritual needs of our patients and find that each person is essential in finding healing and self-esteem.

We believe our patients and their families deserve the best possible care. We are committed to the pursuit of excellence in all that we do. Teaching and learning are fundamental in our efforts.

We believe we are accountable to our communities. Our stewardship is our commitment to making quality healthcare available to all. Our decisions will serve our communities in the present and promote our mission into the future.

We believe our actions and decisions must reflect a faithful balance of our core values. We will act with absolute integrity and expect the same of those who work with us.

We believe we are the stewards of our resources. Our organization is owned by its communities. The wealth, concern, and desire to achieve from within are our commitment to providing a safe environment that enables our associates to fulfill their professional, family, and community responsibilities.

We believe that the spiritual diversity within our organization must be respected and celebrated. The relationship with the Church (Methodist) that grounds us in a strong moral and ethical foundation. Throughout the organization, we seek to serve others:

Our every action must advance our mission: To improve the health of those we serve.

ETHICS & COMPLIANCE RESOURCES

Your Supervisor

Your Vice President/President

Your Manager or Director

Your Vice President/President

Your Vice President/President

Your Vice President/President

Your Vice President/President

Your Vice President/President

Your Vice President/President

Your Vice President/President

Your Vice President/President

Your Vice President/President

Your Vice President/President

Anonymous 24 hr. Reporting Line

1 (866) 411-6181

MyComplianceReport.com

(enter Access ID: OHH)
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As you are no doubt aware, today’s healthcare environment has become increasingly complicated. In order to continually further our commitment to provide compassionate and high-quality care, we implemented a comprehensive, values-based Ethics and Compliance Program more than a decade ago. The Program affords us the opportunity to pay as much attention to the business side of OhioHealth as we do to the caring aspects of healthcare. Our Program rests on our core values of compassion, excellence, stewardship and integrity, and to deep respect for the dignity and worth of each person we serve.

Included within the Program is OhioHealth’s Code of Conduct, which reflects our unwavering commitment to provide care with absolute integrity. The Code is meant to offer guidance to ensure our work is done in an ethical and legal manner. It highlights our more than 100 year tradition of shared common values, high ethical standards and superior business practices. It contains numerous resources to assist you in answering questions about appropriate conduct in the workplace. Please review this document carefully; your adherence to the Code of Conduct is imperative to the continued success of our organization.

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The Code of Conduct is not a substitute for your good judgment, integrity and personal values. It is simply an additional resource to help you find the right answers when faced with difficult situations. We greatly appreciate your willingness to abide by the Code and would like you to know that we are equally committed to ensuring that our actions reflect our values and OhioHealth’s rich heritage of ethical behavior. Finally, we know and trust that you, as each of your colleagues throughout the organization, are not only supporting, but furthering the mission, values and principles that are critical to our tradition of improving the health of those we serve.

Sincerely,

David P. Blom
President and Chief Executive Officer

Jessica L. Quinn, JD
Senior Vice President and Chief Ethics and Compliance Officer
OUR MISSION
TO IMPROVE THE HEALTH OF THOSE WE SERVE.

OUR VISION
Where people want to work, where physicians want to practice and, most importantly, where patients want to go when they need healthcare services.

OUR VALUES
- Compassion
- Excellence
- Stewardship
- Integrity

OUR CARDINAL VALUE
To honor the dignity and worth of each person.

OUR PLEDGE
We honor the dignity and worth of each patient. We believe our first responsibility is to the patients we serve. We respect the physical, emotional and spiritual needs of our patients and trust that compassion is essential to fostering healing and wholeness.

We believe our patients and their families deserve the best possible healthcare experience. We are committed to the pursuit of excellence in all that we do. Teaching and learning are fundamental to our mission.

We believe we are accountable to our communities for our stewardship. We believe our actions and decisions must reflect a faithful balance of our core values.

We believe spiritual diversity within our organization must be respected and celebrated. Our relationship with the United Methodist Church grounds us in a strong moral and ethical foundation.

Our every action must advance our mission: To improve the health of those we serve.

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If you have questions concerning this Code or encounter any situations which you believe violate any provision of this document, you should immediately contact your supervisor, another member of management at your specific workplace, the OhioHealth Ethics and Compliance Line (866) 411.6181, or the Ethics and Compliance Department. You can be assured that there will be no retribution for asking questions, raising concerns about the Code, or for reporting potential questionable conduct.

The Code of Conduct is not a substitute for your good judgment, integrity and personal values. It is simply an additional resource to help you find the right answers when faced with difficult situations. May we appreciate your willingness to do the right thing and remind you that we are all in this together.

Sincerely,

David P. Blom
President and Chief Executive Officer
Jessica L. Quinn, JD
Senior Vice President and Chief Ethics and Compliance Officer

OUR PLEDGE

We honor the dignity and worth of each person. We believe our first responsibility is to our patients; we respect the physical, emotional, and spiritual needs of our patients. We treat each person as essential to finding healing and a cure.

We believe in our patients and their families. We believe the best possible care has a human experience at its center. We champion the principles of excellence in care and the importance of delivering a patient-centered care experience.

We believe we are accountable to our communities. We will strive to serve all members of our communities, in all parts of our communities, including those who are underserved.

We believe in our people, and we respect our caregivers. We believe it is essential to recruit, develop, and retain a diverse group of people who bring different ideas, backgrounds and cultures to our organization.

We believe we are accountable to the United Methodist Church for the ethical conduct of our operations.

Our Code of Conduct reaffirms our values, and is designed to safeguard our organization against potential misconduct.

ETHICS & COMPLIANCE RESOURCES

Your Supervisor
Your Manager or Director
Your Vice President
Ethics and Compliance Department
Office of the General Counsel
Anonymous Reporting Line
MyComplianceReport.com

David P. Blom
President and Chief Executive Officer
Jessica L. Quinn, JD
Senior Vice President and Chief Ethics and Compliance Officer
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CHARITABLE MISSION

OhioHealth is a nonprofit, tax-exempt organization dedicated to providing health, education and related services to our communities. All of our businesses serve or support that purpose. Complex tax laws require that some of our affiliated organizations must be for-profit, but even these are intended to support and enable our primary mission.

Being a non-profit organization does not mean that we do not make a profit. It means that the money we make cannot be used to benefit any individual person (the way a dividend provides a benefit to a stockholder). Instead, the money we make must be used to advance our charitable mission. At OhioHealth we use our profits to:

- Subsidize our Patient Financial Aid and Charity Care Programs,
- Support our community outreach programs,
- Maintain and upgrade our facilities and equipment used in patient care,
- Operate full service Emergency Departments, and
- Develop new programs and services to make a difference in the health of the community we serve.

