

compliance

MERCY
Hospital

integrity

CODE OF CONDUCT

ACTION

compliance is integrity in action

Corporate Integrity Hotline
1-877-Mercy-HL (1-877-637-2945)

Letter from the
President & CEO

Dear Associate,

You are about to read a very important document. This Code of Conduct Handbook consists of basic standards and principles that apply to all of us who work here or are affiliated with Mercy Hospital. I will live by this Code and trust and expect that each of you will as well.

This Handbook has been designed to show each of us how our Core Values and standards of ethics and business go hand-in-hand. We hope this Handbook will serve as your guide to understanding the complex legal and business ethical issues we face every day, and how commitment to our Core Values can guide us in dealing with these issues and in our interpersonal and business relationships.

This Handbook is being given to every Mercy Hospital associate because we need each other's help to continue to meet our mission and to continue to fulfill our commitment to our Core Values. In order to do that, we must report concerns that we may have. Generally, using the supervisory chain by contacting your supervisor or manager should be the first step. There may be occasions, however, when that may not be appropriate or possible. For those occasions, we have established a compliance hotline. Information about the hotline and the hotline number can be found in this Handbook.

Compliance means doing the right thing, not just obeying the letter of the law. With that in mind, I urge all of you to join me in actively embracing our compliance program to ensure that when it comes to our patients and the people that we serve, we always do what's right.

Thank you for your part in making Mercy Hospital an organization in which we can all be proud.



A handwritten signature in black ink, appearing to read "John C. Johnson". The signature is fluid and cursive, with a long horizontal flourish extending to the right.

John C. Johnson
President & CEO

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(Revised November 2008)

Mission Statement

In witness of Jesus' healing mission, Mercy Hospital strives to improve the well being of those served through a health care delivery system designed to promote wellness and cure illness. As a ministry of the Roman Catholic Church and a member of Catholic Health East, we are committed to being a transforming, healing presence within our community.

Adopting the spirit of the Sisters of St. Joseph in "working to achieve unity of neighbor with neighbor and neighbor with God," we attest to the value of human life in all its cycles. This is done through respect for the unborn and recognition of the transcendent meaning of suffering and death by combining professional excellence with a compassionate concern for the whole person.

We seek to understand and respond to the needs of our community through collaboration with others that share a common mission and vision. With attention to fiscal responsibility, quality services are made available and accessible to those who need them.

Core Values

COMMUNITY

We demonstrate our connectedness to each other through inclusive and compassionate relationships.

JUSTICE

We advocate for a society in which all can realize their full potential and achieve the common good.

COMMITMENT TO THOSE WHO ARE POOR

We give priority to those whom society ignores.

STEWARDSHIP

We care for and strengthen the ministry and all resources entrusted in us.

COURAGE

We dare to take the risks our faith demands of us.

INTEGRITY

We keep our word and are faithful to who we say we are.

REVERENCE

We believe that each person is a manifestation of the sacredness of life.

Corporate Compliance

PROGRAM STRUCTURE

The Corporate Compliance Program is intended to demonstrate in the clearest possible terms the absolute commitment of Mercy to the highest standards of compliance. That commitment reaches all levels at Mercy. Included are the Board of Trustees, the Director of Corporate Compliance and a Corporate Compliance Committee consisting of senior and V.P. management. All of these individuals or groups are prepared to support all employees in meeting the standards set forth in this Code.

Mercy Hospital is committed to maintaining an organizational and accountability structure which assures compliance with governmental laws, rules and regulations, and supports the Hospital's ethical standards, code of conduct and zero tolerance for fraud, abuse, and waste.

BOARD OF TRUSTEES

The overall accountability for Mercy Hospital's Corporate Compliance Program rests with the Board of Trustees.

CORPORATE COMPLIANCE OFFICER (DIRECTOR)

The Corporate Compliance Officer (Director) serves as the focal point for compliance activities at Mercy Hospital. The Corporate Compliance Officer (Director) has direct access to the President/CEO and the Chairperson of the Board of Trustees and reports regularly to the Board and its Executive Committee including, at a minimum, meeting with the Board Executive Committee on a quarterly basis and presenting an annual report at a Board of Trustees meeting.

