

DCH HEALTH SYSTEM CODE OF CONDUCT

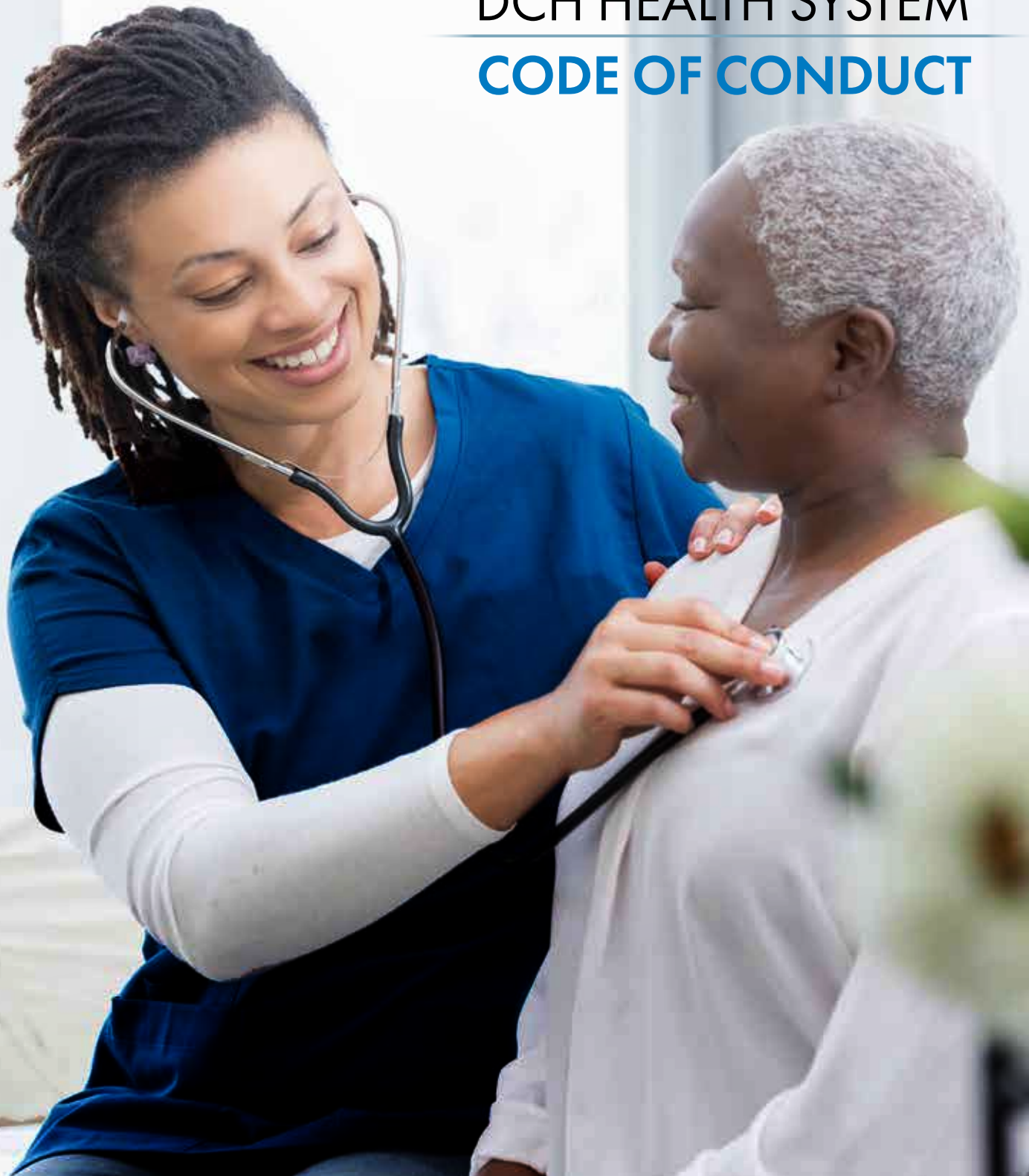


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A MESSAGE FROM THE CEO

The DCH Health System has a comprehensive Ethics and Compliance Program based on our core values of Compassion, Accountability, Respect, and Engagement. These four values are the cornerstone of our organizational culture. They have helped DCH earn the trust of our community for almost one hundred years. This history of trust has been built on a foundation of ethics and integrity; therefore, it is paramount that our daily decisions continue to be rooted in ethical principles and conduct.

This *Code of Conduct* is designed to provide our team members (DCH Board of Directors, employees, physicians, volunteers, vendors, etc.) with general guidance on the ethical principles that are necessary for DCH to be successful in its mission “to improve the health of our patients and community” and our vision “to be the provider of choice in our market by delivering excellent care to patients and families in West Alabama.”

While the *Code of Conduct* provides detailed business conduct policies for which strict adherence is expected, it is not designed to provide a specific course of action for every ethical decision encountered by our team. Rather, the *Code* is intended to support our team members in their commitment to business integrity, ethical behavior, and generally “doing the right thing.”

If you have questions about the *Code of Conduct* or encounter a situation that you believe violates any provision of this *Code*, please reach out to your supervisor, human resources, or the compliance officer. You may also utilize the anonymous Compliance and Ethics Hotline by calling 1-877-847-4324. DCH has a very strict non-retaliation policy, and there will be no retribution for asking questions or raising concerns about the *Code* or for reporting, in good faith, potential violations of the *Code*.

We expect that everyone read and understand this *Code*, as ethical practices are everyone’s responsibility. We appreciate everyone’s participation in helping DCH continue to maintain the highest standards of ethical conduct.

Sincerely,



Katrina Rose Keefer
President/CEO



Katrina Rose Keefer
President/CEO



INTRODUCTION

DCH, in and of itself, is a brick-and-mortar building. Its life, character, and reputation come from the people who provide patient care, support providers of patient care and deliver services, products, and materials to DCH. It is those services and relationships that result in the DCH Culture. The DCH Mission, Vision, and Values (MVV) serve as a guiding light to the type of healthcare organization we desire to be and that our community deserves (Table 1). High-quality patient care and outcomes are our objectives. Doing that with integrity and ethical behavior is also vitally important to DCH's MVV.

As an organization, DCH strives to remain fully compliant with all applicable rules and regulations governing the health care industry. In addition, DCH has an ethical responsibility to patients and the community to maintain a culture that encourages ethical behavior in patient care and business practices.

(Table 1. DCH's MVV)

MISSION

We serve to improve the health of our patients and community.