To ensure the community’s interests are served, the Board of Trustees that governs OhioHealth is comprised of prominent civic leaders who do not have any direct economic interest in the organization, but represent the communities we serve.

PURPOSE OF OHIOHEALTH’S CODE OF CONDUCT

OhioHealth’s Code of Conduct provides guidance to all OhioHealth associates and others acting on behalf of OhioHealth. The Code is also applicable to all of OhioHealth’s affiliated organizations and affiliated physicians. It was designed as a critical component of our Ethics and Compliance Program to assist us in carrying out our daily activities within appropriate ethical and legal standards. These obligations apply to our relationships with patients, physicians, third-party payers, subcontractors, independent contractors, vendors, consultants and one another. We have developed the Code to ensure we meet our ethical standards and comply with applicable laws and regulations.

SUPPORT OF THE ETHICS AND COMPLIANCE PROGRAM

The success and effectiveness of OhioHealth’s Ethics and Compliance Program depends on the support and complete participation of all associates, volunteers and individuals affiliated with OhioHealth. Everyone, regardless of job title, plays a part in maintaining OhioHealth’s culture of high ethical standards and unsurpassed commitment to “doing the right thing.” To fortify existing conduct, OhioHealth published the Code of Conduct in order to assist all associates in avoiding both the fact and appearance of improper activities. The Code of Conduct is the framework in assuring that all applicable laws and regulations are understood and followed.
OhioHealth’s Code of Conduct will be disseminated to all existing associates, as well as to all new associates at the commencement of their employment with OhioHealth. All associates will be required to certify that they have reviewed, fully understand and agree to abide by the Code of Conduct. Associate certifications will be maintained in a manner as directed by the Senior Vice President and Chief Compliance Officer. Furthermore, adherence to the Code of Conduct will be an element in evaluating associates via the normal HR process.

Business decisions and behavior during employment with OhioHealth shall be governed by the Code of Conduct. It is each associate’s responsibility to be familiar with the Code of Conduct and to be sensitive to any situations that would violate the Code or cause the appearance of a violation. Claims of ignorance, good intentions or bad advice will not be accepted as excuses for noncompliance. Failure to comply with the Code of Conduct can take the form of (1) the commission of an act that violates the Code, or (2) the failure to act to remedy a violation, and may result in termination or other disciplinary action, as set forth in relevant disciplinary policies of OhioHealth.

All associates of OhioHealth are expected to:

■ Attend required educational and training sessions relating to the Ethics and Compliance Program;
■ Be aware of all procedures of the Ethics and Compliance Program, including the mandatory duty of all associates to report actual or perceived violations of laws and regulations; and
■ Understand and adhere to the guidelines outlined in the Ethics and Compliance Program, especially those which relate to the associate’s functions within the organization.

Any questions, comments or concerns regarding activity that potentially violates the Code of Conduct should be discussed with a supervisor, the Ethics and Compliance Office or, if preferred, anonymously, through the Ethics and Compliance Line at 1 (866) 411-6181, which is operated by an independent company, 24 hours a day, 365 days a year. Calls are not recorded and all calls are referred to the Ethics and Compliance Department for resolution. Concerns or comments may also be made by utilizing OhioHealth’s anonymous web based reporting system at www.mycompliancereport.com (enter Access ID: OHH).

All reports are addressed. No exceptions.

MANAGERS’ ADDITIONAL RESPONSIBILITIES

While it is imperative that all OhioHealth associates abide by the Code, we expect our managers to “lead by example.” As such, we expect all managers to act in a manner that is respectful, kind, thoughtful and sensitive. Managers must operate within an environment where all associates are free to raise concerns. It is also necessary that all managers ensure that the associates they supervise have sufficient information to comply with the laws, rules and regulations that impact their specific areas. Managers must continually promote the highest standards of ethics and compliance.
OhioHealth’s managers must make sure that the associates they supervise understand and comply with the ethical conduct directives set forth in the Code of Conduct. Managers are responsible for ensuring that staff review the Code of Conduct, understand the importance of the Code of Conduct and participate in ethics and compliance training to familiarize themselves with matters relating to the Code of Conduct and the Ethics and Compliance Program within 60 days of the new associate’s date of orientation. Also, OhioHealth requires the promotion of, and adherence to, the elements of the Ethics and Compliance Program as a factor in evaluating the performance of all managers.

REPORTING METHODS

All individuals affiliated with OhioHealth and its member entities are required to report any activity which they believe may not be in compliance with pertinent laws, rules, regulations or OhioHealth organizational policy. Reporting is vital, because management cannot address a problem if it has not been properly reported.

Reports may be submitted to:
- Your supervisor, manager, director or vice president;
- The Ethics and Compliance Office (614) 544-4200;
- The Ethics and Compliance Anonymous Phone Line at 1 (866) 411-6181; or
- OhioHealth’s web-based reporting system at www.mycompliancereport.com (enter Access ID: OHH)

OhioHealth believes that good faith reporting is a key component in our desire to “do the right thing.” To assure that everyone feels safe in making good faith reports, the Board of Trustees of OhioHealth has adopted the following policy:

Individuals shall not be subject to retaliation by any persons affiliated with OhioHealth based on reports which are submitted in good faith. Any such retaliation shall be considered to be a violation of the Ethics and Compliance Program and should be reported immediately to the Senior Vice President and Chief Compliance Officer.

Any individual who makes a report under this policy may request information from the Ethics and Compliance Office regarding the follow-up and investigation of the report. The response will be as thorough as possible without violating the confidentiality of an associate.

OhioHealth takes its commitment to organizational ethics and compliance very seriously. Failure to follow the standards of the Ethics and Compliance Program (including the duty to report) is a violation of organizational policy and may be grounds for disciplinary action, including termination of employment when warranted.
PATIENTS

QUALITY OF CARE AND PATIENT SAFETY
OhioHealth holds in high regard its commitment to provide high quality, cost-effective healthcare to all of our patients. We treat all patients with warmth, respect and dignity, and provide care that is both necessary and appropriate. Furthermore, OhioHealth has a comprehensive program to promote the quality objectives of the organization. Quality of care has numerous ways of being measured. In promoting a high quality of care, OhioHealth is focused on the attentiveness and dedication of service to patients, the utilization of evolving technology to ensure quality and patient safety, and the creation of an overall culture that makes patient safety paramount.

Our commitment to quality of care and patient safety is an obligation of every OhioHealth associate. In any circumstance where an OhioHealth associate has a question about whether the quality of care or patient safety commitments are being fully met, that individual is obligated to raise this concern through appropriate channels until it is satisfactorily addressed and resolved.

