



Code of Conduct and Ethics

Accountability · Commitment · Patients & Families
Culture · Quality · Self-Governance · Trust

Gila River Health Care Compliance Hotline 1 (866) 601-2967



Code of Conduct and Ethics

Accountability · Commitment · Patients & Families
Culture · Quality · Self-Governance · Trust

Gila River Health Care Compliance Hotline 1 (866) 601-2967



VISION

To be the premier Native American health care delivery system empowered to serve the lifelong needs of our people

MISSION

To provide high quality health care and improve the health of the Gila River and Ak-Chin Indian Communities

PROMISE

We promise to treat you with dignity and respect

VALUES

Accountability • Commitment • Patients & Family
Culture • Quality • Self-Governance • Trust

Dear Gila River Health Care Staff:

Gila River Health Care's (GRHC) strengths are its' employees and newly expanded services. GRHC also has the ability to exceed quality standards and apply sound financial principles, and these strengths ensure our patients have the very best health care possible. GRHC is poised to inspire, motivate and engage employees to work together on a shared vision. Staying true to our purpose and core values has provided us with guidance in the midst of national health care changes. As a healthcare entity of the Gila River Indian Community (GRIC), we strive to treat people with kindness, dignity and respect while providing the highest quality of patient care in a culturally sensitive way. We pledge not to deviate from this purpose, but rather to enhance it with extreme diligence.

Maintaining a vibrant and ethical culture is an obligation that each one of us shares. One important tool to assist us is this Code of Conduct & Ethics. It is imperative that we always hold ourselves accountable for the integrity of our decisions and the actions that we take. The laws and rules that apply to the delivery of healthcare are often complex and confusing. This booklet was designed to serve as a guide as you see to address the legal and ethical challenges which are part of your position.

Whether you prepare rooms between patients, perform diagnostic test for patients or render direct patient care it will be your actions and decisions that shape the culture of this organization's compliance. Therefore, please join us in support of the values and principles that are critical to achieving our mission. We urge you to make us aware of any violations of this Code. You can discuss the matter directly with your supervisor, Human Resources or the Compliance Officer or the GRHC Compliance Hotline at 1-(866) 601-2967. We can assure you calls and emails are handled with discretion and you can remain anonymous.

We sincerely appreciate your commitment and ask that you review this booklet and seek assistance if you have questions.

Kindly,

Ginger Fligger
Chief Executive Officer

Table of Contents

Definitions	1
Program Overview	2
Benefits of the Program	3
Elements of the Program	4
Management Responsibilities	5
Reporting Violations	6
Whistleblower Protections	7
GRHC Policies & Procedures	8
Code of Conduct	9
I. Patient Rights	9
Emergency Treatment	10
II. Ethical & Workplace Conduct	11
Honest Communication	11
Confidential & Proprietary Information	11
Patient Information	12
Conflict of Interest	13
Gifts, Gratuities, Entertainment and Honoraria	13
Outside Business Activities	14
Loans	14
Contracting and Referrals	15
Services for Competitors/Suppliers	15
Workshops, Seminars and Training Sessions	15
Gifts from Patients	16
Business Inducements	16
Respect and Integrity	16
III. Business & Financial Responsibility	17
Financial Accounting and Business Records	17
Internal Controls	17
Financial Reporting	18
Personal Use of Corporate Assets	18
IV. Laws & Regulations	19
Taxes	19
Legal Compliance	19
Fraud and Abuse, Self-Referral Statues	20
Lobbying & Political Contributions	22
Antitrust and Trade Regulations	22
Employment Standards	23
Health and Safety	23
V. Cultural, Social & Environmental Responsibility	24
Inquires, Reporting Violations, Investigations	25
Conclusion	25

Definitions

The following terms are used in this booklet:

“Gila River Health Care” includes each of its subsidiaries, operating or business units, facilities, and affiliated medical staff and medical practices.

“Compliance Officer” is the employee who has been appointed by the Board of Directors to oversee the organization’s compliance and ethics program.

