



Code of Conduct

Message from Brent Turner, Chief Executive Officer

The mission of Summit Behavioral Healthcare (“Summit BHC”) is to improve the lives we touch. We are committed to incorporating our core values of honesty, competence, perseverance, passion, respect and teamwork into the care we provide to our patients, as well as our relationships within our organization and our community as whole. Our values continue to be critical to our success.

The Code of Conduct (the “Code”) we have established provides guidance in ensuring that we conduct ourselves in an ethical and legal manner in everything we do. Several pillars support the compliance program and commitment to the values discussed in our Code – Serve, Understand, Make, Model, Insure and Tell. These elements are present throughout the guidance contained in the Code, which every Team Member will be provided to read thoroughly. Complying with the Code is critical to our success as individuals and as an organization.

As you read the Code, or if in the future you encounter a situation that raises a question, please reach out to (a) your supervisor directly to discuss with them, (b) another member of management, (c) the Compliance Hotline at summitbhc.ethicspoint.com or (844) 920-1197, or (d) Summit BHC’s Chief Compliance Officer or Compliance Department. It is important for you to raise compliance-related concerns or questions. There will be no retribution for asking questions, raising concerns, or for reporting possible improper conduct related to this Code – and you may do so anonymously through the Compliance Hotline.

Thank you for all that you do to make Summit Behavioral Healthcare a leading behavioral healthcare provider and overall great organization. Our joint commitment to compliance, integrity, treating others fairly, and being honest will help us continue to develop and care for the patients in our communities who need us.

/s/

CEO



CODE OF CONDUCT

SERVE: Give excellent care and personal attention to your clients. Document that care well. Live up to your professional responsibilities. Summit's policies, resource guides and training will guide you to do the right thing, but not every situation is covered, so use good judgement and do your best.

UNDERSTAND: Treat everyone fairly - coworkers, clients, visitors, applicants, and business partners. Never discriminate against, harass or mistreat anyone based on race, color, religion, sex, gender, sexual orientation, gender identity, national origin, age, disability, ancestry, genetic information, marital status, veteran status, or anything else illegal.

MAKE: Make the treatment environment nurturing. Keep it safe and clean. Do not tolerate violence, abuse or neglect. Do not insert yourself into a client's personal affairs. Protect client privacy, dignity, and boundaries, even on social media. Communicate clearly and honestly with clients and payors, and charge them only for care actually provided.

MODEL: Follow the laws and rules that govern how we provide care and do business. Never give or take payment for referrals for government healthcare business. Cooperate honestly and reasonably with law enforcement and licensing and accrediting bodies, and let your facility leadership or Summit's Legal Department know if they contact you. Protect Summit's property, money, information, and business opportunities. Do not take or use them for yourself or others. Do not solicit political contributions from your coworkers.

INSURE: Be honest in business and advertising. Never make a false record or report. Never keep accounts "off the books" or make or take a payment "under the table." Never give or take money or expensive gifts to steer business to or away from Summit. Never share or steal secret information, or agree to fix prices or divvy up a market. Never take, pay or promise a bribe. Report to us any worker diverting medicine or under the influence of drugs or alcohol, not properly licensed, or excluded by a government healthcare program.

TELL: If you see or suspect a violation of this Code of Conduct, Summit Policy or the law, report it to your boss, your facility compliance officer, or Summit's Compliance Department by email to corporatecompliance@summitbhc.com. We will not retaliate against you for your good faith concern or complaint. We will investigate and counsel, coach, discipline, or terminate the violator, as appropriate.

CODE OF CONDUCT

Summit BHC provides this Code of Conduct (the “Code”) to provide guidance and assistance in carrying out daily activities within appropriate ethical and legal standards of conduct expected of all Summit BHC managers, directors, officers, employees, contractors, clinicians, vendors, interns, business associates, and volunteers (“Team Members”). This Code, along with Summit BHC’s Compliance Program policies and procedures, is intended to apply to all activities within Summit BHC and its Facilities. It also governs all interactions and relationships between Summit BHC and external healthcare providers, vendors, contractors, patients, and local, state, and federal government agencies.