PATIENT RIGHTS
OhioHealth makes no distinction in the availability of services; the admission, transfer or discharge of patients; or in the care we provide based upon age, gender, disability, race, color, religion or national origin. We recognize and respect the diverse backgrounds and cultures of our patients and make every effort to equip our caregivers with the knowledge and resources to respect each patient’s cultural heritage and needs. We are mindful that the populations in those communities we serve throughout Ohio are becoming even more diverse. OhioHealth respects the patient’s right to, and need for, effective communication. We also provide each patient with a written statement that conforms to all applicable state and Federal laws, including, but not limited to, the Health Insurance Portability and Accountability Act of 1996 (hereinafter referred to as HIPAA).

OhioHealth attempts to involve patients in all aspects of their care, including giving consent for treatment and making healthcare decisions. In the promotion and protection of each patient’s rights, each patient and his or her representatives are accorded appropriate confidentiality, privacy, security, advocacy and protective services, opportunity for resolution of complaints, and pastoral care or spiritual care. Patients have the right to an environment that preserves dignity and contributes to positive self-image.
Patients are treated in a manner that preserves their dignity, autonomy, self-esteem, civil rights, and involvement in their own care. OhioHealth facilities maintain processes to support patient rights in a collaborative manner which involves the facility leaders and others. These structures are based on policies and procedures, which make up the framework addressing both patient care and organizational ethics issues. These structures include informing each patient or, when appropriate, the patient’s representative, of the patient’s rights in advance of furnishing or discontinuing care.

PATIENT INFORMATION
While providing quality care, OhioHealth collects information about our patient’s medical condition, history, medication and family illnesses. We realize the sensitive nature of this information and are committed to maintaining its confidentiality. Consistent with HIPAA, we do not use, disclose or discuss patient-specific information with others unless it is necessary to serve the patient or required by law.

OhioHealth associates must never use or disclose confidential information that violates the privacy rights of our patients. In accordance with our appropriate access and privacy policies and procedures, which reflect HIPAA requirements, no OhioHealth associate, affiliated physician, or other healthcare partner has a right to any patient information other than that necessary to perform his or her job while working on behalf of OhioHealth.

EMERGENCY TREATMENT
OhioHealth adheres to the Emergency Medical Treatment and Active Labor Act ("EMTALA") in providing an emergency medical screening examination and necessary stabilization to all patients, regardless of ability to pay. Provided we have the capacity and capability, anyone with an emergency medical condition is treated. In an emergency situation, or if the patient is in labor, we will not delay the medical screening and necessary stabilizing treatment in order to seek financial and demographic information. We do not admit, discharge or transfer patients with emergency medical conditions simply based upon their ability or inability to pay or any other discriminatory factor.

Patients who present with emergency medical conditions are only transferred to another facility under certain conditions. One example could be at the patient’s request or, in a second scenario, if the patient’s medical needs cannot be met at the specific OhioHealth facility (e.g., we do not have the capacity or capability) and appropriate care is knowingly available at another facility. Patients are only transferred in strict compliance with state and Federal EMTALA regulatory and statutory requirements.
PHYSICIANS

INTERACTIONS WITH PHYSICIANS

Federal and state laws, rules and regulations govern relationships between healthcare providers and physicians who may refer patients to certain facilities. The applicable Federal laws include the Anti-Kickback Law and the Stark Law. It is important that our associates who interact with physicians, particularly regarding making payments to physicians for services rendered, providing space or services to physicians, recruiting physicians to the community, and arranging for physicians to serve in leadership positions in our locations, are aware of the requirements of the laws, regulations, and policies that address relationships between OhioHealth and the myriad of physicians who assist in the provision of care.

It is worth noting that if relationships with physicians are properly structured, but not diligently administered, failure to administer the arrangements as agreed may result in violations of the law. Any arrangement with a physician must be structured to ensure compliance with legal requirements, our policies and procedures, and with any OhioHealth operational guidance that has been issued. Most arrangements must be in writing and approved by the Office of the General Counsel of OhioHealth. Failure to meet all requirements of these laws and regulations can potentially result in serious consequences for OhioHealth.

LEGAL AND REGULATORY COMPLIANCE

OhioHealth provides a vast number of healthcare services throughout Ohio. These services are provided pursuant to appropriate Federal, state and local laws and regulations, and the conditions of participation for Federal healthcare programs. Such laws, regulations and conditions of participation may include, but are not limited to, subjects such as certificates of need, licenses, permits, accreditation, access to treatment, consent to treatment, medical record-keeping, access to medical records and confidentiality, patients’ rights, clinical research, end-of-life care decision-making, medical staff membership and clinical privileges, corporate practice of medicine restrictions and Medicare and Medicaid program requirements.

We have developed policies and procedures to address many of the legal and regulatory requirements of the above-listed. However, it is impractical to develop policies and procedures that encompass the full body of applicable law and regulation. Obviously, those laws and regulations not covered in organizational policies and procedures must be followed. There is a wide range of expertise within OhioHealth, including the Office of the General Counsel and numerous functional experts (i.e., Accountable Executives), who should be consulted for advice concerning human resources, legal, regulatory and the conditions of participation requirements.
BUSINESS AND FINANCIAL INFORMATION

ACCURACY, RETENTION, AND DISPOSAL OF DOCUMENTS AND RECORDS
All OhioHealth associates are responsible for the integrity and accuracy of our organization’s documents and records, not only to comply with regulatory and legal requirements but also to ensure records are available to support our business practices and actions. No one may alter or falsify information on any record or document. Records must never be destroyed in an effort to deny governmental authorities that which may be relevant to a government investigation.

CODING AND BILLING FOR SERVICES
OhioHealth has implemented policies, procedures and systems to facilitate accurate billing to government payers, commercial insurance payers and patients. These policies, procedures and systems conform to pertinent Federal and state laws and regulations. We prohibit any associate or agent of OhioHealth from knowingly presenting, or causing to be presented, claims for payment or approval which are false or fraudulent.

Bills and claims are only to be submitted when services are actually rendered and fully documented in patients’ medical records. Bills and claims are to contain accurate diagnosis and service codes.

In support of accurate billing, medical records must provide reliable documentation of the services we render. It is important that all individuals who contribute to medical record documentation provide accurate information and do not destroy any information considered to be part of the official medical record.

Accurate and timely documentation also depends on the diligence and attention of physicians who treat patients in our facilities. We expect those physicians to provide us with complete and accurate information in a timely manner.

