

# Corporate Compliance Code of Conduct

Effective Date: October 2019



# Table of Contents

- Our Code of Conduct** .....2
- Our Mission, Vision and Values** ...2
- Partner Responsibilities** .....4
- Leadership Responsibilities** .....4
- Our Commitments** .....5
- Our Patients** .....6
- Patient Safety, Quality of Care,  
and Rights .....6
- Our Commitment to  
Confidentiality and HIPAA  
Requirements.** .....6
- Legal and Regulatory  
Compliance.** .....7
- Reporting Requirements  
and Responses** .....7
- Personal Obligation to Report.....7
- Making an Oral Report .....7
- Filing a Written Report .....8
- Internet Reporting .....8
- Non-retaliation .....8
- Response to Inquiries for Guidance .9
- Responding to and Resolving  
Compliance Concerns and  
Investigations.** .....9
- Internal Investigation of Reports.....9
- External Investigations of  
Legal Claims .....9
- Corrective Action.....10
- Discipline .....10
- Financial Management  
and Reporting** .....10
- Fraud, Waste and Abuse** .....10
- Coding and Billing for Services.....11
- False Claims Act .....11
- Referrals and Kickbacks .....12
- Anti-Kickback Statute .....12
- Physician Self-Referral Law (Stark) .12
- License and Certification  
Renewals** .....13
- Ineligible and Excluded  
Individuals** .....13

- Research, Investigations  
and Clinical Trials** .....14
- Business Information and  
Information Systems** .....14
- Accuracy, Retention and Disposal  
of Documents and Records .....14
- Information Security and  
Confidentiality .....15
- Electronic Media and Security  
Requirements .....16
- Workplace Conduct and  
Employment Practices** .....17
- Conflict of Interest.....17
- Controlled Substances .....17
- Substance Abuse and  
Mental Acuity.....17
- Copyrights .....18
- Personal Use of Company  
Resources .....18
- Diversity and Equal Employment  
Opportunity .....18
- Harassment and Workplace  
Violence .....19
- Workplace Health and Safety.....19
- Gifts .....20
- Relationships with Subcontractors  
and Suppliers.....20
- Marketing Practices** .....20
- Antitrust.....20
- Gathering Information about  
Competitors.....21
- Marketing and Advertising .....21
- Environmental Compliance** ....21
- Political Activity and  
Involvement** .....22
- Relationships with  
Governmental Entities and  
Representatives** .....22
- Supplementing Our Code** .....22
- Questions?** .....23
- Compliance Hotline**.....23

# Dear Mercyhealth partners and volunteers:



As a leader in the health care industry, we must meet high standards for ethical and legal conduct. Indeed, our reputation for integrity in all of our business dealings is essential to our continued success. Mercyhealth's Board of Directors and senior leadership are firmly committed to a comprehensive, values-based compliance program, which includes our Code of Conduct. We expect partners and vendors to understand, adopt, consult, and display the principles described in this document.

We are serious about ethical conduct and complying with the laws that affect our business. We must do everything we can to make sure that we do not take actions that undermine our ethical principles or violate legal requirements. If a conflict between compliance and other challenges ever emerges, compliance must never be compromised.

Our Code of Conduct sets some general standards. Your adherence to its spirit, as well as its specific provisions, is absolutely critical to our Mission. If you have questions regarding our Code of Conduct or encounter any situation that you are unsure about, or believe may violate our code, you should immediately report it in person or anonymously to the Compliance Hotline, at 1-877-647-6464 or online at <http://mercyhealthhotline.com>. It is Mercyhealth's policy to not retaliate against partners for good faith reporting of potential Code of Conduct or compliance concerns.

We ask you to assist us, and all of Mercyhealth, in supporting the important values and principles that are critical to continuing our long tradition of providing exceptional health care services to the patients we serve.

Sincerely,

A handwritten signature in black ink that reads "Javon".

**Javon R. Bea**  
President/CEO

## Our Code of Conduct

Our Code of Conduct (code) applies to all partners, provides guidance and assists us in carrying out our daily activities compliantly, ethically and legally. For purposes of our code, “partners” includes all employees, physicians, volunteers, independent contractors, officers, our Board of Directors, and directors of all Mercyhealth affiliated entities (referred herein as the “system”). Our code also applies to our relationships with patients, business partners, regulators, third-party payors, suppliers, consultants, and other vendors.

