



CODE OF ETHICAL CONDUCT

Hospice Compassus is dedicated to providing excellence in hospice care to terminally ill patients and their families. This mandates doing what is legally, ethically, and morally right, as defined by ethical business practices and principles of healthcare. Our Hospice Compassus Integrity and Compliance Program has been established to promote an ethical corporate culture which ensures compliance with federal and state standards, and which promotes integrity, supports objectivity, and fosters trust. Rules and regulations are never, in themselves, sufficient to ensure moral, ethical behavior; and therefore it is Hospice Compassus' philosophy that our Company's moral fiber is exemplified through our Six Pillars of Success.

PILLAR 1: REGULATORY COMPLIANCE

Compliance with Laws, Rules, Regulations, and Company Policies and Procedures

A fundamental principle on which we operate is compliance with all laws, rules, and regulations to which we are subject. Company policies and procedures have been developed to guide our Colleagues to operate within these laws, rules, and regulations. Colleagues are expected to understand and adhere to all Company policies and procedures. If you are ever unsure whether any action is appropriate, ask your Supervisor. If your Supervisor doesn't know the answer to your question, or if you are not comfortable with the answer you receive, ask another Leader or call the Compliance Officer. Remember that it is always better to ask a question before taking any action that may be improper.

Cooperation with Surveys, Audits, and Investigations

Our hospices are frequently subject to internal and external surveys, audits, and investigations. This includes state and federal regulatory surveys and investigations, probe edits, internal surveys conducted by Colleagues or third-party consultants, compliance investigations, and Joint Commission accreditation surveys. Colleagues are expected to cooperate fully and provide truthful and accurate information when responding to those conducting surveys, audits, inquiries, or investigations.

PILLAR 2: COLLEAGUES and CULTURE

Maintaining a Positive and Professional Work Environment

We will strive to maintain a positive and professional work environment for our Colleagues. All Colleagues should be treated with fairness, respect, courtesy, and consideration. We will maintain a safe, positive working environment free from harassment. We will not tolerate any form of harassment—sexual, physical, racial, religious, age-based, disability-based, or otherwise—including degrading or humiliating jokes, slurs, or intimidation. We strongly support equal employment and advancement opportunities for all individuals; and we will not tolerate any form of discrimination based on race, color, religion, sex, national origin, age, disability, genetics, or any other protected characteristic.

We promote an "open-door" environment and encourage direct and honest communication among Colleagues and Leaders. We strive to maintain a professional environment where Colleagues may develop their skills and their careers based upon ability, effort, and job performance.

Non-retaliation for Reporting

No one is permitted to engage in retaliation or any form of harassment or discrimination against a Colleague who reports a concern. Anyone at any level who engages in retaliation, discrimination, or harassment is subject to discipline, up to and including termination. Open and candid reporting of errors and other issues is encouraged, so that such issues may be addressed and corrected at the earliest possible time. If you believe you are being retaliated or discriminated against or harassed because you have reported a concern, **you must promptly report this to the Compliance Officer** at 1-866-970-8840 or compliance@hospicecom.com; or if you prefer, you can report a concern anonymously at the ComplianceLine at 1-866-569-7193.

Conflicts of Interest

A "conflict of interest" occurs when a Colleague's private interests interfere (or appear to interfere) with the interests of the Company as a whole or one of its locations. A potential conflict may arise from business relationships, financial investments, part-time jobs, or other activities that could influence or appear to influence your judgment or duties on behalf of the Company.

An actual, potential, or perceived conflict of interest occurs in those circumstances where a Colleague's judgment

could be affected because the Colleague has a personal interest in the outcome of a decision over which the Colleague has control or influence. A personal interest exists when a Colleague or a member of his or her family stands to directly or indirectly gain as a result of a decision. Avoid making any business decision that involves yourself, friends, or family without first making appropriate disclosure and seeking appropriate approval through your Executive or Department Director.

A Colleague's part-time employment with another company must not result in a violation of stated Hospice Compassus performance standards, and it must not damage Hospice Compassus' reputation among patients, referral sources, and/or the general public. Colleagues working part-time in another healthcare capacity must notify their Executive or Department Director. The Compliance Officer will make the final determination whether the part-time role creates a conflict of interest.