CONFIDENTIAL INFORMATION
The term “confidential information” refers to proprietary information about our organization’s strategies and operations as well as patient information and third party information. Improper use or disclosure of confidential information could violate legal and ethical obligations. OhioHealth associates may use confidential information only to perform their job responsibilities and shall not share such information with others unless the individuals and/or entities have a legitimate need to know the information in order to perform their specific job duties or carry out a contractual business relationship, provided disclosure is not prohibited by law or regulation.
Confidential information covers virtually anything related to OhioHealth’s operations that is not publicly known, such as Human Resources and personnel data maintained by the organization; Medical Staff data (credentials, quality); patient lists and clinical information; patient financial information; passwords; pricing and cost data; information pertaining to acquisitions, affiliations and mergers; financial data; details regarding Federal, state, and local tax examinations of the organization or its joint venture partners; research data; strategic plans; marketing strategies and techniques; supplier and subcontractor information; and proprietary computer software.

As an OhioHealth associate, it is likely you will be entrusted with confidential information. It is your responsibility to protect that information. Disclosure to anyone — inside or outside of OhioHealth — should be made only as permitted by law and OhioHealth policy. If you have any doubt about how to respond to a request for disclosure, ask your supervisor or department director, the Senior Vice President and Chief Compliance Officer, the Privacy Officer, or a representative from the Office of the General Counsel. If you believe that confidential information has been disclosed improperly, lost or stolen, report that to your supervisor or department director, the Senior Vice President and Chief Compliance Officer or call the Privacy Officer.

Use of due care and due diligence is required to maintain the confidentiality, availability and integrity of information assets OhioHealth owns or controls. Because so much of our clinical and business information is generated and contained within our computer systems, it is essential that each OhioHealth associate protect our computer systems and the information contained in them by not sharing passwords and by reviewing and adhering to our information security policies and guidance.

If an individual’s employment or contractual relationship with OhioHealth ends for any reason, the individual is still bound to maintain the confidentiality of information viewed, received or used during the employment or contractual business relationship with OhioHealth.
HIPAA PRIVACY AND SECURITY

HIPAA regulations give patients more access to and control over who accesses their healthcare information. Access by an OhioHealth associate or other workforce member to a patient’s protected health information (PHI) is a privilege and is restricted on a need-to-know and minimum necessary basis. If given permission to access PHI, you are only allowed to look at that information required to do your job. Viewing your own PHI or the records of family members and friends is prohibited unless you need the information to do your job or you follow your department’s procedure for appropriately obtaining access.

In any case, limit your use or disclosure of healthcare information to the minimum necessary, unless the information is needed by a provider to provide treatment to the patient.

HIPAA also requires us to safeguard all healthcare information stored or communicated in any manner, whether oral, written or electronic. The following are examples of best practices:

- Do not leave patient data on computer screens.
- Do not leave charts open on desks or counters.
- Shred printed documents with patient data when you are done with them, or place the data in designated secure recycle bins.
- Avoid patient-related discussions in public areas.
- Avoid informal or casual discussions of patient situations which are not directly related to care.
- Do not leave voicemails or phone messages containing sensitive information.
- Avoid inadvertent disclosures and take special care in semi-private situations.
- Do not take patient data offsite except as necessary and in accordance with OhioHealth and departmental policies.
- Never leave patient data, whether stored on an electronic device or on paper, in a vehicle overnight.
- Report any theft, loss, or inappropriate use or disclosure to your supervisor, department director, the Senior Vice President and Chief Compliance Officer or the Privacy Officer, who will provide direction on how to proceed.

ELECTRONIC MEDIA AND SECURITY REQUIREMENTS

OhioHealth’s electronic and telecommunications systems, including but not limited to e-mail, Intranet, Internet access, telephones and voice mail, are the property of OhioHealth and are to be used primarily for business purposes in accordance with internal policies and procedures. In some instances, use is further regulated by Federal law as regards use and disclosure of PHI (Protected Health Information) and HCBI (Health Care Business Information) in electronic communications.

Personal use of these resources should not assume privacy, whether for creating, storing, sending or receiving non-business communications. OhioHealth reserves the right to monitor and/or access communications usage and content consistent with internal policies and procedures. Associates may not use these resources to post, store, transmit, download or distribute any threatening materials; knowingly,
recklessly, or maliciously false materials; obscene materials, material designated confidential by organizational policy or federal regulation; or anything constituting or encouraging a criminal offense, giving rise to civil liability, or otherwise violating any laws. Additionally, these channels of communication may not be used to send chain-letters, non-OhioHealth approved solicitations, personal broadcast messages or copyrighted documents that are not authorized for reproduction.

Associates who abuse OhioHealth’s communication systems or use them excessively for non-business purposes may lose these privileges and be subject to disciplinary action.

COST REPORTS
We are required by Federal and state laws and regulations to submit certain reports of our operating costs and statistics. These laws, regulations and guidelines address the appropriate methodologies to claim reimbursement for the cost of services provided to program beneficiaries. We comply with Federal and state laws, regulations and guidelines relating to cost reports.

All issues related to the preparation, submission and settlement of cost reports must be performed by or coordinated with OhioHealth’s Reimbursement Department.

WORKPLACE CONDUCT AND EMPLOYMENT PRACTICES
CONFLICT OF INTEREST
All individuals acting on behalf of OhioHealth have been placed in a position of trust and are expected to conduct themselves with the highest level of integrity. Such individuals, in dealing with others on behalf of OhioHealth and its related entities, shall act honestly and fairly; they shall not use their positions or knowledge gained from those positions in such a way that a conflict of interest might arise between the organization and the individuals interest.

A conflict of interest may occur if an OhioHealth associate’s outside activities, personal financial interests, or other personal interests influence or appear to influence his or her ability to make objective decisions in the course of the associate’s job responsibilities. A conflict of interest may also exist if the demands of any outside activities hinder or distract an associate from the performance of his or her job or cause the individual to use OhioHealth resources for other than OhioHealth purposes. OhioHealth associates are obligated to ensure they remain free of conflicts of interest in the performance of their responsibilities at OhioHealth. If associates have any question about whether an outside activity or personal interest might constitute a conflict of interest, they must obtain the written approval of their supervisor or the Office of the General Counsel before pursuing the activity or obtaining or retaining the interest. Also, clinical decisions will be made without regard to compensation or financial risk to OhioHealth leaders, managers, clinical staff or licensed, independent practitioners.
Potential conflict of interest situations may include:
- OhioHealth associates working with or for a competitor — including a business of their own.
- Working with or for an organization that does business with OhioHealth.
- Acceptance of gifts, favors or hospitality from actual or potential suppliers that are more than a nominal value.
- Misuse of information obtained while an associate in the OhioHealth System.

The above examples of potential conflicts is not exhaustive. OhioHealth relies on the honesty and integrity of the individuals employed to avoid conflicts of interest. Conflicts of interest or potential conflicts of interest must be reported to the Chief Executive Officer or the Office of the General Counsel.