CORPORATE COMPLIANCE COMMITTEE

The Corporate Compliance Committee is comprised of Hospital leaders from various functional areas. The Committee will make recommendations and suggestions on policies, procedures and practices pertaining to the Corporate Compliance Program. The Corporate Compliance Officer (Director) serves as Chair of this Committee.

INTEGRITY

*We keep our word and are faithful
to who we say we are.*

CODE OF CONDUCT INTRODUCTION

Mercy Hospital is committed to providing the highest-quality health care services in a lawful and ethical manner. This fundamental commitment finds expression in our Core Values. Mercy's commitment helps maintain the trust and respect of patients and the communities we serve. To reinforce and strengthen this commitment, Mercy has developed a Corporate Compliance Program to help ensure that all activities are conducted in full compliance with all applicable laws and regulations.

Government regulation of the health industry is increasingly complex. At the same time, health care fraud and abuse have become a top law-enforcement priority for both the federal and state governments. Mercy's Corporate Compliance Program was developed in response to the risks that are inherent in such a complex system. The Program was designed to assist in preventing violations of the law from occurring. Any violations that are found will be corrected, along with a thorough evaluation of any additional measures needed to prevent duplicate violations.

Mercy takes its responsibility to comply with the law very seriously and has taken steps to prevent, detect, and correct legal violations. To be successful, the Compliance Program requires the collective participation of every individual within Mercy.

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PURPOSE OF THE CODE

Our Code of Conduct, which has been adopted by the Board of Trustees of Mercy, provides guidance to all of us and assists us in carrying out our daily activities within appropriate ethical and legal standards. These standards apply to our relationships with patients, physicians, payers, subcontractors, independent contractors, vendors, consultants and one another. This Code of Conduct, which is built upon our Core Values, provides standards by which we will conduct ourselves in order to protect and promote integrity and to enhance Mercy's ability to achieve its Mission.

This Code establishes the general policies and procedures all Mercy employees must follow as a condition of employment. These policies and procedures are not meant to cover all situations. Questions as to the legality or ethics of a particular conduct in a particular situation, whether or not the situation is described within the Code of Conduct, should be submitted either to your immediate supervisor at Department Head level or above or to the Director of Corporate Compliance. As a condition of employment, every employee of Mercy is required to understand and comply fully with both the rules and approved procedures established by this Code of Conduct.

Any employee violating any provision of this Code of Conduct will be subject to disciplinary action up to and including discharge from employment. In addition, promotion of and strictly following this Code of Conduct and the Corporate Compliance Program will be one criterion used in evaluating performance. To the extent that any additional policies are set forth in any other manual, those policies shall be consistent with this Code of Conduct. In case of any inconsistency, this Code of Conduct shall govern.

To provide additional guidance, we have developed a comprehensive set of compliance policies and procedures, which may be accessed on the Compliance site of our Intranet. Those policies expand upon or supplement many of the principles discussed in this Code of Conduct.

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Quality of Care...

PATIENT CARE

The mission and vision of Mercy Hospital is to provide safe, high quality patient care services. The Performance Improvement Coordinating Council, by implementation of the performance improvement plan, strives to assure that the services provided at Mercy Hospital meet or exceed acceptable standards of both quality and patient safety and are available to those who need them within the limits of Mercy Hospital's resources.

We are committed to providing quality healthcare to our patients. We treat our patients with respect and dignity and provide care that is both necessary and appropriate. We make no unlawful distinction in the admission, transfer or discharge of patients or in the care we provide based on race, color, religion or national origin. Clinical care is based on identified patient healthcare needs, not on patient or organization economics.

Upon admission, each patient is provided with a written statement of patient rights and Joint Notice of Privacy Practices. The statement includes the rights of the patients to make decisions regarding medical care and conforms to all applicable state and federal laws. The Joint Notice provides information on how protected health information will be handled.

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 ability to pay. Provided we have the capacity and capability, anyone with an emergency medical condition is treated in an emergency situation or if the patient is in labor. We will not delay the medical screening and necessary stabilizing treatment in order to seek financial and demographic information. We do not admit, discharge or transfer patients with emergency medical conditions simply based on their ability or inability to pay or any other discriminatory factor.