Our code is a critical component of our overall compliance program and assists us in upholding our ethical obligations and compliance with established system policies and procedures. It is only as meaningful as the corporate culture of integrity and openness it supports. Our code also evidences our commitment to comply with all applicable federal and state laws, rules and regulations that affect our business. The code provides an overview of your responsibilities and Mercyhealth’s expectation; however, it is also your responsibility to understand the details surrounding the topics within the code and the applicable Mercyhealth policies and procedures at your specific location(s).

## The Mercyhealth Mission

To provide exceptional health care services with a passion for making lives better.

## Mercyhealth Vision

### **Quality – I will provide excellent patient care, and:**

- Continuously seek ways to improve the quality of my own performance and the care I deliver to our patients
- Respect patient privacy and diversity, and be mindful of individual needs
- Use evidence-based medicine and best practices
- Promote a culture of safety and ethical practices

### **Service – I will provide exceptional patient and customer**

**service, and:**

- Remember that our patients and their families always come first
- Treat our patients with compassion, concern and caring
- Know that my ability to help others is what gives my job meaning and purpose
- Always do what's in our patients' best interests
- Take every opportunity to promote health and service in our community

**Partnering – I will make Mercyhealth a best place to work, and:**

- Communicate openly, honestly and positively with my fellow partners
- Actively engage in the goals of my department and work to make decisions and resolve issues
- Lead through example to make everyone's job better and safer
- Respect my fellow partners for their uniqueness, experiences, opinions, ideas, talents and skills
- Pursue organizational and personal learning opportunities

**Cost – I will contribute to Mercyhealth's cost-effective care, and:**

- Use our resources appropriately and respectfully
- Focus on decreasing waste and expenses
- Offer cost improvement ideas
- Keep efficiency in mind when performing my job

**Mercyhealth Values**

- Healing, in the broadest sense
- Patients come first
- Treat each other like family
- Always seek excellence

## Partner Responsibilities

The standards set forth in our code are mandatory and must be followed by all partners. Partners are also responsible to comply with all applicable federal and state laws, rules and regulations, and system policies and procedures (collectively referred to as “standards”). Compliance with our code and policies and procedures, along with participation in all mandatory training, is a condition of partner employment and vendor contracting. Adherence and participation with our code is also used in performance evaluations. Partners should refer to our code and Mercyhealth policies to guide their daily work activities.

Upon contracting or hire, partners are required to acknowledge the following:

- They have received, read, and understand the Code of Conduct;
- They understand it represents mandatory policies of the system; and
- They agree to abide by it.

Partners re-confirm this acknowledgement as part of their annual compliance training.

## Leadership Responsibilities

While all partners are obligated to follow our code, we expect our leaders to set the example, and, in every respect, be a role model. We expect our managers to exercise this responsibility in a manner that is sensitive, thoughtful and respectful. We expect each manager to create an environment where all team members feel free to raise concerns and propose ideas. We also expect managers to ensure that their team members have sufficient information to perform their job duties according to established standards. Managers must also foster a culture that promotes the highest standards of ethics and compliance and encourages all partners to share concerns without fear of retaliation. We must never sacrifice ethical and compliant behavior in the pursuit of business or personal objectives.

## Our Commitments

- 1) To our patients:** We are committed to providing quality, compassionate, respectful, cost-effective care through a team approach to health care delivery and management.
- 2) To our partners and volunteers:** We are committed to a work setting that treats all partners and volunteers with fairness, dignity and respect, and provides an opportunity to grow, to develop professionally and to work in a positive team environment.
- 3) To our affiliated physicians and other providers:** We are committed to providing a work environment that has modern facilities and equipment and outstanding professional support, in order to provide quality services to the communities we collectively serve.
- 4) To our third-party payors:** We are committed to working with our third-party payors by demonstrating our commitment to contractual obligations, compliance with applicable standards, and shared concern for providing quality health care in an efficient and cost-effective manner. This includes a commitment to submit compliant claims as required with federal health care program and payor requirements.
- 5) To our suppliers:** We are committed to fair competition among prospective suppliers and the sense of responsibility required of a good customer.
- 6) To our regulators:** We are committed to an environment where compliance with applicable standards and sound business practices is woven into the corporate culture. We accept the responsibility to aggressively self-govern and monitor adherence to the requirements of our Code of Conduct.
- 7) To the communities we serve:** We are committed to understanding and meeting the health care needs of the communities we serve in a quality, cost-effective manner. We recognize and gladly accept our responsibility to help those in need. We proudly support charitable contributions and events in the communities we serve.