PRIVATE INUREMENT STANDARD
The use of revenues for the benefit of an individual is called “private inurement.” OhioHealth will not use any part of the net earnings to inure to the benefit of its directors, officers, physicians, associates or other private persons.

Examples of arrangements that would violate the Private Inurement Standard are:
- Charging physicians rental fees at a rate less than fair market;
- Intentional purchasing of supplies from a vendor at a premium rate where the vendor receives the excess benefits;
- Providing loans to related individuals with an interest rate below market;
- Payments made for referral of patients; or
- Offering free services to directors, physicians or other related individuals when they do not meet the criteria for charity care.

Any associate aware of an arrangement that may violate the Private Inurement Standard must report the matter to the Office of the General Counsel or the Senior Vice President and Chief Compliance Officer. The reported arrangement will be reviewed for compliance with the tax exempt laws and regulations.

BUSINESS COURTESIES
All individuals acting on behalf of OhioHealth are placed in a position of trust and are expected to conduct themselves with the highest level of integrity. Sometimes it is difficult to know what the rules and guidelines are pertaining to the acceptance of gifts and entertainment. Throughout the year, associates may have gifts, favors or hospitality offered to them.

OhioHealth’s general policy on accepting gifts from vendors/suppliers is that associates, medical staff members employed by the hospital, and medical staff members acting in an advisory capacity on the selection of any vendor, shall not accept any gifts, favors or hospitality from actual or potential suppliers under circumstances which might influence their decision making or actions affecting OhioHealth.
This policy does not include the acceptance of items of nominal value that are clearly tokens of respect or friendship and are not related to any particular transaction or activity of OhioHealth.

Gifts of more than a nominal value or gifts of cash or its equivalent should be returned with an explanation of OhioHealth’s policy on gifts, or turned over to the OhioHealth Foundation, which acts as the fiduciary agent for gifts received by any department.

The Internal Revenue Service views gifts to associates as payment for past, present or future services. Consequently, the Internal Revenue Service requires that such gifts be treated as taxable compensation. There are, however, exceptions to this requirement. They include: Holiday gifts of nominal value, occasional parties or picnics, flowers, fruit, movie tickets, etc., provided under special circumstances (illness, outstanding performance).

Only entertainment that is a true business expense is permissible. To be a true business expense, the entertainment must be directly related to business, which means a discussion of business must occur before, during or after the event and the following details must be included on your expense form to be approved by your supervisor:

- The date and nature of the expense;
- Names of guests and associates present;
- Business purpose of the entertainment;
- Business relationship of individuals present; and
- Cost and place of the entertainment.

Occasionally, there may be an exception to the examples presented above. In those cases, approval by the senior manager of the division, the Office of the General Counsel or the Senior Vice President and Chief Compliance Officer is required. If you are unclear about whether or not a gift or invitation is appropriate, you should talk to your supervisor about whether or not additional approvals are necessary.
EXTENDING BUSINESS COURTESIES AND TOKENS OF APPRECIATION TO POTENTIAL REFERRAL SOURCES

Any entertainment, gift or token of appreciation involving physicians or other persons who are in a position to refer patients to our healthcare facilities must be undertaken in accordance with all relevant OhioHealth policies, which have been developed consistent with Federal laws, regulations and rules regarding these practices. OhioHealth associates must consult existing policies prior to extending any business courtesy or token of appreciation to a potential referral source.

CONTROLLED SUBSTANCES

Some of our associates routinely have access to prescription drugs, controlled substances and other medical supplies. Many of these substances are governed and monitored by specific regulatory organizations and must be administered by physician order only. Prescription and controlled medications and supplies must be handled properly and only by authorized individuals to minimize risks to us and to patients. If one becomes aware of the inadequate security of drugs or controlled substances, or the diversion of drugs from OhioHealth, the incident must be reported immediately.

COPYRIGHTS

OhioHealth associates may only copy and/or use copyrighted materials pursuant to the organization’s policy on such matters.

DIVERSITY AND EQUAL EMPLOYMENT OPPORTUNITY

OhioHealth actively promotes 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 will 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 are committed to recruiting and retaining a diverse staff reflective of the patients and communities we serve. We regard laws, regulations and policies relating to diversity as a minimum standard. We strive to create and maintain a setting in which we celebrate cultural and other differences and consider them core strengths of OhioHealth.

OhioHealth is an equal opportunity workforce and no one shall discriminate against any individual with regard to race, color, religion, sex, national origin, ancestry, age, disability, sexual preference, veteran status, pregnancy or other characteristics protected by law, with respect to any offer, term or condition of employment.

It is the responsibility of every person working within OhioHealth, in any capacity, to support and comply with OhioHealth’s policy of equal opportunity employment.
Any individual who believes he/she has been the subject of unlawful employment discrimination should report the act immediately to their department manager or to the Human Resources Department. If the complaint involves a manager or supervisor, or if it is otherwise inappropriate or undesirable to report a complaint to an immediate supervisor, the complaint should be filed directly with Human Resources, the Ethics and Compliance Office or the Office of the General Counsel.

**HARASSMENT AND WORKPLACE VIOLENCE**

Each OhioHealth associate has the right to work in an environment free of harassment and disruptive behavior. We do not tolerate harassment by anyone based on the diverse characteristics or cultural backgrounds of those who work with us. Degrading or humiliating jokes, slurs, intimidation or other harassing conduct is not acceptable in our workplace.

Sexual harassment is prohibited. This prohibition includes unwelcome sexual advances or requests for sexual favors in conjunction with employment decisions. Moreover, verbal or physical conduct of a sexual nature that interferes with an individual’s work performance or creates an intimidating, hostile or offensive work environment, has no place at OhioHealth.

Harassment also includes incidents of workplace violence. Workplace violence includes robbery and other commercial crimes, stalking, violence directed at an employer, terrorism, and hate crimes committed by current or former colleagues.

OhioHealth and all associates at all levels must work together to maintain a professional work atmosphere. Associates who observe or experience any form of harassment or violence should report the incident to their supervisor, department manager, the Human Resources Department, the Ethics and Compliance Department or by calling the Ethics and Compliance hotline at 1-866-411-6181.

**WAGE AND HOUR**

OhioHealth maintains a pay program that rewards associates based on the value of the services they perform.

OhioHealth is committed to a competitive compensation program by evaluating market conditions and making necessary changes on an annual basis.

No “non-exempt” associate (that is, an associate who is not exempt from overtime requirements) may perform work authorized by OhioHealth without compensation. For example, if it is necessary for associates to work during meal periods or to be called back to work for emergency purposes, if the associate is not granted another meal period during their shift, the associate is paid for their entire meal period.
Approved overtime hours worked by non-exempt associates are paid in accordance with federal and state guidelines.