Patients with emergency medical conditions are only transferred to another facility at the patient's request or if the patient's medical needs cannot be met at Mercy (e.g., we do not have the capacity or capability) and appropriate care is knowingly available at another facility. Patients are only transferred in strict compliance with state and federal EMTALA regulatory and statutory requirements.

REVERENCE

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Fraud and Abuse

Providers and suppliers have an obligation, under law, to conform to the requirements of the Medicare program. Fraud and abuse committed against the program may be prosecuted under various provisions of the United States Code and could result in the imposition of restitution, fines, and, in some instances, imprisonment. In addition, there is also a range of administrative sanctions (such as exclusion from participation in Medicare, Medicaid and other government programs) and civil monetary penalties that may be imposed when facts and circumstances warrant such action.

DEFINITION AND EXAMPLES OF FRAUD

Fraud is defined as making false statements or representations of material facts in order to obtain some benefit or payment for which no entitlement would otherwise exist. These acts may be committed either for the person's own benefit or for the benefit of some other party. In order to prove that fraud has been committed against the government, it is necessary to prove that fraudulent acts were performed knowingly, willfully, and intentionally.

Examples of fraud include, but are not limited to the following:

- Billing for services that were not furnished and/or supplies not provided;
- Altering claims forms and/or receipts in order to receive a higher payment amount; duplicating billings that includes billing both the Medicare program and the beneficiary, Medicaid, or some other insurer in an effort to receive payment greater than allowed; offering, paying, soliciting, or receiving bribes, kickbacks, or rebates, directly or indirectly, in cash or in kind, in order to induce referrals of patients or the purchase of goods or services that may be paid for by Medicare, Medicaid or other government program;
- Billing a person who has Medicare coverage for services provided to another person not eligible for Medicare coverage;
- Completing certificates of medical necessity (CMN) for patients not personally and professionally known by the provider;
- Billing procedures over a period of days when all treatment occurred during one visit (e.g., split billing schemes).

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DEFINITION AND EXAMPLES OF ABUSE

Abuse describes practices that, either directly or indirectly, result in unnecessary costs to the Medicare program. Many times abuse appears quite similar to fraud except that it is not possible to establish that abusive acts were committed knowingly, willfully, and intentionally.

Following are three standards that CMS uses when judging whether abusive acts in billing were committed against the Medicare program:

- Was it medically necessary?
- Does it conform to professionally recognized standards?
- Is it provided at a fair price?

Examples of abuse include, but are not limited to, the following:

- Charging in excess for services or supplies;
- Providing medically unnecessary services or services that do not meet professionally recognized standards;
- Billing Medicare based on a higher fee schedule than for non-Medicare patients;
- Submitting bills to Medicare that are the responsibility of other insurers under the Medicare secondary payer (MSP) regulation;

Although these types of practices may initially be categorized as abusive in nature, under certain circumstances they may develop into fraud if there is evidence that the subject was knowingly and willfully conducting an abusive practice.

COMMITMENT TO THOSE WHO ARE POOR

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Confidentiality...

PATIENT INFORMATION

We collect information about the patient's medical condition, history, medication, and family illness to provide quality care. Confidential information includes personal data maintained by Mercy such as, patient lists, medical records (clinical information) and patient financial information. We realize the sensitive nature of this information and are committed to maintaining its confidentiality. Consistent with HIPAA privacy regulations, we do not use, disclose or discuss patient-specific information with others unless it is necessary to serve the patient or required by law. If questions arise regarding an obligation to maintain the confidentiality of information or the appropriateness of releasing information, you may seek guidance from your Department Head or the Privacy Officer.

Mercy employees must never use or disclose confidential information that violates the privacy rights of patients. In accordance with our appropriate policies and procedures, which reflect HIPAA requirements, no Mercy employee, credentialed physician or other healthcare partner has a right to view or access any patient information other than that necessary to perform his or her job.

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PROPRIETARY INFORMATION

Confidential Mercy owned or operated information about Mercy's strategies and operations is a valuable asset. Confidential information includes personal data maintained by the Hospital's patient lists and clinical information, pricing and cost data, information pertaining to acquisitions, affiliations and mergers, financial data, research data, strategic plans, marketing strategies, techniques, associate lists and data maintained by the Hospital's suppliers and sub-contractor information and proprietary computer software. Every Mercy employee has an obligation to actively protect and safeguard this confidential, sensitive, and proprietary information in a manner designed to prevent the unauthorized disclosure of information. Proprietary (Mercy) information may not be disclosed to anyone without proper authorization. Keep these documents protected and secure. In the course of normal business activities, suppliers, customers, and competitors may sometimes divulge to you information that is proprietary to their business; respect these confidences.