## **Our Patients**

### **Patient Safety, Quality of Care, and Rights**

We treat all patients with compassion, respect and dignity and provide care that is both necessary and appropriate.

We do not discriminate in the care we provide. We recognize and respect the diverse backgrounds and cultures of our patients.

We make every effort to equip our partners with the necessary knowledge and resources to respect each patient's cultural heritage and needs. We also respect the patient's right to and need for effective communication.

We seek to involve patients and, when appropriate, their families and authorized representatives, in all aspects of their care and treatment decisions. This includes managing pain effectively, foregoing or withdrawing treatment, and providing appropriate care at the end of life. Patients also have the right to seek second opinions and request transfers to other facilities and providers.

Patients and their representatives are afforded appropriate confidentiality and privacy, and the opportunity for prompt resolution of any complaints or concerns.

### **Our Commitment to Confidentiality and HIPAA Requirements**

We are committed to maintaining confidentiality and protection of our patients' information by following the Health Insurance Portability and Accountability Act of 1996 (HIPAA), other applicable laws, and our privacy policies.

We do not use, disclose, or discuss protected health information (PHI) with others, unless it is necessary to serve the patient or authorized by law. Notable uses and disclosures permitted by HIPAA include treatment, payment and operations.

No partner has a right to use, disclose or release any PHI that violates the privacy rights of our patients. Partners' use of PHI must be as minimally necessary to perform his or her job. Under no circumstances may a partner use a patient's, colleague's or other individual's information for personal reasons.

Any violation or unauthorized release of or access to PHI, even if inadvertent, must be reported consistent with this Code of Conduct.



Mercyhealth investigates each privacy or security allegation and takes appropriate corrective action, which may include termination of employment.

## **Legal and Regulatory Compliance**

Mercyhealth is committed to full compliance with all applicable standards and the conditions of participation for federal, state and private health care programs. Partners are required to comply with these standards.

We have developed a wide range of policies and procedures to address legal and regulatory requirements. Department managers are required to understand regulatory requirements specific to their area of responsibility and ensure policies and procedures are in place to meet regulatory requirements. Where there is uncertainty, a wide range of expertise is available within Mercyhealth, including the Legal Services and Compliance Departments, which should be consulted for advice concerning legal and regulatory requirements.

## **Reporting Requirements and Responses**

### **Personal Obligation to Report**

We are committed to ethical and legal conduct that is compliant with all relevant standards and to correcting wrongdoing wherever it may occur within the system. Partners must immediately report any known or suspected violation. A violation includes, but is not limited to, an activity by any partner, regardless of their position, or vendor which appears to violate established standards, acceptable medical practices, payor program requirements, our code, or other system policies or procedures. Violations, or failing to report known violations to appropriate legal authorities, may expose the system to federal and/or state inquiries, including criminal and civil sanctions.

### **Making an Oral Report**

Partners are encouraged to directly report to their immediate supervisor, the department manager, the Corporate Compliance Director, the MercyCare Compliance Director, or the Corporate Compliance Officer. If the concern relates to an area of operations supervised by the Corporate Compliance Officer, or if the partner is uncomfortable reporting to the Corporate Compliance Officer,

they may contact the Director of Human Resources. Partners may anonymously call the Compliance Hotline at (877) 647-6464. The Compliance Hotline is available 24/7.

## **Filing a Written Report**

Partners may also file a report by writing to the Corporate Compliance Officer, Corporate Compliance Director, or the MercyCare Compliance Director. There is no form required and they need not sign their name or identify themselves in any way. Their written report should contain enough information so that the nature of the reported activity and the persons involved can be determined. The report should be sent to the Corporate Compliance Department, 501 N. Terrace St., Janesville, WI 53548. For MercyCare concerns, reports should be sent to the MercyCare Compliance Director, 580 N. Washington St., Janesville, WI 53548.

## **Internet Reporting**

Partners may also file an anonymous report on the internet by going to the Corporate Compliance Hotline at [mercyhealthhotline.com](http://mercyhealthhotline.com).

