

CORE VALUES IN ACTION



MISSION

HealthSpan delivers compassionate, high-quality, affordable health care to improve the health of our communities with emphasis on people who are poor and underserved.

CORE VALUES

HealthSpan demonstrates behaviors reflecting our Core Values of compassion, excellence, human dignity, justice, sacredness of life and service.

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Certification and contact information are made available with this booklet.

LETTER FROM THE PRESIDENTS & CEOS

HealthSpan is an organization dedicated to the care of the whole person and continually striving to attain its mission to deliver compassionate, high-quality, affordable health care and to improve the health of our communities with emphasis on people who are poor and underserved. In carrying out our mission, we embody and commit to our core values of compassion, excellence, human dignity, justice, sacredness of life and service.

As a relatively new organization, we have the opportunity to shape a culture of transparency, trust, service and good stewardship. As we develop and grow our insurance and care delivery business, we are accountable to many: to our patients and communities, to the government, to each other and especially to ourselves. HealthSpan has developed and acquired tools to help each of us meet these responsibilities. These tools, including orientation training, our Code of Responsible Conduct and Report Line, as well as our Corporate Responsibility Department, will assist us in our efforts to put our Core Values into action every day, in every role, in every facility and in every team that makes up HealthSpan.

These tools and our commitment are at the heart of our Corporate Responsibility Program. It is an approach to accountability and “doing what is right” that serves and empowers our mission. It is grounded in our Core Values and our commitment to serve in our communities as a trusted partner. This program will ultimately allow us to continue to develop a culture built on transparency and trust and to clearly document our commitment to “do the right thing” for all to see.

The ultimate success of this Corporate Responsibility Program will require a commitment from each of us. We will all need to dedicate ourselves to living out our Core Values in all that we do, especially through our commitment to the Code of Responsibility and Standards of Responsible Conduct. The Corporate Responsibility Program has our complete support, and we know you will find it to be a trusted resource for putting our Core Values into action.

Jane Durney Crowley

President
HealthSpan Partners

Ken Page

President & Chief Executive Officer
HealthSpan Inc. and HealthSpan
Integrated Care

Nabil Chehade, MD

President & Market CEO
HealthSpan Physicians

CORPORATE RESPONSIBILITY PROGRAM

INTRODUCTION

HealthSpan's mission is to deliver compassionate, high-quality, affordable health care to improve the health of our communities with emphasis on people who are poor and underserved. To achieve our mission, we commit to Core Values of compassion, excellence, human dignity, justice, sacredness of life and service in all we do. We also commit to fulfill all ethical, professional and legal obligations and to foster a culture that enables others who work with us to do the same. We developed the Corporate Responsibility Program to provide guidelines, education and tools to help all of us meet these commitments and to help us better understand and obey health care laws and rules. It also enables each of us to put our Core Values into action, in particular our commitments to excellence, human dignity and justice. Most of us make decisions based on "doing the right thing." The Corporate Responsibility Program works by applying that **"Golden Rule"** to hard decisions. The Program stresses **"doing the right thing"** at every level of our organization, obeying all relevant laws and rules, dedicating ourselves to excellence and to the wise use of resources in our work of caring for Ohio families. It also emphasizes that each of us has a duty to speak up to ensure that our organization remains a model of responsible and ethical practices. This philosophy is not new to HSP. We have many programs already in place to promote excellence, quality and responsible conduct - quality initiatives and best practices are two examples. The Corporate Responsibility Program builds on these efforts to ensure that we make the right decisions every day, at every level of the organization and that we support others' efforts to do the same.

The challenges in health care today make the Corporate Responsibility Program critical for our success. We must provide quality care more efficiently, manage costs and obey growing numbers of federal, state and local laws and rules. We also accept our duty to use taxpayers' money wisely, and to serve effectively and efficiently so we can do more for those we serve. The stakes are high and improper action could hurt our well-deserved reputation for integrity, quality patient care and the trust we have worked so hard to earn with those we serve.

GOALS

The HSP Board of Trustees set up the Corporate Responsibility Program to:

- Promote justice and ethics in our business practices;
- Foster good corporate citizenship;
- Educate every associate about our *Standards* and what we expect;
- Give you tools to make responsible decisions and to report concerns promptly, and
- Prevent, find and correct violations of our *Standards*, as well as laws and rules.

The Program also addresses how we monitor and enforce the *Standards* and their impact on Human Resources (HR) policies. The Program will change from time to time to keep pace with changes in health care, regulatory and legal areas.

