



# Code of Conduct

***Making the Best Choices.***

2025

*This Code of Conduct applies to all U.S. Medical Management, LLC doing business as HarmonyCares and its owned and managed entities ("HarmonyCares"). Statements made about the "Company" refer to these entities.*

*References to employees and team members means employees, officers, directors, consultants, contractors, volunteers, and anyone else providing services to HarmonyCares patients under agreement with HarmonyCares.*

*"Patient" refers to HarmonyCares patients, clients, and their legally authorized representatives.*

Revised: 01/01/2025

## About Our Code of Conduct

Our Code is based on our Mission, Vision, and Values.



At HarmonyCares, **the way we care has been our legacy** for over 30 years. We believe that **every interaction counts** and each touchpoint is an opportunity to make a positive difference in the lives of our patients and their families. We always **go the extra mile**, anticipating the needs of our patients, team members, and clients to make it easy to work with us. We understand the importance of collaborating and caring as a team; to achieve this, we **empower and support each other** in our collective mission to bring personalized quality care to our patient's homes because every person deserves access to healthcare.

## VALUES



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### **Let the Code of Conduct Guide Your Actions**

As a team member of HarmonyCares, you must comply with the Code of Conduct and all policies, laws, and regulations that apply to your job and our company.

#### **You should feel empowered to do the right thing at all times.**

Team members required to comply with the Code of Conduct include employees, independent contractors, subcontractors, vendors, volunteers, officers, Board Members and any other third-party individuals or entities acting on behalf of the company.

The Code of Conduct serves as a general guide for doing the right thing by providing information on a number of topics. However, this Code does not cover every topic you may encounter in your job or the specific details you may need to understand about an issue or concern.

Therefore, we ask that all team members seek guidance whenever you have questions or concerns using the Speak Up process.

During your onboarding and annually, you will be asked to acknowledge receipt and understanding of the Code of Conduct. At that time, you will also be asked to comply with the Code and report any issues or concerns that you feel may be a violation of the Code or any other company standard, policies, procedures, or state/federal regulations. Compliance with the Code of Conduct and applicable policy and procedures are part of performance evaluations for all employees and contractors. We refer to this process as Living the Code.

### **Supervisor Responsibilities**

Team members that supervise others have an additional responsibility to be examples to others in the way that they conduct themselves. Supervisors are expected to create a culture in which team members feel comfortable asking questions and raising concerns without fear of retaliation.

If a team member raises a question or concern, supervisors:

- Take prompt action to address the concern or answer the question.
- Evaluate if corrective action is needed to prevent issues from reoccurring.
- Ensure that team members understand the Code of Conduct, policies, and procedures and regulations that impact their job and our company.
- Understand that business results or performance are never more important than conducting business in an ethical manner.

## **Message from the CEO, Matt Chance**

### **Thank you for your commitment to HarmonyCares.**

We have been embarking on a journey that involves incredible transformation for our leaders and colleagues. Our company culture will be the result of each team member embracing our mission, vision, and core values.

As we rethink how we do our day-to-day work, how we report on progress, and how we become accountable to each other, we are grounded by conducting our business with honesty, integrity, and transparency.

The HarmonyCares leadership team and I are personally making efforts to meet as many of you as possible and ask for feedback. My hope is that you will be transparent about the issues that are most important to you and that you will offer ideas related to culture and business transformation, as you continue to take ownership for your areas of responsibility. Through these actions, my hope is that each of you can connect to the overarching goal and mission of our organization.

Quality is the focus of the work we do. We will be continually innovating all areas of our service delivery so that we can provide world-class cohesive in-home care at scale to increase access to quality of care for everyone.

I'm excited to be on this journey with each of you and am humbled on a daily basis by the dedication we see to our mission, our patients, and their loved ones, and each other.

**Thank you,**

Matt

## Message from the Chief Compliance Officer

I am often asked about how we maintain compliance in an ever-changing and complicated environment.

A few key concepts guide our work, which aren't based on complex regulations:

- **Honesty and Integrity:** Consistently living by strong moral and ethical principles
- **Values:** beliefs and principles that guide how people live and work, and motivate their actions
- **Transparency:** Demonstrating openness and accountability
- **Teamwork:** working together collaboratively, and using available supporting resources

At HarmonyCares, we work every day to improve and make the right thing to do the easy thing to do.

All of us should occasionally ask ourselves:

- At the end of the day, am I proud of the work I've done?
- Is the treatment we're providing, prescribing, and educating the best course of action?
- Would my team members and managers agree with my decision?
- Am I treating my patients the way they want to be treated?
- Do I seek out guidance, and ask questions?
- If I feel like I've made the wrong decision, do I let someone know and re-choose?

At HarmonyCares, how we provide services is as important as why. We are caring, professional and committed to Making the Best Choices as we work. We understand that we have been entrusted with a huge responsibility when we provide care to our patients and services that support patient care.

When we make decisions each day, we should challenge ourselves to consider whether what we are doing is aligned with our mission and core values.

This Code includes guidance that helps us do the right thing for our patients and our teammates on a daily basis. We use our Code to help with our individual actions that lead to combined success as an organization. Of course, it is not meant to address every requirement and situation, which is why we maintain detailed policies and procedures and also offer the Speak Up process.

It is up to all of us to live our Mission and Values. It is up to all of us to build HarmonyCares. **Let's make living our Code of Conduct something we do every day.**

**Thank you for all you do as you support our Mission.**

Janine

## **Introduction**

We share a commitment to conduct ourselves in an ethical, legal, efficient, and effective manner every day - whether we are providing care to patients and families or providing support services.

We have a shared responsibility...we are responsible to each other as well as to many other stakeholders:

- Our patients and their families.
- Our co-workers.
- Other healthcare providers that assist with services to our patients.
- Non-HarmonyCares colleagues and customers.
- Payors, including federal and state governments and health plans.
- Regulators, surveyors, and monitors.
- Vendors and suppliers.
- Owners and investors.

The Compliance and Ethics Program (Program) was created so that HarmonyCares can self-monitor and improve performance. The Program has two main guiding goals:

- Prevention of violations of standards and regulations, where possible, by creating and maintaining great teams and structure and providing effective education; and
- Detection of concerns and violations to mitigate risk.

### **Let this Code help you Make the Best Choices.**

This Code of Conduct is the foundation of the Program. It is a guide to appropriate behavior at work and can help you to make the right decisions. The Code applies to everyone that works here; we are all responsible for supporting the Program in every aspect of workplace behavior.

The Code is supported by the Employee Handbook and policies and procedures that apply specifically to your job. It discusses the importance of Basic Principles of Quality, Honesty and Integrity, and Compliance.