Please note, Mercyhealth makes every effort to maintain, within the limits of the law and specific circumstances, confidentiality and anonymity with respect to individuals who report anonymously through the Compliance Hotline.

If a matter poses a serious compliance risk or involves patient safety, and the reporter is unsure whether appropriate attention was given, the matter should be reported to higher levels of management, the Compliance Department, or the Compliance Hotline.

Partners are encouraged to submit guidance questions to the Compliance Department, the Corporate Compliance Officer, or the Compliance Hotline.

## **Non-Retaliation**

Mercyhealth has a non-retaliation policy and does not tolerate retaliation or discipline against anyone for reporting a compliance concern in good faith. However, any partner who deliberately makes a false accusation with the purpose of harming or retaliating against another colleague is subject to corrective action.

## **Response to Inquiries for Guidance**

Every effort is made to respond to compliance inquiries as soon as possible. The receipt of all inquiries is promptly acknowledged and listed in the Compliance Department's log. You may be contacted for additional information necessary to appropriately respond to your inquiry.

## **Responding to and Resolving Compliance Concerns and Investigations**

### **Internal Investigations of Reports**

We are committed to investigating all reported concerns promptly and confidentially to the extent possible. The Corporate Compliance Director, with assistance from the Legal Services Department, Human Resources, Clinical Operations and other representatives, coordinates findings from corporate-led investigations and timely recommends corrective action or system changes. When necessary, the system may retain external consultants or legal advisors to assist in developing and implementing appropriate corrective action plans. All partners are expected and required to fully cooperate with any committee, consultant or legal representative retained by the system to review and resolve compliance matters.

### **External Investigations or Legal Claims**

Partners may receive legal documents, requests, inquiries from federal, state or local officials or parties. These requests or inquiries may relate to the serving of an official court summons or complaint, a demand (written or oral) from a patient or supplier of Mercyhealth, letters, phone calls, or visits from government officials requesting documents, records or other information.

If you receive a legal claim against Mercyhealth or a request for information, promptly inform your immediate supervisor or the Legal Services Department.

Mercyhealth cooperates with all federal, state or local investigations. Additionally, Mercyhealth and its partners are entitled to all safeguards provided by law for the benefit of individuals and entities under investigation. If a government representative seeks copies of documents or access to files, through formal or informal discussion,

partners should inform them of Mercyhealth's policy to cooperate with the government and that the matter must initially be referred to the Legal Services Department.

## **Corrective Action**

Where an internal investigation substantiates a reported violation, a Corrective Action Plan is initiated. Corrective Action Plans are designed to prevent non-compliance from occurring again and mitigate any current compliance concerns. Corrective Action Plans may include the prompt restitution of overpayment amounts, notification to the appropriate governmental agency, and implementation of system changes.

## **Discipline**

Any partner who violates the standards described in our code will be subject to corrective action up to and including termination. The precise actions taken will depend on the nature, severity and frequency of the violation. Disciplinary actions will be handled in accordance with established policies on corrective action.

## **Financial Management and Reporting**

Mercyhealth requires and promotes ethical and professional conduct in all matters related to finance, financial management and reporting, pursuant to all legal and regulatory requirements. We have established and maintain a high standard of accuracy and completeness in documenting, maintaining and reporting financial information. This information serves as a basis for managing our business and is important in meeting our obligations to patients, colleagues, payors, financial institutions, bondholders, suppliers and others. It is also necessary for compliance with financial reporting requirements.

## **Fraud, Waste and Abuse**

Mercyhealth is fully committed to complying with all laws associated with fraud, waste and abuse and recognizes the significant penalties for filing false or fraudulent claims under the federal False Claims Act, or any similar state law, or for paying or receiving financial inducements for patient referrals.

## Coding and Billing for Services

We are committed to submitting accurate claims for our services and have implemented policies, procedures and systems to facilitate accurate billing consistent with applicable standards and payor requirements.

Physicians and other partners who provide billable services are responsible for selecting the appropriate procedure and diagnosis codes. Physicians and partners, along with support staff, have a collective responsibility to be knowledgeable about the appropriate interpretation and application of the codes and procedures used for billing purposes.

In support of accurate billing, medical records must provide reliable documentation of the services rendered. Individuals who contribute to medical records are required to provide accurate information and not destroy or inappropriately alter information considered part of the official medical record.