We have staff to help you with your questions or concerns about decisions, actions or policies. A Deputy Corporate Responsibility Officer (DCRO) has been designated, who serves on HealthSpan's management team and oversees Program activities. The DCRO works closely with HealthSpan's Corporate Responsibility Officer (CRO), who designs, coordinates, and reports on the effectiveness of the Program to the HSP Board Audit and Corporate Responsibility Committee and is responsible for the overall program. The Corporate Responsibility Department works closely with the HSP General Counsel for oversight of legal issues for the organization. Your DCRO and CRO's names and contact information are made available with this booklet.

HOW TO DIRECT QUESTIONS AND REPORT CONCERNS

THE 3-STEP PROCESS

Our associates have a duty to report promptly and in good faith any potential violations of law, regulations, policies, procedures or the HSP *Standards of Responsible Conduct*. In many cases, we have processes in place to resolve concerns or obtain answers to questions (for example, HR or Occupational Health.) The Corporate Responsibility Program builds on those processes. We encourage you to use existing processes when you can. We realize that no single resource can answer every question or issue, so we created a three-step process to help resolve issues, answer questions or report concerns or possible violations.

1. If we have no process to address your concern or question, first talk with your supervisor or other managers in the organization. They may help you or refer you to others who can. Other resources include our Human Resources staff (for issues about work conditions, discrimination or harassment); security staff (for issues about physical security, theft or abuse of property); and Quality Assurance or Risk Management staff (for clinical or regulatory concerns).
2. If the staff cannot help you, or if they are not a suitable resource for your concern, contact your Corporate Responsibility Department. The names and phone numbers for Corporate Responsibility staff contacts are made available with this booklet.
3. If the issue or question is still unresolved, or if you want to report a concern anonymously, call the 24-hour HSP Report Line at **1-888-302-9224** or log on to **www.mercyhealthreportline.com** to file a report using the Make a Report link. You may make a report without giving your name if you choose.

ABOUT THE HSP REPORT LINE

You may call or report on-line through the HSP Report Line 24 hours a day, seven days a week. An outside company with special training answers these calls. The Report Line does not use Caller ID or trace any call. All reports are confidential. If you provide your name, we will contact you with a response. If you prefer not to give your name, you will receive a code number and a date to call or follow-up on-line via the Report Line for the answer.

NO RETALIATION FOR REPORTING CONCERNS IN GOOD FAITH

Everyone working with HSP has a duty to report, in good faith, concerns about potential violations of laws, regulations, standards or policies. This includes our associates, supervisors, physicians, volunteers, and board members. No one who works with us should overlook violations. Our policy is that all real concerns should be reported. We also forbid any retaliation against an individual for reporting a concern in good faith. Making a good faith report will not put you job at risk. We protect every associate who reports a concern. Anyone who retaliates in any way is subject to immediate discipline, and that may include being fired. Report any retaliation or harassment at once to your Corporate Responsibility Department. An associate who breaks a law or standard is responsible, even if he or she comes forward and reports it. Each of us is responsible for our actions and their outcomes. However, we will view a prompt, truthful and sincere report of the wrong action as an effort to correct it.



OVERVIEW OF CODE OF RESPONSIBILITY AND STANDARDS OF RESPONSIBLE CONDUCT

We each feel confident in our morals and values. We each uphold the professional guidelines that apply to our jobs. Sometimes, however, we may be unsure what to do. Our Code of Responsibility and the *Standards of Responsible Conduct* can guide us through these unclear areas. They are tools to help us make the decisions that best serve our patients, customers and our organization. They also help us obey related laws and rules. Six principles guide our Corporate Responsibility Program. They are based in our Core Values and reaffirm that we will meet all ethical, professional and legal duties. The Code of Responsibility outlines these six principles. Each principle leads to a series of *Standards of Responsible Conduct*. The *Standards* explain how we expect you to act to follow each principle. The *Standards* cover many situations. Please review them carefully. Refer to them when you have questions about proper business and professional conduct.

Duty to Comply with the Standards of Responsible Conduct. The *Standards of Responsible Conduct* apply to all HSP associates and are mandatory. This includes the senior executives and finance officials. You must follow the *Standards of Responsible Conduct* that apply to you. It is the **“right thing to do.”** We also require it as a condition of your continued work with HSP. Each of us is responsible to report to supervisors or to the Corporate Responsibility Department anything that appears to break the law or be in conflict with these *Standards*.

We take pride in doing what is expected, and frequently do more than expected in our work. We sometimes face difficult choices and in those cases, these *Standards* can help us make the right decision. Whatever the motive—pressure to cut corners “just once,” or the demand to meet a budget or a tight deadline—there are no good reasons for not following the *Standards of Responsible Conduct*. Our managers and supervisors have two added duties within these *Standards*. They must ensure (by training, teaching, leading and monitoring) that the people they supervise follow the *Standards of Responsible Conduct*. They must also resolve questions about applying the *Standards* before making a difficult decision.