Due to the potential for perceived or actual conflicts, a Colleague may not supervise a relative. "Relative" is defined for this purpose as a spouse, parent, child, grandparent, grandchild, brother, sister, aunt, uncle, cousin, niece, nephew, or the equivalent in-law, step relationship, or half relationship (e.g., half brother) of any of these. This also applies to those who are in significant relationships but not married.

Colleagues and Leaders are responsible for disclosing personal relationships within the organization's reporting structure to the Director of Colleague Relations in Human Resources.

PILLAR 3: QUALITY

Interaction with Patients, Family Members, and Caregivers

Patients and their families are our first priority, and we are committed to treating all patients, their family members, and their caregivers with compassion, dignity, and respect. We welcome the involvement of our patients and their loved ones as appropriate in decisions affecting their Plan of Care. We strive to treat our patients and their families in the same manner that we would desire to be treated.

Qualifications and Training of Colleagues

All Colleagues, prior to starting work, are subject to background checks as required by federal and state laws and Company policy. We will not employ or otherwise engage any individual whom we know to have failed the background check requirements or to have been excluded from participating in any federal healthcare program.

Colleagues are expected to maintain all required professional licenses, certifications, or other accreditations, and to comply with the ethical standards of their respective professional organizations. Colleagues are required to report any occurrence that may disqualify them from fulfilling their job responsibilities. Colleagues are expected to perform only those professional duties that are within their authority to perform.

The Company will provide Colleagues with mandatory job-related training to ensure compliance and continue their development. All Colleagues are required to attend such training.

Supervisors must ensure that only properly screened, qualified, and trained Colleagues are assigned to care for our patients.

Plans of Care

For each patient admitted to hospice, a Plan of Care, tailored to meet the specific needs of the patient and family, is established by the Interdisciplinary Team (IDT) including Medical Director, patient/family, and attending physician. The Plan of Care is reviewed on a regular basis and revised as necessary to provide palliation of the patient's symptoms and management of the terminal illness. It is imperative that services are provided in accordance with the Plan of Care, documented accurately and in a timely manner, and made a part of the permanent patient record.

PILLAR 4: SERVICE EXCELLENCE

Service Commitment

We strive to maintain a culture of service excellence and have developed the Hospice Compassus Service Commitment, an eight-point promise to our patients and their family members and to our referral sources. It is the top priority of all Colleagues to fulfill each individual component.

HOSPICE COMPASSUS SERVICE COMMITMENT

SERVICE

Excellent patient care and service are our highest priorities.

Hospice Compassus will always be the leader in quality hospice care in each community we serve.

URGENCY

We will initiate contact with patients/families within 2 hours of receiving a referral.

Patients referred to us with required documentation will be admitted on that same day or within 24 hours,

when family and/or guardians are available.

CARING

We will provide compassionate, timely, and effective pain and symptom management to patients and offer support to their families, 24 hours a day.

RESPONSIBILITY

We recognize the special relationship between physicians and their patients, and we offer to provide those physicians regular patient status reports on any schedule they request.

COMMUNICATION

Telephone calls to our staff will always be answered promptly and politely. Trained staff will respond to urgent calls made to our after-hours call service within 15 minutes, 24 hours a day.

RESPONSE

We will address patient, family, or physician questions, issues, or concerns within 24 hours of the appropriate staff being notified about the issue.

COMPASSION

We will care for our patients and their families with the same compassion, dignity, and respect we give our own families.

FEEDBACK

We regularly survey our patients, families, facilities, and physicians to ensure we are meeting our service commitment to the people, professionals, and communities we serve.

Patient Privacy

In the course of serving our patients and their families, we collect sensitive information about our patients' medical conditions, treatments, family history, and/or medications. Much of this information is personal in nature and must be considered highly sensitive. We must maintain the confidentiality of this information at all times.

All of our Colleagues shall comply with the Health Insurance Portability and Accountability Act (HIPAA) in accessing, using, processing, or disclosing protected health information. (HIPAA is a law which protects the confidentiality of an individual's healthcare information.) Each Colleague should be familiar with our *Notice of Privacy Practices* because, as a Colleague, you are required to comply with the terms of this document. We will not share protected information except when authorized under HIPAA for treatment, payment, or healthcare operations; or as required by law. If you have questions, ask your Supervisor or Executive/Department Director, or call the Compliance Officer.