INFORMATION SECURITY AND CONFIDENTIALITY

Although Mercy employees may use confidential information to perform their jobs, it must not be shared with others unless the individuals and/or entities have a legitimate need to know the information in order to perform their specific job duties or carry out a contractual business relationship. In order to maintain the confidentiality and integrity of information security, confidential information, should be sent through the Internet only in accordance with information security policies and procedure and in accordance with HIPAA security standards, which require, among other things, that the individual and/or entity be validated and the information be encrypted.

Maintaining the confidentiality, availability, and integrity of information (software, licensing agreements) Mercy owns or of which it is the custodian is imperative. Because so much of our clinical and business information is generated and contained within our computer systems, it is essential that each Mercy employee protect our computer systems and the information contained in them by not sharing passwords and by reviewing and adhering to our information security policies and procedures.

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If an individual's employment or contractual relationship with Mercy ends for any reason, the individual is still bound to maintain the confidentiality of information viewed, received or used during the employment or contractual business relationship with Mercy.

(Respect and Protect Confidential Information)

Examples to ensure confidentiality:

- Honor the privilege of information about our patients at Mercy by only using and sharing it according to applicable guidelines.
- Reasonably and lawfully protect the individual rights of our patients.
- Limit restricted information to only those who need to know.
- Refrain from discussing restricted/confidential information in public areas.
- Never allow others to examine, make copies of or share restricted documents or information unless it's part of a job function.

Protection of Assets...

Proper use of Mercy property, facilities, and equipment is every employee's responsibility. Use and maintain these assets with the utmost care and respect, guarding against waste and abuse. Be cost-conscious and alert to opportunities for improving performance while reducing costs. The use of Mercy's time, material, or facilities for purposes not directly related to Mercy business, or the removal or borrowing of Mercy property without permission, is prohibited.

ELECTRONIC MEDIA

All communications systems, including but not limited to electronic mail, Intranet, Internet access, telephones, and voice mail, are the property of Mercy and are to be used primarily for business purposes in accordance with electronic communications policies, and standards. Users of computer

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and telephone systems should presume no expectation of privacy in anything they create, store, send, or receive on the computer and telephone systems, and Mercy reserves the right to monitor and/or access communications usage and content consistent with our policies and procedures.

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

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

All employees are responsible for complying with requirements of software copyright licenses related to software packages used in fulfilling job requirements.

Mercy's assets are to be maintained for business related purposes. As a general rule, the personal use of a Mercy asset without prior supervisory approval is prohibited. Any community or charitable use of Mercy's resources must be approved in advance by a supervisor. Any use of Mercy's resources for personal financial gain unrelated to Mercy's business is prohibited.

INTELLECTUAL PROPERTY RIGHTS AND OBLIGATIONS

Any work of authorship, invention, or other creation ("Development") created by an employee during the scope of the his/her employment with Mercy shall be considered the property of Mercy, including any patent, trademark, copyright, trade secret or other intellectual property right in the Development. Whether something is developed during the scope of an employee's employment depends on a number of factors, including: the nature of the employee's work, whether the Development is related to Mercy's business, whether the employee was directed to produce the Development as part of the employee's work, whether the employee utilized Mercy's intellectual property or resources at least in part to make the Development, and whether the employee created the Development while being paid by Mercy. If any Development created is copyrightable, then it will be considered a "Work for Hire" under the United States Copyright Act, with Mercy being considered to be the author and owner of such work.

When creating Developments for Mercy, employees shall respect the intellectual property rights of others. Any works or inventions created by employees prior to employment by Mercy shall be disclosed to Mercy upon commencement of employment, and management and Legal Department approval shall be obtained prior to any use of these works or inventions in a Development for Mercy. Notwithstanding the foregoing, Mercy shall have the right to deviate from this requirement under such circumstances as shall be clearly delineated in contractual language.

COURAGE

We dare to take the risks our faith demands of us.