As you read the Standards, keep in mind:

- When we use “HSP” or “our organization,” we mean HealthSpan and each of our facilities and/or organizations.
- When we use “associate,” we mean anyone who works with HSP. This includes employees, board members, contractors doing business with HSP, volunteers and health care providers with privileges at any HSP facility. “You” means all associates.
- The “Deputy Corporate Responsibility Officer” or “DCRO” is the HealthSpan Deputy Corporate Responsibility Officer. The “Corporate Responsibility Officer” or “CRO” is the Corporate Responsibility Officer. When we use “Legal Counsel”, we mean General Counsel for HSP.
- Because the *Standards of Responsible Conduct* relate to the laws and rules that govern health care, they will change when the law or rules change. HSP will communicate any changes as quickly as possible.
- Neither the Code of Responsibility nor the *Standards of Responsible Conduct* create or give any added employment rights to associates or others.
- HSP regions may add policies or standards above and beyond these *Standards of Responsible Conduct*, as needed.
- Human Resources policies outline how employees may be disciplined for violating the *Standards of Responsible Conduct*. Providers who violate these *Standards* may lose privileges. Contractors who violate them may have their contracts canceled.

With this booklet are the names and phone numbers for Corporate Responsibility Program contacts who can help you.

ETHICAL DECISION MAKING

The goal of the HSP Corporate Responsibility Program is to help you make ethical and professional business decisions. Use this model when you face choices or situations that make you uncomfortable. It will help you gather facts and reach a decision. Know where and when to ask for help. You can also use the 3-Step Process.

Think about your starting point: our mission is rooted in the great moral traditions which emphasize compassion care for all. All of our associates must support our Core Values in every decision.

Recognize the issue involved in all its aspects:

- The act itself. (What is being asked or considered that troubles me?)
- The motives of all parties involved. (Who will benefit?)
- The consequences. (Will someone be hurt or injured? Does this violate a law, rule, policy or our *Standards of Responsible Conduct*?)
- The circumstances. (Are there other important reasons or facts I need to consider to understand the dilemma and make the right decision?)

Understand that HSP wants each of us to do what is best for the largest portion of our community, while following the ethical and legal rules that govern us. Any potential action that considers breaking a policy, rule or law—even for very good reasons—must be raised to an executive leader before any decision occurs.

Seek assistance from the resources available to you:

- Your supervisor or other facility and system leaders
- Our *Standards of Responsible Conduct*
- Our Statement of Common Values
- The 3-Step Process
- Corporate Responsibility Department

These resources will offer sound advice and help you from getting trapped by personal biases or preferences and help you find the right decision.

Take responsibility for your actions and make the right decision with confidence. Remember, you are accountable for the outcome of your decisions.

Know that we always will support an ethical decision you make following the Code of Responsibility and these *Standards*.

CODE OF RESPONSIBILITY

HealthSpan delivers compassionate, high-quality, affordable health care and health care coverage. We do so in accordance with our Statement of Common Values, HSP Mission and the HSP Core Values. These values include compassion, excellence, human dignity, justice, sacredness of life and service. Our commitment to excellence and justice requires each person who works with HSP to act with integrity and ethics. It also requires us to use resources with care. These form the foundation for the trust that we build and maintain with those we serve. Each of us from associates and medical staff to contractors has a duty to support ethical conduct through our Corporate Responsibility Program. HSP expects all who work with us to act in keeping with these principles, based on our Core Values:

- Act with honesty, integrity and ethics. Demonstrate those traits at every level of leadership.
- Use our resources to support our work of healing, following our ethical and legal standards.
- Obey all laws and regulations. These laws include antitrust, discrimination at work, environmental protection, false claims, fraud and abuse, lobbying and political activity and not-for-profit and tax exempt status.
- Keep information about patients, associates and the organization confidential.
- Avoid what are—or seem to be—conflicts of interest in your actions and dealings with others.
- Treat everyone with dignity and respect and provide quality, holistic care.

These principles seem like “second nature” to most of us. In some cases, however, you may be unsure of what to do. The Standards of Responsible Conduct explain this Code in more detail. Use them to guide your ethical behavior.



STANDARDS OF RESPONSIBLE CONDUCT

CODE OF RESPONSIBILITY PRINCIPLE 1: OUR CULTURE OF HONESTY AND INTEGRITY

Act with honesty, integrity and ethics. Demonstrate those traits at every level of leadership. Our associates represent our organization accurately and honestly. They do not act to defraud anyone of money, property or services. Our associates' conduct sets an example for co-workers. Supervisors set, and enforce where needed, ethical standards for those they supervise. The following Standards ensure that our activities reflect high levels of ethics and integrity. They show that we value ethical decision-making and that this is our normal practice. These Standards do not speak to every possible action; however, we expect that your behavior will follow this principle. If you have questions about what this principle means or how to apply it, talk with your supervisor, DCRO or CRO.