Each Summit BHC Facility also may have additional policies and procedures that are unique to the operations and geographic location of such Facilities. Accordingly, Team Members are expected to comply with Facility-specific rules and policies and procedures when on-site or conducting business on behalf of such Summit BHC Facility.

In this Code, we refer to “clients” and “patients”. Depending on context, the term clients may refer to patients and vice versa.

Compliance Program

Summit BHC is committed to providing behavioral healthcare services in compliance with applicable laws, rules, regulations, and business ethics. This commitment extends to all levels of the organization. Our Team Members function as agents of Summit BHC when performing their jobs and thus form the basis of our reputation as a provider of high-quality behavioral healthcare services. As Team Members of Summit BHC, it is important that we conduct ourselves in an ethical and legal manner as part of our day-to-day responsibilities.

Summit BHC’s Compliance Program is in place to ensure that the organization conducts its business with integrity and in accordance with all applicable laws, rules, and regulations, and to provide a safe patient care environment as well as pathways for Team Members to raise compliance concerns and questions. Our Compliance Program outlines what we do as a company to comply with legal and ethical requirements, including the following activities:

- Establishing integrity standards through this Code and our written policies and procedures;
- Communicating our internal standards through awareness, education, and training;
- Providing a process for Team Members to report potential violations of laws, rules, regulations, the Code, and Summit BHC and Facility-specific policies and procedures without fear of retaliation;
- Conducting ongoing auditing and monitoring of Summit BHC’s risk areas;
- Identifying, investigating, and responding to potential compliance problems;

- Ensuring that routine sanction and exclusion checks are performed so that Summit BHC will not conduct business with ineligible individuals or entities;
- Reviewing progressive discipline for compliance misconduct to ensure it is consistently applied; and
- Maintaining an organizational structure that reinforces a culture of compliance, including appointment of a Compliance Committee and a Chief Compliance Officer with an independent reporting relationship to Summit BHC’s Board of Managers (the “Board”).

As a healthcare system, Summit BHC is governed by a variety of federal and state laws, rules, and regulations, the violation of which can result in significant criminal, civil, or administrative penalties. These penalties can be imposed on Summit BHC or its Team Members in an individual capacity. This Code provides guidance that will help you remain in compliance with the laws, rules, and regulations governing Summit BHC’s operations and avoid putting you or Summit BHC at risk. **Our Code standards are mandatory and must be followed by all Team Members.**

These guidelines are provided, not because we question the honesty and integrity of our Team Members, but because of the overall complexity of the healthcare environment. This Code is meant to encourage you and suggest ways to get answers when you are uncertain. The Code is not intended to cover every situation that may be encountered. To provide additional guidance, we have developed a comprehensive set of compliance policies and procedures that expand upon or supplement many of the principles articulated in this Code. Sometimes, a subject discussed in the Code involves such complexity that additional guidance may be needed. In those cases, consult with your supervisor or the Compliance Department for additional guidance.

If you believe a law, rule, regulation, this Code, or a Summit BHC policy or procedure is not being followed, you must report it to the Compliance Department. You should also report the issue to your supervisor. If you feel uncomfortable talking to your supervisor, raise your concern to the next level in your management chain, up to and including the highest level. Summit BHC encourages open and honest discussion of issues with management. The organization is committed to fostering an environment that allows reporting of concerns in good faith without fear of retaliation.

- **Contact your Facility Compliance Officer or the Summit BHC Compliance Department;**
- **Raise the concern online at summitbhc.ethicspoint.com; or**
- **Call the Compliance Hotline at 844-920-1197.**

Serve Patients with Integrity in Patient Care

Quality Care

Everything that Summit BHC does should advance our mission to provide the highest quality, compassionate, comprehensive behavioral healthcare services to our patients. We treat all

patients with dignity, respect, and courtesy, making every effort to furnish the best care for their treatment and recovery needs. Summit BHC strives to create an environment in which care is provided safely, efficiently, and timely, based on scientific knowledge and best clinical practices. The care Summit BHC provides does not vary in quality based on personal characteristics such as age, gender, disability, race, color, ancestry, citizenship, religion, pregnancy, sexual orientation, gender identity or expression, national origin, medical condition, marital status, veteran status, payment source or ability, or any other basis prohibited by federal, state, or local law. Summit BHC accepts only those patients who have a need for and will benefit from the treatment it provides.