We will not conduct discussions of patient issues in public areas or with non-authorized individuals. We will take all reasonable measures to protect medical record information in all forms, whether paper or electronic.

PILLAR 5: GROWTH

Growth as an Indicator of Success

Growth of a hospice Program is an affirmation that the Program is achieving success in Pillars 1 through 4 and an indication that the hospice is meeting the needs of the community it serves.

Admissions

Only patients meeting established eligibility criteria (Local Coverage Determinations – LCD's) shall be admitted and recertified for hospice care. Patients on service are certified by their attending physician and our Medical Director to be terminally ill with a prognosis of six months or less, if the disease follows its normal progression. It is not unusual for patients to live beyond six months and continue enrollment in hospice. Continued enrollment in hospice is determined by the IDT and requires appropriate documentation by the IDT members and recertification by the attending physician or the hospice Medical Director.

All patients that meet established admission criteria shall be admitted, without regard to age, race, color, sex, national origin, disability, religion, or any other protected characteristic.

Business Entertainment and Gifts

Gifts and entertainment should never be offered or accepted in exchange for or as a reward for referrals. Personal/individual gifts should not be given to referral sources. Any type of seasonal gift provided to physicians or facilities should be something to be shared by the staff. Cash and cash equivalents (gift cards) should never be given or received. Marketing lunches/dinners, as a general guideline, should be reasonable, of nominal value, and approved by your Executive Director beforehand. All gifts and entertainment should be thoroughly documented on expense reports or check requests, with specifics of who attended, what, when, and where.

Arrangements with Physicians and Other Referral Sources

All financial arrangements with physicians, nursing homes, or other referral sources must be necessary for legitimate

business purposes, set forth in writing at fair market value, and signed by all parties involved. We will not pay for referrals, nor will we accept payment for referrals made to other entities. We will not consider the volume or value of referrals in establishing compensation under our agreements with physicians, nursing homes, or other referral sources. All financial arrangements involving physicians, nursing homes, or other referral sources must comply with Company policies and be documented in Company-approved contracts.

PILLAR 6: FINANCIAL PERFORMANCE

Financial Performance

Successful financial performance is the direct outcome of achieving success in the first five Pillars and managing our programs in a fiscally responsible manner. We strive to be good stewards of our limited financial resources and of the Medicare Hospice benefit.

Billing for Services Rendered

All claims to government and commercial payors must accurately reflect the dates of service and level of care to our patients, and they must comply with all pertinent billing rules and regulations.

We will not tolerate false, fictitious, or fraudulent claims.

Any billing errors identified through audit processes or other means shall be promptly corrected. Any overpayment received from Medicare, Medicaid, or any other payor source must be promptly returned.

Maintaining Accurate Business and Medical Records

Colleagues are expected to maintain complete and accurate business and medical records for which they are responsible. This includes, but is not limited to, time records, financial reports, accounting records, expense reports, check requests, billing records, patient records, Colleague records, and any other business or medical record documents. Records should never be destroyed or altered to cover up an error or omission, or for the purpose of receiving any payment to which the Company or the Colleague is not entitled. Colleagues should never sign someone else's name to a hospice document.

SUMMARY OF YOUR RESPONSIBILITIES UNDER OUR CODE OF ETHICAL CONDUCT

- You have a responsibility to act in a manner consistent with our Code of Ethical Conduct.
- You have a responsibility to learn and understand the requirements of your specific job, and to learn and understand the laws and regulations that affect your specific job.
- Always follow the “Golden Rule” – treat our Colleagues, patients, families, and others with whom you interact in the same manner with which you would desire to be treated.
- Never share the protected health information of any individual without proper authorization.
- Never knowingly falsify information in a medical record.
- Never sign another individual’s name to a medical record document.
- Never take action that would result in billing for services that were not provided.
- Never pay money or give anything of value to anyone in order to encourage referrals.
- Never accept money or anything of value in return for referring business to another provider.
- Never personally accept money or anything of value from a patient or family member. All gifts from patients and families are presumed to be property of the Foundation affiliated with your Program. Executive Directors must approve any exceptions.
- Never participate in business relationships that pose a conflict of interest with your hospice responsibilities.
- If you are unsure if your intended actions might violate our Code of Ethical Conduct, ask before you act.