“Compliance & Ethics Program” refers to activities designed to promote ethical conduct and adherence to the laws including:

- Compliance policies and procedures
- Staff education
- Auditing and monitoring programs and activities
- Open and effective communication mechanisms
- Investigations
- Follow-up
- Corrective and/or disciplinary action when necessary

“Employees or Staff” means all individuals employed, or otherwise retained by the organization either full-time or part-time including per diem, temporary, casual, contract labor or volunteers.

Program Overview

Our vision is to be the premier Native American health care delivery empowered to serve the lifelong needs of our people. In alignment with our vision to be the premier Native American Health Care delivery system, we must continue to be good stewards of the resources entrusted to us, and continuously seek opportunities to improve our approach to care. This means effectively managing capital, facilities, land and human resources that are in the best interest of the Community.

There has been increasing scrutiny by the federal government over the vast amount of money that they were paying healthcare providers across the nation. The scrutiny stemmed from the discovery that healthcare providers were engaged in fraudulent and abusive practices against the Medicare system. Many attribute the increasing rates of Medicaid and Medicare fraud to the system's design; it was built primarily to reward those who were providing care to the needy and elderly with prompt payments and reimbursements, not to protect patients and the system as a whole from fraudulent acts. Health care laws have become more complex in recent years, with an increased emphasis on financial considerations. In addition, there has been a growing sense by some that the health-care industry has largely been "under-scrutinized" by the federal and state governments, and, as a result, there has been growing importance on preventing and detecting violations of state and federal health-care laws and regulations. The primary method of accomplishing this task has been the creation of health-care compliance programs as a method of self-policing by members of the health-care sector. The Code of Conduct is an integral part of the GRHC Compliance program and reflects the values of the organization. The health system's ability to further its mission depends upon the capability of all employees to support one another in upholding these values.

Each employee is responsible to read and follow this Code of Conduct and other GRHC policies. This commitment reaches to all levels at GRHC - the *Board of Directors, Executive Leadership, the Compliance Office, the Corporate Compliance Committee, managers, supervisors and employees as a condition of employment, and vendors, suppliers and independent contractors as a condition of doing business with the organization. This Handbook sets the standards for a Code of Conduct, the expected ethical behaviors and provides information on how to get answers to your questions.

Benefits of the Compliance and Ethics program

- Concretely demonstrates to employees and the community at large the hospital's strong commitment to honest and responsible provider and corporate conduct;
- Provides a more accurate view of employee and contractor behavior relating to fraud and abuse;
- Identifies and prevents criminal and unethical conduct;
- Tailors a compliance program to a hospital's specific needs;
- Creates a centralized source for distributing information on health care statutes, regulations and other program directives related to fraud and abuse and related issues;
- Develops a methodology that encourages employees to report potential problems;
- Develops procedures that allow the prompt, thorough investigation of alleged misconduct by corporate officers, managers, employees, independent contractors, physicians, other health care professionals and consultants;
- Initiates immediate and appropriate corrective action; and
- Helps staff understand their roles and responsibilities and provides guidance who may have questions.

Elements of an Effective Compliance Program

- Policies, procedures including the Code of Conduct
- Appointing a compliance officer and a compliance committee
- Conducting effective training and education
- Developing open and effective lines of communication
- Conducting internal monitoring and auditing
- Enforcing ethical behavior through well-publicized and consistent disciplinary guidelines
- Responding promptly to detected offenses and undertaking corrective action

This program does not replace other policies, such as those governing employee grievance procedures, employee benefits, accounting, auditing, etc. Rather, the policies of GRHC should be used along with these other policies. Further, this does not affect the “employment at will” status of those employees who are subject to such a policy, nor does it supersede the provisions of any collective bargaining agreement or create any contractual obligation.

Employee Responsibilities

The culture of compliance is dependent upon the commitment of each employee. Each employee should take responsibility for his/her own actions. They should be aware and should comply with applicable laws and rules that apply to his/her job responsibilities. Staff should seek guidance when in doubt, and refrain from involvement in illegal, unethical or improper acts.