We provide our services under strict regulations and close oversight. Compromise in our standards could harm our patients, co-workers, and our company. To confirm that all of us understand and agree to abide by the Code, every employee and many other team members are required to read it and acknowledge our Commitment to its content during training completed in orientation and again annually. This training and acknowledgement are a condition of employment and providing services for HarmonyCares.

Because no single resource can adequately describe every regulation we follow, or answer every question or concern, we expect our team members to be guided by their own personal integrity. **Questions are encouraged; in fact, if a question arises about your work or any moral, legal, or ethical concerns, you are required to let us know, following the Speak Up process described in this Code.**

### **Summary of the Compliance and Ethics Program**

The HarmonyCares Compliance and Ethics Program is designed to effectively self-identify and address compliance issues and includes eight core elements, summarized briefly below. The primary purpose of the Compliance and Ethics Program is to reduce risk and seek opportunities to improve.

#### **Element 1: Code of Conduct, Written Standards and Policies and Procedures (Standards)**

The Standards promote quality of care and are written plainly, so that they are reasonably capable of reducing the incidence and effects of administrative, civil, and criminal violations.

#### **Element 2: Compliance Leadership**

HarmonyCares has identified and assigned key leaders with the overall responsibility to oversee compliance with our Standards, including:

- Each location leader; including Administrators, Operations Managers and Directors, Regional Leaders, their managers, and each business line leader; collectively referred to as **Compliance Liaisons**; and
- The **Compliance Officer**, reporting to the Chief Executive Officer and the company Board.

#### **Element 3: Due Care, Background Screening and Credentialing**

HarmonyCares provides specific resources and undertakes due care to ensure that we don't give authority to individuals who may commit compliance violations. The HarmonyCares Talent and Human Resources Departments work with management to identify and screen all candidates for employment. On an ongoing basis the Compliance Department routinely screens team members against exclusions lists to ensure that excluded individuals are not employed, contracted, or ordering services. While credentials, including licenses, certifications and degrees are verified prior to and during employment, team members are personally responsible for license/certification and enrollment maintenance.

#### **Element 4: Effective Education and Training**

HarmonyCares provides effective, comprehensive, and job-appropriate education, including training on this Code of Conduct, to team members, who are expected to comply fully with educational content and ask questions at any time.

#### **Element 5: Confidential Disclosures Reporting and Investigation (Speak Up)**

HarmonyCares strives to discover issues of concern and potential adverse events and to resolve allegations regarding violations of compliance and regulatory standards. Speak Up is a comprehensive and confidential reporting tool to assist management and employees to work together to address fraud, waste, abuse, and other misconduct in the workplace, all while cultivating a positive work environment. Speak Up also provides a mechanism for our patients and their representatives to ask questions and report issues. HarmonyCares believes in open, honest, and timely feedback in order to internally identify issues. Any person can report concerns and violations, anonymously if they wish, and without fear. Reports are investigated to establish associated facts and corrective actions.

**Element 6: Internal Monitoring and Auditing**

HarmonyCares uses periodic monitoring and auditing processes designed to confirm effective education, detect violations and improper conduct, and identify process opportunities.

**Element 7: Consistent Corrective Actions**

After a violation or opportunity is detected, HarmonyCares works to ensure that all reasonable steps are taken to mitigate and/or reduce the potential recurrence of similar issues. Corrective actions are always specific, confirmed, and monitored for effectiveness.

**Element 8: Risk Assessment**

The Compliance Department conducts an annual Risk Assessment based on our strategic objectives and mission, regulatory requirements and interests, and internal operations. This Assessment is used to assess the effectiveness of our Program and inform the Compliance and Ethics Program Annual Work Plan.



**Element 5 Fine Points: We want you to Speak Up.**

HarmonyCares encourages feedback from stakeholders including but not limited to patients, their representatives, family members, friends and companions, employees, management, and other staff. The company maintains the Speak Up Program to respond to matters brought to our attention in an efficient and effective manner. HarmonyCares embraces a philosophy that encourages disclosures, prohibits retaliation, offers methods to solve problems, and attempts to ensure that allegations regarding violation of our standards are properly addressed as a key element of our Compliance and Ethics Program.

**When to Speak Up: Communication is Key**

- Anytime you have a question or concern.
- Anytime you observe or suspect conduct that could be contrary to our Code.
- Any time you think there might be a violation of law, regulations, or policies and procedures.
- All concerns involving abuse, neglect, mistreatment, or misappropriation affecting our patients.

**How to Speak Up:**

- Talk to your supervisor, manager, someone else in management, human resources, compliance or someone else who can help; OR
- Call 1-800-609-9783 (available 24 hours, 7 days a week); OR
- Email [speakup@harmonycares.com](mailto:speakup@harmonycares.com); OR
- File a web-based report at <https://app.mycompliancereport.com/MCR> (Company Code HMY).

**Speaking Up helps us all get better at what we do.**

- Reports from you are opportunities.
- **Retaliation is never permitted.**
- Reports can be made anonymously.
- Reporting is your responsibility. Failure to report misconduct is misconduct.

**After reports are made, we follow up.**

- We take all issues seriously.
- We inquire about the issues and conduct investigations when appropriate.
- We implement corrective and preventive measures to address identified concerns.
- We protect the confidentiality of the individuals involved.

**Speak Up!**



### **What Should I Do?**

If you feel as if anyone has asked you to do something that is wrong, we expect you to speak up. You may decide to discuss the concern directly with the person. However, if you are not comfortable doing so, you should raise the concern through the Speak Up process described above.

Similarly, if you feel that you are in a situation in which profitability is being prioritized over ethical conduct, you should raise the concern through the Speak Up process.

If you are not certain if a situation is ethical or not, you might ask the following questions to help determine your next steps:

- Is it legal?
- Does it align with the Code of Conduct?
- Does it represent our mission and core values at HarmonyCares?
- Is it fair and honest?
- Would I be concerned if the situation were discussed in the media?

If your answer is **no** to any of the questions above or you just don't feel the situation is Living the Code – **Speak Up!**

The company will not retaliate against any employee for reporting misconduct or for engaging in or refraining from engaging in protected concerted activities under Section 7 of the National Labor Relations Act. None of our policies should be construed to interfere with, restrain, or prevent employees from exercising their rights under the National Labor Relations Act.

## QUALITY

**At HarmonyCares, our priority is providing quality services to our patients and supporting our team in providing quality services.** This means offering compassionate care and support in all interactions so that our patients feel heard and valued during their care journey. We work toward the best possible outcomes while abiding by the rules we must follow.