If you ever have any questions regarding billing and coding practices, you are encouraged to report your concerns using one of the reporting options available to all partners.

## False Claims Act

In accordance with the False Claims Act (FCA), we prohibit any partner from knowingly presenting, or causing to be presented, claims for payment or approval that are false, fictitious or fraudulent.

The federal FCA makes it a crime for any person or entity to “knowingly” make a false record or file a false claim with the government for payment. “Knowingly,” in this case, means several things:

- We know the record or claim is false.
- We seek payment while ignoring whether or not it is false.
- We seek payment recklessly without checking to ensure that it is not false.

Penalties are severe for violating the federal FCA. The penalty can be up to three times the value of the false claim, plus fines of many thousands of dollars.

Many states have enacted similar laws that mirror the federal FCA with respect to defining what constitutes a “false claim” and the penalties for submitting one.

## **Referrals and Kickbacks**

The Anti-Kickback Statute, Stark Law, and corresponding state laws, govern how we refer or receive patient referrals. Violations of these statutes can lead to fines, denial of claims, and imprisonment.

### **Anti-Kickback Statute**

As required by the Anti-Kickback Statute (AKS), Mercyhealth and its partners are prohibited from knowingly and willfully offering, paying, asking for, or receiving any cash or other payment (including discounts, rebates, bribes or an item of value), directly or indirectly, in return for referrals, arrangements, or orders for any good or service that could be reimbursed by federal health care programs.

### **Physician Self-Referral Law (Stark)**

We conduct our business in compliance with the Stark Statute and we prohibit a physician from making referrals for certain designated health services to an entity when the physician (or member of his or her family) has a compensation arrangement or an ownership/ investment interest.

We accept patients based solely on the patient’s medical needs and our ability to render the needed services. We do not pay or offer to pay anyone—colleagues, physicians or other persons or entities—for the referral of patients.

We do not accept payments for referrals we make. No partner is permitted to solicit or receive anything of value, directly or indirectly, in exchange for referral of patients. Similarly, when making patient referrals to another health care provider, we do not consider the volume or value of referrals that the provider has made (or may make) to us.

It is important that those partners who interact with or receive referral sources are aware of the legal requirements that apply, especially when payments are involved, such as in agreements for professional and administrative services, physician recruitment and the rental of space.

If you have questions about a business arrangement or the referral laws above, contact your manager, the Compliance Officer or Legal Services Department.

Your vigilance to prevent fraud, waste and abuse, and your willingness to ask questions and report concerns, are key elements to Mercyhealth's success. These are important ways you can help us prevent fraud, waste and abuse.

## **License and Certification Renewals**

Mercyhealth prohibits partners from working or providing services without valid licenses or credentials, unless fully authorized to do so by law. Partners who are retained in positions that require professional licenses, certifications or other credentials are responsible for maintaining those credentials and complying with standards applicable to their respective disciplines. The system has policies and procedures related to partner and medical staff credentialing to verify current licensure or credentialing status to ensure compliance.

## **Ineligible and Excluded Individuals**

We do not employ, contract with, or bill for services furnished by an individual or entity that is excluded, debarred, suspended or otherwise ineligible to participate in federal health care programs or federal procurement or non-procurement programs, or that has been convicted of a criminal offense related to the provision of health care items or services (as defined in 42 USC §1320a-7(a)). Prior to hiring or contracting, and monthly thereafter, we search against the lists of excluded persons maintained by the Department of Health and Human Services Office of the Inspector General (OIG) and the General Services Administration (GSA). Partners are required to immediately report to the system if they become excluded, debarred, suspended or otherwise ineligible to participate in federal or state health care programs, or if they have been convicted of a criminal offense related to the provision of health care items or services.

## **Research, Investigations and Clinical Trials**

We follow high ethical standards and comply with applicable requirements in research, investigations, and clinical trials conducted by our physicians and professional staff. We do not tolerate research misconduct, including fabricating or changing results, copying results from other studies without performing the clinical investigation or research, failing to identify and deal appropriately with investigator or institutional conflicts of interest, and proceeding without Institutional Review Board (IRB) approval. Our first priority is always to protect the patients and respect their rights during research, investigations, and clinical trials.