Exempt associates, due to the nature of their positions as administrators, executives or professionals, are compensated with a salary established on an annual basis. Compensation is tied to the job performed rather than the number of hours worked. Associates in these positions are not entitled to overtime compensation.

Non-exempt associates work in positions which do not meet the exemption standards as defined by federal and state regulations. Associates in non-exempt positions are paid on a per hour basis and qualify for overtime compensation as required under their work scheduling option.

HEALTH AND SAFETY
OhioHealth provides an environment that minimizes hazards and the risk of injury and occupational illness to patients, visitors and staff.

OhioHealth supports a safety management program that designs, implements and monitors programs to prevent injury and occupational illness.

It is the responsibility of all associates to adhere to all OhioHealth and departmental safety policies, procedures, plans and policies that have been developed based upon the following:
- Applicable laws, regulations and accreditation Standards (OSHA, EPA, JCAHO, etc.);
- Information derived from monitoring, investigating and the evaluation of incidents, accidents and occupational illnesses;
- External services regarding healthcare safety practices; and
- Associate input and feedback regarding safety issues.

OhioHealth requires attendance at safety education and training programs by all associates. All incidents, accidents or reports of occupational illness among associates must be reported. Any notices, inquiries or citations related to safety received from outside regulatory agencies are to be reported. These reports allow for corrections, further education and improvement throughout our organization.

HIRING OF FORMER AND CURRENT GOVERNMENT AND FISCAL INTERMEDIARY EMPLOYEES
The recruitment and employment of former or current U.S. government employees may be impacted by regulations concerning conflicts of interest. Hiring associates directly from a fiscal intermediary requires certain regulatory notifications. Associates should consult with the Human Resources and Organizational Development Department or the Office of the General Counsel regarding such recruitment and hiring.
INELIGIBLE PERSONS

OhioHealth does not contract with, employ or bill for services rendered by individuals or entities that have been excluded or have been deemed ineligible to participate in Federal healthcare programs; suspended or debarred from Federal government contracts; or who have been convicted of a criminal offense related to the provision of healthcare items or services and who have not been reinstated in a Federal healthcare program after a period of exclusion, suspension, debarment or ineligibility, provided that we are aware of such criminal offense. We routinely search the Department of Health and Human Services’ Office of Inspector General and the General Services Administration’s lists of such excluded and ineligible persons. A number of policies address the procedures for timely and thorough review of such lists and appropriate enforcement actions.

Associates, vendors and privileged practitioners at OhioHealth facilities are required to report to us if they become excluded, debarred or ineligible to participate in Federal healthcare programs; or have been convicted of a criminal offense related to the provision of healthcare items or services.

LICENSE AND CERTIFICATION RENEWALS

Associates, individuals retained as independent contractors and practitioners in positions which require professional licenses, certifications, or other credentials are responsible for maintaining the current status of their credentials and shall comply at all times with Federal and state requirements applicable to their respective disciplines. To assure compliance, OhioHealth may require evidence of the individual having a current license or credential status.

OhioHealth does not allow any associate, independent contractor or privileged practitioner to work without valid, current licenses or credentials.

PERSONAL USE OF OHIOHEALTH RESOURCES

It is the responsibility of each OhioHealth associate to preserve our organization’s assets including time, materials, supplies, equipment and information. Organization assets are to be maintained for business-related purposes. As a general rule, the personal use of any OhioHealth asset without prior supervisory approval is prohibited. The occasional use of items, such as copying facilities or telephones, where the cost to OhioHealth is insignificant, is permissible. Any charitable use of organization resources must be approved in advance by one’s supervisor. Any use of OhioHealth resources for personal financial gain unrelated to the organization’s business is prohibited.
RESEARCH, INVESTIGATIONS, AND CLINICAL TRIALS

OhioHealth follows the highest ethical standards in full compliance with Federal and state laws and regulations in any research, investigations and/or clinical trials conducted by our physicians and professional staff at the OhioHealth Research and Innovation Institute. Our organization’s first priority is always to protect the patients and human subjects and respect their rights during research, investigations and clinical trials.

Physicians participating in research investigations and clinical trials are expected to fully inform their patients of the patients’ rights and responsibilities of participating in the research or clinical trial. All patients asked to participate in a clinical investigation or research project are given a full explanation of alternative services that might prove beneficial to them. They are also fully informed of potential discomforts and are given a full explanation of the risks, expected benefits, and alternatives. Patients are to be fully informed of the procedures to be followed, especially those that are experimental in nature. Refusal of a patient to participate in a research study will not compromise his or her access to services. Patient voluntary informed consent to participate in clinical investigations or research is documented and retained pursuant to the organization and hospital policies.

Any OhioHealth facility or associate applying for or performing research of any type must follow all applicable research guidelines and maintain the highest standards of ethics and accuracy in any written or oral communications regarding the research project. As in all accounting and financial record-keeping, our policy is to submit only true, accurate and complete costs related to research grants.

Any OhioHealth facility or associate engaging in human subject research must do so in conjunction with IRB approval and consistent with OhioHealth policies regarding human subject research and IRBs.

SUBSTANCE ABUSE AND MENTAL ACUITY

To protect the interests of our associates and patients, we are committed to an alcohol and drug-free work environment. All associates must report for work free of the influence of alcohol and illegal drugs. Reporting to work under the influence of any illegal drug or alcohol; having an illegal drug in an associate’s system; or using, possessing, or selling illegal drugs while on OhioHealth work time or property may result in immediate termination. OhioHealth may use drug testing as a means of enforcing this policy.

It is also recognized that individuals may be taking prescription or over-the-counter drugs which could impair judgment or other skills required in job performance. Associates with questions about the effect of such medication on their performance, or who observe an individual who appears to be impaired in the performance of his or her job, must immediately consult with their supervisor.
MARKETING PRACTICES

ANTITRUST
All OhioHealth associates must know that antitrust laws are designed to create a level playing field in the marketplace and to promote fair competition. Violations of antitrust laws carry serious criminal and civil penalties. These laws could be violated by discussing OhioHealth business with a competitor, such as how our prices are set, disclosing the terms of supplier relationships, allocating markets among competitors and boycotting of third parties.

In general, associates must avoid discussing sensitive topics with competitors or suppliers, unless they are proceeding with the advice of the Office of the General Counsel. Associates also must not provide any information in response to an oral or written inquiry concerning an antitrust matter without first consulting with the Office of the General Counsel.

OHIOHEALTH’S ETHICS AND COMPLIANCE PROGRAM

PROGRAM STRUCTURE
Our Ethics and Compliance Program is intended to clearly demonstrate the absolute commitment of the organization to the highest possible standards of ethics and compliance. The program includes all suggested governmental elements (as directed by the Office of the Inspector General, U.S. Department of Health and Human Services). These elements are further explained in this section.