Management Responsibilities

Management at every level has the added responsibility to ensure our compliance efforts are properly and effectively implemented. Compliance is not the responsibility of the compliance officer, it is the responsibility of every one of us, particularly management. We each play a vital role to ensure we fulfill our obligations as managers and ensure compliance with laws, rules and policies. Managers will:

- Use care in screening potential employees and act professionally and lawfully in supervising existing employees;
- Take reasonable steps to ensure that employees are familiar with the Program;
- Adequately train employees to comply with the requirements contained in this Code of Conduct and comply with applicable laws and regulations, policies and/or compliance directives;
- Maintain a work environment in which employees feel free to ask questions and/or report concerns about potential or suspected issues without fear of retaliation;
- Conduct periodic reviews to provide reasonable assurances of adherence to the Program;
- Promptly report any potential or suspected violation of the Code of Conduct, policy or applicable laws and regulations; and,
- Set a proper example for employees to follow.
- Administer policies and procedures consistently and fairly.

The Compliance Officer

The Compliance Officer is a GRHC employee who reports directly to the Board of Directors.

Reporting Potential / Suspected Violations

It is the responsibility of every employee to report suspected violations of the code, applicable laws and regulations, and GRHC policy. Reporting these concerns helps the organization promptly determine whether conduct is proper and correct problems quickly. If you have questions or want to report a potential or suspected violation, you are encouraged to first speak with your immediate supervisor.

If you do not feel you can candidly discuss the issue or matter with your supervisor, you may call your Human Resources representative for matters relating to your employment or employee benefits, Compliance Officer, or the Gila River Hotline at 1-866 601-2967. Calls to the Hotline are not traced and anonymous unless you choose to identify yourself.

Employees who violate the Code are subject to discipline, up to and including dismissal.

Retaliation against any employee, who, in good faith, reports potential or suspected violations, is unlawful and will not be tolerated.

The False Claims Act - Federal and State Laws Protecting Whistleblowers

The Federal False Claims Act (31 USC 3729-33) makes it a crime for any person or organization to knowingly make a false record or file a false claim with the government for payment. “Knowing” means that the person or organization:

- Knows the record or claim is false, or
- Seeks payment while ignoring whether or not the record or claim is false, or
- Seeks payment recklessly without caring whether or not the record or claim is false.

Under certain circumstances, an inaccurate Medicare, Medicaid, VA, Federal Employee Health Plan or Workers' Compensation claim could become a false claim. Examples of possible false claims include someone knowingly billing Medicare for services that were not provided, or for services that were not ordered by a physician, or for services that were provided at sub-standard quality. A person who knows a false claim was filed for payment can file a lawsuit in Federal Court on behalf of the government and, in some cases, receive a reward for bringing original information about a violation to the government's attention. There are also state laws that allow a similar lawsuit in state court if a false claim is filed with the state for payment, such as under Medicaid or workers' compensation. Penalties are severe for violating the federal False Claims Act. The penalty can be up to three times the value of the false claim, plus fines from \$5,500 - \$11,000 per claim.

Whistleblower Protections.

The Federal False Claims Act protects anyone who files a false claim lawsuit from being fired, demoted, threatened or harassed by their employer for filing the suit. An employee who was harmed by their employer for filing a false claims lawsuit may file a lawsuit against their employer in Federal Court. If the employer retaliated, the court can order the employer to re-hire the employee, and to pay the employee twice the amount of back pay that is owed, plus interest and attorney's fees.

GRHC Policies & Procedures

GRHC is committed to honest and ethical conduct. The compliance program includes policies and procedures for detecting and preventing fraud, waste and abuse—including false claims. In addition to the Code of Conduct, key policies include:

- Fraud & Abuse Enforcement and Prevention
- Response Procedures—Hotline Calls
- Medicare / Medicaid Compliance
- Other Compliance Policies

These policies can be found on the GRHC intranet under Compliance Policies.

The following Code has been developed to demonstrate GRHC's commitment to honest and ethical behavior and provide guidance for employees facing uncertain situations. They address five categories that are critical to the success of GRHC: *Patients Rights, Ethical & Workplace Conduct, Business & Financial Responsibility, Laws & Regulations and Cultural, Social and Environmental Responsibility*. This is not intended to be an all inclusive list of issues, but those that are frequently inquired about.