Refusal to participate in a research study will not compromise a patient's access to services or the quality of care provided by partners. Informed consent to participate in clinical investigations or research is documented and retained pursuant to affiliated entity policies. Any partner applying for or performing research of any type is responsible for maintaining the highest ethical standards in any written or oral communications regarding the research project, as well as for following appropriate research guidelines and study protocols. We submit only true, accurate and complete costs related to research grants. Any partner engaging in human subject research must do so, as required, in conjunction with an IRB approval and consistent with policies regarding human subject research and IRBs.

## **Business Information and Information Systems**

### **Accuracy, Retention and Disposal of Documents and Records**

Medical and business documents and records are generated and retained in accordance with the law and our record retention policies. Documents include paper, electronic disks or tape, and any other medium that contains information about Mercyhealth or its business activities. It is important to retain and destroy records only according to our policy.



Partners are responsible for the integrity and accuracy of system documents and records, not only to comply with regulatory and legal requirements, but also to make sure that records are available to support our business practices and actions. Partners may not alter or falsify information on any record or document. Records must never be destroyed in an effort to impede an inquiry or investigation.

## **Information Security and Confidentiality**

Since confidential information about our operations is a valuable asset, we exercise due care in maintaining its confidentiality, availability and integrity. Confidential information is information that is protected by law or is considered to be proprietary in nature. Confidential information includes, but is not limited to, employment files; strategic business plans; patient information; electronic databases and other business records; proprietary systems and software; information related to legal and regulatory matters; and other information that is not intended to be publicly shared. Although partners are permitted to use confidential information to perform their jobs, Mercyhealth expects that such information will not be shared with others, unless authorized by law or a legitimate need exists to perform specific job duties or contractual obligations. Partners who handle confidential information are required to be familiar with and follow departmental and entity policies related to the use, disclosure, and release of such information.

If a partner's employment or contractual relationship with the system ends for any reason, individuals remain bound to our confidentiality requirements for information viewed, received or used during the employment or contractual business relationship with Mercyhealth. Any confidential information in a partner's possession must be left with the system, including paper documents, data stored on computers, USB drives, CDs, etc.

## **Electronic Media and Security Requirements**

All communication systems (telephones, facsimile machines and voicemail), including computers, computer-related equipment, electronic mail, Intranet and Internet access are system property and are to be used for business purposes in accordance with electronic communications policies and procedures. Since so much of our clinical and business information is generated and contained within our computer systems, it is essential that each partner protect our computer systems and the information contained in them by adhering to established policies and procedures regarding electronic security and protecting equipment from theft. Also, partners should not share passwords or improperly transmit confidential information over the Internet. Portable devices and removable media, such as laptop computers, PDAs, USB drives, CDs and external hard drives, must be physically secured at all times and properly password protected and encrypted.

Limited reasonable personal use of Mercyhealth communications systems is permitted provided it does not interfere with the partner's job duties or those of their co-workers. However, partners should presume no expectation of privacy in anything they say, write, create, store, send or receive on Mercyhealth electronic and telephone systems. Mercyhealth reserves the right to monitor and/or access communications usage and content consistent with system policies and procedures.

Partners may not use internal communication channels or Internet access at work to post, store, transmit, download or distribute threatening, false or obscene materials; or anything constituting or encouraging a criminal or civil offense that could lead to legal liability, or otherwise violating any laws. Additionally, these channels of communication may not be used to send chain letters, personal broadcast messages, or copyrighted documents that are not authorized for reproduction.

Partners who abuse our communications systems or use them excessively for non-business purposes may lose these privileges and be subject to corrective action.

# **Workplace Conduct and Employment Practices**

## **Conflict of Interest**

A conflict of interest may occur if personal activities or financial interests influence or appear to influence a partner's ability to make objective decisions in the course of their job responsibilities. A conflict of interest may also exist if the demands of any outside activities hinder or distract a partner from the performance of his or her job or cause the individual to use system resources for non-Mercyhealth purposes. Partners are obligated to remain free of conflicts of interest in the performance of their responsibilities. If partners have questions about whether an outside activity or personal interest might constitute a conflict of interest, they must obtain the approval of their supervisor before pursuing the activity or retaining the interest. Clinical decisions made by professional partners should never be made based on personal gain or compensation or the financial risk to Mercyhealth or any other person. Certain partners, based on their level of authority and responsibility, are required to periodically complete conflict of interest disclosure forms in accordance with system policy.