Summit BHC is committed to providing clear, accurate, honest, and transparent information about the quality of care offered to all patients so they and their families can make informed healthcare decisions. As healthcare providers, we should constantly endeavor to improve the quality of care provided to our communities. If you learn of a potential error, deficiency, or issue that affects or has the potential to affect patient care, report the matter promptly to your supervisor or the Compliance Department.

Patient Rights and Patient Choice

Summit BHC encourages patient and family involvement in all aspects of care. Patients admitted to or otherwise accepted for treatment at a Summit BHC facility are provided a statement of patient rights and responsibilities, including information on their right to make decisions about their care. Whenever possible, this notice of patient rights is provided before providing or stopping care in a language or manner that the patient (or patient's representative) can understand. These statements include the rights of a patient to make decisions regarding medical care, the right to refuse or accept treatment, the right to informed decision-making, visitation rights of the patient or their support persons including the patient's right to consent to receive visitors and the right to withdraw or deny visitor consent at any time, and a patient's rights related to his or her health information maintained by the facility. Such statements conform to all applicable state and federal laws, including but not limited to the Health Insurance Portability and Accountability Act of 1996 (hereinafter referred to as HIPAA).

Summit BHC involves patients and their families in decisions regarding treatment to the extent practical and possible, consistent with applicable laws, rules, regulations, and Summit BHC policies. This involvement includes informing patients about the benefits associated with a particular course of treatment, the attendant risks, and any alternatives. The patient or patient's representative has the right to participate in the development and implementation of their plan of care. Patients receive information about the person(s) responsible for their care, treatment and services. Patients and, when appropriate, their families are informed about the outcomes of care, treatment and services that have been provided, including unanticipated outcomes. Patients are also involved as clinically appropriate in resolving dilemmas about care decisions. The patient's rights include being able to request or refuse treatment. This is not to be construed as a mechanism to demand treatment or services deemed medically unnecessary or inappropriate. Patients may only be admitted involuntarily to a Summit BHC facility and kept for

treatment in accordance with federal and state laws, rules, and regulations. All admissions will be made in accordance with Summit BHC's policies and procedures.

To address the unique clinical needs of each patient, Summit BHC develops individualized treatment plans using a multi-disciplinary approach. Treatment options may include inpatient care, partial hospitalization, outpatient care, or other healthcare services as appropriate to meet the patient's needs. Summit BHC is committed to fostering a safe, compassionate environment where patients and their families understand their individual illnesses and the recovery process.

Discharge planning begins at the time of admission and continues throughout the treatment process. Patients are discharged when the attending physician determines that continued treatment is not medically necessary or appropriate. Discharge plans are developed in a collaborative manner. Patients and their families are participants in the discharge process and their preferences and choices are given priority whenever possible. Summit BHC respects the wishes of patients related to advance directives and end of life decisions. Summit BHC also ensures that patients are made aware of their freedom to choose among post-discharge providers, including any community organizations, support groups, or specialty providers that may be included in the patient's aftercare plan.

Privacy and Security of Patient Information

As a healthcare organization, we are entrusted with highly personal and sensitive information about the patients for whom we provide care. If our patients and their families do not feel confident that we will maintain the privacy of that information, they may hesitate to discuss health-related issues or concerns with us, which can affect our medical decision-making and ability to provide quality care. A breach of patient confidentiality also can result in significant criminal, civil, or administrative penalties and reputational damage to Summit BHC and its Team Members in an individual capacity.

Summit BHC recognizes the sensitive nature of the information it obtains from patients and is committed to safeguarding patient privacy. Summit BHC's Privacy Officer is dedicated to evaluating our privacy practices, training Team Members about privacy issues, supervising the sharing of information with third parties, and addressing any complaints from patients, their friends and loved ones, staff, providers, and members of the community regarding patient information.