### **Our quality services are demonstrated when we:**

- Tailor our care to the unique needs of our patients.
- Respond in a timely and courteous manner to patient needs.
- Use clinically appropriate methods to address illness.
- Engage in ongoing training opportunities to evolve with industry standards and technologies.
- Provide information to patients so that they can discuss the benefits, risks, and costs of appropriate treatment alternatives, including the risks, benefits, and costs of forgoing treatment. Provide guidance about what is considered the optimal course of action for the patient based on objective professional judgment.
- Answer questions about the patient's health status or recommended treatment.
- Allow patients to make decisions about treatment recommendations and respect their decisions. If the patient has decision-making capacity, they may accept or refuse any recommended medical intervention. Understand that a patient may ask for a second opinion.
- Advise patients regarding any conflict of interest that staff may have in respect to their care.
- Protect patient privacy and confidentiality.
- Provide continuity of care by coordinating care with other health care professionals, within and outside of HarmonyCares.
- Give sufficient notice and reasonable assistance in making alternative arrangements for care when necessary.
- Recognize that patients have the right to voice concerns or grievances at any time.

### **Patient Choices and Provider Choices**

Patients have the right to make choices and decisions about the type and extent of care they wish to receive. Team members should not feel pressure to refer patients to a specific provider. In addition, patients have the right to choose their provider. Patients may request to change providers, refuse specific services, or be discharged from services, and HarmonyCares staff must respect and honor the wishes of their patients.

### **Notice of Non-Discrimination**

HarmonyCares service locations comply with civil rights laws\* and do not exclude, deny benefits to, or otherwise discriminate or permit discrimination, including but not limited to bullying, abuse or harassment against any person (i.e. patients, companions, and employees) or

based on any individual's association with another individual, based on actual or perceived race, color, religion, national origin, (including people whose primary language is not English), gender, gender expression, gender identity, sex stereotypes, sexual orientation, sex characteristics (including intersex traits), health status (including HIV status), age, disability, marital status, pregnancy or related conditions, ancestry, genetic information, amnesty, veteran status, cost of treatment, participation in benefit plans, or payment source. This prohibition applies to admission to, participation in, or receipt of the services and benefits under any of our programs and activities conducted by any service location directly, or through a contractor or any other entity with which the location arranges to carry out its programs or activities.

\*Specific civil rights regulations related to employees and patients include:

- Title VI and VII of the Civil Rights Act of 1964
- Section 504 of the Rehabilitation Act of 1973
- Americans with Disabilities Act of 1990
- Age Discrimination Act of 1975
- Age Discrimination in Employment Act of 1967
- Section 654 of the Omnibus Budget Reconciliation Act of 1981
- Medicare-Medicaid Fraud and Abuse Act of 1978
- Title IX of the Education Amendments of 1972
- Section 1557 of the Patient Protection and Affordable Care Act of 2010, 42 U.S.C. §18116
- Regulations of the U.S. Department of Health and Human Services, at Title 45 Code of Federal Regulations Parts 80, 84, and 91
- 42 Code of Federal Regulations (C.F.R.) 423.100
- 42 C.F.R. Part 422
- Other applicable federal and state civil rights statutes

HarmonyCares provides people with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively with us, such as qualified sign language interpreters and written information in other formats (large print, audio, accessible electronic formats, braille, or other formats).

HarmonyCares provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages.

### **Interpreter Service Request and Plan**

It's important for our patients and their companions to understand their clinical conditions and associated treatment interventions.

When patients complete their initial consents, they complete the Interpreter Services Request and Plan which documents their right to receive qualified language interpreter services during treatment, visits, and other communications. The Request and Plan notes that interpreter

services or auxiliary aids and services are offered free of charge and provides a method for documenting the specific decisions that are made about these services for each patient.

### **Language Line Services**

LanguageLine Solutions is our company-approved interpreter/translator services vendor. The LanguageLine mobile application makes it quick and easy to communicate with our patients with limited English proficiency or disabilities, like hearing loss. LanguageLine provides audio and video interpreter services, and for our patients and their representatives who communicate using American Sign Language, interpreters are available through a video conferencing platform. Detailed instructions for accessing these services are posted on the Compliance Page on the company intranet site.

### **Culturally Competent Care**

Our patients come from a range of cultures and backgrounds. Cultural competency is the ability to interact with individuals who have diverse values, beliefs and behaviors, and being able to honor the different cultures of those you work with. Cultural competence must be a guiding principle to ensure that services to our patients are culturally sensitive and provide appropriate prevention, outreach, assessment, and intervention.

### **Examples of Compassionate and Culturally Competent Interactions:**

- Talking to patients compassionately, respectfully, and understandably
- Talking about patients and families respectfully
- Keeping personal feelings or situations from interfering with patient care
- Understanding how a patient's values and beliefs impact their approach to their care
- Providing quality services to all patients without discrimination in any form

When we recognize diversity, it can lead to better outcomes and solutions for our patients including:

- More successful patient education
- Clinically appropriate testing and screening
- Greater adherence to medical advice

### **Respect for Patient Property**

Many of our HarmonyCares staff have the honor of visiting and treating patients in their home environment. Staff are expected to respect patients' personal property and protect it from loss, damage, misuse, or theft.

### **Medical Necessity**

HarmonyCares staff are required to furnish healthcare services and supplies necessary to diagnose or treat illness, injury, condition, disease, or its symptoms and that meet accepted standards of care. Our medical record documentation should provide clarity about the medical necessity for each service and treatment and help to ensure that we bill external payers appropriately.

### The Quality and Documentation Connection

The quality of service we provide should be directly reflected in our documentation. Our medical record notes and corresponding communication are relied on by multiple internal and external stakeholders.

That's why we:

- Document the services we provide as soon as possible and typically no later than 24 hours after service delivery
- Accurately and completely reflect evaluation, management, education and treatment that was performed on the date of service
- Provide concise and objective statements that describe the symptoms, problems, conditions, diagnoses, or reasons for the patient encounter
- Are extremely cautious with the use of cutting and pasting methods or tools to avoid misrepresentation of the care and services provided
- Ensure visit notes, clinical notes, and assessments (including the History of Present Illness, physical examination, and vital signs) are a complete and accurate portrayal of the patient encounter
- Document services performed, services ordered, and prescriptions in the appropriate sections of the medical record
- Complete a plan of care for each diagnoses documented for the patient encounter
- Provide appropriate notes related to patient instructions and return visits
- Complete medical record entries, including a signature and date

#### Documentation Best Practices:

- Complete visit notes within 24 hours of the time of visit
- Review every note for professionalism, accuracy, and document clearly and completely. *What you write impacts the care that others provide*
- Use professional and factual language
- Use only approved abbreviations
- Contact the local office if information is missing from the patient demographic, account, patient contact, or pharmacy tab or if you have questions or concerns

Cloning, or copy/pasting in medical documentation occurs when users select information from one source and replicate it in another location **without adjusting language to reflect current services and information**. When clinicians copy and paste information but fail to update it or ensure accuracy, the patient's medical record may be inaccurate and inappropriate charges may be billed to patients and payers. Clinicians are prohibited from cloning documentation because it may lead to:

- Other team members drawing the wrong conclusions about the current status and course of treatment for the patient
- Inappropriate clinical interventions
- Inaccurate or questionable billing

## **Prohibition against Abuse and Neglect**

**The company will not tolerate any form of abuse, neglect, mistreatment, or misappropriation.**

**Abuse:** The willful infliction of injury, unreasonable confinement, intimidation, or punishment with resulting physical harm, pain, or mental anguish. Abuse also includes the deprivation by an individual, including a caretaker, of goods or services that are necessary to attain or maintain physical, mental, and psychosocial well-being. Instances of abuse of any patient, irrespective of any mental or physical condition, cause physical harm, pain, or mental anguish. It includes verbal abuse, sexual abuse, physical abuse, and mental abuse including abuse facilitated or enabled using technology. Willful means the individual must have acted deliberately, not that the individual must have intended to inflict injury or harm.

