Physician Health Partners

Physician Health Partners Compliance Program and Code of Conduct

Our compliance program reflects our dedication to maintaining a culture of excellence, transparency, and continuous improvement, ensuring we meet all regulatory requirements and uphold the trust placed in us by our patients, team members, and communities. To show our commitment to a culture of compliance we ask all team members to review and sign this Compliance Program upon hire and annually thereafter. The Physician Health Partners' (PHP) Compliance Program is approved by the Board of Directors (Board). It is available for all team members to access via Workday at any time.

Code of Conduct

An important component of the Compliance program is a Code of Conduct. The Code of Conduct sets out basic principles which we all must follow. These principles are the building blocks for a culture of compliance. They support us in maintaining a reputation for integrity and honesty. PHP depends on all team members to contribute to a culture of compliance by adhering to the Code of Conduct. This Code applies to all business operations. Non-employed representatives of PHP, such as external advisors and consultants, providers and business associates are also directed to conduct themselves in a manner consistent with this Code of Conduct.

Promote a Culture of Compliance

All of PHP's policies and procedures incorporate a culture of compliance into its day-to-day operations. Retaliation against any team member for reporting a suspected compliance violation is strictly prohibited. Team members are expected to:

- Learn and follow the laws, regulations, contracts, and PHP policies and procedures applicable to job functions and PHP activities
- Be proactive to prevent and detect any compliance violations
- Report suspected violations to supervisors or other PHP officials
- Ensure that reports of violations within their area of responsibility are properly resolved
- Ask questions

Act Ethically and with Integrity

Ethical conduct is a fundamental expectation for every participant. In practicing and modeling ethical conduct, participants are expected to:

- Act according to the highest ethical, personal, and professional standards of conduct
- Be personally accountable for individual actions
- Conscientiously fulfill obligations
- Communicate ethical standards of conduct through questions, instruction, and example

Be Fair and Respectful to Others

PHP is committed to tolerance, diversity, and respect. When working with others, participants are expected to:

- Embrace diversity and respect others without regard to race, color, religion, sex, gender, national origin, age, disability, sexual orientation, or political affiliation
- Speak candidly and truthfully, while also being fair, respectful, and civil in interaction
- Promote conflict resolution
- Reject and advocate against all forms of harassment, discrimination, threats, and violence
- Advocate for underrepresented individuals
- Promote inclusion, equity, and compassion

Manage Responsibly
Managers and supervisors are expected to:

- Ensure access to and delivery of proper training and guidance on applicable workplace and educational rules, polices, and procedures, including this Code of Conduct
- Ensure compliance with applicable laws, policies, and workplace rules
- Review performance conscientiously and impartially
- Foster intellectual growth and professional development
- Remind team members that compliance and ethics are integral in primary in day-to-day work
- Lead by example: model ethics and integrity in all interactions
- Promote a healthy, innovative, and productive atmosphere that encourages dialogue and is responsive to concerns

Protect and Preserve PHP Resources
PHP is dedicated to responsible stewardship of its reputation and assets. Team members are expected to:

- Use property, equipment, finances, materials, systems, and other resources only for legitimate business purposes
- Prevent and identify waste and abuse
- Promote efficient operations
- Follow sound financial practices including accurate financial reporting, asset protection processes, and responsible fiscal management
- Engage in appropriate accounting and monitoring

Avoid Conflicts of Interest
Team members have an obligation to be objective and impartial in making decisions on behalf of PHP.
To ensure this objectivity, team members are expected to:

- Identify and avoid individual or company conflicts of interest
- Disclose potential conflicts of interest and adhere to any management plans created to eliminate these and other conflicts
- Ensure personal or professional relationships do not interfere with objective judgment in decisions affecting PHP

Carefully Manage Confidential Information
Team members are the creators and custodians of many types of information. The right to access this information and an individual's right to privacy are both governed by laws and PHP policies. To meet these responsibilities, team members are expected to:

- Learn and follow laws, policies, and agreements regarding access, use, protection, disclosure, retention, and disposal of confidential information
- Follow document preservation and retention guidelines
- Maintain data security using electronic and physical safeguards