Each Team Member is expected to maintain the confidentiality of our clients' personal information as required by federal and state laws and our privacy policies, including HIPAA and 42 CFR Part 2, Confidentiality of Substance Use Disorder Patient Records ("Part 2"). Team Members may not access patient information, internally use patient information, or disclose patient information outside the organization except as necessary to perform their jobs. Summit BHC's Code and privacy and security policies apply to individually identifiable information on past, present or future health care or payment for health care, also known as "Protected Health Information" or "PHI."

The HIPAA Privacy Rule allows Summit BHC to disclose health information needed for patient care, billing, and other important purposes. The HIPAA Security Rule establishes federal protections of individuals' electronic personal health information that is created, received, used, or maintained by a covered entity, and requires appropriate administrative, physical and technical safeguards to ensure the confidentiality, integrity, and security of electronic protected health information.

Any uses or disclosures of PHI – whether spoken, written, or in our electronic systems – must comply with applicable federal and state laws, rules, and regulations governing patient privacy. If you have a question or concern about whether accessing, using, or disclosing patient information in a particular circumstance is appropriate, speak with the designated Privacy Officer, your supervisor or contact the Compliance Department.

Integrity in Financial Matters

Coding and Billing for Patient Care Services

Summit BHC has implemented procedures designed to ensure that claims for patient care services submitted to government payers, commercial insurance payers, and patients are accurate and comply with applicable federal and state laws, rules, and regulations. Summit BHC's commitment to accurate coding and billing for the services it provides includes the following:

- We only bill for services actually provided, documented, medically necessary, and ordered by a physician or other appropriately licensed provider.
- We assign codes that accurately represent the services provided and are supported by proper documentation in the medical record.
- We implement appropriate internal controls to prevent improper billing practices such as unbundling, upcoding, duplicate billing for the same services, billing for services furnished without appropriate supervision, and other errors.
- We respond to billing and coding inquiries and work to timely resolve inaccuracies in previously submitted claims that are identified.
- We ensure that our Team Members who perform billing or coding functions have the necessary skills, training, expertise, quality assurance processes, and systems to ensure the submission of accurate and complete claims.
- We do not knowingly present, or cause to be presented, claims for items or services that are false, fraudulent, or fictitious.

False Claims Act

Summit BHC is committed to complying with applicable federal and state laws designed to prevent fraud, waste, and abuse in government healthcare programs. The federal False Claims Act, and similar state false claims laws, prohibit any person from knowingly submitting, or causing

another person to submit, false claims for payment of government funds. The False Claims Act contains provisions allowing individuals with actual knowledge of alleged false claims to sue on behalf of the government and provides protection from retaliation for individuals who bring such suits.

It is unlawful to submit claims for payment to government programs Summit BHC knows or should know are false or fraudulent. For a violation of the False Claims Act to occur, no specific intent to defraud the government is required. It is enough for a person to act in deliberate ignorance or reckless disregard as to the truth or falsity of the claim. Filing false claims can result in substantial civil penalties, fines, imprisonment, enhanced monitoring by the government, and/or exclusion from participation in federal or state healthcare programs. If you have concerns that a claim may be potentially false or improper, contact the Compliance Department immediately or call the Compliance Hotline to make an anonymous report. Failure to make a report under such circumstances may lead to disciplinary action, up to and including termination.

Financial Reporting

We must maintain accurate books and records in accordance with generally accepted accounting principles. Our financial reporting system must contain accurate entries that reflect all financial transactions. All cost reports must be completed in an accurate manner, assuring that Summit BHC and its facilities obtain reimbursement only for allowable costs in accordance with applicable laws, rules, and regulations. Team Members must not engage in any conduct that results in false, artificial, or misleading entries being made in any Summit BHC corporate or facility records.