**Sexual abuse:** Non-consensual sexual contact of any type with a patient.

**Neglect:** The failure to provide goods and services that are necessary to avoid physical harm, pain, mental anguish, or emotional distress.

**Exploitation:** Taking advantage of a patient for personal gain, using manipulation, intimidation, threats, or coercion.

**Misappropriation of patient property:** The deliberate misplacement, exploitation, or wrongful, temporary, or permanent use of a patient's belongings or money without the patient's consent.

**Mistreatment:** Inappropriate treatment or exploitation of a patient.

### **Adult Protective Services (APS) Reporting Requirements**

- To comply with federal and state requirements and to protect the safety of patients, all HarmonyCares staff who suspect that a patient is being subjected to abuse, neglect, exploitation, misappropriation, and/or mistreatment should personally report such information to APS within 24 hours of the suspicion or becoming aware of the suspicion.
- Reports may be filed anonymously.
- If the staff member believes further information is needed prior to determining that there is reasonable cause, a direct supervisor, or higher-level supervisor may be contacted for guidance. The staff member may also contact the Compliance or Legal Department for guidance or contact the Speak Up Line.
- Where applicable per business line and state regulatory requirements, reporting to Child Protective Services may also be mandated.

### **Accountable Care Organizations (ACOs)**

Accountable Care Organizations (ACOs) are groups of doctors, hospitals, and other health care providers, who come together voluntarily to give coordinated high-quality care to the Medicare

patients they serve. Coordinated care helps ensure that patients, especially the chronically ill, get the right care at the right time, with the goal of avoiding unnecessary duplication of services and preventing medical errors. When an ACO succeeds in both delivering high-quality care and spending health care dollars more wisely, it will share in the savings it achieves for the Medicare program.

HarmonyCares operates in two ACO models, the Medicare Shared Savings Program (MSSP) ACO and the Realizing Equity, Access, and Community Health (REACH) ACO which focuses on underserved communities and promotes provider leadership and governance.

These two models vary in the flexibilities provided to allow ACOs and their participants to market to beneficiaries and otherwise incentivize beneficiaries to align with an ACO without violating fraud and abuse laws.

HarmonyCares is committed to complying with the provisions in the guidance for operating ACOs and providing the coordinated care our ACO patients need. Our Compliance Program is designed to comply with ACO requirements.



## HONESTY AND INTEGRITY

This Code is about Making the Best Choices. At the end of each day, we want to be able to feel confident in the things we've said and done. Honesty is about being compassionately truthful in our interactions. Integrity is about having strong moral principles, and Making the Best Choices, even when no one is watching.

### **Maintaining Appropriate Patient Relationships**

On a daily basis we may interact with multiple patients, family members, and other people providing assistance to our patients. We often develop meaningful relationships with our patients. It is important to also maintain appropriate professional boundaries:

- If you are providing direct care to a relative, notify your direct supervisor who will evaluate the situation to determine if there is a conflict of interest
- Conduct visits with patients during normal business hours in the patient's home/facility setting
- Avoid speaking about intimate or personal issues or problems
- Engage in appropriate relationships with patients or their immediate family members
- Be sure not to tease or make inappropriate comments or jokes

### **Government Contracting**

When doing business with federal, state, or local governments, we must ensure all statements and representations to government officials are accurate and truthful, including costs and other financial data. If your assignment directly involves the government or if you are responsible for someone working with the government on behalf of the company, be alert to the special rules and regulations applicable to our government customers. Additional steps should be taken to understand and comply with these requirements.

Any conduct that could appear improper should be avoided when dealing with government officials and employees. Payments, gifts, or other favors given to a government official or employee are strictly prohibited as it may appear to be a means of influence or a bribe. Failure to avoid these activities may expose the government agency, the government employee, HarmonyCares, and you to substantial fines and penalties. For these reasons, any communications, and interactions with federal, state, or local government entities must be in accordance with our company policy.

### **Equal Opportunity**

HarmonyCares hires and promotes team members based on their qualifications, experience, and dedication. Our commitment to equal opportunity employment applies to all persons involved in our operations and prohibits unlawful discrimination by any employee, including supervisors and co-workers.

In accordance with applicable law, HarmonyCares prohibits discrimination against any applicant or employee based on any legally-recognized basis, including, but not limited to: race, color, religion, sex (including pregnancy, lactation, childbirth or related medical conditions), sexual orientation, gender identity or expression, age (40 and over), national origin or ancestry, citizenship status, physical or mental disability, genetic information (including testing and characteristics), veteran status, uniformed service member status or any other status protected by federal, state or local law.

Any employee with questions or concerns about any type of discrimination or retaliation in the workplace is encouraged to bring these issues to the attention of a supervisor, Human Resources, or through the Speak Up process. No one will be subject to, and the company strictly prohibits, any form of discipline, reprisal, intimidation, or retaliation for good faith reports or complaints of incidents of discrimination of any kind, pursuing any discrimination claim, or cooperating in related investigations.

HarmonyCares considers all requests for reasonable accommodations for qualified individuals with known disabilities unless doing so would result in undue hardship to our organization. This policy applies to all aspects of our employment relationships, including staffing, job requirements, salary, corrective actions, termination, as well as access to benefits and training.

**The Speak Up process described above is always available for you to report issues of concern during employment.**

### **Employee Screening and Credentialing**

- **Background Screening:** All team members are background screened prior to hire in accordance with company policy and state/federal regulations. If you are arrested, convicted, indicted, or plead guilty or no contest during your employment, you are required to be honest about it and report to your supervisor. Your supervisor will review the situation with Human Resources, Compliance, and/or the Legal Department to determine if you are permitted to continue working.
- **Excluded Parties:** We do not knowingly contract with, employ, or bill for services rendered by an individual or entity that is excluded or ineligible to participate in federal healthcare programs, suspended or debarred from federal government contracts, or has been convicted of a criminal offense related to the provision of healthcare items or services. You are required to inform your supervisor and the compliance team if you have been excluded or are otherwise ineligible to participate in federal healthcare programs.
- **Credentialing:** If your position requires a license, certification, or payer enrollment, it is your responsibility to renew your credentials as required. In addition, you are required to report to your supervisor if your credentials expire or any licensing agency has initiated an investigation or taken any action relating to your credentials.