**The Code of Conduct Handbook is in addition to any Board of Director policies required for compliance with the Gila River Indian Community Code of Conduct as codified at Title 1, Chapters 4 through 7 of the Gila River Indian Community Code*

Code of Conduct

I. Patient Rights

GRHC is firmly committed to fostering the innate dignity of the human person, and to the belief that such dignity deserves respect and protection regard-less of the nature of the person's health condition or social status. In fostering individual dignity, GRHC acknowledges and promotes the patient's right to make free and informed decisions regarding medical treatment and procedures.

We seek to involve patients in all aspects of their care, including giving consent for treatment and making healthcare decisions, which may include managing pain effectively, foregoing or withdrawing treatment, and, as appropriate, care at the end of life.

Patients are informed of their right to self-determination. This right respects the competent adult patient's right to participate in and make his/her own health care decisions after receiving his/her physician's complete disclosure of the nature and consequences of proposed health care, including significant benefits, risks and alternatives. A patient has the right to accept medical care or to refuse treatment, and to be informed of the medical consequences of such refusal.

Patients are provided information regarding their right to make advance directives regarding treatment decisions, financial considerations and the designation of surrogate healthcare decision-makers. Patient advance directives are honored within the limits of the law and our organization's mission, philosophy, values, and capabilities.

In the promotion and protection of each patient's rights, each patient and his or her representatives are accorded appropriate confidentiality, privacy, security, advocacy and protective services, opportunity for resolution of complaints, and spiritual care. Patients have the right to an environment that preserves dignity and contributes to positive self-image.

Patient privacy and confidentiality of care is respected at all times in accordance with the Health Insurance Portability and Accountability Act (HIPAA) requirements.

Emergency Treatment

We follow the Emergency Medical Treatment and Active Labor Act (“EMTALA”) in providing an emergency medical screening examination and necessary stabilization to all patients, regardless of their ability to pay.

At a minimum, a person presenting to GRHC is entitled to a medical screening examination to determine whether he or she has an emergency medical condition or, in the case of a pregnant woman, is in active labor, irrespective of ability to pay. If it is determined that a patient has an emergency medical condition, the patient must receive a further medical evaluation and such treatment to stabilize the medical condition, within the capabilities of the staff and facilities available. If it is determined that GRHC cannot provide the medical services necessary for the patient, the patient must be transferred in a medically appropriate manner to another medical facility that can knowingly provide the necessary services. Patients are only transferred in strict compliance with state and federal EMTALA regulatory and statutory requirements.

Patients have the right to have a family member or representative of their choice and their own physician notified promptly of admission to a hospital.

II. Ethical & Workplace Conduct

GRHC has worked hard to create an environment of integrity for our patients, their families, employees, contractors and members of the Gila River Indian Community and other federally recognized American Indian tribes and nations.

Honest Communication

All staff are expected to represent the organization accurately and honestly. Employees are expected to communicate with candor and honesty in performing their job responsibilities and in dealing with organization attorneys and auditors. Employees are not to make false or misleading statements to any patient, person or entity doing business with GRHC.

We also expect that all leadership will ensure those on their teams have sufficient information to comply with laws, regulations, and policies, as well as the resources to resolve ethical dilemmas. They must help to create a culture within GRHC which promotes the highest standards of ethics and compliance. This culture must encourage everyone in the organization to share concerns when they arise. We must never sacrifice ethical and compliant behavior in the pursuit of business objectives.

Confidential & Proprietary Information

Confidential information, also referred to as “sensitive information,” covers virtually anything related to GRHC’s operations that is not publicly known, such as personnel data maintained by the organization; patient lists and clinical information, including individually identifiable patient information and clinical quality data; patient financial information, including credit card data and social security numbers; pricing and cost data; and may also include photos and videos. Employees must not disclose confidential, sensitive or patient information to unauthorized persons or individuals that do not have a legitimate need to know the information in order to perform their specific job duties.

Ethical Boundaries in the Healthcare Setting

All GRHC staff are considered professionals and as such, we are committed to promoting the welfare and well-being of the patient over and above any personal consideration. This concept requires that boundaries be established for relationships and that are limits of ethically appropriate professional behavior. A violation to ethical behavior occurs when a health care professional's behavior goes beyond appropriate professional limits. Boundary violations generally arise when a personal interest displaces the professional's primary commitment to the patient's welfare in ways that harm the patient or the patient-clinician relationship.