Integrity in Business Conduct

Use of Resources and Assets

Summit BHC's organizational resources and assets are to be used only to further our mission to provide high-quality behavioral healthcare services to our communities. The company's physical assets, including space, furniture, vehicles, equipment, machinery, and supplies, may only be used by private individuals and other organizations on a restricted basis, with advance written approval from the appropriate level of Summit BHC management and in compliance with applicable federal and state laws, rules, and regulations and Summit BHC policies. Under no circumstances are Team Members to use Summit BHC resources and assets for their personal benefit or advantage.

Conflicts of Interest

Every Team Member of Summit BHC owes a duty of loyalty to our organization. Team Members must avoid any activity that may involve, or may appear to involve, a conflict of interest with their obligations to Summit BHC. Our patients and communities expect us to make decisions that are not biased by financial or personal interests. Actual or perceived conflicts of interest can

compromise our ability, and the ability of Summit BHC, to provide patient care, transact business, or make purchasing decisions. Conflicts of Interest may also pose a risk to our organization and the operations of our facilities.

A conflict of interest, or the appearance thereof, may occur if an individual's outside activities or personal interests influence (or appear to or have the potential to influence) his or her ability to make objective decisions while conducting business on behalf of Summit BHC. A Team Member may also experience a conflict if his or her outside activities require (or appear to or have the potential to require) so much attention that the individual's professional obligations are hindered or neglected. It is every Team Member's responsibility to avoid and remain free from conflicts of interest.

At the time of hire, promotion, or transfer, and at least annually thereafter, all Team Members must disclose all information about any actual or perceived conflicts of interest using Summit BHC's Conflict of Interest Disclosure Form. Team Members must also submit updated Conflict of Interest Disclosure Forms in a timely manner following a material change in their situations that may create an actual or perceived conflict of interest. Failure to disclose completely and timely a conflict of interest may result in disciplinary action, up to and including termination. All full-time and part-time workforce members must obtain prior written approval from their supervisors before undertaking any outside employment or other work activity, including self-employment, if it could create a conflict of interest.

Relationships with Referral Sources

Both federal and state laws strictly prohibit any form of kickback, bribe, or rebate made directly or indirectly, overtly or covertly, in cash or in kind, to induce the purchase, recommendation to purchase, or referral of any healthcare goods, services, or items paid for by Medicare, Medicaid, or other federal or state healthcare programs. Neither Summit BHC nor its Team Members may offer items or services for free or below fair market value to beneficiaries of federal or state healthcare programs to induce their use of Summit BHC's facilities, or provide items or services for free or below fair market value to physicians, external healthcare providers, and other potential referral sources.

Summit BHC and its Team Members may not accept anything of value in exchange for recommending a particular product or service. Summit BHC ensures that all arrangements with actual or potential referral sources are subject to appropriate business and legal reviews before entering into the arrangement, and to ongoing auditing and monitoring to ensure compliance throughout the relationship. Summit BHC does not provide any remuneration to physicians or other healthcare providers for services not rendered or in excess of fair market value for services rendered.

Summit BHC, Facilities and Team Members will comply with the federal Eliminating Kickbacks in Recovery Act, the federal Anti-Kickback Statute, Physician Self-referral Prohibition ("Stark Law"), similar state laws, and their implementing regulations. Summit BHC will not give, take, ask for or

promise money or anything of value for the purpose of illegally inducing referrals to a treatment program, whether or not the program is part of Summit BHC.

Gifts

Team Members may not receive gifts, favors, entertainment, special accommodations, or other things of material value that could influence their decision-making or make them feel beholden to a third person or vendor. Likewise, Summit BHC and its Team Members may not provide gifts, favors, entertainment, special accommodations, or other things of material value to third persons, vendors, or other persons who are in a position to refer patients to our Facilities, when the provision of such items is intended to, or aimed at, influencing decision-making or making the recipient feel beholden to Team Members or Summit BHC, or that create the appearance of such intent. Under no circumstances may Team Members offer, provide, or accept gifts of cash or cash equivalents (including gift cards or gift certificates).