**No Harassment or Discrimination**

HarmonyCares is committed to providing a work environment that is free from all forms of discrimination and conduct that can be considered harassing, coercive, or disruptive, including sexual harassment. The company specifically prohibits any form of harassment and/or discrimination, whether in person or via electronic media, by or toward any person doing business with or for the organization or on the organization's premises, including co-workers, managers, contractors, suppliers, or customers.

Employees who believe they have experienced or witnessed sexual or other unlawful harassment or discrimination in the workplace must report it immediately through the Speak Up Process. Any supervisor who becomes aware of possible unlawful harassment or discrimination must immediately advise Human Resources or Senior Management or contact the Speak Up Line.

No one will be subject to, and the company strictly prohibits, any form of discipline, reprisal, intimidation, or retaliation for good faith reports or complaints of incidents of harassment of any kind, pursuing any harassment claim or cooperating in related investigations. All allegations of unlawful harassment or discrimination will be promptly and discreetly investigated.

Information learned during the investigation will be managed as confidentially as possible and on a need-to-know basis to the extent possible without impeding the investigation.

Refer to the HarmonyCares Employee Handbook for additional information.

**Workplace Safety and Violence Prevention**

HarmonyCares strives to provide a workplace that is safe and free from threatening and intimidating conduct. The company does not tolerate any acts or threats of violence in any form in any workplace, at work-related functions or outside of work if it affects the workplace. Behavior that threatens team members or property should be immediately reported through the Speak Up Process.

The company has a Workforce Safety Committee that is committed to improving team member safety through initiatives that include safety training modules, the implementation of standardized safety procedures, and offering the use of safety devices. Team members may reach out to their direct manager or email [workforcesafety@harmonycares.com](mailto:workforcesafety@harmonycares.com) with questions or concerns regarding personal safety.

**Occupational Safety and Health Administration (OSHA), Emergency Preparedness, and Business Continuity**

HarmonyCares complies with all applicable federal and state OSHA standards, rules, and regulations. Team members must follow all safety rules and regulations established by OSHA and the company and have the right to report any unsafe working conditions or potential hazards, or to refuse to perform work they believe to be unsafe. The company maintains a

comprehensive Infection and Pathogen Exposure Control Plan (IECP) which is available on the company intranet and provides required company level and local level training regarding the IECP.

The company maintains a (BCP) Business Continuity Plan available on the company intranet and Emergency Preparedness Plans (EPPs) are also developed at the local business level. Team members are provided with required training to outline safety and communication procedures during events such as natural disasters, power outages, active shooter situations, cyber-attacks, and other types of emergency situations.

### **Drug and Alcohol Use**

Working under the influence of alcohol or illegal drugs is prohibited. Possession, distribution, sale, transfer, or use of alcohol or illegal drugs in the workplace, while on duty or while operating employer-owned vehicles or equipment is also not permitted.

### **Use of Company Property and Electronic Media**

Company property including supplies, equipment, employee time, and information, must be used for legitimate business purposes. In addition, the company provides information and technology resources such as email, instant messaging, computer software, intranet/internet, fax machines, telephones, cell phones, portable electronic devices, and voice mail systems. Occasional, limited, or incidental personal use of these resources is permitted, but the company reserves the right to track and review personal use of company property to ensure that security and privacy is maintained.

Team members must strive to protect company property from theft, improper access, loss, and carelessness. Any suspected incident of theft or loss must be immediately reported to the IT Department.

### **Conflicts of Interest**

Conflict of Interest refers to any situation or position in which a personal interest conflicts with organizational interests, affecting an individual's ability to make impartial decisions in the best interest of HarmonyCares.

Examples include, but are not limited to:

- Other or alternate employment
- Financial involvement with competitors, vendors, or others
- Significant investments in other healthcare companies
- Provision of medical direction for non-HarmonyCares entities
- Provision of board or other advice for non-HarmonyCares entities
- Immediate family member employment or financial interests that may have potential to influence your decisions affecting Harmony Cares

Under the Code of Conduct, team members are:

- Expected to recognize and avoid activities and relationships that involve, or might appear to involve, conflicts of interest or behavior that may discredit HarmonyCares or compromise its integrity.
- Required to disclose and remove any potential conflict of interest that would affect our responsibility to act ethically within HarmonyCares, including financial conflicts.
- Required to also report any immediate family members with conflicts of interest with HarmonyCares or affiliated entities.
- Understand that failure to report is a violation of policy.

**Social Media**

Social media provides a way for individuals and the company to share information with others. However, the use of social media also presents certain risks and carries with it certain responsibilities. Employees must not make comments on behalf of the company without proper authorization. In addition, you may not disclose confidential or proprietary information about our business, associated businesses, or our patients. In addition, employees should remember that what they publish on social media may negatively affect their relationships with other team members or connections to our patients and families.

**Advertising, Marketing and Media Relations**

It is our responsibility to accurately represent HarmonyCares and our services in our marketing, advertising, and sales materials. Deliberate misleading messages, omissions of important facts, or false claims about our services, individuals, or our competitor's products, services, or employees are inconsistent with our values and may violate the law.

Although it may sometimes be necessary to make comparisons between our services and those of our competitors, we must make factual and accurate statements that can be easily verified or reasonably relied upon. Please check with the Legal Department and Compliance Department if you have any questions about these types of statements.

The Marketing Department assures that all information about HarmonyCares locations provided to the public, patients, patient representatives, and other stakeholders is accurate. The Marketing Department is also responsible for the creation and approval of all company websites and social media sites.

The Marketing and Communications Departments are also responsible for responding to inquiries from media outlets. Any staff member that receives a media inquiry should not respond to the inquiry and immediately forward the inquiry to [mediainquiries@harmonycares.com](mailto:mediainquiries@harmonycares.com) who will prepare the appropriate response to the media outlet(s).

**Confidential and Proprietary Information**

Confidential information is information that would not generally be known to the public. Proprietary information is a company's confidential information about its products, business, or

activities. Examples of confidential and/or proprietary information include financial information, patient listings, medical records, clinical data, strategic plans, marketing plans, policies, procedures, and documents, employee or patient protected health information (PHI), personally identifiable information (PII), information about changes in company structure (e.g. acquisitions, divestitures, or other business dealings) that the company has not yet made public, pricing data, cost data, computer systems and software, health plan member and other confidential/proprietary data, insider information (non-public, material information about a company), and other private business-related data.