You have a responsibility to immediately report any activity you encounter that is inconsistent with the guidelines presented in our Code. You are obligated to report any concern to your Supervisor, Executive or Department Director, or the Compliance Officer. Failure to report suspected or perceived violations of the Code or any other form of non-compliance may result in disciplinary action, up to and including termination. Suspected or perceived violations of this Code may be reported in any of the following ways:

- ✓ Speaking with your Supervisor, Executive or Department Director, or other Leader
- ✓ Calling the Company’s Compliance Officer
1-866-970-8840
- ✓ Leaving a message on the voice mail of your Supervisor, Executive, or Department Director, or the Compliance Officer
- ✓ Emailing the Compliance Officer
compliance@hospicecom.com
- ✓ Writing to the Compliance Officer
12 Cadillac Drive, Suite 360
Brentwood, TN 37027
- ✓ Filing a report anonymously by calling the ComplianceLine 24 hours a day / 7 days a week
1-866-569-7193

Importantly, if you are not completely satisfied with the response of your Supervisor, Executive Director, Department Director, or other Leader, you must promptly report your concerns to the Compliance Officer or by calling the ComplianceLine. Colleagues will not be retaliated against for reporting fraud and abuse concerns and will remain anonymous, if at all possible. Colleagues will not always be privy to the results of investigative or corrective action. All reports will receive serious consideration and investigation, as warranted.

THE HIPAA PRIVACY and SECURITY PROGRAM

HIPAA PRIVACY LAWS

The Health Insurance Portability and Accountability Act, commonly referred to as "HIPAA," gives patients rights over their information and establishes rules and limits on who can look at and receive such information.

WHAT INFORMATION IS PROTECTED?

HIPAA protects a patient's health and related financial information. Examples of the types of information protected include:

- Information which you put in a patient's medical record,
- Conversations between you and other Colleagues about a patient's care or treatment, and
- Billing information about the patient in the hospice's accounting systems.

HIPAA continues to protect patients' information after they are deceased. HIPAA continues to protect a patient's information which you learned while employed at the hospice, even after your employment ends.

HOW DOES HIPAA PROTECT A PATIENT'S INFORMATION?

HIPAA protects a patient's information from inappropriate uses internally within the hospice. For example, HIPAA is violated if you access patient information for a non-treatment or non-business purpose, such as accessing information of a patient who is a celebrity, relative, or friend due to your curiosity or even genuine personal concern for the well-being of the patient.

HIPAA protects a patient's information from inappropriate external disclosures to third parties. For example, HIPAA is violated if you release health information:

- To a relative who is not entitled under HIPAA to obtain the information,
- In response to a subpoena that does not comply with HIPAA,
- To law enforcement who do not comply with HIPAA,
- To a third party through a misdirected fax, email or paper mailing, or
- To a third party due to patient information being unencrypted on a stolen laptop.

HIPAA protects the integrity of a patient's information from changes which are either intentional or accidental.

Finally, HIPAA requires that the patient's information not be destroyed unless appropriate, and if the destruction is appropriate that it be in a manner so that a third party could not access the information. For example, if you discard an obsolete computer, flash drive, or other electronic media containing patient information, HIPAA is violated if you have not complied with appropriate methods to remove the patient information from the electronic media. If paper records are discarded, HIPAA specifies methods of destruction of the paper records.

You have also violated HIPAA if you do not reasonably limit uses and disclosures to the minimum necessary to accomplish their intended purpose. For example, if you receive a subpoena that complies with HIPAA but instead of disclosing only the information specified in the subpoena, you disclose the entire medical record.

HIPAA also gives patients several rights with respect to their health information, including:

- Viewing and receiving a copy of health records;
- Having corrections added to health information;
- Receiving a notice of privacy practices;
- Deciding if s/he wants to give permission before health information can be used or shared for certain purposes, such as for marketing; and
- Receiving an accounting report on when and why health information was shared for certain purposes.

It is a violation of HIPAA to not follow the Company's policies with respect to the above rights.

Most states also have similar privacy laws. HIPAA does not preempt or override these state privacy laws when the state privacy laws provide more protections or are more stringent. If you violate HIPAA you may also have violated a patient's state law privacy rights.