Summit BHC recognizes that the company's and its Team Members' ongoing business relationships may occasionally involve an invitation for a meal or entertainment. Gifts of nominal value offered or received without any attempt to influence business activity or a transaction may be appropriate. Such items may include refreshments such as coffee, cookies, box lunches, and inexpensive dinners in connection with an approved Summit BHC event, or small items such as flowers, pens, mugs, t-shirts, and other token promotional items, consistent with Summit BHC's Gift Policy. Violations of Summit BHC's Gift Policy may result in disciplinary action up to and including termination.

If you are unclear about whether a particular gift is appropriate, contact your supervisor or the Compliance Department for further guidance.

Excluded Parties

Summit BHC does not hire Team Members, accept volunteers, contract with, or bill for services rendered by individuals or entities excluded from participating in federal or state healthcare programs. This requirement includes exclusion from programs administered by the U.S. Department of Health and Human Services, federal contracting agencies, and the Medicaid agencies of the states in which Summit BHC operates. We conduct initial excluded party checks on potential Team Members before hiring or engaging their services. We also re-screen our Team Members regularly to ensure continued eligibility to participate in federal and state healthcare programs. Any Team Member whose eligibility status changes must immediately report that information to the Compliance Department.

Contracting

As an organization, Summit BHC negotiates and enters into fair and equitable contractual arrangements with such reputable vendors and individuals that meet its business and patient care needs. All arrangements must comply with applicable federal and state laws, rules, and

regulations, this Code, and Summit BHC policies. The selection of products or services will be based on business criteria such as quality, price, delivery, technical excellence, availability, service, and maintenance of adequate sources of supply. Summit BHC purchasing or contracting decisions will be conducted at “arms-length” negotiations and will not be made based upon personal relationships or for something in return. Before executing arrangements for items and services, Summit BHC verifies that all contracted parties are eligible to participate in federal- and state-funded healthcare programs. All contracts with actual or potential referral sources must be in writing and subject to Summit BHC’s internal business and legal review processes.

Accuracy of Records and Document Retention and Destruction

Summit BHC and all Team Members are responsible for the accuracy, retention, and disposal of organizational documents and records consistent with applicable laws, rules, regulations, and Summit BHC policies. Medical and business documents and records that are subject to these requirements include letters, memos, electronic information, such as files on disk or tape and e-mails, databases, and correspondence. It is important to retain and destroy records and documents only according to Summit BHC policies, including the Record Retention and Destruction Policy, the Email Retention and Destruction Policy and other guidance as it is developed. Team Members must not tamper with records, nor destroy or remove records subject to these policies before the specified date.

Confidential Business Information

Protecting secure and confidential information about Summit BHC’s strategy and operations is every Team Member’s responsibility. Team Members may be required to sign a Confidentiality Agreement as part of the onboarding process.

Although Team Members may use confidential business information as necessary to perform their jobs, it must not be shared with others outside the organization or internally with those who do not need to know the information to perform their jobs. Confidential and proprietary business information includes anything related to Summit BHC’s business or operations that is not publicly known, such as personnel files, wage and salary information, financial information, billing and pricing information, cost data, strategic plans, marketing strategies, projected earnings, techniques, employee lists, information related to investigations, disciplinary actions, supplier and contractor information, information related to acquisitions or joint ventures, policies and procedures, clinical and patient information, computer and system login IDs and passwords, e-mails, and proprietary computer software.

If you are provided with an e-mail account to facilitate communications within and outside of Summit BHC, all your e-mails remain the property of Summit BHC. Management may review your e-mails and terminate your e-mail account at any time. You are responsible for the appropriate use of your e-mail account, and all other systems such as phone, voicemail, internet, and intranet, to which you are granted access during your relationship with Summit BHC.

Even if a Team Member no longer works for or has a relationship with the organization, you are still bound to maintain the confidentiality of information viewed, received, or used during your relationship with Summit BHC. Copies or electronic files of any confidential or proprietary information in your possession when you leave the organization must be returned at the end of your employment or Team Member relationship with Summit BHC.

Team Members should exercise common sense when discussing or communicating about confidential business information to help prevent accidental disclosure. This requirement includes not discussing confidential business information in public places such as elevators, hallways, cafeterias, and restaurants. Team Members also should not discuss confidential business information with family members, friends, or acquaintances. If you are in doubt about whether information you are being asked to share is confidential or proprietary, contact your supervisor or the Compliance Department. Violations of Summit BHC's policies regarding nondisclosure of confidential and proprietary information may result in disciplinary action up to and including termination.