Confidential information may only be used to perform job duties and must not be shared with individuals or entities outside the company unless it is required to meet specific obligations or until the information is released to the public through approved channels.

Materials that contain confidential information (e.g., memos, binders, notebooks, and computers) should be stored securely.

### **Intellectual Property Rights and Copyright Laws**

Intellectual property rights include registered copyrights, trademarks, trade names, and logos. Intellectual property also includes any work product that is created or developed in whole or in part on company time as part of your job responsibilities with the use of company resources or information. Team members are expected to protect the intellectual property of the company, and we must not knowingly infringe upon the intellectual property rights of another individual or company (e.g., copyrighted books, articles, images, software).

## COMPLIANCE

HarmonyCares is committed to complying with all standards, laws, and regulations that apply to our business. Healthcare has numerous rules and regulations, many of which focus on quality and patient and employee protections and rights. Others focus on accurate and prompt documentation of services, coding, claims for payment, and data submitted to federal and state healthcare programs or otherwise publicly reported. Violation of these standards, laws, and regulations can have severe consequences, including financial fines, penalties, and other serious consequences.

The Code of Conduct supplements the Employee Handbook and the specific policies and procedures that apply to your job. No single resource can answer every question or cover every concern you may encounter at work. If you encounter a situation where there does not seem to be a specific policy that applies, discuss the concern with your local management, contact the compliance team or use Speak Up.

Throughout this Code we summarize many key Compliance focus areas. In this section we provide some additional specific considerations.

### **Fraud, Waste, and Abuse**

The company is committed to honest and ethical billing practices including compliance with the federal False Claims Act (FCA).

Examples of false claims include the following:

- Billing for a service or item that is not reasonable or necessary for a patient's treatment or diagnoses
- Billing for services that were not provided
- Submitting bills with insufficient or incomplete documentation in the medical record
- Documenting false or misleading information about a patient's diagnoses or condition
- Adjusting billing code to increase reimbursement
- Billing for services or items more than once

**Fraud** is intentionally submitting false information to the government to get money or a benefit. This includes situations in which you should have known the information was false.

**Waste** includes practices that, directly or indirectly, result in unnecessary costs to federally funded programs, such as overusing services or misusing resources.

**Abuse** includes actions that may, directly or indirectly, result in unnecessary costs to federally funded programs. Abuse involves paying for items or services when there is no legal entitlement to that payment.

Team members are required to follow our policies and procedures which assist us in preventing and detecting fraud, waste, and abuse.

- Billing statements must always reflect the services actually provided, including the correct charges for those services.
- Employees involved in any aspect of the revenue cycle, from providing services, documenting, coding, billing and to collecting payment, must understand and abide by Medicare, Medicaid or other third-party insurer coverage, documentation, coding, and billing rules.
- Intentionally assigning inaccurate codes or patient statuses to increase reimbursement is never permitted.
- Each employee must use their best efforts to prevent and report errors, as well as billing situations that seem suspicious.
- We engage in ongoing monitoring and auditing efforts to evaluate compliance and implement corrective actions when necessary.

Team members are encouraged to report concerns about fraud, waste, and abuse, including false claims, to the Speak Up line. The False Claims Act also allows individuals to report credible allegations about the submission of false claims to governmental agencies. In these situations, the individuals are protected as whistleblowers and cannot be retaliated against.

### **Reporting and Return of Overpayments**

HarmonyCares strives to bill accurately for all services performed in accordance with all state, federal, and third-party payor requirements. Submission of incorrect and/or inaccurate claims to any government entity may result in overpayments or potentially false claims.

Any overpayment received should be reported and returned by no later than:

- The date which is 60 days after the date on which the overpayment was identified or in a timely manner after a good faith thorough investigation;
- A maximum of six years from overpayment receipt, generally known as the Lookback Period;
- The date any corresponding cost report is due; or
- In accordance with contractual obligations.

Overpayments must be reported and returned only if a person identifies the overpayment within six years of the date the overpayment was received, or in accordance with contractual obligations.

### **Interactions with Referral Sources and Patient Inducement**

- **Physician Referrals and Stark Law**

The Stark Law prohibits physicians from referring patients to receive Designated Health Services payable by Medicare or Medicaid from entities with which the physician or an immediate family member has a financial relationship unless an exception is satisfied. These financial relationships must be disclosed. The Compliance team manages



disclosures and monitors relationships and will work with Legal to ensure any exceptions are satisfied.

- **Anti-Kickback Policy**

The Anti-Kickback statute prohibits any person or entity from offering, paying, soliciting, or receiving anything of value in exchange for referrals for health care items or services (kickbacks) payable by a federal health care program. Most states have similar laws prohibiting kickbacks in health care.

We accept patient referrals, and order items and services, based solely on clinical needs and our ability to provide the services required by the patient. We make referrals based solely on clinical needs and the providers' ability to provide the identified items or services. HarmonyCares and its personnel never solicit, accept, offer, or provide kickbacks of any kind. The Federal Statute as well as many state laws contain exceptions or safe harbors that permit payment practices that satisfy specific certain conditions. Questions about whether a safe harbor applies should be directed to the Legal Department.

### **Selection and Use of Delegated Entities and Other Third Parties**

We rely on suppliers, contractors, and consultants to help us accomplish our goals, and believe in doing business with third parties that demonstrate high standards and ethical business behavior. We offer fair opportunities for prospective third parties to compete for our business, and our selection process is a reflection of HarmonyCares. In addition, we must maintain a positive environment that provides an incentive for third parties to engage with HarmonyCares.

### **Relationships with Providers**

At times, HarmonyCares contracts with third party providers to deliver care to our patients. We strive to establish a collaborative relationship with high-quality providers based on integrity and trust to the benefit of our patients, internal providers, and the company. All provider contracts should be completed with assistance from the Legal Department and comply with applicable federal and state rules and regulations and health plan contractual requirements.

### **Vendor Relations**

HarmonyCares has processes for reviewing all arrangements and contracts with vendors and contractors. We expect vendors to be familiar with the company policies and procedures that address compliance and interactions with our employees, locations, and support units. In addition, vendors are encouraged to have a Compliance and Ethics Program, a Code of Conduct, or other policies and programs that demonstrate commitment to ethical business practices.

Vendors are required to comply with state and federal regulations that apply to their business or profession, including the Federal False Claims Act. In addition, specific vendors identified as First Tier, Downstream and Related (FDR) entities that provide administrative or healthcare-

related services for patients are required to comply with additional HarmonyCares and health plan contractual requirements.

Vendor funding for education events, charitable events, trade shows and conferences are permitted as outlined in our policy and procedures to ensure that the funding and/or participation is not inappropriately offered, solicited, or accepted by the company.

Discounts, rebates, and administrative fees received from vendors must be structured to comply with safe harbor provisions, so the Legal Department is required to be consulted about these arrangements.