Honest Communications

Our associates communicate with honesty. This includes honesty with co-workers and those we serve. This also means that our marketing and advertising accurately explains our services, level of licensure and accreditation.

Ethical Culture

- Our associates follow all Standards of Responsible Conduct to support a corporate culture focused on ethics.
- Our associates report, in good faith, concerns about potential violations of the law or the Standards to their supervisors or Corporate Responsibility Department. Associates who raise issues and questions in good faith are valued. We will protect them from any retaliation for raising concerns in the Corporate Responsibility Program.
- Our supervisors must ensure that associates receive training and management support on all aspects of the Standards. Supervisors also monitor how their associates follow the Standards.

Cooperation with Government Investigations

Our associates obey all laws that apply to our operations. They cooperate with reasonable demands made in a federal, state or local government investigation. We also are responsible to protect the legal rights of HSP, our organization and our associates. Tell your Corporate Responsibility Department or the HSP General Counsel at once if you learn an HSP organization is being investigated. Also, see your organization's policy for more details on how to deal with government investigators.

Employment of Trustworthy Persons

We maintain our ethical culture by hiring, promoting and contracting with the people who are best qualified and who share our values. Federal law sets minimum standards for those we hire to positions of authority and enter into contracts with. In these cases, HSP may not hire a person or entity that has been convicted of a health care related crime. We also may not hire those who are debarred, excluded or are not eligible to take part in federal or state-funded health care programs. Before offering a job, contract or privileges, check federal and state medical databases of suspended, excluded, and barred persons to confirm that a candidate meets this standard. Federal rules also require us to act if we learn that an associate, doctor or contractor has been convicted of a crime related to health care or has been debarred, excluded or judged not eligible to take part in federal or state-funded health care programs. This may mean ending their job, privileges or contracts with any HSP organization.

CODE OF RESPONSIBILITY PRINCIPLE 2: OUR CULTURE OF STEWARDSHIP OF RESOURCES

Use our resources carefully, to support our healing mission, following our ethical and legal standards. Our associates are entrusted with our resources to achieve our healing mission. Our associates have a duty to protect our resources—including our people, money, supplies, equipment and good name. They do so by making careful decisions about how our resources are used. They assure that our assets support our healing mission. Talk with your supervisor or Corporate Responsibility Department if you have questions about this principle.

Internal Control

- Associates follow our standards and procedures to ensure that assets are protected and properly used. Keep accurate and reliable financial records and reports.
- Associates are responsible for acting within the authority they are given. Our supervisors give associates proper authority to carry out their duties and also monitor their associates' use of authority, as needed.

Financial Reporting

Associates ensure that our financial and cost reports, accounting records, research reports, expense accounts, time sheets and other financial documents clearly and accurately represent the facts. Improper or fraudulent accounting, documentation, or financial reporting is illegal under federal and state law and health care programs.

Honoraria

We encourage associates to teach and speak at educational functions related to your work. However, an outside group may not pay you for outside work you do during normal work hours. See your supervisor or the Human Resources Department about how to handle such a payment if it is offered to you.

Travel and Business Expenses

Travel and business expenses for our associates follow our policies and reflect proper use of our resources. Use good judgment. Spend our organization's assets as carefully as you would spend your own. Business travel and meals should result in proper and reasonable payments. Review the Travel and Business Expenses policy for detailed guidance.

Personal Use of Organization Assets

Our organization's assets are to be used only in our health care mission. You may not use them for personal business. You may not use our equipment, supplies, materials or services for any unauthorized purpose. Talk with your supervisor before using our organization's assets for any activity for which you will be paid by an outside source, or for any private, charitable project.

Record Retention and Destruction

- Keep records (paper or electronic) as required by law or business needs and according to internal policy. Talk with your supervisor about how long each type of record must be held. Keep accurate records for all business dealings. Make sure our records are not seen or used by people who have no right to see or use them. For records not specifically outlined in policy, follow your supervisor's guidelines for keeping and destroying records.
- Never destroy records that you believe may be requested or that have been requested by a regulator or investigator. If anyone tells you to destroy records related to an investigation, contact the Corporate Responsibility Department or Legal Counsel before you do anything.