Integrity in the Workplace

Diversity and Equal Opportunity Workforce

Summit BHC is committed to maintaining an equal opportunity work environment in which all Team Members are treated with dignity, respect, fairness, and impartiality. Our organization complies with all applicable laws, rules, and regulations regarding recruiting, hiring, compensation, promotions, disciplinary action, staff reductions, Team Member evaluations, transfers, and terminations. We do not discriminate against individuals based on race, color, national origin, religion, age, sex (gender), sexual orientation, physical or mental disability, or any other protected classification in any offer, term, or condition of employment, contract or workforce arrangement. Summit BHC will make reasonable accommodations to the known physical and mental limitations of qualified individuals with disabilities in the workplace.

Workplace Harassment and Violence

All Team Members have the right to work in an environment free of harassment and violence. We will not tolerate any form of harassment, sexual or otherwise, from or among our Team Members. Sexual harassment may include unwelcome sexual advancements; requests for sexual favors in conjunction with workforce decisions; and verbal or physical conduct that creates an intimidating, hostile, or offensive work environment or interferes with an individual's work performance. Summit BHC will not tolerate harassment of any kind, including, but not limited to, degrading or humiliating jokes, slurs, or intimidation, from any Team Member.

We are also committed to maintaining a violence-free work environment. Workplace violence includes robbery and other commercial crimes, violence directed at the employer, stalking, terrorism, and hate crimes committed by a Team Member. Summit BHC prohibits Team Members from possessing firearms or other weapons, explosive devices, or dangerous materials

on the premises of any Summit BHC Facility. Team Members who experience or observe any form of harassment or violence must immediately report the incident to a supervisor, the Human Resources Department, or the Compliance Department so the matter can be addressed.

Workplace Health and Safety

Summit BHC seeks to provide a healthy and safe work environment for all Team Members. We are committed to complying with all applicable laws, rules, regulations, and Summit BHC policies that promote workplace health and safety. Team Members are expected to be aware of and abide by all applicable health and safety standards and precautions. Any Team Member who learns of a condition or situation that may violate health and safety standards, or that may present a danger to others, must notify their supervisor immediately so the matter can be addressed.

Summit BHC is committed to providing an alcohol-free and drug-free work environment. All Team Members must report to work free of the influence of alcohol and illegal drugs. Reporting to work under the influence of alcohol or an illegal drug, having an illegal drug in your system, or using, possessing, or selling illegal drugs while on work time or Summit BHC property will result in adverse disciplinary action, up to and including termination. Summit BHC may require Team Members to undergo drug tests as a means of enforcing this policy.

Team Members must also be aware of and sensitive to the effects of taking prescription or over-the-counter drugs and medications that could impair judgment or skills required for a job. Any Team Member with concerns or questions about the effect of such drugs on his or her own work performance or on the work performance of another Team Member must immediately consult with their supervisor or Human Resources Department.

While executing our professional responsibilities and caring for our patients, some Team Members routinely have access to controlled substances. It is critical that controlled substances are handled and monitored appropriately, and that all applicable laws, rules, regulations, and protocols be followed. Any activity that does not comply with controlled substance laws or Summit BHC policies must be reported immediately to your supervisor or the Compliance Department.

Make Decisions with Integrity

This Code helps Team Members make ethical business decisions and provides a framework for identifying, assessing, and responding to compliance situations that may arise. However, it is not designed to address every possible issue. You may face a situation where the right course of action is unclear. In those cases, ask yourself these questions:

- Is the situation inconsistent with Summit BHC's mission and values?

- Is it unethical?
- Is it illegal?
- Is there a potential harm to patients?
- Is there a potential harm to other Team Members?
- Is there a potential harm to government programs or other insurers?
- Could this harm Summit BHC's financial health?
- Would Summit BHC be compromised or embarrassed if this became public?
- Would we be uncomfortable if this appeared in the news?
- Is it unfair or inappropriate?
- Would Summit BHC potentially be negatively affected if everyone did this?
- Is this inconsistent with Summit BHC's Code and policies?