VISION

To be the provider of choice in West Alabama by delivering excellent care.

VALUES

Compassionate

Accountable

Respectful

Engaged





COMPLIANCE PROGRAM

DCH Health System (DCH) has a comprehensive compliance program that promotes ethics and compliance with team members at all levels. This section addresses the main components of the DCH Compliance Program. In addition, the use of DCH in this document includes all departments, clinics, and locations connected to DCH Health Care Authority.

PROGRAM STRUCTURE

The compliance program shows DCH's commitment to high standards of ethics and compliance. We have systems, processes, and committees in place to ensure compliance with laws, rules, and regulations to assure this commitment. In addition, the program supports DCH's ethical standards, *Code of Conduct*, and zero-tolerance policy for fraud and abuse.

Board of Directors

The Board of Directors oversees the compliance program through the DCH Audit and Corporate Compliance Committee (Compliance Committee). The compliance officer is responsible for the day-to-day management of the compliance program.

Corporate Compliance Committee

The DCH Compliance Committee consists of a subset of DCH Board Members. Their backgrounds, experiences, and areas of expertise are relevant to the compliance program's activities. The Compliance Committee is primarily responsible for providing governance and advising the compliance officer in managing and implementing DCH's compliance program.



Compliance Department

The Compliance Department's DCH page on the intranet includes more information about the Compliance Department, the compliance program, and related educational materials. It also has links to many other compliance resources. Additionally, the Compliance Department is available to assist you with any questions or concerns about any laws, rules, or regulations that apply to DCH.

Written Guidelines

DCH policies and procedures, along with this *Code of Conduct*, provide guidance on performing job responsibilities ethically and legally. As DCH team members, it is your responsibility to become familiar with and follow the policies and procedures that govern the workplace.

Therefore, all DCH team members are encouraged to review these policies and procedures to remain up-to-date with current guidelines.

Training

DCH has developed training programs to provide information about:

- Our compliance program
- Federal and state false claims acts
- Anti-Kickback statutes
- Fraud and abuse
- Patient privacy protections

- Emergency Medical Treatment and Active Labor Act (EMTALA)
- Theft of drugs
- Other topics that relate to operating an effective compliance program

Monitoring

Internal and external monitoring systems allow DCH to assess how our guidelines and training programs address compliance concerns. The information gained through monitoring is used to improve operations.

Ethics is the Foundation of an Effective Compliance Program

Some ethical situations are black and white. For example, if a particular action would be considered illegal, a team member should avoid the action and adhere to the law. But not every situation is clear cut, nor is every situation addressed by this *Code of Conduct*. When things are not clear, here are some things to consider:

- Verify that you have the correct facts.
- Think about the impact of your decision.
- Handle your decision like it could be reported in the news.
- Identify the possible consequences of your decision before you take action.
- Consider if your decision is setting a precedent.
- Put yourself in the situation.
- Stop if you are in doubt, and ask for help.

THE PURPOSE OF THE CODE OF CONDUCT

Honesty and integrity are core values of DCH. The need to make ethical decisions is essential as we interact with patients, physicians, and co-workers. It's not only the right thing to do; it's necessary for success. Our *Code of Conduct* provides direction to all DCH team members. It assists us in carrying out our daily activities ethically and legally.

The *Code of Conduct* applies to every DCH employee, regardless of their role. The *Code* and its guidelines also apply to all non-employees who work on behalf of DCH. These include members of the DCH Board of Directors, physicians, contractors, vendors, volunteers, and other health care professionals connected to us or doing business in our facilities.

PERSONAL ACCOUNTABILITY

We are personally responsible for our decisions and actions. Doing right is your responsibility. No one has the power to tell you to do anything unethical or illegal. However, we must behave in ways that maintain or improve DCH's reputation for honesty and integrity. Because of this, we must understand the laws, policies, and contractual agreements that apply to DCH.

DCH defines "acceptable behavior" as ethical, legal behavior and supports policies, procedures, and the *Code of Conduct*. It demonstrates a commitment to our patients and other customers by providing excellent service. **Unethical or illegal behaviors that do not support policies, procedures, or the Code of Conduct are not acceptable.**

As a team member, it is your responsibility to tell your leader and Human Resources if you are arrested or convicted of a crime. Also, if you become ineligible to participate in federal health care programs or are

WHO ARE DCH'S CUSTOMERS

At DCH patients, family members, guests, coworkers, physicians, and volunteers are considered customers.

convicted of a crime that could cause you to become ineligible, you must inform the Human Resources Department or the Compliance Department.

Behavior that interferes with patient care or the course of business is disruptive and will be addressed according to policy and procedure or through the appropriate medical staff committee.

LEADERSHIP RESPONSIBILITIES

While all DCH team members must follow these guidelines, each DCH leader must be an example for others in the organization. It is expected that all leaders be open and willing to discuss ethics and compliance related concerns with their respective team members. The work environment should be structured to where team members feel comfortable raising and discussing such concerns. Leaders also owe it to their team members to hold each team member accountable in a fair and consistent manner, which includes enforcing discipline consistently.

QUALITY: A COMMITMENT TO PROVIDING THE BEST POSSIBLE PATIENT CARE

The mission of DCH is: *"We serve to improve the health of our patients and community"*. The following standards help us in our goal to achieve "best practices" in clinical outcomes and support our commitment to provide high-quality patient care.

QUALITY OF CARE AND PATIENT SAFETY

We provide high-quality, cost-effective health care to all of our patients. We treat all patients with respect and dignity and provide care that is both necessary and appropriate. DCH dedicates itself to continuous quality improvement and patient-centered care.

DCH focuses on training as well as policies and procedures to provide quality care and outcomes. We realize that quality improves when we act on opportunities that appear in our daily work.

A commitment to excellent service and patient safety is the responsibility of every DCH team member. To help us meet our quality and safety goals, we establish processes that reflect the best practices required by regulatory agencies (i.e., the Centers for Medicare and Medicaid Services (CMS) Conditions of Participation, the Standards and Surveys of the Joint Commission, and the ongoing zero harm initiative focusing on patient-centered care).

PATIENT SAFETY

DCH Health System's vision is to be the provider of choice in our market by delivering excellent care to patients and families in West Alabama. DCH's mission statement strongly supports this vision: *"We serve to improve the health of our patients and community."* DCH is committed to developing a culture of safety, which can only occur through the practice and dedication of every team member.