Promote Health and Safety in the Workplace
Team members have a shared responsibility to ensure a safe, secure, and healthy environment for all PHP patients, customers, and visitors. team members are expected to:

- Follow safe workplace practices and report accidents, injuries, and unsafe situations
- Report suspicious activities

Compliance Program Structure

Chief Compliance Officer

PHP has appointed a Chief Compliance Officer (CCO) who is responsible for setting and overseeing the enterprise compliance strategy; identifying monitoring and mitigating organizational compliance risks; and driving a culture of compliance and accountability. The CCO reports to the PHP Board of Directors and is responsible for ensuring the Board is fully informed regarding the scope and effectiveness of the Compliance Program. The Compliance Officer makes quarterly reports regarding compliance matters directly to the PHP Board of Directors and is authorized to report on compliance matters to the Board at any time.

Compliance Committees

PHP believes that a successful compliance program engages the entire workforce in compliance related activities. As such, the Compliance Program includes an Executive Compliance Committee and Operational Compliance Committee(s) that are composed of clinicians, leaders, and representatives from multiple departments. The purpose of operational compliance committees is to:

- Support the Chief Compliance Officer in fulfilling the responsibilities associated with the Compliance Program including compliance with federal and state laws and regulations related to healthcare.
- Set the tone for a culture of compliance throughout the company. It shall lead the way with respect to compliance, integrity and ethics and shall hold themselves and the workforce accountable for abiding by the Code of Conduct.
- Oversee the implementation and operation of the Compliance Program and Plan
- Review reports and recommendations of the Chief Compliance Officer, Information Security Officer, and other departmental leaders as applicable regarding Plan activities, including data regarding compliance generated through audit, monitoring, and individual reporting.
- Participate in an annual risk assessment and create a subsequent annual Compliance Plan.
- Review complaints and reports of compliance concerns.
- Recommend discipline and take corrective action based on investigative findings.
- Make recommendations to the Board of Directors regarding the efficacy of the Plan.

Policies & Procedures

PHP has developed compliance policies that are an integral part of the Compliance Program. They ensure compliance with all applicable statutes, rules, regulations, and contractual requirements. Policies include but are not limited to HIPAA/privacy; IT Security/HITECH; fraud, waste, and abuse; records retention; non-retaliation; corrective action; and providers excluded from receiving federally funded healthcare dollars. Compliance and privacy policies are reviewed annually. The Compliance Officer is responsible for education, training, monitoring, and auditing elements of compliance polices. Managers and supervisors are responsible for ensuring their teams are educated and adhere to departmental policies. Violation of these policies, or other departmental policies that govern processes related to statutes, regulations, rules, either state or federal, or required by contract with a health plan, is considered a violation of the Compliance Program.

Education and Training

A principal component of a Compliance Program is an effective education program. An effective education program ensures communication and understanding of the Compliance Program, as well as the standards and procedures to be followed.

Education includes a description of the consequences of failure to comply with the Compliance Program or policies and procedures. Consequences include corrective action and disciplinary procedures, up to and including termination.

All new PHP team members will receive initial education that covers the content of the Compliance Program; fraud, waste, and abuse; and HIPAA as part of New Hire Orientation. All personnel will receive compliance education and training on an annual basis. This annual training will be mandatory to continue employment. Additional focused education and training will be provided as necessary, either due to issues identified through monitoring and auditing, in response to changes in rules and regulations, or for department-specific needs. Training and education will be provided in a variety of formats and mediums.

Leaders are expected to continuously reinforce the importance of education and training, support their team members in completing training on time, and monitor for overdue trainings. Each department manager or supervisor is responsible for education and training related to departmental level policies, procedures, and processes.

Auditing and Monitoring

An ongoing evaluation process is critical to the success of the Compliance Program. The Compliance Officer coordinates with applicable department leaders and/or Compliance Committee members to identify areas that are at risk for non-compliance with statutes, regulations, rules, internal policies, and contractual requirements. Based on the risk areas identified, a compliance plan is developed which includes key operational activities for each market. Operational reports from various departments are monitored and trended for deviations from the expected norm. Unexplained deviations may trigger a compliance audit. Audit results are reviewed by the Compliance Officer and Compliance Committees and disseminated to the appropriate department managers. A request for corrective action will be initiated by the Compliance Officer if the results are not within established goals. All monitoring reports and audits will be reviewed with a focus on isolated and systemic problems and issues that may need to be corrected.