CODE OF RESPONSIBILITY PRINCIPLE 3: OUR CULTURE OF LEGAL AND REGULATORY COMPLIANCE

Obey all laws and regulations

We obey all laws and regulations that apply to our organization. This includes federal, state and local laws and regulations, as well as our Statement of Common Values. These Standards guide our associates:

- Our associates obey all laws, regulations and guidelines that apply to their area of work. This includes laws and regulations that may not be mentioned in this booklet.
- Our supervisors and managers make sure that all associates receive training in the laws and regulations that apply to their department or unit.

If you have any questions about the laws and regulations that apply, ask your supervisor, Corporate Responsibility Department, or Corporate Responsibility Officers. Or call the Report Line at 1-888-302-9224 or log on to www.mercyhealthreportline.com to file a report. The 3-Step Process can help you make the right decision.

Fraud, Abuse and The False Claims Act

Our associates work hard to ensure that we create accurate and truthful patient bills and submit accurate claims for payment from any payer, including Medicare and Medicaid, commercial insurance, or our patients. It's the right thing to do and complies with federal and state laws that require accuracy in health care billing and payment. The Federal False Claims Act imposes civil penalties on any person or organization for knowingly making a false record or filing a false claim with the government for payment. "Knowing" can include deliberate or reckless ignorance of facts that make the claim false. Examples of activities that could trigger possible False Claims Act liability include:

- Billing Medicare for services that were not provided
- Billing for services that were not ordered by a physician

- Billing for services that were provided at sub-standard quality where the government would not pay
- Keeping payments that are known to be overpayment or errors in payment that should be returned to the government

A person who knows a false claim was filed for payment can file a lawsuit in federal court on behalf of the government and, in some cases, receive a reward for bringing original information about a violation to the government's attention. Penalties for violating the Federal False Claims Act can be up to three times the value of the false claim, plus from \$5,500 to \$11,000 in fines, per claim. Some states also have a False Claims Act that allows a similar lawsuit in state court if a false claim is filed with the state for payment, such as under Medicaid or Workers' Compensation. The False Claims Act protects anyone who files a false claim lawsuit from being fired, demoted, threatened or harassed by their employer for filing the suit. If a court finds that the employer retaliated, the court can order the employer to re-hire the employee and to pay the employee twice the amount of back pay that is owed, plus interest and attorney's fees.

Our Corporate Responsibility Program supports compliance with the False Claims Act by:

- Monitoring and auditing to prevent or detect errors in coding or billing.
- Educating our associates that they are responsible to report any concern about a possible false claim at an HSP facility via our 3-Step Reporting Process.
- Investigating all reported concerns and correcting any billing errors discovered.
- Protecting our associates from adverse action when they do the right thing and report any genuine concern via the 3-Step Process. HSP will investigate any allegation of retaliation against an associate for speaking up.

Anti-Kickback Law

The Federal Anti-Kickback law says no one may offer, pay or receive payment—cash or anything of value—for referring patients for items or services paid for by Medicare and Medicaid. The law also applies to ordering items or services paid for by Medicare or Medicaid. We do not pay patients, physicians or other health care providers or professionals for referrals. Our associates may not ask for or accept payment of any kind or receive anything of value for a referral. The law is complex. It includes exceptions adopted by Congress and a number of “safe harbors” adopted by the Department of Health and Human Services. Please use the 3-Step Process to obtain advice and assistance about the Anti-Kickback law, exceptions or “safe harbors” before acting.

Stark Self-Referral Statute

The Federal Stark Law prohibits a physician from referring patients to an entity with which the physician or his/her immediate family member has a financial relationship for “designated health services” reimbursed by Medicare or Medicaid unless all criteria of a Stark Law exception are satisfied. Designated health services cover a broad range of health care services including all of the following:

- Clinical laboratory services
- Physical therapy, occupational therapy, and speech-language pathology services
- Radiology and certain other imaging services (CT Scans, MRIs, ultrasounds)
- Radiation therapy services and supplies
- Durable medical equipment and supplies
- Nutritional supplies and equipment (feeding tube or IV products)
- Prosthetics, orthotics, and prosthetic devices and supplies
- Home Health Services
- Outpatient prescription drugs and inpatient and outpatient hospital services

Entities that provide or perform services that are a result of a prohibited referral may not bill Medicare or Medicaid for those services. We comply with the Stark Law and require that all of our physicians comply with the Stark Law as well. Please use the 3-Step Process to obtain advice and assistance about all Stark Law-related issues and questions before acting.

However, this law may permit doctors to refer patients to these services, if the financial relationship meets certain standards. We obey the Stark Laws and require that all physicians and other health care providers do so. Because the facts of each case will decide if referrals are allowed, report all stark-related issues and questions using the 3-Step Process.