Business Associate Agreements are required for vendors that access protected health information and must be approved by the Legal Department.

### **Patient Confidentiality and HIPAA**

Our team members are entrusted with sensitive and confidential information about our patients and their families that we must safeguard at all times. HarmonyCares complies with the requirements of the Health Insurance Portability and Accountability Act (HIPAA) and the HITECH Act and similar laws.

**Personally Identifiable Information (PII)** is information explicitly linked to a specific individual such as social security number or driver's license number.

**Protected Health Information (PHI)** is individually identifiable verbal, written or electronic health information that relates to the past, present, or future physical or mental health conditions and services.

We maintain and/or communicate using **PHI** in:

- Electronic Medical Records (EMR), Health Information Exchanges (HIE), and databases
- Paper documentation
- Telephone calls and voice mails
- Verbal discussions
- Faxes
- Emails
- Photos/videos

Team members must work to protect PHI by:

- Limiting **access and sharing** of PHI to the **minimum amount necessary** to accomplish an intended purpose.
- Following the requirements outlined in our Notice of Privacy Practice which describes how we access, use, or disclose PHI that is not related to treatment, payment, or healthcare operations.

- Using caution with suspicious messages that could be phishing attempts, and report concerns to IT Security immediately.
- **Not texting PHI.** Electronic communication including PHI should only occur using HIPAA-compliant programs such as the electronic medical record system, internal email, or encrypted external email. Before you send make sure you have the correct recipients and use secure email when sending PHI to external authorized users.

| DO . . .   | DON'T . . .  |
|--|--|
| <ul style="list-style-type: none"> <li>• Use strong passwords</li> <li>• Use a password management tool for personal and work needs</li> <li>• Apply email encryption to emails containing PHI</li> <li>• Log out of systems when leaving your workstation</li> <li>• Lock PHI in a drawer, file cabinet or other secure area when not at your workstation</li> <li>• Lock offices, when not in use</li> <li>• Discard PHI and other confidential information using designated and secure bins or shredding</li> <li>• For individuals remotely accessing external health records, adhere to the requirements of the external provider</li> <li>• Regularly clean out your email box</li> <li>• Have confidential discussions when sharing PHI</li> <li>• Print documents using the lock print function that requires users to enter a password to print documents</li> <li>• Hold meetings in conference rooms behind closed doors</li> <li>• Accompany visitors throughout the office location. Provide visitors with a badge or sticker that identifies them as visitors</li> <li>• Promptly collect keys/access cards after termination of employment</li> </ul> | <ul style="list-style-type: none"> <li>• Share passwords with anyone including co-workers, supervisors, or IT staff</li> <li>• Re-use passwords in multiple systems</li> <li>• Leave a laptop or other electronics unattended in a car</li> <li>• Email PHI or confidential information to personal email addresses</li> <li>• Save PHI to shared drives when other staff are not eligible to receive the PHI</li> <li>• Store PHI or company information on USB keys/thumb drives or other portable storage devices</li> <li>• Take unauthorized photos or videos of patients or post on patient information on social media without specific authorization</li> <li>• Provide more information and recipients than necessary when sending, forwarding, or replying to email containing PHI</li> <li>• Record Teams meetings in which PHI is presented</li> </ul> |

A breach is any acquisition, access, use, or disclosure of PHI not permitted under the HIPAA Privacy Rule which compromises the security or privacy of the PHI. Determining whether a

breach has occurred is complex - and because we must perform a breach assessment for any concern that PHI may have been inappropriately disclosed or exposed - **we require reporting of suspected security incidents or privacy breaches to the Compliance Department at 800-609-9783 or to [speakup@harmonycares.com](mailto:speakup@harmonycares.com)**

### **Photography**

Photographs can be useful for effective treatment and care quality. HIPAA regulations should always be considered, and we should always take reasonable steps to inform and protect patients from unauthorized use and/or release of photographic images and recordings.

- Team members should take photos with the minimum content necessary for treatment purposes. Backgrounds should be blurred or not included. The patient's face should only be included when absolutely essential.
- Photographs should always be taken using company-issued equipment within authorized applications. Team members are prohibited from taking patient photos on their personal phones or personal computers.
- The rights and dignity of the patient should always be respected when photos are taken.
- All images should be stored in the electronic medical record.
- After images are uploaded to the electronic medical record, they must be deleted from mobile devices.

### **Cybersecurity**

Malicious software (malware) refers to any intrusive software developed by cybercriminals (hackers) to steal data or damage or destroy computers and computer systems. Ransomware is a form of malware designed to deny a user or organization access to files on their computer until a ransom is paid. Phishing is a technique used to attempt to acquire sensitive data through targeted emails, text messages or phone calls.

HarmonyCares is a target for these types of schemes due to the PII and PHI that we use and retain in our various systems. Team members should be vigilant about protecting our company data. To help remind employees about these threats, the IT Security Department conducts regular phishing training and exercises.

Keep these important tips in mind:

- Do not install or download unapproved software or computer programs without permission from IT Security.
- Do not uninstall security software or disable device GPS locators on company issued devices.
- Review and react to warnings on your emails. **Do not open unexpected or suspicious attachments.**
- Contact IT Security if you receive a suspicious email:
  - Emails that attempt to convey a sense of urgency or are aggressively requesting a response
  - Emails that come from a name you know/trust, but they are asking you to do something unusual or that they've never requested before

- Emails warning you of some impending negative action, unless you click on an attached link
- Emails that promise an unexpected reward

Please immediately report any real or suspected security incidents using the Report Email function, or to the Compliance Department at 800-609-9783 or to [speakup@harmonycares.com](mailto:speakup@harmonycares.com).

### **Artificial Intelligence**

Any use of artificial intelligence (AI) systems is assessed to ensure appropriate development, implementation, maintenance, and monitoring. AI systems are evaluated to ensure that they are fair, unbiased, and not misleading.

### **Record Retention**

The company maintains and destroys all medical documentation and other company-related documentation in accordance with state and federal laws, contractual requirements, and the company record retention schedule.

### **Antitrust and Fair Competition**

HarmonyCares believes in open competition. Antitrust and competition laws are complicated, and failure to adhere to these laws could result in significant penalties imposed for the company or individual team members. The company prohibits collusive or unfair business behavior, such as price fixing and bid rigging that restricts free and open competition.

Legal issues may also arise if we refuse to deal with certain customers or competitors or restrict free and open competition. Consult with the Legal Department if you have any questions or concerns.