Our vision and mission incorporate patient safety as a high priority. Therefore, all team members are empowered to provide services and care in a manner that ensures clinical excellence at all times.

PATIENT RIGHTS

Upon admission to any DCH facility, our patients have the right to expect:

- Equal access to quality care regardless of age, gender, gender identity, sexual orientation, disability, race, color, religion, or national origin.
- Patient care that is considerate and respectful of their personal beliefs and values.
- To be informed about and participate in decisions regarding their care.
- To participate in ethical questions that arise in the course of their care.
- To designate a decision-maker in case they cannot communicate their wishes regarding care.



- Personal privacy and confidentiality of their protected health information.
- Compliance with a request to transfer to another health care facility. In such circumstances, the patient is provided with an explanation of the associated risks, benefits, and alternatives.

EMERGENCY MEDICAL TREATMENT AND ACTIVE LABOR ACT (EMTALA)

DCH is committed to providing emergency medical treatment regardless of the patient's ability to pay. EMTALA applies to any patient who (1) comes to DCH seeking emergency treatment (2) has emergency treatment requested on his/her behalf or (3) is reasonably believed to be in need of emergency treatment. Patients in any of these categories will be given a medical screening examination. If an emergency medical condition is found to exist, the patient will be stabilized and treated within the capabilities of DCH. If the patient needs treatment that is beyond the capabilities or resources of DCH, the patient

will be transferred to a facility that can provide the level of care needed. The transfer will occur after the patient is stabilized as much as possible and another facility accepts the patient.

A patient may also be transferred at the request of the patient or his/her next of kin if an appropriate facility accepts the patient.

Patient registration can take place at any time during the patient encounter. However, this process may not delay the patient's evaluation, stabilization and/or treatment and may not discourage the patient from receiving treatment. Therefore, the discussion of financial matters prior to the time that DCH's EMTALA obligations have been discharged is strongly discouraged.

The immediate needs of the patient always come first.



PATIENTS: A COMMITMENT TO OUR PATIENTS AND EACH OTHER

We strive to improve the services provided to our patients and other customers. We are entrusted to provide excellent care and service to our patients every day. We are committed to treating each other and our patients with respect and dignity. We demonstrate these commitments when we live out the following standards.

CARE AND COMPASSION

Care is at the heart of what we do. We must treat our patients equally and with compassion, understanding, and respect. We never treat anyone differently because of race, ethnicity, religion, gender, gender identity, sexual orientation, national origin, age, disability, or veteran status. We involve them in decisions about their care. We obtain their consent for treatment and participation in research and explain available options. We never conduct medical procedures unless they support good medical practices.

PATIENT COMMUNICATION

Our patients have the right to know the name and qualifications of all team members who provide services for them. We offer various resources to our patients and their families to educate them about their illness and treatment plan. We encourage patients to share any concerns with us. We use this information to improve patient care and customer satisfaction.

PRIVACY AND SECURITY

We respect our patients by protecting their privacy and personal information. We recognize that we hold sensitive information about our patients, and they expect the information to be kept confidential.

We have physical and procedural safeguards in place to protect their information. At registration, we provide patients the “Notice of Privacy Practices” that details their rights and responsibilities regarding their medical information.

In alignment with HIPAA (Health Insurance Portability and Accountability Act) standards, DCH will only disclose patient-specific information to others for treatment, payment, or health care operations unless patient consent is obtained to release for other purposes. In addition, no DCH team member or other health care partner has a right to access or disclose any patient information other than what is necessary to perform their job responsibilities (minimum necessary standard).

GUIDING PRINCIPLES OF INFORMATION PRIVACY AND SECURITY

The following list of safeguards serves as boundaries to protect personal health information.

- We comply with all DCH policies and procedures relating to patient privacy and security.
- We safeguard confidential information from misuse, theft, or unauthorized access.
- We use reasonable steps to ensure unauthorized individuals do not overhear or see confidential information. We do not discuss confidential information in public areas.
- We do not access confidential information without a work-related need. All patient information is confidential, not only the medical information – ALL information.



- Team members are encouraged to use the patient portal to access information regarding their health records. They may also officially request records through the Health Information Management Department.
- We do not access records or information belonging to family members, friends, neighbors, co-workers, high profile people, or celebrities without a work-related need.
- We access, disclose or use only the minimum amount of information necessary to complete a task.
- We do not communicate patient information through regular texting on personal devices.
- We do not take photographs or videos of patients, patient information, or post hospital or patient information on social media.
- We report any theft, loss, or breach of confidential information to our supervisor or Privacy Officer.
- We interview patients as privately as possible. We knock before entering a room and close doors or pull curtains whenever possible.
- We communicate with our patients, their families, and significant others privately and respectfully.
- We respect the privacy of our co-workers by refraining from gossip.
- We ensure our patient's dignity by providing appropriate gowns, sheets, or blankets.
- We keep passwords secure and do not share accounts. Authorized users are responsible for the security of their passwords and accounts.
- We log off all PCs, laptops, and workstations when they are unattended.
- We always encrypt emails to healthcare providers outside the DCH network by placing "dchsecure" in the subject line of the email.

- We dispose of patient information by using shred bins.
- We take extreme care to ensure that patient information is not mailed, emailed, or faxed to wrong parties.
- We do not leave patient information in any format unattended in public areas.
- Only the minimum necessary information needed to complete a task is used, accessed, or disclosed regardless of the extent of user access provided.
- We participate in Privacy and Security training at least once annually.

PATIENT WAITING

We know that our patients' time is valuable. Therefore, we strive to provide our patients with prompt service, making them comfortable while they wait.

These four behaviors guide our actions when delays do occur:

- If there is a delay in service, thank the patient for waiting, apologize for their inconvenience and determine the best way to meet their needs. In these situations, patients should be updated by the care provider frequently.
- Educate patients and families about processes. For example, they need to know that procedures often do not begin as soon as patients enter the area.
- Our patients' families are as important to us as our patients. Update family members periodically while a patient is undergoing a procedure.
- Provide a comfortable environment for waiting patients and family members.

REMEMBER:

"If our patients wait, we update!"

ELEVATOR ETIQUETTE

Elevator etiquette can create a positive impression for our customers. Good elevator manners, like the ones described in Box 1, contribute to patient satisfaction.