Billing Accuracy

We send bills to patients and/or third-party payers (including Medicare, Medicaid, insurance companies, employers and others) that are accurate and that obey federal and state laws and regulations. We are responsible for accurately coding and describing our services, treatments and charges. And true to our mission, we provide information on all bills to assist those in need to obtain financial assistance from us or others. We follow all special billing requirements for government-sponsored programs and other payers. We make accurate statements—spoken or written—to any government agency, intermediary or other payers. It is a fraud to mislead on purpose any government agencies or other payers. Fraud may be punished with criminal or disciplinary action. If you find billing errors or actions that you believe may cause bills to be wrong or improper report them right away, using the 3-Step Process.

Antitrust Compliance

We conduct our health care business according to federal and state antitrust laws. These complex laws are written to support competition. They help ensure that business agreements preserve reasonably free trade among organizations. Such laws generally forbid:

- Fixing prices, rigging bids or secret agreements (including price sharing) with competitors;

- Boycotts (including agreements with competitors to deal or not to deal with specific patients, providers or payers) and some exclusive dealing and price discrimination agreements;
- Unfair trade practices, including bribery, stealing trade secrets, deception, intimidation and similar unfair practices;
- Agreements with competitors on wages to be paid to their respective employees, and
- Agreements with competitors to divide the market along product lines, service lines or geography.

The law also limits what type of information we can share legally with our competitors or potential competitors. Information that may be covered by this law includes current or future fees, bids or negotiations, compensation or benefits, cost or financial projections, marketing or strategic plans, markets and market share, and plans to discontinue services or offer new services. When you face business decisions that may risk violating antitrust laws, report your concerns using the 3-Step Process to obtain legal advice before acting.



Tax Compliance

HSP is a not-for-profit, tax-exempt entity. It is organized and operated solely for our charitable purposes and to serve the communities in which we are located. We must ensure that our resources are used only for our charitable purposes, not for any private individual, in order to keep our tax-exempt status. Tax laws forbid conduct such as:

- Paying “excess benefits” to any person; or taking part in any joint venture, partnership or similar dealing that can bring an improper private benefit to a third party working with us;
- Recruiting physicians with incentives or compensation plans that are excessive and do not support our charitable mission;
- Accepting research grants from third parties, where the researcher keeps the funds for personal use, and where we are not paid for the researcher’s use of our time, equipment or facilities;
- Permitting any person to buy, sell, lease or use our property at less than fair market value;
- Engaging in forbidden political activity for any federal, state or local political candidate, party organization or committee, including:
 - Donating our organization’s money, property, use of our facilities or the services of our associates;
 - Making a spoken or written endorsement from our organization, or
 - Fundraising by our organization.
- Engaging in substantial lobbying. This includes communicating or acting in the name of HSP or our organizations, without our consent, to try to influence the making of laws.

Environmental Compliance

We obey environmental laws and rules in our health care operations. We follow accepted procedures for handling, storing, labeling, using, transporting or disposing of solid, liquid, hazardous and infectious wastes. We do this for our safety and the safety of our associates and

our patients. Our associates need to be familiar with all procedures that apply. They use resources properly and efficiently and recycle materials where possible. They report promptly to supervisors (and response teams where required) any spills or contamination that may affect the environment.

Labor and Employment Law Compliance

We care for patients and residents, and serve everyone without regard to race, color, religion, ethnic origin, sex, marital status, public assistance, disability, age or any other category prohibited by law. We attract and retain the most qualified associates to fulfill our health care mission. We ensure a workplace that supports excellence and the health, safety, privacy and comfort of all associates. HealthSpan supports fully the laws prohibiting harassment and discrimination because of, but not limited to race, color, ethnicity, religion, sex, national origin, sexual orientation, age, ancestry, disability, veteran era status, or any persons with HIV infection, whether asymptomatic or symptomatic, or AIDS or in any manner prohibited by the laws of the state or the United States in the recruitment, selection, promotion, evaluation or retention of employees or volunteers. We obey all labor laws and rules that apply. Generally, these laws forbid:

- Employment that violates wage and hour rules, or employment of non-U.S. persons who cannot document their eligibility for employment, or
- Employment of non-trustworthy persons.

Report any discrimination or harassment at once to your Human Resources Department or use the 3-Step Process. We investigate promptly and thoroughly, following Human Resources policies and procedures. We will discipline anyone who violates harassment or discrimination policies.