The specific elements are supported at all levels of the organization. Providing direction, guidance and oversight to the program are the Ethics and Compliance Senior Leadership Committee and the Ethics and Compliance Steering Committee. Both committees have system-wide representation.

The Senior Vice President and Chief Compliance Officer, and the Ethics and Compliance Department are responsible for the day-to-day direction and implementation of the Ethics and Compliance Program. This includes developing resources and providing support. The Senior Vice President and Chief Compliance Officer reports directly to the President and Chief Executive Officer of OhioHealth.

ETHICS AND COMPLIANCE TRAINING AND COMMUNICATION
The proper education and training of new staff, and the continual retraining of current associates at all affected levels, is a significant element of our Ethics and Compliance Program. As such, OhioHealth will periodically require staff to attend specific training, including training and education in federal and state statutes, regulations and guidelines, the policies of private payors, and training in ethics (as set forth in the Code of Conduct), which emphasize OhioHealth’s commitment to compliance with these legal requirements and policies.
Training and educational programs for affected associates will include sessions highlighting OhioHealth’s Ethics and Compliance Program, fraud and abuse laws, applicable laws and regulations, e.g., coding requirements, claim development and submission processes, and requirements that reflect current legal and Program standards. OhioHealth will take steps to communicate effectively its standards and applicable procedures to all staff by requiring participation in training programs as provided by OhioHealth University.

Attendance and participation in training and educational programs is a condition of continued employment, and the failure to comply with training and education requirements will result in disciplinary action, including possible termination when such failure is serious. Adherence to the provisions of the Ethics and Compliance Program, such as training requirements, will be a factor in the annual evaluation of associates. The Ethics and Compliance Department and relevant OhioHealth managers will retain adequate records of OhioHealth’s training and educational programs, including attendance logs and outlines/topics which comprise the training sessions. Acknowledgement of OhioHealth’s Ethics and Compliance Program will also be a provision of consultant, contractor and vendor contracts.

LINES OF COMMUNICATION — VOLUNTARY REPORTING MECHANISMS

An open line of communication between OhioHealth’s Senior Vice President and Chief Compliance Officer and all OhioHealth associates and agents is necessary for the successful implementation and maintenance of the Ethics and Compliance Program. Furthermore, free flowing communication will reduce the potential for misconduct, fraud, abuse and waste. OhioHealth encourages open communications throughout the organization.

Associates and agents are encouraged to use ordinary channels of communication to report any violations of the Ethics and Compliance Program; however, in understanding the importance of establishing a means of communication to remove the concern of retaliation, OhioHealth also has established alternative voluntary anonymous reporting mechanisms for associates as described below.

An individual reporting known or suspected improper conduct is not required to identify himself/herself. Anonymous calls and communications will be investigated and acted upon in the same manner as calls where the caller or writer reveals his/her identity. No effort will be made to determine the identity of an individual making an anonymous report unless the individual admits to engaging in improper conduct. Associates who are uncertain whether an action violates OhioHealth’s Code of Conduct or Ethics and Compliance Program and would like to communicate with OhioHealth on a confidential basis may report the action on an anonymous basis. Individuals shall not be subject to retaliation based on reports which are submitted in good faith. Any such retaliation shall be considered to be a violation of the Ethics and Compliance Program and should be reported immediately to the Senior Vice President and Chief Compliance Officer.
Reports may be made in the following manner:
- Orally, and anonymously if so desired, through OhioHealth’s Ethics and Compliance Line at 1-(866)-411-6181;
- In writing, through a designated mail address or e-mail address;
- In person, through the associate’s supervisor, director, vice president, the Office of the General Counsel, or the Ethics and Compliance Office; or
- OhioHealth’s web-based reporting system at www.mycompliancereport.com (enter Access ID: OHH)

All reports will be investigated in a prompt and reasonable manner under the supervision of the Senior Vice President and Chief Compliance Officer, or his/her designee, including Ethics and Compliance staff or a representative from HR or the Office of the General Counsel. Reports made anonymously will be investigated consistent with the information received. Any individual who makes a report under this policy is entitled to request information from the Senior Vice President and Chief Compliance Officer regarding the follow-up and investigation of the report.

OhioHealth’s Ethics and Compliance Line, mail address, e-mail or other designated reporting processes are the responsibility of, and monitored by, the Ethics and Compliance Department. All calls and correspondence will be assigned an identification code at the time of the call, date of contact, or receipt of the letter/email that can be used when referring any new/additional information on the same matter. The caller/author is encouraged to provide as much information as possible to assist with the issue at hand.

It is the policy of OhioHealth that no associate shall be punished solely on the basis that he or she reported what was reasonably believed to be an act of wrongdoing or a violation of OhioHealth’s Ethics and Compliance Program or Code of Conduct.

It is the policy of OhioHealth that no associate shall be punished solely on the basis that he or she reported what was reasonably believed to be an act of wrongdoing or a violation of OhioHealth’s Ethics and Compliance Program or Code of Conduct. However, an associate whose report of potential misconduct contains admissions of personal wrongdoing will not be guaranteed protection from potential disciplinary action. The weight to be given to the self-confession will depend on all the facts known to OhioHealth at the time a disciplinary decision, if any, is made by the appropriate staff. It is the policy of OhioHealth that an associate will be subject to disciplinary action, potentially termination, if OhioHealth reasonably concludes that the report of wrongdoing was knowingly fabricated, distorted, exaggerated or minimized to either injure someone else or to protect others.
CORRECTIVE ACTION
Where an internal investigation substantiates a reported violation, it is the policy of OhioHealth to initiate corrective action, including, as appropriate, making prompt restitution of any overpayment amounts, notifying the appropriate governmental agency, instituting whatever disciplinary action is necessary, and implementing systemic changes to prevent a similar violation from taking place in the future.

COMPLIANCE AUDITING AND MONITORING
An integral part of OhioHealth’s Ethics and Compliance Program is the ongoing auditing and monitoring of billing and coding practices, processes, and adherence to the Ethics and Compliance Program. OhioHealth is committed to assuring the Medicare and Medicaid programs, as well as other third party insurers, and its patients, that all billings accurately reflect the services and supplies that were actually rendered and documented and that all applicable coding and other designations impacting payment levels are appropriately determined and assigned.