(Box 1)

ELEVATOR ETIQUETTE EXPECTATIONS

- Pause briefly before entering an elevator. Do not block the way for anyone exiting.
- Use the elevator as an opportunity to make a positive impression. Smile and speak to other passengers.
- Do not discuss patients, their care, or DCH business in elevators.
- Do not use the elevators to make personal phone calls.
- Use service elevators when transporting patients and equipment.
- Allow patients in wheelchairs to face the elevator door.
- Always make sure the way is clear when exiting an elevator with a patient in a wheelchair, on a bed, or stretcher.
- Do not allow the patient to be surrounded by other visitors or team members. Instead, politely ask others to wait for another elevator.
- Be considerate of a patient's condition before entering the elevator. For example, the presence or aroma of food, perfume, etc., may be unpleasant to a patient and have an adverse effect on their condition.
- Once on an elevator, if sufficient room is available for others, hold the door for them.



FINANCIAL: A COMMITMENT TO CONDUCT BUSINESS IN AN ETHICAL AND FINANCIALLY RESPONSIBLE MANNER

To provide the best possible care to our patients, we must produce the financial resources necessary to support our mission. Therefore, we are committed to doing business in an ethical and financially responsible way.

DOCUMENTS AND RECORDS

Each DCH team member is responsible for the integrity and accuracy of our organization's documents and records. This responsibility aligns with regulatory and legal requirements and supports our business practices.

No one may change or place false information on any record or document. Records must never be altered or destroyed in an effort to deny authorities information that may be relevant to an investigation.

Medical and business documents and records are retained as outlined by law and our record retention policy. Medical and business documents include paper documents, digital documents, or other tools that hold information about DCH or its business activities. It is vital to keep and destroy records as outlined by DCH policy. We will not use patient, employee, or other information for personal gain (identity theft). Any errors in medical documents identified by the patient may be amended in compliance with HIPAA requirements.

CODING AND BILLING

DCH is committed to making sure that the bills we submit are complete and accurate. We will only bill for medically necessary services. Services will not be changed to inappropriately bypass coverage limitations or to increase reimbursement. DCH takes steps to ensure that billing and coding are correct and timely and investigates any billing errors. Staff assigned to work in billing and coding areas are expected to understand and follow all billing related policies and procedures established by Medicare, Medicaid, and other insurance programs.

Any subcontractors who perform billing or coding services for DCH are expected to have the necessary skills, quality control processes, systems, and procedures to ensure all billings for governmental and commercial insurance programs are accurate and compliant.

RELATIONSHIPS WITH PAYORS

We must provide government agencies and other payors with truthful and correct information in all written and verbal statements. Anyone who documents in a medical record at DCH must provide complete and accurate information in a timely manner. False statements to a government agency or other payors will not be tolerated.

PROPRIETARY INFORMATION

The term "proprietary information" refers to information about DCH's strategies and operations as well as patient

information and third-party information. Proprietary information is anything related to DCH's operations that are not publicly known, including personnel data, patient financial information, passwords, pricing and cost data, financial data, strategic plan, marketing strategies, and techniques. Improper use or release of this type of information could violate our legal and ethical obligations.

Team members may use proprietary information only as necessary to perform their job responsibilities. We will not share this information with others unless the person or organization has a legitimate need to know in order to perform their specific job duties or carry out a contractual business agreement.

Information that is privileged and confidential or otherwise protected by law should never be shared outside of the organization unless expressly authorized by DCH General Counsel.

FINANCIAL REPORTING

DCH is committed to ensuring that all of its financial reports and records are correct, complete, and aligned with generally accepted accounting principles. DCH has a system of internal controls and procedures to assure that all financial actions are performed as outlined by management and are recorded in a way that maintains accountability of DCH's assets.

RELATIONSHIPS WITH VENDORS AND SUBCONTRACTORS

Team members, who work with suppliers, should act professionally and legally. DCH promotes competitive purchasing to the maximum extent possible. DCH selects products or services based solely on business criteria, including quality, price, delivery, technical excellence, availability, service, and maintenance of adequate sources of supply. Purchasing decisions will not be based on personal relationships.

Vendor payments or material gifts to the individual choosing the supplier is strictly prohibited. Likewise, gifts to the individual choosing the supplier are also not allowed unless a specific exception for the situation exists

in the "Gifts, Gratuities and Entertainment" policy. DCH's "no gift policy" prohibits accepting anything of value from suppliers or potential suppliers.

DCH expects the people and companies that work on our behalf to maintain high standards. If you work with contractors, you are responsible for making these companies and their employees aware of our compliance program. In addition, all vendors are provided with information about our compliance plan at the check-in kiosk in the main lobbies of each hospital.

When faced with a difficult situation, it may help to ask yourself these questions:

- Are my actions legal?
- Am I being fair and honest?
- Will my actions stand the test of time?



POLICY ON FRAUD AND ABUSE

DCH requires all team members to report known or suspected wrongdoing (fraud, waste, or abuse) to the compliance officer or through other appropriate means (i.e., the Compliance Reporting Hotline, hospital administration, or immediate supervisor). Any individual who, in good faith, reports known or suspected wrongdoing will be protected from retaliation. DCH will take appropriate corrective action as soon as possible when credible evidence of fraud, waste, or abuse is discovered.

DEFINITIONS

It is important for all DCH team members to know and understand the following terms, as relates to the reporting of suspected wrongdoing:

- **FRAUD** – An action taken on purpose to secure unfair or unlawful gain. As it relates to the False Claims Act, fraud is defined as intentionally making false statements to receive some benefit or payment for which no entitlement would otherwise exist.
- **ABUSE** – Excessive and wrongful misuse of anything. As it relates to the False Claims Act, abuse includes providing inconsistent services with established, sound medical practices or practices that result in unnecessary costs to the Medicare or Medicaid programs.
- **WHISTLEBLOWER** – An individual that reveals wrongdoing within an organization to the public or those in a position of power. A whistleblower is an individual who knows of potential illegal activities in their organization and reports them to the public. The False Claims Act protects whistleblowers from retaliation, as detailed below.

FEDERAL FALSE CLAIMS

The Federal False Claims Act (FCA) was created to punish individuals or companies that file false claims for payment with federal government agencies. These laws apply to

any false claims for payment from the federal government, not just for health care services. Violation of the FCA happens when a service provider, knowingly or recklessly, files false bills for payment to government programs such as Medicare and/or Medicaid. Billing errors are not considered false claims when they are promptly corrected when identified, and refunds are processed.

REGARDING FRAUD, WASTE, AND ABUSE

The Deficit Reduction Act requires any organization receiving more than \$5 million annually from the Medicaid program to have policies and procedures to detect and prevent fraud and abuse. These efforts must include employee education incorporated into the compliance program, new hire orientation, and annual compliance training.