CODE OF RESPONSIBILITY PRINCIPLE 4: OUR CULTURE OF TRUST WITH SENSITIVE INFORMATION

Keep information about patients, associates and the organization confidential. Our associates see a wide range of information that is confidential, sensitive or proprietary that includes information that we create and own or that is owned by others and provided to us for limited use. The information may be in many forms, including paper or electronic records, voice mail or in a person's memory. Giving out this information improperly can harm individuals, our business partners and our organization. Our associates must protect this information from being revealed or used without proper approval. They are to use such information only for the benefit of the patient and our organization. If you have questions about this principle, talk with your supervisor or use the 3-Step Process. These Standards can help guide you:

Personal and Patient Information

Our associates keep personal and patient information confidential, obeying the federal laws and rules that apply to privacy and security, including HIPAA (Health Insurance Portability and Accountability Act) and more stringent state laws. They prevent the release of any personal or confidential information about a patient unless it is needed for lawful business or patient care. They also do not seek personal or private information about any patient if they do not need it to complete their duties.

Proprietary Information

- Our associates must protect the information, ideas and intellectual property of HSP from use or release without permission. This includes information about our competitive position or business strategies, contract terms or negotiations, payments and reimbursements, internal policies and procedures, and information about negotiations with associates or other organizations. We protect this information and share it only with associates who need it to perform their duties.

Our associates must use, preserve and protect intellectual property. This includes patents, trademarks or copyrights, and programs, software or information owned by other organizations, following the terms of our license or other agreement to use the property. We also must use and protect confidential information or data owned by others that is given to us for our use, such as client lists, price lists, contracts or documents, following any terms we agreed to when we received the information.

- Our associates may not use confidential information that they obtain from competitors in violation of a non-compete agreement, prior employment agreement or other contract.

Personnel Records and Information

Some jobs require access to other associates' personnel files or other confidential information. This puts a special obligation on associates to make sure this information is used or released only with proper authorization. Improper access, release, or use of this information can harm our associates, our organizations and HSP. However nothing in this section is intended to prevent associates from voluntarily discussing employment matters.

Peer Review Information

Peer review information must be protected, according to federal and state laws and rules and our organization's policies. These laws and rules protect this confidential information so that health providers can talk openly and honestly about professional performance. They also protect our organization and our efforts to safeguard this information. If you have questions about which peer review information may be protected, ask, using the 3-Step Process if needed, before you share the data with anyone outside of our organization.

BUSINESS COMMUNICATIONS—EAVESDROPPING, WIRE OR INTERCEPTION

State and federal laws regulate wiretapping, eavesdropping and other forms of observing people by electronic means. Our policy is to obey all such laws that apply to our business. It is against the law to use any electronic, mechanical or other device to monitor, copy or obtain the contents of any telegraph, telephone, facsimile, modem, transmitted email or other communications unless one (or sometimes all) of the parties involved agree to it. You may violate the law merely by listening in on a conversation, even if you take no notes or make recordings. Unless you receive approval ahead of time, you must do one of three things if you pick up a phone that is in use by others.

1. You may listen to the call if you received prior permission to listen from every party to the call;
2. You must identify yourself at once so that every person on the call knows that you are on the line, or
3. You must hang up at once.



CODE OF RESPONSIBILITY PRINCIPLE 5: OUR CULTURE OF TRANSPARENCY TO AVOID CONFLICTS OF INTEREST

Avoid what are—or seem to be—conflicts of interest in your actions and dealings with others. Our associates work to further the HSP mission work of caring for Ohio families. They use their positions to benefit our organization, not for personal benefit or profit. Associates must avoid any conflicts of interest or what appear to be conflicts of interest that would cause a reasonable person to question their motives. Associates must report any real or potential conflicts of interest before acting in a way that might seem to be a conflict of interest. If you have questions about conflicts of interest, ask your supervisor or use the 3-Step Process to obtain help. These Standards can guide you:

Outside Interests and Activities

- Our associates or their immediate family members should not have an interest in any outside organization from which any HSP entity buys goods or services or that competes or does business with us. Ownership, financial interest or having an employment, consulting or management position may be considered an “interest.” Review our Conflicts of Interest Policy, or use the 3-Step Process to clarify how this policy may affect you.
- Our associates may not compete, either directly or indirectly, with any services, products or plans that any HSP organization offers. If you learn of a business opportunity that may interest HSP or our organization, let your supervisor know. You must give us the chance to take part in the opportunity before you take part in the opportunity.
- Associates who want to do extra work with an entity that does business with us must obtain their supervisor’s approval before doing so. If you obtain permission to moonlight with an outside entity, you must be sure the outside entity does not use your HSP position or title to suggest a business relationship with HSP or our organization.

- Our associates do not lend or borrow money or anything of value from a patient, individual or entity that does business with us, except if it is on the same terms offered to the general public.