Business Courtesies...

GENERAL

This part of the Code of Conduct should not be considered in any way as an encouragement to make, solicit, or receive any type of entertainment or gift. For purposes of clarification, please note that these limitations govern activities with those outside of Mercy. This section does not pertain to actions between Mercy and its employees or actions among Mercy employees themselves.

It is critical to avoid the appearance of wrong-doing when giving gifts to individuals who do business or are seeking to do business with Mercy. It is not acceptable to use gifts or other incentives to improperly influence relationships or business outcomes. Gifts to business employees who are not government employees must not exceed in cash or kind \$100 per year per recipient. Any gifts, in cash or kind to Medicare or Medicaid beneficiaries must not exceed nominal value of \$10 per item and \$50 in aggregate per patient total per year.

Any entertainment or gift involving physicians or other persons who are in a position to refer patients to Mercy facilities must be undertaken in accordance with corporate policies, which have been developed consistent with federal and state laws, regulations, and rules regarding these practices. Mercy employees must consult Mercy policies prior to extending any business courtesy to a potential referral source. Guidance is always available from the Corporate Compliance Department.

If a vendor wishes to present a monetary gift, he/she should be referred to the Appropriate Department Head. To the extent possible, these gifts should be shared with the employees' co-workers.

Nothing in this Code prohibits the establishment of stricter rules relating to the acceptance of gifts, gratuities or other things of value from vendors.

We recognize there will be times when a current or potential business associate, including a potential referral source, may extend an invitation to attend a social event in order to further develop a business relationship. Such invitations may be accepted provided:

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1. The cost associated with the event is reasonable and appropriate (please consult the "Gifts, Conflict of Interest and Relationships with Vendors" policy and procedure for monetary limitations).
2. The cost must not include expenses paid for travel cost (other than in a vehicle owned privately or by the host entity) or overnight lodging.
3. Such Events are infrequent which means they occur no more than 4 times per year.
4. Topics of business nature must be discussed and the host must be present

Prior to accepting invitations to training and educational opportunities that include travel and overnight accommodations at reduced or no cost to you or Mercy, consult our policies and seek appropriate approvals.

A perishable or consumable gift that is given to a department is generally acceptable. In these cases, appropriateness should guide acceptance.

GIFTS AND GRATUITIES

1) Employees are prohibited from accepting excessive gifts, meals, expensive entertainment or other offers of goods or services, and 2) Employees may not accept a gift that exceeds the monetary value described in Mercy's "Gifts, Conflict of Interest and Relationships with Vendors" policy and procedure from any individual or organization who has a business relationship with the Hospital. For purposes of this section, physicians are considered to have such a relationship.

Acceptance of cash or financial instruments (e.g., checks, stocks) from patients and/or their families, vendors, or any other persons or entities other than Mercy Hospital is strictly prohibited.

Gifts Influencing Decision Making. Mercy employees are not permitted to accept gifts, favors, services, entertainment or other things of value to the extent that decision making or actions affecting Mercy might be influenced. Also, the offer or giving of money, services or other things of value with the expectation of influencing the judgment or decision-making process of any purchaser, supplier, customer, physician, government official or other person by Mercy is strictly prohibited. Any such conduct must be reported immediately to your manager, the Director of Corporate Compliance, Human Resources and/or the Compliance Hotline.

REVERENCE

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BUSINESS INDUCEMENTS

We acknowledge that the entities with which we do business may be entitled to appropriate commissions, rebates, discounts and allowances. Any such payments must be approved by Mercy and determined by Mercy Hospital to be customary and acceptable and not an illegal or unethical payment. Such payments must be reasonable in value. Offering, giving, soliciting or receiving any form of bribe or other improper payment is prohibited.

Mercy may be entitled to rebates, discounts and allowances from the entities with which it does business. All such rebates, discounts and allowances must be approved by Mercy management as being customary and acceptable and not an illegal or unethical payment.

In addition, we may provide gifts, entertainment and meals to Mercy customers, current and prospective business partners and other persons when such activities have a legitimate business purpose, are reasonable, and consistent with all applicable laws. If you have a question or concern regarding whether a specific gift or type of entertainment has a legitimate business purpose and is reasonable and consistent with all applicable laws, please contact your Department Head or the Director of Corporate Compliance.