Medicare Part C (Medicare Advantage/Medicare Managed Care) and Medicare Part D (Medicare Prescription Drug Benefit) also require that health care providers have policies and procedures designed to detect and prevent fraud, waste, and abuse.

Violations of the False Claims Act may result in damages and financial penalties ranging from \$11,805 to over \$23,607 **per claim** (as of 2022) and exclusion from the Medicare and/or Medicaid programs. Penalties adjust annually due to inflation.

Our Code of Conduct requires that all team members report known or suspected wrongdoing. Reports can be made to the compliance

officer, General Counsel, hospital Administration, or immediate supervisor. Reports can also be made anonymously to the Compliance Reporting Hotline at **877.847.4324**. Failure to report known or suspected wrongdoing violates the DCH *Code of Conduct*. It may result in accountability action up to and including separation of employment.

DCH's compliance program includes all necessary elements for an effective fraud, waste, and abuse prevention program. Examples of FCA violations are listed in Box 2. Violations by a health care provider of other laws, such as the Anti-Kickback Statute and the Stark Law, may form the basis for an FCA action.

(Box 2)

EXAMPLES OF FALSE CLAIMS ACT VIOLATIONS

- Filing or participating in the filing of a false claim for payment.
- Intentionally making or using false records or statements to support a claim.
- Seeking reimbursement at a higher code or level than is appropriate for the service provided.
- "Unbundling" claims for services that are required to be billed on a bundled basis.
- Claiming payment from federal programs for services that are not medically necessary or not authorized by the physician treating the patient.
- Failing to have business practices to process and file accurate claims, resulting in filing inaccurate or misleading claims.
- Billing Medicare or Medicaid substantially more than the usual charge.

Another important feature of the FCA is the qui tam provision or whistleblower statute. This statute allows individuals to file suit on behalf of the federal government if they have independent knowledge of illegal activity, including fraud and/or abuse. Whistleblower actions typically remain secret for at least 60 days while the government decides whether or not to get involved. After that, the government can choose to take over the case and prosecute the wrongdoing or settle the charges. If the government refuses to get involved, the whistleblower may go forward with the lawsuit at their own expense, as long as the government does not object.

When the government gets involved, whistleblowers can receive 15-25 percent of the recoveries as a reward for coming forward. When the government refuses to get involved and the whistleblower moves forward, they can earn 25-30 percent of the recoveries. When the lawsuit is brought by a person who was part of the illegal activity, the court may reduce the award to the extent that it feels is appropriate. If the person is convicted, then they will not receive any share of the recoveries.

Whistleblowers are protected from retaliation under the FCA, which states, "any employee who is discharged, demoted, suspended, threatened, harassed, or in any other manner discriminated against by their employer because of lawful whistleblower actions shall be entitled to all relief necessary to make the employee whole..." Fines for such treatment may include two times back pay plus interest, job replacement at the same level with the same seniority, plus legal fees and any other costs paid by the employee due to the discrimination.

Any individual making a good-faith report of wrongdoing at DCH will be protected from all forms of retaliation. Intentionally making false misconduct allegations will not be tolerated and may result in accountability action, including separation of employment.

To prevent and identify fraud and abuse, we have a compliance program containing all of the essential elements of an effective compliance program. In addition, DCH has implemented billing edits, routine monitoring and periodic auditing activities to detect claim errors and/or fraudulent activities.

All employees must complete annual compliance training to obtain updated information regarding the compliance program, regulatory changes, and updates regarding the prevention of fraud, waste, and abuse.

All team members are reminded of their responsibility to report any known or suspected wrongdoing. **Failure to report known or suspected wrongdoing is a violation of our Code of Conduct. It may result in accountability action up to and including separation of employment.**

ANTI-KICKBACK

This federal law prohibits healthcare providers from soliciting or accepting anything of value for referrals of Medicare or Medicaid patients. A violation can result in jail time, fines, and exclusion from the Medicare and Medicaid programs.

DCH team members should never give or offer anyone something of value to produce referrals or as a reward for referrals. The “something of value” can be money, services, gifts, entertainment, or anything else that would be attractive to a person.

STARK LAW

The Stark Law is a federal law. It prevents physicians from referring Medicare patients for certain services to a company where the physician or family member will receive financial gain from the referral payment.

DCH requires all physician payment agreements to be formalized in a contract approved by General Counsel. Any questions or concerns about whether a particular arrangement is allowed should be directed to the DCH Compliance and/or Legal Departments.

PHYSICIAN RECRUITMENT

The recruitment of physicians and purchase of physician practices requires special care to comply with fraud and abuse laws, the Stark Law, and Internal Revenue Service’s rules governing DCH’s tax-exempt status. Therefore, each recruitment package or purchase agreement is in writing and consistent with policies established by DCH. Physicians are not required to refer patients to DCH, and physician payment or support is not related to the volume or value of referrals.



PEOPLE: A COMMITMENT TO ETHICAL CONDUCT

DCH seeks to create an environment that attracts and develops the best people to provide the best care possible to our patients. Therefore, team members are expected to read and understand policies, procedures, and other guidelines related to their roles, as they contain specific instructions designed to ensure ethical and compliant behaviors.

POSITIVE WORK ENVIRONMENT

Each DCH team member has the right to work in a positive environment. Therefore, DCH does not allow conduct that disrupts the work environment, including disrespectful, hostile, intimidating, threatening, or unprofessional behaviors. Professional behavior creates

an environment that promotes safe and high-quality patient care and results in a positive learning environment. Therefore, it is DCH's policy that all team members behave professionally, avoiding inappropriate or disruptive behavior and appropriately resolving conflicts at all times. Table 2 provides examples of professional behavior.

INAPPROPRIATE DISRUPTIVE BEHAVIOR

Inappropriate behavior means behavior that is uncalled-for and is generally understood to be degrading or shocking. Repeated inappropriate behavior can become a form of harassment and can disrupt the work environment. Disruptive behavior will result in corrective action. Examples of disruptive behavior are listed in Table 2. If you experience or see any form of disruptive behavior, you should immediately report it to a supervisor, the Human Resources Department, the Compliance Department or **call the Compliance Reporting Hotline at 877.847.4324.**





(Table 2)

EXAMPLES OF PROFESSIONAL AND DISRUPTIVE BEHAVIORS

PROFESSIONAL BEHAVIORS

- Clearly identifies one's self to patient and staff;
- Maintains a clean and neat appearance;
- Maintains self-control;
- Treats co-workers and patients with dignity and respect
- Collaborates with other members of the health care team and treats them with respect;
- Answers questions and explains the patient's plan of care to the patient, family (with patient's permission), and health care team members;
- Respects cultural and religious differences;
- Is truthful in verbal and written communications;
- Communicates differences in opinion and good faith criticism respectfully in the appropriate place;
- Is on time for meetings and appointments.