Patient Information

As a healthcare provider, we collect information about a patient's medical condition, history, medications and family history to provide quality of care. We are committed to maintaining this information in the upmost confidential manner. Consistent with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) we do not use, disclose or discuss patient-specific information, including patient financial information, with others unless it is necessary to serve the patient, authorized by the patient or is required by law.

GRHC staff must never use or disclose confidential information that violates the privacy rights of our patients. In accordance with our information privacy and security policies and procedures, which reflect HIPAA concepts, no workforce member or business associate has a right to any patient information other than that necessary to perform his or her job.

The Notice of Privacy Practices includes principles explaining the use and disclosure of patient information, explains patients their additional rights to their medical information and how GRHC will safeguard their information. The provisions of this notice are available to all patients and posted to our websites, and at our facilities.

The Compliance Officer, appointed by the Board of Directors is responsible to establish, educate and implement policies and procedures to ensure continued compliance with Federal Laws.

Conflict of Interest

GRHC is committed to exercising responsible stewardship of natural, human and financial resources, and avoiding conflicts of interest and/or the appearance of conflicts. Employees may not use their positions for personal gain or advantage, or to assist others, including family members, in profiting in any way at the expense of GRHC. Employees may not voluntarily serve as an expert witness in any case without the written permission of the CEO.

The GRHC Conflict of Interest Policy for Board Members (220.02) provides additional guidance in this area. To ensure compliance with policies, these individuals are required to submit a Conflict of Interest Disclosure Statement annually. All other employees are required to disclose any real or potential conflicts of interest upon hire and subsequently as they might arise to the GRHC Compliance Officer for review and analysis.

Gifts, Gratuities, Entertainment and Honoraria

No gift of money should ever be accepted by an employee from any company or firm that transacts business with GRHC. Similarly, GRHC prohibits its employees from offering or giving money, services or other things of value with the expectation of influencing the judgment or decision-making process of any referral source, referral recipient, supplier, contractor, bank, physician, third party payer or government official.

An employee must not accept or give gifts or entertainment that have the appearance of being given to obtain business from referral sources, referral recipients, suppliers of goods or services, contractors, banks, physicians, third party payers or government agencies.

Gifts should not be given to or solicited from any physicians without first notifying the GRHC Compliance Officer. The laws governing physician monetary transactions are very complex.

An employee may accept payments or honoraria for speaking engagements or other activity requiring substantial time and effort provided that such honoraria is disclosed to the employee's supervisor or manager. Speaker's fees or honoraria that exceed \$500 in annual aggregate must be paid to GRHC directly or forwarded to GRHC unless the employee is entitled under the terms of a written employment contract to retain honoraria in excess of \$500.

Outside Business Activities

Holding, directly or indirectly, a material ownership or financial interest, or employment or management position in any outside business entity from which GRHC makes or receives patient referrals or purchases goods or services is considered a conflict of interest. This includes any material financial interest held by a family member such as a parent, spouse, child, sibling or an in-law of the employee or a person with whom the employee has a significant personal relationship. A "significant personal relationship" means a relationship the existence of which has the potential to influence, or would appear to influence, and employee's decision-making or performance of his or her duties for GRHC. A material ownership interest does not include ownership of publicly traded securities that are acquired on the same basis as made available to the general public and that amount to less than a 1% ownership interest.

Without prior written approval of a manager or supervisor, employees must not engage in outside business activities during working hours. Employees must not use GRHC equipment, supplies or contact information in connection with their outside business activities.

Loans

GRHC shall not make any loan of money or property to any employee, or guarantee the obligations of any employee.

Contracting and Referrals

Business relations with contractors or vendors and referral relationships with other health care providers must not be influenced by individual financial or personal relationships and must comply with GRHC policies and procedures. Employees must disclose personal relationships and business activities with contractors, vendors or persons employed by such entities as well as referral sources or referral recipients that may be construed by an impartial observer as influencing the employee's performance of duties.