## **Controlled Substances**

Many partners routinely have access to prescription drugs, controlled substances and other medical supplies. Many of these substances are governed and monitored by specific regulatory agencies and can only be administered by the order of a physician or authorized practitioner. To minimize risks to Mercyhealth, our partners and our patients, prescription and controlled medications and supplies must be handled properly and only by authorized individuals. If a partner becomes aware of inadequate security of drugs or controlled substances, or improper diversion or use, the incident must be immediately reported to the partner's supervisor or the Human Resources Department.

## **Substance Abuse and Mental Acuity**

To protect the interests of our partners and patients, we are committed to an alcohol- and drug-free work environment. Partners must report to work free of the influence of alcohol and illegal drugs. Reporting to work under the influence of any illegal drug or alcohol;

having an illegal drug in a partner's system; or using, possessing or selling illegal drugs while on system work time or property may result in immediate termination. We may use drug testing as a means of enforcing this policy.

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

## **Copyrights**

Partners may only use copyrighted materials pursuant to law. Questions regarding copyright issues should be directed to the Legal Services Department.

## **Personal Use of Company Resources**

It is the responsibility of each partner to preserve Mercyhealth assets, including time, materials, supplies, equipment and information. Company assets are to be used for business-related purposes only.

As a general rule, the personal use of any system asset without prior supervisory approval is prohibited. The occasional use of items, such as copying machines or telephones, where the cost to the system is insignificant, and such use does not interfere with the partner's job duties, is permissible. A supervisor must approve any community or charitable use of system resources in advance. Any use of system resources for personal financial gain or other benefit is prohibited.

## **Diversity and Equal Employment Opportunity**

Mercyhealth actively promotes diversity in its workforce at all levels of the organization. We are committed to providing an inclusive work environment where everyone is treated with fairness, dignity, and respect. We will make ourselves accountable for how we treat one another and for how people around us are treated. We

are committed to recruit and retain a diverse staff reflective of the patients and communities we serve. We regard laws, regulations and policies relating to diversity as a minimum standard. We strive to create and maintain a setting where we celebrate cultural and other differences and consider them strengths of the organization. Mercyhealth has an Affirmative Action and Equal Opportunity Policy.

## **Harassment and Workplace Violence**

Each partner has the right to work in an environment free of harassment and disruptive behavior. Mercyhealth has a policy on Illegal Harassment and Partner Behavior. We do not tolerate harassment by anyone based on the diverse characteristics or cultural backgrounds of those who work with us or other forms of illegal harassment as defined in our policy. Degrading or humiliating jokes, slurs, intimidation or other harassing conduct is not acceptable in our workplace.

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

Harassment also includes incidents of workplace violence. Workplace violence includes robbery, threatening gestures, bullying, physical altercations, stalking, destruction of property, terrorism and hate crimes. In support of this policy, partners and visitors (excluding law enforcement) are prohibited from bringing firearms or other dangerous weapons or items into system facilities. Partners who observe or experience any form of harassment or violence should report the incident to their supervisor or through the reporting mechanisms outlined in our code.

## **Workplace Health and Safety**

We are committed to ensuring our system facilities comply with government and accreditation standards promoting the protection of workplace health and safety. Our policies are developed to protect our colleagues, patients and visitors from potential workplace hazards. Partners must become familiar with and understand how these policies apply to their specific job responsibilities. Partners are

expected to seek advice from their supervisor or the facilities director whenever a question or concern arises. It is important that each partner immediately notify his or her supervisor, risk management, security, or the facilities director of any serious workplace injury or any situation presenting a danger of injury so timely corrective action may be taken.

## **Gifts**

Gifts, favors and entertainment may be given to others at Mercyhealth expense only under certain conditions. Gifts must be consistent with the law and accepted business practices. They must also be of sufficiently limited value and in a form that could not be reasonably construed as a bribe or payoff. Gifts in the form of cash or its equivalent are prohibited. Neither a partner nor their family members should solicit or accept, either directly or indirectly, a fee, a substantial gift, or excessive entertainment from any present, past, or prospective patient, partner, customer or supplier.

## **Relationships with Subcontractors and Suppliers**

We must manage our consulting, subcontractor and supplier relationships in a fair and reasonable manner, free from conflicts of interest and consistent with all applicable laws and good business practices. We promote competitive procurement to the maximum extent practicable. We make our selection of consultants, subcontractors, suppliers and vendors based on objective criteria and not on personal relationships and friendships. We employ the highest ethical standards in business practices in source selection, negotiation, determination of contract awards, and the administration of all purchasing activities. We comply with contractual obligations not to disclose confidential vendor information unless permitted under the contract or otherwise authorized by the vendor.