DISRUPTIVE BEHAVIORS

- Belittling or aggressive statements;
- Name-calling;
- Profane or disrespectful language;
- Outbursts of anger;
- Racial, gender, or ethnic jokes;
- Criticizing other caregivers in front of patients or other staff;
- Comments that undermine a patient's trust in other caregivers or the facility;
- Inappropriate comments are written in the medical record;
- Failure to respond to patient care needs or staff requests;
- Deliberate lack of cooperation;
- Deliberate refusal to return phone calls, pages, or other messages concerning patient care or safety;
- Making degrading comments about patients and their families, nurses, physicians, volunteers, facility personnel and/or the facility;
- Physically threatening language or behavior directed at anyone in the facility, including physicians, nurses, or any other member of the DCH team;
- Sexual or other forms of harassment including, but not limited to, persistent inappropriate behavior and repeated threats of litigation;
- Retaliation against a patient, visitor, or another member of the DCH team who reports an instance of violation of the code of conduct or who has participated in the investigation of an incident, regardless of the perceived truth of the report.



WORKPLACE VIOLENCE

We are committed to maintaining a violence-free work environment. Workplace violence includes criminal acts, robbery, violence (actual or threatened) directed at anyone, intimidation, stalking, terrorism, and hate crimes. No firearms or other weapons, including explosive devices or dangerous materials, are allowed, except when carried by law enforcement officers on duty.

HEALTH, SAFETY, AND ENVIRONMENTAL LAWS

DCH is committed to upholding all applicable federal, state, and local health, safety, and environmental laws. DCH team members are responsible for ensuring that we follow these laws, including laws regarding:

- Handling and disposal of infectious materials
- Use of medical equipment
- Use of personal protective equipment to prevent the spread of infectious diseases
- Storage, security, handling, and disposal of hazardous materials

Please notify your supervisor immediately if you become aware of a situation that presents a danger or may be in violation of health and safety standards.

ALCOHOL AND DRUGS IN THE WORKPLACE

DCH is committed to providing a safe workplace for its team members, patients, and community. This commitment is put at risk when anyone uses drugs or alcohol on or off the job. Team members should not come to work under the influence, possess, distribute or sell drugs while on duty or on DCH property. The same is true for alcohol. The use of alcohol or any illegal substance while at work is not allowed. In addition, team members should not be impaired by the use of too many prescription or over-the-counter drugs.

DCH has the right to require employees, doctors, volunteers, and contract staff to agree to search their persons, lockers, and personal property if there is cause

to believe that they possess drugs or alcohol. For-cause drug screens may also be needed for impairment, complaints, or investigation purposes. If any employee, doctor, volunteer, or contract staff refuses consent for a for-cause search or drug screen, the hospital will take appropriate action per policy. All team members have a duty to immediately report any concerns of impairment to Employee Health.

Drug Diversion

Drug diversion is taking medication, including “waste,” from patients or health care facilities for personal use. Prescriptions, controlled medications, and supplies must be appropriately handled to lower risks to, patients, team members, and the community. If you know of any unsecured medications or theft of drugs from the organization, it must be reported immediately to a supervisor, the Drug Diversion Specialist, or the Compliance Department.

LICENSE AND CERTIFICATION RENEWALS

DCH team members must maintain all credentials, licenses, and certifications that are necessary to perform their job. DCH does not hire, contract with, or bill for services provided by persons or organizations excluded from participating in the federal health care programs by the Department of Health and Human Services, Office of Inspector General, or the U.S. General Services Administration.

As a DCH team member, it is your responsibility to tell your supervisor and Human Resources if you are arrested or convicted of a crime. Also, if you become ineligible from participating in the federal health care programs, or if convicted of a crime that could lead to becoming ineligible, you must tell the Human Resources Department or the Compliance Department. You must also inform the Human Resources Department or the Compliance Department of any lapse in credentials, licenses, or certification required to perform your job. Medical Staff members have a duty to report each of these issues to the Medical Staff Office.

CONFLICTS OF INTEREST

DCH wants to make sure that business decisions are made objectively and free from improper influence. Therefore, disclose all potential conflicts of interest. For example, a conflict of interest may occur if a team member's outside activities and/or employment, personal financial interests, or other personal interests influence or appear to influence the team member's ability to make objective decisions concerning their job responsibilities. A conflict of interest also may exist if the demand of any outside activities hinders or distracts a team member from their job performance or causes the individual to use DCH resources for anything other than DCH purposes.

(Box 3)

CONFLICT OF INTEREST EXAMPLES

- Being employed by a competitor or potential competitor while employed by DCH.
- Requesting or accepting anything of value in exchange for, or as a result of, services performed in the course of employment.
- Conducting business on behalf of the hospital with any company that you or a member of your family has a financial or personal interest.

Examples of possible conflicts of interest are contained in Box 3. If you have any questions about whether an activity might be a conflict of interest, you must complete a Conflict of Interest form in order to get written approval from your supervisor, the compliance officer, and facility administrator before pursuing the activity.

GIFTS AND ENTERTAINMENT

DCH team members must remember that the federal Stark law governs all business relationships with physicians. Also, the federal anti-kickback statute and other laws

restrict the giving or receiving anything of value to influence referrals or recommendations of federal health care program business. Because of these laws, DCH developed policies and procedures on the giving and acceptance of gifts. As a result, DCH team members never offer, give or accept bribes or kickbacks. If in doubt, ask first!

Providing Gifts and Entertainment

DCH does not provide gifts or entertainment if a law or policy prohibits it. Nor do we provide gifts or entertainment to get referrals or to reward referrals. Gifts to potential referral sources must be reasonable, occasional, and approved by the compliance officer and General Counsel. If the recipient is not a potential referral source, any gift or entertainment must be small enough in value that it will not influence the receiver.

Laws and regulations also govern political contributions and gifts to elected officials or government employees. Therefore, team members should not commit to any political contribution or gift on behalf of DCH before discussing with Senior Leadership and the Compliance Department.