GOVERNMENT PERSONNEL

(This section applies to both foreign and domestic government officials.)

At times, Mercy may ask employees to make personal contact with government officials or to write letters to present our position on specific issues. In addition, it is a part of the role of Mercy employees to interface on a regular basis with government officials. If making these communications on behalf of Mercy, be familiar with any regulatory constraints and observe them. Guidance is always available from the Corporate Compliance Department.

Federal, state and local government departments and agencies are governed by laws and regulations concerning acceptance by their employees of entertainment, meals, gifts, gratuities, and other things of value from firms and persons with whom those departments and agencies do business or over whom they have regulatory authority. It is the policy of Mercy Hospital to strictly comply with those laws and regulations.

STEWARDSHIP

*We care for and strengthen the ministry
and all resources entrusted to us.*

Permissible exceptions are offering Mercy advertising or promotional items of nominal value such as a coffee mug, calendar or similar item displaying the Mercy logo, and providing modest refreshments such as soft drinks, coffee, and donuts on an occasional basis in connection with business activities. "Nominal value" is \$10 or less.

Political Activities and Contributions...

Mercy has many contacts and dealings with governmental bodies and officials. All such contacts and transactions shall be conducted in an honest and ethical manner. Any attempt to influence the decision-making process of governmental bodies or officials by an improper offer of any benefit is strictly prohibited. Any requests or demands by any governmental representative for any improper benefit should be immediately reported to the Director of Corporate Compliance.

It is important to separate personal and corporate political activities in order to comply with appropriate rules and regulations relating to political activities. Mercy employees may, of course, participate in the political process on their own time and at their own expense. While doing so, it is important not to give the impression that they are speaking on behalf of or representing Mercy in these activities. Mercy employees cannot seek to be reimbursed by Mercy for any personal contribution for such purposes.

Mercy employees are not permitted to make any agreements to contribute any money, property or services of any officer or associate at Mercy's expense. Mercy expects each of its employees to refrain from engaging in activity that may jeopardize the tax-exempt status of the organization, including lobbying and political activities such as contributing or donating funds, products, services or other resources of Mercy to any political party or candidate.

Mercy's political participation is limited by law. Mercy funds or resources are not to be used to contribute to political campaigns or for gifts or payments to any political party or any of the affiliated organizations. Such resources include financial and non-financial donations such as using work time and telephones to solicit for a political cause or candidate or the loaning of Mercy property for use in the political campaign.

COMMITMENT TO THOSE WHO ARE POOR

We give priority to those whom society ignores.

Conflicts of Interest...

GENERAL

Department Heads and other management personnel, Medical staff, employees involved with strategic planning and other key employees owe a duty of undivided and unqualified loyalty to Mercy. Persons holding such positions may not use their position to profit personally or to assist others in profiting in any way at the expense of Mercy. (Please refer to Mercy Hospital Conflict of Interest Policy for further guidance.)

A conflict of interest may occur if outside activities or personal interests influence or appear to influence the ability to make objective decisions in the course of job responsibilities. It is important to know that appearances are also important. When it comes to conflict of interest, it must be remembered that our success depends on how we are perceived by others. A conflict of interest may also exist if the demands of any outside activities hinder or distract you from the performance of your job or cause the use of Hospital resources for other than Hospital purposes. Any questions about whether an outside activity might be or appear to be a conflict of interest should be directed to your Department Head or the Director of Corporate Compliance or Vice President of Human Resources prior to pursuing the activity.

Mercy employees are expected to act with integrity, honesty, and fairness and to avoid any conflict, or appearance of conflict, between personal interests and the interests of Mercy.

COURAGE

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our faith demands of us.*

It is the policy of Mercy to:

- Graciously decline any offers of money from patients, their families, visitors and others, which are not intended for benefit of Mercy Hospital.
- Not to provide, or appear to provide, payment or other benefits for referral of patients.
- Ensure that no employee is in a position to affect the work, pay or promotion of his/her relative.
- Use discretion in the giving or receiving of meals, refreshments, entertainment and/or gifts from patients, visitors, business associates or their representatives. Lavish, extravagant or frequent gifts are not acceptable.
- Obtain written authorization from the Corporate Compliance Office for the placement of business with any firm, which may result, or appear to result, in the personal gain of an agent of Mercy Hospital.