## **Marketing Practices**

### **Antitrust**

Antitrust laws are designed to create a level playing field in the marketplace and to promote fair competition. Violation of these laws could occur by discussing Mercyhealth business with a competitor, such as how prices are set, sharing contracts, disclosing the terms of supplier relationships, agreeing to divide markets, or agreeing

with a competitor to refuse to deal with another supplier or payor. In general, partners should avoid discussing confidential information or other sensitive topics with competitors or suppliers, unless they are proceeding with the advice of the Legal Services Department.

## **Gathering Information about Competitors**

It is not unusual to obtain public information about other organizations, including our competitors, through legal and ethical means including public meetings, documents and presentations, journal and magazine articles, and other published and presented information. Partners should avoid seeking or receiving information about a competitor through other non-public means, if they know or have reason to believe the information is proprietary or confidential. For example, partners should not seek proprietary or confidential information when doing so would require anyone to violate company policy or a contractual agreement, such as a confidentiality agreement.

## **Marketing and Advertising**

We may use marketing and advertising activities to educate the public, provide information to the community, increase awareness of our services, and recruit personnel. We present only truthful, fully informative and non-deceptive information in these materials and announcements.

## **Environmental Compliance**

We comply with all environmental standards related to our operations, and operate our facilities with the necessary permits, approvals and controls. We diligently employ the proper procedures to provide a safe environment of care. Partners must adhere to all requirements for the proper handling of hazardous materials and immediately alert supervisors to any situation regarding the discharge of a hazardous substance, improper disposal of hazardous and medical waste, or any situation that may be potentially damaging to the environment or pose a health hazard.

## **Political Activity and Involvement**

Partners are encouraged to be politically active and informed on their personal time and are prohibited from engaging in political activity on behalf of Mercyhealth. Any political involvement is limited to the extent permitted by law to activities that do not interfere with partners' work performance and do not reflect adversely on the goodwill and reputation of Mercyhealth. As a charitable organization, Mercyhealth is subject to limitations on its political activity. Failure to adhere to proper procedures and legal requirements can result in civil and criminal liability.

## **Relationships with Governmental Entities and Representatives**

Federal and state governments have strict rules and laws regarding gifts, meals and other business courtesies for their employees. Mercyhealth does not provide any gifts, entertainment, meals or anything else of significant value to any federal or state employee. If appropriate, we may provide minor refreshments in connection with business discussions or promotional items with the Mercyhealth logo. With regard to gifts, meals and other business courtesies involving any other category of government official or employee, partners must determine the applicable rules and carefully follow them. The Legal Services or Compliance Department should be consulted on such matters.

## **Supplementing Our Code**

Through our code, we have provided extensive guidance regarding the ethical and compliant behavior expected of partners. However, it is not possible to address every policy and procedure that is necessary to fully meet the spirit and intent of the code. Additional guidance to expand and supplement the principles addressed in the code can be found in corporate, compliance, departmental, and HR policies and procedures, which can be accessed in your department or on the Mercyhealth Intranet. Partners are expected to familiarize themselves with policies and procedures applicable to their work.



Managers are expected to supply additional resources to partners and are responsible for the following:

- Supplementing the information contained in this code with corporate, entity and departmental policies and procedures, where appropriate;
- Being knowledgeable of those specific legal requirements that affect their area of responsibility; and
- Most importantly, notifying appropriate system representatives if any compliance issues arise or if they have questions or concerns of a compliance nature.

We believe, through our code and other resources, that all partners have the necessary tools to address compliance concerns and assist Mercyhealth in meeting its health care and business mission in an ethical and compliant manner.

## **Questions?**

### **Compliance Department**

(608) 756-6156

501 N. Terrace St., Janesville WI 53548

### **Privacy**

(608) 756-6753

1000 Mineral Point Ave., Janesville WI 53548

## **Compliance Hotline for anonymous reporting**

Call (877) 647-6464 or visit [mercyhealthhotline.com](http://mercyhealthhotline.com), available 24/7.

## This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.



A passion for  
making lives better.