Receiving Gifts

DCH has a "Gifts, Gratuities, and Entertainment" policy. To avoid a conflict of interest, the appearance of a conflict of interest, or the need for our team members to examine the ethics of acceptance, DCH and its team members should not accept gifts from vendors, suppliers, customers, potential employees, potential vendors, or suppliers, patients, or any other individual or organization, under any circumstances, unless an exception applies as outlined in the DCH policy "Gifts, Gratuities and Entertainment."

COMPUTER, EMAIL, AND INTERNET

All communication systems, including phone systems, voice mail, internet access, and email, are DCH property. They are to be used for business purposes. You should assume your communications on company-owned or maintained systems are not private. Never send confidential patient or organizational information outside the DCH network by text, unsecure email, or another unencrypted mobile process.

When it is essential to communicate confidential patient information to another healthcare provider, use DCH's email encryption process by typing "dchsecure" in the email subject line [This will work using Outlook or the Outlook Web Application (Webmail)]. Do not include confidential patient or organizational information in the subject line of an email.

Team members should not use any communication system to post, store, download, or transmit illegal, threatening, or obscene material. Do not use DCH resources to distribute false materials, send or solicit chain letters, or spam.

Do not violate copyright protections. DCH reserves the right to access and monitor company communication systems. Anyone who abuses these systems or uses them excessively for personal purposes will be subject to corrective action.

PERSONAL USE OF COMPANY RESOURCES

All team members are responsible for using company resources wisely, including time, materials, equipment, supplies, and information. These resources are to be maintained and used for business purposes only. Use of resources for personal financial gain is not allowed. Your supervisor must provide written approval to use resources for charitable reasons.

ATTITUDE

At DCH, we believe that we are here to serve our customers. Therefore, we are committed to providing excellent service in meeting our customers' needs with courtesy and care. This commitment to service is reflected by demonstrating the behaviors listed in Box 4.

GIVING DIRECTIONS AND INFORMATION

Pay attention to customers and visitors. If someone looks like they need directions, offer to help. Let customers know that you will help them to their desired location. If you are unable to escort a customer personally, take them to someone who can.

(Box 4)

CARE BEHAVIORS

- Greet all with a smile, make eye contact and use a friendly tone of voice.
- Introduce myself.
- Ask how I may help.
- Keep all informed.
- Take the time to listen actively.
- Respect the modesty and privacy of others.
- Escort those who appear to need directions or find someone who can assist.
- Ask if there is anything else I can do.
- Pick up litter.
- Avoid using personal technology in hallways and elevators.
- Thank guests for choosing DCH.

COMMUNICATION

The goal of communication is to understand. We must be committed to listening to our co-workers and customers to understand their needs. We must pay attention to both their verbal and nonverbal cues of co-workers and customers.

Our messages should be delivered with courtesy and clarity. Use words that the person you are speaking to can easily understand. DCH team members should avoid gossip and making offensive or hurtful comments.

Greetings and Introductions

When introducing and communicating with others:

- Introduce yourself with a warm and friendly smile.
- Use "please" and "thank you," "sir," and "ma'am" in conversations.
- The use of words such as "honey," "sweetie," etc., is inappropriate in the workplace.
- Listen to concerns closely, showing that you care.

Telephone Etiquette

When communicating by telephone:

- Answer all telephone calls promptly (within three rings whenever possible), in a courteous, professional manner.
- When answering calls, identify your department and yourself, and then offer assistance to the caller.
- Speak clearly.
- When transferring a call, provide the caller with the correct number in case the call is lost.
- Get the caller's permission before putting them on hold. Thank them for holding when you return to the line.
- If you are using a speakerphone, inform the other person. Tell them if anyone else is in the room with you.
- Acknowledge callers on hold periodically, report the status of their calls and ask if they want to continue to hold.
- Place phones on voice mail only when necessary. Keep recorded voice mail messages short and to the point.
- Return calls promptly.
- End calls in a kind manner by saying, "thank you", "goodbye", etc.

Email Etiquette

Electronic email is an easy and frequently used means of communication. However, there are some special considerations to keep in mind when utilizing email.

Email is not private. It is considered company property and can be used in a court of law. A rule of thumb: compose an email as if it will show up on the front page of a newspaper. Consider these guidelines when communicating by email:

- Limit the length of an email.
- Never use ALL CAPITAL LETTERS. The reader may feel that you are SHOUTING.
- Treat email as confidential. Do not forward messages without the knowledge of the author.
- Think before you send. If you are emotional when writing the message, reread it and reassess it before sending it.
- When necessary, break the cycle of SEND and RESPOND. Pick up the phone.

- Do not manage by email. While email is a useful tool, it is not meant to replace face-to-face communication between leaders and team members.
- Be diplomatic. Criticism is always harsher when written.
- Be calm. You may have misunderstood what was meant. Don't reply while you are still angry.
- Be brief. When replying to a message, include just enough of the original message to give the context of your response.
- Watch out for viruses in files attached to emails. Do not open attached files received from outside the DCH System unless you have verified with the sender that the information is safe.
- Be professional. Only send (or reply to) an email to a person or group who has a "need to know" related to the content.
- Use correct spelling and grammar. Pay attention to rules of grammar.
- Do not forward chain mail, junk mail, or spam. It slows down the network, wastes time, and violates policy.

Media

To avoid confusion and ensure we are compliant with regulatory requirements, DCH communicates with the community in a clear, unified voice. Any media inquiries or requests for interviews, press releases, or use of our company logo should be referred to the Marketing and Communications Department. They can be reached at **205-759-7209**.

REQUESTS FROM THE MEDIA ARE REFERRED TO MARKETING AND COMMUNICATIONS

COMMITMENT TO OUR COLLEAGUES

DCH team members are linked to one another by a common purpose – serving our patients and our community. As team members, we should support one another. Without everyone's contributions, we could not perform our responsibilities to the fullest. Make new team members feel welcome. Be supportive and offer help as needed. DCH team members are encouraged to address problems by speaking with their leader or contacting Human Resources or the Compliance Department.

REPORTING IMPROPER PRACTICES AND BEHAVIOR: A COMMITMENT TO INTEGRITY

While ethics and compliance can often be complicated and confusing, our commitment to doing the right thing should not waiver. We should always strive to “do the right thing” for our patients, guests, co-workers, and other customers.