AVOIDING CONFLICTS OF INTEREST

Playing favorites or having conflicts of interest – in practice or in appearance runs counter to the fair treatment to which we are all entitled. Avoid any relationship, influence, or activity that might impair, or even appear to impair, your ability to make objective and fair decisions when performing your job. When in doubt, share the facts of the situation with your supervisor, Vice President of Human Resources, or Director of Corporate Compliance.

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Here are some ways a conflict of interest could arise:

- Employment by a competitor or potential competitor, regardless of the nature of the employment, while employed by Mercy.
- Acceptance of gifts, payment, or services from those seeking to do business with Mercy.
- Placement of business with a firm owned or controlled by an employee or his/her family.
- Ownership of, or substantial interest in, a company which is a competitor or a supplier.
- Acting as a consultant to a Mercy competitor, customer or supplier.

PHYSICIAN RELATIONSHIPS

It is important that those employees who interact with physicians, particularly regarding making payments to physicians for services rendered, leasing space, recruiting physicians to the community, and arranging for physicians to serve in leadership positions in facilities, are aware of the requirements of the laws, regulations and policies that address relationships between facilities and physicians.

Any business arrangement with a physician must be structured to ensure compliance with legal requirements, our policies and procedures and with any operational guidance that has been issued by Catholic Health East (CHE) or Mercy Hospital Corporate Counsel. All arrangements must be in writing and approved by the Compliance Department.

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

We do not accept payments for referrals we make. No Mercy employee or any other person acting on behalf of the organization is permitted to solicit or receive anything of value, directly or indirectly, in exchange for the referral of patients. Similarly, when making patient referrals, we are not allowed to receive any payment in cash or kind for patient referrals.

JUSTICE

We advocate for a society in which all can realize their full potential and achieve the common good.

SUBCONTRACTORS AND SUPPLIERS RELATIONSHIPS

We must manage our subcontractor and supplier relationships in a fair and reasonable manner, free from conflicts of interest and consistent with all applicable laws and good business practices. Our selection of subcontractors, suppliers, and vendors will be made on the basis of objective criteria including quality, technical excellence, price, delivery, adherence to schedules, service, and maintenance of adequate sources of supply. Our purchasing decisions will be made on the supplier's ability to meet our needs, and not on personal relationships and friendships. We employ the highest ethical standards in business practices in source selection, negotiation, determination of contract awards, and the administration of all purchasing activities.

Mercy will manage subcontractor and supplier relationships in a fair and reasonable manner, consistent with all applicable laws and good business practices. Competitive procurement is promoted to the maximum extent practical including participation in a Group Purchasing Organization (GPO).



Ineligible Persons...

It is the policy of Mercy not to 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. These individuals, companies, or groups are not eligible to do business with or be employed by Mercy. In order to ensure safeguards, Mercy performs General Service Administration checks (GSA) and Office of The Inspector General (OIG) checks upon contracting or hiring and annually as per policy.

Employees, vendors, and credentialed practitioners at one or more Mercy facilities are required to report to Mercy if they become excluded, debarred, or ineligible to participate in Federal healthcare programs or have been convicted of a criminal offense related to the provision of healthcare items or services.

(Please refer to employing sanction individuals, vendor sanction, and/or medical staff sanction policies for further guidance)

COMMUNITY

We demonstrate our connectedness to each other through inclusive and compassionate relationships.

Marketing Practices...

ANTI-TRUST

Anti-Trust laws are designed to create a level playing field in the marketplace and to promote fair competition. These laws could be violated by discussing Mercy business with a competitor, such as how prices are set, disclosing the terms of supplier relationships or agreeing with a competitor to refuse to deal with a supplier. At associations or other outside meetings, employees should be alert to potential situations where it may not be appropriate to participate in discussions regarding prohibited subjects with competitors. Prohibited subjects include any aspect of pricing, Mercy services in the market, key costs such as labor costs, and marketing plans.

It is not unusual to obtain information about other organizations, including competitors, through legal and ethical means such as public documents, public presentations, journal and magazine articles, and other published and spoken information. However, it is not acceptable to obtain proprietary or confidential information when doing so would require anyone to violate a contractual agreement, such as a confidentiality agreement with a prior employer.