Gifts, Entertainment and Discounts

- We conduct our business fairly. We do not offer, ask for, accept or give gifts, services, improper discounts, kickbacks or other things of value to influence the business actions of any supplier, vendor, customer, contractor, government official or other associate. Tell your supervisor or Corporate Responsibility Department about any personal or family relationship with an entity that is a current or potential vendor or contractor. Use the 3-Step Process to report any offer or request to you for a gift, improper discount or kickback to influence your business decisions.
- Our associates may not ask for money, rewards, gifts or any other thing of value from patients or their family members, or from contractors (except as approved for charity fundraising). Our associates may not accept money or rewards, or a gift that has more than a token value, from patients or their families. If a patient or family member wishes to give more than a token amount of money as a gift, refer them to our Foundation or other appropriate office for charitable donations.

Inside Information

Our associates do not use our business information for their personal profit or advantage. They also do not give any such information to anyone for any reason that is unrelated to performing their job duties.

Participation on Outside Boards of Directors

We encourage our associates to take part in the civic and social affairs of their communities. This may include serving on the boards of directors of various charitable, civic or fraternal organizations. When serving on such boards, remember:

- Obtain your supervisor’s approval before serving on the board of directors of any organization that may have interests that conflict with ours;

- Do not discuss or vote on any matter that might affect the interests of HSP or our organization;
- When you speak as a board member, be sure you are not identified as speaking on behalf of HSP or our organization, unless you are given permission to do so, and
- Be sure you follow your organization's policy on payment from outside groups, especially if your board duties require you to perform board work during your regular work hours.

HSP or your organization can withhold or withdraw consent for you to serve on outside boards or organizations if it would conflict with HSP's interests. If you think your board duties might present a conflict of interest, ask your supervisor or use the 3-Step Process to obtain an answer.



CODE OF RESPONSIBILITY PRINCIPLE 6: OUR CULTURE OF DIGNITY AND RESPECT FOR ALL

Treat everyone with dignity and respect and provide quality, holistic care.

- Our associates treat every person—including those we serve and other associates—with dignity and respect. We recognize each person's worth, value and status.
- Our associates make decisions to admit, treat, transfer and discharge based on the medical findings of what is best for each patient, resident or client. Our associates do not base decisions on the financial status of the patient, resident, client or the organization.
- Our associates follow our Statement of Common Values and encourage our patients, residents and clients to participate in considering ethical issues that arise in their care.
- Our associates understand that patients, residents and clients must have reasonable access to care based on what is best for them. We are dedicated to quality, holistic service in our work that addresses health and wellness, as well as healing for the mind, body and spirit.
- Our associates will help our patients, residents and clients to manage their pain through appropriate and timely assessments and pain management care.
- Our associates understand that patients, residents and clients must be allowed to express grievances or complaints and we will endeavor to resolve any grievances or complaints in a timely manner.
- The responsible physician or other licensed independent practitioner will clearly explain the outcome of any treatment or procedure to our patients, residents or clients, and to their families when appropriate, especially if outcome differs significantly from expected results.



CERTIFICATION



I acknowledge that I have received a copy of the HealthSpan Corporate Responsibility Program booklet and I agree to read it completely and discuss it with my supervisor, team leader or other managers.

I certify that I will comply with the Code of Responsibility and Standards of Responsible Conduct, and any other standards or policies set by my organization, throughout my association with HealthSpan.

I attest it is my responsibility to identify and disclose any Conflicts of Interest (COI) that would impact my job now and in the future. I recognize it is my responsibility to report any conflicts via the organization's COI form or report the conflict to the Corporate Responsibility Department.

I also certify that I am not barred from taking part in federal or state-funded health care programs; and I agree to inform the Corporate Responsibility Department if this occurs while I am associated with HealthSpan.

Name: _____
[Please print]

Department: _____

Organization: _____

Signature: _____ Date: _____

Please complete this certification and submit it to your training facilitator or Corporate Responsibility Department as documentation of your attendance at this orientation session and your receipt of this booklet. Thank you.



CORPORATE RESPONSIBILITY PROGRAM CONTACTS

You may contact the ReportLine to report concerns or ask questions 24 hours a day, 365 days a year.

Phone: 1-888-302-9224

Online: www.mercyhealthreportline.com (select Make a Report)

The 3-Step Process

1. Contact your supervisor or team leader
2. Contact your Corporate Responsibility Department
 - Angie DeBerry, HealthSpan Deputy Corporate Responsibility Officer, CRP: 513-551-1841
 - David Fogarty, HealthSpan Corporate Responsibility Officer, CRP: 216-479-5085
3. Contact the HealthSpan ReportLine with unresolved concerns or issues at 1-888-302-9224 or go to www.mercyhealthreportline.com and select Make a Report

CORE VALUES IN ACTION

HealthSpan
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Suite 1200
Cleveland, OH 44114-1153