PERSONAL OBLIGATION TO REPORT

We are committed to ethical and legal conduct in alignment with all laws and regulations. We will correct wrongdoing whenever and wherever it occurs. Each DCH team member is responsible for reporting any activity that appears to violate laws, rules, regulations, standards of medical practice, Federal Healthcare Conditions of Participation, or this *Code of Conduct*.

You should report actions/behaviors that conflict with the Code of Conduct, DCH policies, or our commitment to provide high-quality health care ethically as well as incidents that could possibly harm patients or co-workers (See Table 3). Questionable behavior even if you’re not sure there is a problem should also be reported.

Sometimes a small detail of a situation is discovered to be part of a much larger problem. It’s important to remember that even the appearance of a conflict of interest can be serious. If you have concerns that a particular issue has not been sufficiently addressed, you may report the situation to a higher level of management or the Compliance Department.

LEADERSHIP RESPONSIBILITIES

While all team members are responsible for following the *Code of Conduct*, DCH expects leaders to set the example. Everyone with supervisory responsibility is expected to perform in a kind, sensitive, thoughtful, and respectful manner. In addition, leaders are expected to create an environment where all team members feel free to raise concerns or propose ideas.

Leaders are also expected to ensure that team members have sufficient information to uphold laws, regulations, policies, and the resources to resolve ethical dilemmas. They must help to create a culture within DCH that promotes the highest ethical standards and compliance. This culture must encourage everyone in the organization to share concerns openly and timely. We must never sacrifice ethical behavior in the pursuit of business objectives.

COMPLIANCE REPORTING HOTLINE

The Compliance Reporting Hotline is a confidential telephone line to report ethics and compliance concerns or ask questions about compliance issues. The hotline is answered by a company that is not a part of DCH. You can call the hotline at any time of the day or night from any location.

It’s a free call and completely confidential. You do not have to give your name. When you dial **877.847.4324**, a specialist will answer the phone and listen to the details

EXAMPLES OF QUESTIONABLE BEHAVIOR

BEHAVIORS THAT...

HINDER HIGH-QUALITY CARE

- Paying someone to refer or admit patients.
- Billing for services not provided.
- Billing for inappropriate admissions or medically unnecessary services.
- Backdating written or electronic entries in the medical record.
- Providing services that violate federal or state laws.
- Using accounting practices that violate DCH policies and/or laws.
- Allowing a vendor's gift to influence a business decision.
- Inappropriately sharing confidential information.
- Looking in the medical record of a family member, friend, team member, or anyone for personal reasons (i.e., snooping).
- Harassing or discriminating against others.
- Engaging in any activity that creates a conflict of interest.

COULD HARM PATIENTS OR TEAM MEMBERS

- On-the-job substance abuse,
- Stealing or accepting bribes or kickbacks,
- Using company resources for personal use,
- Accepting entertainment, gifts, and tips,
- Violating internal accounting controls,
- Being asked to lie to cover another team member's mistake,
- Using a company computer to send an inappropriate email,
- Improperly retaining or disposing of company records,
- Theft of property, including medication,
- Failure to visually witness narcotic waste when signing as a waste witness
- "Covering up" any violation of this code of conduct, or
- Violations of patient privacy by team members on social media.

of your concern. They may ask follow-up questions to make sure they understand the situation. At the end of the call, the specialist will give you a confidential case number, a security code, and a date to call back if you want an update on the situation.

Corporate Compliance Committee for investigation. After the investigation, the Compliance Reporting Hotline will be updated. You can check back and get an update on the investigation if you wish to do so.

COMPLIANCE HOTLINE PHONE NUMBER

877.847.4324

After each call, a written report is provided to the compliance officer and the Chairman of the Audit &

NON-RETALIATION FOR REPORTING

It is strictly prohibited to retaliate against someone for: raising a concern, calling the hotline, or cooperating with an investigation. Retaliation means taking action in return for an injury or offense. Claims of retaliation are taken very seriously and, if proven, will result in corrective action, up to and including separation of employment.

INTERNAL INVESTIGATIONS OF REPORTS

We are committed to investigating all reported concerns quickly and confidentially. If DCH initiates an investigation to determine whether there has been illegal or unethical conduct, you must cooperate with the investigation and disclose all information and records you are aware of that are relevant to the investigation. Failure to cooperate with an internal investigation violates the principles outlined in this Code of Conduct and can lead to corrective action, up to and including separation of employment.

GOVERNMENTAL INVESTIGATIONS

DCH complies with all state and federal laws and regulations and cooperates with any reasonable request for information from any government agency. It is vital to respond to government requests for information in an accurate, complete, and timely manner. You must notify your supervisor, department director, Legal Counsel or the Compliance Department immediately if you receive a subpoena, search warrant, or other legal documents from a government agency regarding DCH business.

We encourage team members to cooperate with government authorities conducting investigations. No adverse action will be taken against team members for cooperation. You should be aware that the law guarantees each person the right to be represented by legal counsel during an investigation by any government agency. If an investigator shows up on the premises, team members should ask for a business card and immediately contact Compliance or Legal Counsel.

CORRECTIVE ACTION

When internal investigations verify a reported violation, it is the policy of DCH to take corrective action, including;

- Making prompt refunds of any overpayments,
- Notifying the appropriate government agency,
- Instituting whatever accountability action is necessary; and
- Implementing appropriate changes and/or education to prevent a similar situation from occurring in the future.

RESOURCES FOR GUIDANCE AND REPORTING CONCERNS

To obtain guidance on an ethical or compliance issue or to report a concern, team members may choose from several options. We encourage the resolution of issues, including human resource-related matters (e.g., fair treatment, accountability issues), at a department level. It is expected to raise concerns first to the supervisor or manager. If this is uncomfortable or inappropriate based on the circumstances, the team member may discuss the situation with the Human Resources Department, Senior Leadership, Legal Counsel, or the Compliance Department. Individuals are also always free to contact the Compliance Reporting Hotline at **877-847-4324**.

We are obligated to report concerns that would prevent us from pursuing our mission to serve to improve the health of our patients and community. Reporting concerns regarding a physician, safety events, and/or patient complaints is done by notifying the Performance Improvement/ Risk Management Departments. This notification is done through the Midas+™ software platform, which DCH uses for reporting risk events.

DCH makes every effort not to disclose the identity of any individual who reports concerns or possible misconduct within the limits of the law. There will be no discipline or retaliation for anyone who reports a concern in good faith. However, any team member who deliberately makes a false accusation against another person is subject to corrective action.



CHAMPIONS FOR
YOUR HEALTH