Services for Competitors/Suppliers

Employees must not perform work or render services for any vendor or supplier outside of the normal course of their employment with GRHC without prior notice to their manager or supervisor. Service on vendor sponsored advisory councils or similar groups is permitted only with the approval of the employee's supervisor or an ELT member as applicable. In addition, all travel and lodging costs must be paid by GRHC, not the vendor, and all GRHC policies, including policies related to gifts and honoraria, must be followed.

Workshops, Seminars and Training Sessions

GRHC recognizes the value of supplier sponsored education programs principally to provide employees with important, job-related information. Employees may attend such local, supplier-sponsored workshops, seminars and training sessions. Supplier-funded out-of-town seminars, workshops and training sessions are permitted only with prior approval of an employee's manager or supervisor. And again as stated above, GRHC would be responsible to cover all travel related expenses on behalf of the employee.

Gifts from Patients

Employees are prohibited from soliciting money, personal gratuities or gifts and from accepting money, personal gratuities and gifts from patients or their families. Gifts of perishable items, such as flowers or cookies, given as tokens of appreciation by patients and their families may be accepted and should be shared in the work unit. No patient or family should be expected or encouraged to provide gifts or gratuities in exchange for care.

Business Inducements

Commissions, rebates, discounts and allowances are customary and acceptable business practices, if they are approved by GRHC management and do not constitute illegal or unethical payments. Such payments must be reasonable in value, competitively justified, properly documented and made to GRHC. These payments should not be made to individual employees or agents of GRHC. Any rebate, discount, allowance or similar benefit must be properly recognized and reported under applicable cost reporting laws and rules.

Respect and Integrity

Employees, medical staff members and contractors are expected to conduct themselves in a manner that reflects integrity, shows respect and concern for others, protects GRHC interests and meets GRHC's mission to its patients, customers, clients, employees and others with whom it interacts.

III. Business & Financial Responsibility

GRHC at all times maintains financial statements that properly represent its financial position, results of operations and cash flow in conformity with applicable law and Generally Accepted Accounting Principles (GAAP), consistently and fairly applied.

Financial Accounting and Business Records

GRHC maintains honest and accurate financial records. The books and records must not contain any false, misleading or deceptive information or entries. Financial reports must fairly and consistently reflect GRHC's performance and accurately disclose the results of operations. As appropriate, they must also comply with GAAP and other applicable rules and guidelines and provide a sufficient platform on which to complete cost reports and requests for payment for services provided to beneficiaries of federal and state health care programs such as Medicare, Medicaid etc. Each employee has a personal responsibility to ensure that every document and entry is complete and accurate, and that requests for reimbursement or payments are supported by receipts, purchase orders or other documentation as required by GRHC financial policies.

Each employee has a personal responsibility to ensure that every document and entry is complete and accurate, and that requests for reimbursement or payments are supported by receipts, purchase orders or other documentation as required by our financial policies.

Internal Controls

An internal control is any process or procedure designed to ensure that an activity is performed safely, accurately, and consistent with applicable laws. These processes are designed and intended to protect GRHC and its employees. These controls exist in virtually every aspect of our work and all employees share responsibility for maintaining and complying with required internal controls.

Financial Reporting

All financial reports, accounting records, research reports, expense accounts, time sheets and other documents must accurately and clearly represent the relevant facts or true nature of a transaction.

Personal Use of Corporate Assets

Assets shall not be used for personal purposes unless approved in advance by the employee's manager, or unless the use is considered minimal. Employees are prohibited from unauthorized use or taking of equipment, supplies, materials or services. Employees are required to obtain approval of their manager before engaging in any activity on company time that will result in payment to the employee by a person or entity other than GRHC or to use equipment, supplies, materials or services for personal or other purposes unrelated to their responsibilities.

IV. Laws & Regulations

GRHC complies with all laws and regulations affecting its business.

Taxes

As a nonprofit entity, GRHC has a legal and ethical obligation to comply with applicable laws, to engage in activities to further its charitable purpose, and to ensure that its resources are used to further the public good rather than the private or personal interests of any individual. Consequently, employees must avoid compensation arrangements in excess of fair market value, accurately report payments to appropriate taxing authorities, and file all tax and information returns according to applicable laws.