DISCIPLINE
Common sense, good business judgment and acceptable personal behavior are expected of each OhioHealth associate. Intentional or reckless noncompliance will subject violators to disciplinary action. Such sanctions will range from verbal and written warnings to suspension, privilege revocation (subject to applicable peer review procedures) or termination, as appropriate. Disciplinary action will be taken where an associate’s failure to detect a violation is attributable to negligence or reckless conduct. In addition to disciplining associates who violate OhioHealth’s Code of Conduct and/or Ethics and Compliance Program, OhioHealth will also discipline associates who fail to understand conduct that potentially violates laws, regulations, policies, procedures or standards. Violations will be handled through OhioHealth’s normal progressive disciplinary process. The precise discipline utilized will depend on the nature, severity, and frequency of the violation.

ACKNOWLEDGMENT PROCESS
OhioHealth requires all associates to acknowledge and confirm they have received the Code of Conduct, understand it represents mandatory policies of OhioHealth and agree to abide by the directives set forth in the Code. All OhioHealth associates are also required to participate in annual ethics and compliance education.
Dear OhioHealth Associate,

As you are no doubt aware, today’s healthcare environment has become increasingly complicated. In order to continually further our commitment to provide compassionate and high-quality care, we implemented a comprehensive, values-based Ethics and Compliance Program more than a decade ago. The Program affords us the opportunity to pay as much attention to the business side of healthcare as we do to the caring aspects of healthcare. Our Program rests on our core values of compassion, excellence, stewardship and integrity, and a deep respect for the dignity and worth of each person we serve.

Included within the Program is OhioHealth’s Code of Conduct, which reflects our unwavering commitment to provide care with absolute integrity. The Code is meant to offer guidance to ensure our work is done in an ethical and legal manner. It highlights our more than 100 year tradition of shared common values, high ethical standards and superior business practices. It also contains numerous resources to assist you in resolving questions about appropriate conduct in the workplace. Please review this document carefully; your adherence to the Code of Conduct is imperative to the continued success of our organization.

If you have questions concerning this Code or encounter any situations which you believe violate any provision of this document, you should immediately contact your supervisor, another member of management at your specific workplace, the OhioHealth Ethics and Compliance Line (866) 411.6181, or the Ethics and Compliance Department. You can be assured that there will be no retribution for asking questions, raising concerns about the Code, or for reporting potential questionable conduct.

The Code of Conduct is not a substitute for your good judgment, integrity and personal values. It is simply an additional resource to help you find the right answers when faced with difficult situations. We greatly appreciate your willingness to abide by our Code and would like to stress that we are equally committed to ensuring that we act consistently with our values and that our actions reflect the rich heritage of our organization.

Sincerely,

David P. Blom
President and Chief Executive Officer

Jessica L. Quinn, JD
Senior Vice President and Chief Ethics and Compliance Officer

OUR PLEDGE

We honor the dignity and worth of each person. We believe our first responsibility is to the patients we serve. We respect the physical, emotional and spiritual needs of our patients and their families, and we assure them of our concern for their well-being and privacy.

We believe in our patients and their families. We do our best possible job by providing the experience the patient expects. We conduct each other and our relationships with our patients in the spirit of mutual trust and respect that is intrinsic to our mission.

We believe we are accountable to our community, for our actions and our commitments to making quality healthcare available to all. Our decisions will serve our community in the present and preserve our mission in the future.

We believe our actions and decisions must reflect a faithful balance of our core values. We will act with absolute integrity and expect the same of those who work with us.

We believe in our people as the source of our success. Our organization must reflect the rich diversity of our communities. We will embrace, respect and draw strength from our differences. We are committed to providing a work environment that enables our associates to fulfill their professional, family and community responsibilities.

We believe that spiritual diversity within our organization must be respected and celebrated. Our commitment to the United Methodist Church grounds us in a strong moral and ethical foundation. Throughout the organization, we seek to serve all people.

The Code of Conduct is not a substitute for your good judgment, integrity and personal values. It is simply an additional resource to help you find the right answers when faced with difficult situations. We greatly appreciate your willingness to abide by our Code and would like to stress that we are equally committed to ensuring that we act consistently with our values and that our actions reflect the rich heritage of our organization.

Sincerely,

David P. Blom
President and Chief Executive Officer

Jessica L. Quinn, JD
Senior Vice President and Chief Ethics and Compliance Officer

ETHICS & COMPLIANCE RESOURCES

- Office of the General Counsel - (544.4300)
- General Counsel’s Office - (544.4300)
- Director of Compliance Resources - (544.4200)
- MyComplianceReport.com - (enter Access ID: OHH)
- Ethics and Compliance Department - (544.4200)

Office of the General Counsel - 201.4200
General Counsel’s Office - 201.4300
Director of Compliance Resources - 201.4200
MyComplianceReport.com - (enter Access ID: OHH)
OUR MISSION
To improve the health of those we serve.

OUR VISION
To be where people want to work, where physicians want to practice, and most importantly — where patients want to go when they need healthcare services.

OUR VALUES
- Compassion
- Excellence
- Stewardship
- Integrity

OUR CARDINAL VALUE
To honor the dignity and worth of each person.

OUR PLEDGE
We honor the dignity and worth of each person. We believe our first responsibility is to the patients we serve. We respect the physical, emotional and spiritual needs of our patients and seek to foster their healing and wholeness.

We believe our patients and their families deserve the best possible healthcare experience. We are committed to the pursuit of excellence in all that we do. Teaching and learning are fundamental in our efforts.

We believe we are accountable to our communities for our stewardship. We have a special concern for the poor, and are committed to making quality healthcare available to all. Our decisions will serve our communities in the present and preserve our mission into the future.

We believe our actions and decisions must reflect a faithful balance of our core values. We will act with absolute integrity and respect the name of those whose names we bear.

We believe our patients and their families are the source of our success. Our organization must reflect the rich diversity of our communities. We will respect, embrace and derive strength from our differences.

We are committed to providing a work environment that enables our associates to fulfill their professional, family and community responsibilities.

We believe that spiritual diversity within our organization must be respected and celebrated. Our fellowship with the United Methodist Church is a strong moral and ethical foundation. Throughout the organization, we exist to serve others.

Our every action must advance our mission: To improve the health of those we serve.

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A FAITH-BASED, NOT-FOR-PROFIT HEALTHCARE SYSTEM
RIVERSIDE METHODIST HOSPITAL + GRANT MEDICAL CENTER + DOCTORS HOSPITAL + GRADY MEMORIAL HOSPITAL
DUBLIN METHODIST HOSPITAL + HARDIN MEMORIAL HOSPITAL + MARION GENERAL HOSPITAL + REHABILITATION HOSPITAL
O’Bleness Hospital + MedCentral Mansfield Hospital + MedCentral Shelby Hospital + Westerville Medical Campus
Health and Surgery Centers + Primary and Specialty Care + Urgent Care + Wellness + Hospice + Home Care
28,000 PHYSICIANS, ASSOCIATES & VOLUNTEERS