Communication and Reporting

Any associate who has reason to believe that there may be illegal or unethical conduct has an obligation to report their suspicions or observations to the appropriate authority. Team members may be subject to disciplinary action if they are aware of a problematic situation and do not report it. PHP provides open access to the Compliance Officer and Compliance Team as part of its commitment to support education and reporting of suspected ethical or legal violations. Concerns, clarifications, or questions may be presented verbally or in writing to any member of the Compliance team or to a team member's manager or supervisor. Compliance team members can be reached directly through email, phone or MS Teams. Confidential reporting may be done via the confidential Compliance Hotline: 833-254-2025 or online: PHP-physicians.ethicspoint.com. These resources are checked daily.

Feedback on the Compliance Program is sought via surveys and through compliance related questions in exit interviews. All reports of misconduct are taken seriously and are thoroughly investigated. If compliance issues are identified, action will be taken to correct them. Retaliatory action against team members or others who, in good faith, report an observed or suspected violation will never be taken.

Investigation and Remediation Plans

All identified and reported suspected violations will be assessed by the Compliance Officer. A determination will be made as to whether the reported issue constitutes a violation of the Compliance Program. If the reported issue is a potential violation, the Compliance Officer will initiate an internal investigation to determine if a violation exists.

If it is determined that no violation exists, the issue will be closed. When it is determined that a violation is present, the Compliance Officer will request a Remediation Plan be submitted by the manager/supervisor of the person(s) who committed the violation.

The Compliance Officer shall follow up to ensure that the Remediation Plan is effective, and the violation is not being repeated. Failure to submit a Remediation Plan upon request is considered a violation of the Compliance Program and may result in disciplinary action, termination of contract, or reporting to the appropriate governing authority.

If after reasonable inquiry, it is determined that the identified violation may have violated criminal, civil, or administrative law, PHP will, after consultation with legal counsel, report the misconduct to the appropriate governmental authority.

Disciplinary Guidelines for Team Members

PHP will take immediate steps to correct any violation of laws, regulations or the Compliance Program and associated policies and procedures, including implementation of systemic changes, corrective and disciplinary action, and reporting to authorities, as appropriate. All PHP team members are held accountable for compliance with statutes, regulations, rules and standards specific to their position and job function. Supervisors and/or managers will be held accountable to ensure team members understand and follow expectations.

Team members who do not comply with the Compliance Program are subject to disciplinary action. The Compliance Officer and/or Compliance Committee, as well as legal counsel, may be consulted in determining the seriousness of the violation and giving recommendations to management. However, the Compliance Officer and/or Compliance Committee shall never be involved in imposing discipline. The supervisor or manager, in collaboration with Human Resources, will be responsible for taking appropriate disciplinary actions. The disciplinary process for violations of the Compliance Program will be administered according to the procedures outlined in the PHP Associate Policy Manual. When disciplinary action is warranted, it should be prompt, consistent, and imposed according to written standards of disciplinary action.

Disciplinary action may include, without limitation, one or more of the following:

1. Verbal counseling
2. Written corrective action plan
3. Entering into and monitoring a compliance remediation plan. The remediation plan may include requirements for individual or group education and training, consultation, proctoring, and/or concurrent review.
4. Suspension or termination of employment.

In the event it is determined that the violation has the potential to be repeated, the CCO shall work with the manager to determine the timing and scope of a focused audit to determine if the issue has been resolved.

Thank you for your commitment to maintaining the highest standards of integrity and ethics in all that you do. Your dedication to our compliance program ensures that we will achieve our mission by providing safe, quality care to our patients, in an environment where we all thrive. Together, we continue to foster a culture of compliance that not only meets regulatory requirements, but also demonstrates our shared commitment to doing what is right.