Legal Compliance

GRHC conducts its business in accordance with the spirit and letter of all applicable laws and regulations.

- Employees are expected to have a practical, working knowledge of the laws and regulations affecting their job responsibilities.
- If employees have questions about the application of the law to their work activities, they may contact the Compliance Department.
- GRHC provides training and supplemental materials to help employees know and comply with the laws and the policies and procedures relating to their jobs.
- Employees are required to bring to management's attention suspected violations of policies and applicable laws and regulations.

Fraud and Abuse & Self-Referral Statutes

We will maintain honest and accurate records concerning the provision of health care services, submit accurate claims, and never offer, pay, solicit, or receive any money, gifts or services in return for the referral of patients or to induce the purchase of items or services.

Violation of federal and state laws concerning fraud and abuse, false claims and self-referral can result in significant criminal and civil penalties including imprisonment, fines, penalties and damages. Employees must be vigilant in avoiding any conduct that could violate or even appear to violate these laws.

Prohibited activities include, but are not limited to, the following:

- Billing for supplies or services not delivered;
- Misrepresenting services actually provided. Such misrepresentation includes, but is not limited, to assigning a code for a more complicated procedure than actually performed (upcoding), or by dividing a procedure or service typically billed as one procedure into multiple parts in order to increase reimbursement (unbundling);
- Duplicate billing for services rendered;
- Falsely certifying that services were medically necessary;
- Falsely certifying that an individual meets the Medicare requirements for home health (or any other) services;
- Seeking to collect amounts exceeding the co-payment and deductible from a Medicare or Medicaid beneficiary who has assigned his or her rights to benefits;
- Permitting an employee, provider or supplier who has been excluded from Federal health care programs to prescribe, provide or oversee the delivery of goods or services to the beneficiaries of such programs;
- Offering or transferring money, gifts, or other items of value to a patient or prospective patient to influence him or her to order or receive services or items from GRHC.

The fraud and abuse laws prohibit knowingly and willfully offering, paying, soliciting or receiving any money gifts, kickbacks, bribes, rebates or any other type of value, remuneration or services in return for the referral of patients or to induce the purchase, lease, or ordering of any item, good or service for which payment may be made by the federal or state government. Examples of violations include:

- Payment of an incentive each time a patient is referred;
- Provision or receipt of free or significantly discounted billing, nursing care, rent or other staff services;
- Provision or receipt of free training in management techniques, coding and laboratory techniques;
- Payment for services in excess of their fair market value;
- Forgiveness of indebtedness to absent a charitable or risk management purpose; and,
- Preferential treatment in any form to obtain business.

We have developed a comprehensive program to ensure compliance with the federal and state anti-kickback and anti-referral laws pertaining to physician arrangements. The intent of the program is to provide standardization of physician contracting and consistency of legal interpretation, with the ultimate goal of providing an efficient framework to contract with physicians in compliance with the laws.

Lobbying & Political Contributions

Employees may personally participate in and contribute to political organizations or campaigns as long as it is on the employee's own time, financed exclusively with the employee's own funds and resources, and done outside of GRHC.

Antitrust and Trade Regulations

GRHC avoids activities that illegally reduce or eliminate competition, control prices, allocate markets or exclude competitors.

- The purpose of the antitrust and trade regulation laws is to protect the public, from unfair trade practices. These laws promote competition and preserve the free enterprise system. Employees are expected to strictly comply with all applicable federal and state antitrust laws and regulations.
- Because antitrust matters can only be analyzed on a very fact-specific basis, the Compliance department will consult in advance on each occasion where collective activity or decision making will occur that may involve antitrust issues.

Rules to live by

GRHC does not engage in anti-competitive conduct that lessens overall competition but does use a factor for Indian preference when hiring and evaluating contracts. Employees shall not communicate with competitors about matters that could be perceived as undermining competition, favoring one competitor over another or attempt to "fix" prices. Any intentional or unintentional action that could violate fair and open competition must be immediately reported to your supervisor and the Compliance department.