### **Obtain Competitive Information Fairly**

Gathering information about our competitors is a legitimate business practice and helps us stay competitive in the marketplace. However, we must never use any illegal or unethical means to get information about other companies. Legitimate sources of information include information available to the public such as news accounts, industry surveys, competitor displays at conferences and trade shows, and information on the Internet. You may also obtain information appropriately from customers and suppliers (unless they are prohibited from sharing the information), by obtaining a license to use the information, or purchasing the ownership of information. When working with consultants, vendors, and other third parties, ensure that they understand and follow company policy.

### **Anti-corruption/Anti-bribery**

Federal and state laws prohibit bribery, kickbacks, and other improper payments. A bribe is defined as directly or indirectly offering anything of value (e.g., gifts, money, or promises) to influence or induce action, or to secure an improper advantage. No team member, officer,

agent, or independent contractor acting on our behalf may offer or provide bribes or other improper benefits to obtain business or an unfair advantage.

The Foreign Corrupt Practices Act and other U.S. laws prohibit payment of any money or anything of value to a foreign official, foreign political party (or official thereof), or any candidate for foreign political office for the purposes of obtaining, retaining, or directing of business. We expect all staff members, officers, agents, and independent contractors acting on behalf of the company to strictly abide by these laws.

### **Political Activities and Contributions**

We encourage all team members to exercise their right to vote and be active members in political processes. You may support the political process through personal contributions or by volunteering your personal time to the candidates or organizations of your choice. However, these activities must not be conducted during company time or involve the use of any company resources such as telephones, computers, or supplies. You may not make or commit to political contributions on behalf of the company.

It is acceptable for the company to express our view to governments on subjects that might affect the welfare of the company. Communicating the company's position on issues or matters of policy to government employees and officials can make team members and our company subject to applicable lobbying laws. The company may also choose to contribute funds to support or help defeat public initiatives that may substantially affect our business. Our Chief Executive Officer and General Counsel must approve all participation or use of funds for these purposes.

### **Relationships with Regulators**

We are committed to maintaining an open, constructive, and professional relationship with regulators on matters of regulatory policy, submissions, compliance, and product performance.

Given the highly regulated environment in which we operate, we must be vigilant in meeting our responsibilities to comply with relevant laws and regulations. We expect full cooperation from our staff members with our regulators and to respond to their requests for information in an appropriate and timely manner.

We should be alert to any changes in the law or new requirements that may affect our business units and be aware that new products or services may be subject to special legal and/or regulatory requirements. If you become aware of any significant regulatory or legal concerns, bring them to the attention of your supervisor, or the Legal and/or Compliance Departments.

### **Investigations and Litigation**

The company may have independent or state/federal third auditors or other authorities conduct remote and/or on-site audits including, but not limited to, financial audits, regulatory

audits, or health plan related audits. Team members are expected to fully cooperate with these activities and provide all requested and relevant information.

Government inspectors or investigators may also contact our team members to ask questions or request information. Team members are advised to:

- Always ask for identification.
- Inform the General Counsel or Legal Department of the record request immediately so that they can provide the appropriate guidance.
- Provide records in accordance with a court-approved search warrant.
- If the investigator does not have a search warrant and requests records, do not allow them to take, view or copy records.
- Allow a search if the investigator produces a search warrant and take the following steps:
  - Contact the Chief Compliance Officer or General Counsel immediately for guidance;
  - Do not interfere with the investigator;
  - Make a copy of the search warrant, including all attached schedules, exhibits, and supporting affidavits (if made available); and
  - Send staff home during a government search, except anyone designated to manage HarmonyCares responses to the search or required to remain for patient care purposes.

If you receive a subpoena or other written request for information from a court or government agency, contact the Compliance or Legal Department for guidance on how to respond.

You may also be contacted by an investigator outside of the workplace. It is your decision whether you choose to participate in the investigation. You have the legal right to contact an attorney before responding to an investigator's questions.

- To further comply with any external request noted above, you must NEVER:
  - Conceal, destroy or alter any documents;
  - Lie or provide false or misleading statements or attempt to persuade others to give false or misleading statements;
  - Provide inaccurate information;
  - Be uncooperative; or
  - Obstruct or delay communication of information.

### **Internal Investigations and Audits**

The Compliance Department investigates all reported concerns promptly and confidentially to the fullest extent possible. The Compliance Department conducts objective investigations and audits and does not form any conclusions until their work is completed. Team members are expected to cooperate with audits and investigations and any associated corrective action plans

such as coaching, performance improvement plans, or ongoing monitoring or assessments. Failure to cooperate with an internal investigation may result in disciplinary action.

**Gifts To/From Patients, Family Members, and Business Partners**

Team members are prohibited from accepting individual gifts from patients or family members, including tips, gratuities, personal property, and loans. In addition, selling or buying anything from a patient or family member is prohibited. Consumable food items may be given to patients in need. Incentives to patients may be provided in accordance with patient incentive programs (e.g., Helping Hand) approved by the Legal and Compliance Departments.

To avoid the appearance or actual occurrence of impropriety when giving gifts to, or receiving from, individuals who do business or seeking to do business with HarmonyCares, staff may never use or allow gifts or other incentives to improperly influence relationships or business outcomes. Company policy provides for limited situations where gifts may be provided to, or received from, business partners. Perishable or consumable gifts that can be shared with team members are allowable and are not subject to any specific dollar limitation. However, such gifts should not be received from the same business partner more than twice annually. Refer to company policy for other specific details on the frequency, amount, and types of gifts that are permissible.

Gifts are further guided by our policies and procedures. Address questions about gifts to the Compliance Department.

**Policy on Policies and Standards**

HarmonyCares follows a specific protocol to write, revise, approve and implement policies and procedures. All team members are encouraged to provide input on our standards.

Individuals that are subject to each policy are required to comply or be subject to progressive discipline and engage in required training, testing and acknowledgement (where applicable) within communicated timelines.

**Code Violations**

Any team member that violates the Code of Conduct is subject to the appropriate level of disciplinary action, including possible termination of employment or services. All suspected violations are treated with discretion and the appropriate outcome is determined based on the facts and circumstances of the specific situation.



## CONCLUSION

Thank you for doing your part to make the best choices for yourself and the company!

Your responsibility to comply with the Compliance and Ethics Program and the Code of Conduct are critical to the success of the company.

**Make the Best Choices. Choose to:**

- Provide high quality care and services to our patients
- Act with integrity and take personal responsibility
- Be compassionate, professional and courteous in your interactions with patients, family members and team members
- Study this Code of Conduct and comply with its requirements
- Follow company policy and procedures and state and federal regulations that guide our business
- Complete required training that provides you with important guidance for your job
- Report **any situation** that you feel may be illegal, unprofessional, unethical or wrong

Remember you may reach out to the Compliance Department at any time for assistance or guidance by calling 1-800-609-9783 (available 24 hours, 7 days a week) OR emailing [speakup@harmonycares.com](mailto:speakup@harmonycares.com). Please visit the Compliance Page on the company intranet for additional details and resources.