If the answer to any of the above questions is “yes,” we strongly encourage you to speak with your supervisor about the issue, consult with the Compliance Department, or make a report to the Compliance Hotline. Compliance is every Team Member's personal responsibility, from the lowest levels of the organization to the most senior levels of management. It is essential that we adhere to the highest ethical standards at all times, in all that we do, and collectively strive to promote Summit BHC's mission of providing high-quality, compassionate behavioral healthcare services.

Reporting Concerns

Team Member Reporting Obligations and Process

Reporting compliance concerns is not an option – it is mandatory. It is critical that all Team Members immediately report any actual or perceived violation of laws, rules, regulations, this Code, Summit BHC policies or Facility-specific policies to the Compliance Department. Failure to make a report may result in disciplinary action, up to and including termination. Summit BHC will evaluate all reports promptly, completely, and fairly by the Compliance Department. **You may report concerns in one of the following ways:**

- **Contact your immediate supervisor;**
- **Contact the Human Resources Department;**
- **Contact your Facility Compliance Officer or the Chief Compliance Officer;**
- **Contact any member management;**
- **Report your concern online at summitbhc.ethicspoint.com; or**
- **Call the Compliance Hotline at 844-920-1197.**

Any Team Member reporting a compliance concern should include information that the Compliance Department will need to investigate the situation. This may include, for example, the location where the concern occurred, the date or dates of the incident, the names and job roles of the individuals involved, a description of the concern, and your name (if you are comfortable providing it). If you do not feel comfortable leaving your name, the report may be made anonymously.

The Compliance Department treats all reports as confidential and only shares information with others on a need-to-know basis. In all compliance investigations, the findings remain confidential to the extent possible in order to protect everyone involved in the process. Details and specific findings of a compliance investigation will only be shared on a need-to-know basis.

Summit BHC strives to promote a culture of openness and transparency. No adverse actions will be taken against a Team Member for reporting a compliance concern in good faith or cooperating with a compliance investigation. Summit BHC has a strict non-retaliation policy that ensures no one is penalized for reporting what they honestly believe to be a compliance issue or for participating in or assisting a compliance investigation.

The non-retaliation policy does not protect those who purposely falsify or misrepresent a report or make false statements during an investigation. Anyone determined to have intentionally made false accusations or statements in a report or during a compliance investigation will be subject to disciplinary action, up to and including termination. Team Members should also understand that Summit BHC's non-retaliation policy does not protect individuals from consequences up to and including termination if they participated in the misconduct and are found to have broken laws, rules, regulations, this Code, or Summit BHC policies.

Occasionally Summit BHC may be required by law to report compliance issues to federal or state government agencies. For any compliance issue reported or otherwise investigated, the Compliance Department will evaluate any applicable federal or state reporting requirements, including, as appropriate, with the assistance of legal counsel, and notify or facilitate notification to the required federal or state government agencies. Summit BHC is committed to correcting wrongdoing, whether intentional or unintentional, wherever it may take place within the organization, and to cooperating fully with any government investigation or inquiry.

Requests for Information Pursuant to an Investigation or Legal Proceeding

Summit BHC promptly and appropriately responds to informational requests in connection with government investigations or legal proceedings. These requests may come in the form of a subpoena, summons, warrant, letter, or verbal request. Only certain individuals at Summit BHC are authorized to accept requests for information from the government on behalf of the organization. Accepting or acting on these requests inappropriately could expose the organization, and occasionally you as an individual, to significant criminal, civil, or administrative penalties.

If you are asked to accept a legal document or to share information of any kind regarding Summit BHC's business, whether at home or in the workplace, please notify your supervisor, the Legal Department, or the Compliance Department immediately. It is important that Summit BHC's legal rights and the legal rights of its Team Members be protected during any investigation or inquiry. Both the organization and Team Members as individuals have a right to be represented by legal counsel during any investigation or inquiry by a government agency.