Employment Standards

- GRHC is an equal opportunity employer. We are dedicated to ensuring that all decisions regarding terms and conditions of employment, including recruitment, hiring, training, promotions, transfers, discipline, layoff, recall and termination are in accordance with principles of non-discrimination.
- We comply with all federal, state and local laws prohibiting discrimination.
- We prohibit harassment, including sexual harassment. Sexual harassment includes sexual advances, requests for sexual favors or any sexually offensive verbal, visual or physical conduct, when such conduct creates an intimidating, hostile or offensive work environment. Sexual harassment will not be tolerated. Any alleged incident will be promptly investigated in accordance with Human Resources policies.
- We respect and value each employee's unique contributions to our organization, and seek to ensure that any real or artificial barriers in any aspect of employment are identified and corrected.

Health & Safety

- GRHC maintains a safe and healthy working environment.
- Employees shall conduct themselves in a manner that minimizes potential health and safety hazards and notify their supervisors promptly of any actual or potential unsafe working conditions or practices.
- Employees must properly generate, store and dispose of medical, chemical and other waste in accordance with applicable laws and environmental policies designed to protect human health, the environment and surrounding community.
- Employees who are authorized to operate incinerators, sterilizers and underground storage tanks (containing fuels for emergency generators) are adequately trained to operate such devices pursuant to all permits, regulations and applicable procedures.

V. Cultural, Social & Environmental Responsibility

Our Vision is to be the premier Native American health care delivery empowered to serve the lifelong needs of our people. In alignment with our vision to be the premier Native American Health Care delivery system, we must continue to be good stewards of the resources entrusted to us, and continuously seek opportunities to improve our approach to care. This means effectively managing capital, facilities, land and human resources that are in the best interest of the Community. We are developing ways to increase productivity, improve workflow, adopt nationally recognized best practices, improve our facilities to accommodate patients needs, and use our capital effectively to invest resources and continually improving patient care.

Our compassionate approach enhances patient engagement, GRHC's role is to place our patient's at the forefront of every decision. This approach to care, coupled with GRHC's firm commitment to cultural sensitivity, greatly enhances patient satisfaction, and will continue to be a core initiative for our organization. Treating patients and their families with kindness, dignity and respect is more than an inspirational statement, it is our commitment.

The Cultural Customer Service department is about exceeding satisfaction and ensuring a respectful, thoughtful and nurturing patient experience. Customer service awareness starts with each and every employee though a sustained and consistent effort of a period of time.

Inquires, Reporting Violations, Investigations

GRHC has established a Hotline at 1-866-601-2967 for use by employees to ask questions or report potential or suspected violations of the Code of Conduct, policies, or applicable laws and regulations when employees are not comfortable communicating these matters within their usual organizational structures. The Hotline is accessible 24 hours per day, seven days a week. All reports will be taken seriously, reviewed and investigated promptly, result in appropriate corrective action and, to the extent possible, be treated in a confidential manner. An employee has the option to make a Hotline report anonymously. In that event, employees should understand that in a follow-up review or investigation, the reporter's identity may be learned as a natural consequence of the review or investigation. Retaliation against any employee who, in good faith, reports potential or suspected violations is unlawful and will not be tolerated.

It is our policy to cooperate in all governmental audits and investigations and for employees to do so as well, subject to guidelines set forth in the Code of Conduct and our policies.

Conclusion

The Code sets forth GRHC's expectations about proper job related conduct. However, the Code does not address every difficult situation that an employee may encounter in the workplace. While policies are intended to help employees recognize, understand and fulfill their responsibilities, employees are expected to take the initiative and ask questions if they are unsure how the laws or policies apply to a situation.

NOTHING CONTAINED IN THIS HANDBOOK SHALL CONSTITUTE A WAIVER OF GRHC'S SOVEREIGN IMMUNITY OR ANY EXEMPTIONS IT MAY BE ENTITLED TO FROM FEDERAL OR STATE LAWS AND REGULATIONS.



Gila River
HEALTH CARE

Gila River Health Care
Compliance Hotline
1(866) 601-2967

Acknowledgement

I acknowledge that I have received and read the Gila River Health Care Code of Conduct and understand that it represents mandatory policies of the organization.

Signature

Position

Printed Name

Date

Gila River Health Care
Compliance Hotline
1(866) 601-2967