Marketing and advertising activities to educate the public, provide information to the community, increase awareness of our services and to recruit employees may be utilized. Marketing materials and media announcements are to be presented in a truthful, fully informative, and non-deceptive manner.

Conducting Research...

Mercy complies with federal and state laws and regulations in any research, investigations and clinical trials conducted by our physicians and professional staff. Research misconduct includes making up or changing results or copying results from other studies without performing the clinical investigation or research. Our hospital protects the patients and respects their rights during research, investigations, and clinical trials.

Any Mercy facility or employees engaging in human subject research must do so with the approval of the Mercy Hospital Institutional Review Board (IRB) and consistent with Mercy policies regarding human subject research and IRB's. All research at Mercy must be reviewed by the IRB or the Nursing Research Committee (NRC).

REVERENCE

*We believe that each person is a
manifestation of the sacredness of life.*

(Employees and Affiliates must follow the standards for ethical research)

It is the policy of Mercy to:

- Conduct all research in compliance with accepted ethical and legal standards, including the accurate collection, analysis and reporting of data.
- Promptly report and resolve all research-related conflicts.
- Responsibly administer funds from research grants and contracts in accordance with applicable regulations.
- Ensure fair and equal access to research protocols without discrimination while protecting the individual's right to refuse, agree to, or withdraw from participation in a study.
- Not bill the patient or third party payer for the costs of research-related tests, procedures and treatments, which are paid by a study sponsor. Promptly correct any errors in billing and refund any duplicate payments.

Financial Reporting and Records...

Mercy has established and maintained a high level of accuracy and completeness in the documentation and reporting of its financial records. These records serve as a basis for managing of business and are important in meeting our obligations to patients, employees, suppliers and others. They are also necessary for compliance with tax and financial reporting requirements.

All financial information must reflect actual transactions and conform to generally accepted accounting principles. No undisclosed or unrecorded funds or assets may be established. Mercy maintains a system of internal controls to provide reasonable assurances that all transactions are executed in accordance with management's authorization and are recorded in a proper manner so as to maintain accountability of the Hospital's assets.

STEWARDSHIP

*We care for and strengthen the ministry
and all resources entrusted to us.*

At Mercy, we are required by federal and state laws and regulations to submit certain reports of our operating costs and statistics. The compliance with federal and state laws, regulations, and guidelines relating to all cost reports is essential. These laws, regulations, and guidelines define what costs are allowable and outline the appropriate method used to claim reimbursement for the cost of services provided to program beneficiaries. Mercy policies address cost report compliance and articulate our commitment by: providing corporate and departmental policies and procedures; providing effective and timely education and training programs for Reimbursement Department personnel regarding federal and state laws, regulations and guidelines, and corporate policies; maintaining a standardized work paper package to provide consistency in the preparation, organization, presentation, and review of cost reports; applying a uniform cost report review process; identifying and excluding non-allowable costs; adhering to documentation standards; and using transmittal letters to report protested items and make other appropriate disclosures. Additionally, submission of the cost reports process to internal audits and a peer review process further demonstrates our commitment to compliance.

All issues related to the preparation, submission and settlement of cost reports must be performed by or coordinated with our Finance Department. Mercy employees in this area or impacted by this area must seek clarification when needed in order to assure continued compliance. In addition, Mercy's Finance Department employees must comply with applicable auditing, accounting, and financial disclosure laws. As part of Mercy's open door policy employees are encouraged to discuss issues of concern with their Department Head. Anyone having concerns regarding questionable accounting or auditing matters are required to report such matters to their Department Head or to Corporate Compliance.

Record Keeping...

Record keeping should honestly and accurately document our actions. Mercy has many kinds of records, beyond the patient's chart. It is not possible to list the rules that apply to all of them. You must learn and apply the rules specific to the documents you use or create.

Each Mercy employee is responsible for the integrity and accuracy of documents and records, not only to comply with regulatory and legal requirements but also to ensure records are available to support our business practices and actions. No one may alter or falsify information on any record or document. Records must never be destroyed in an effort to deny governmental authorities that which may be relevant to a government investigation.

COMMITMENT TO THOSE WHO ARE POOR

We give priority to those whom society ignores.

Medical and business documents include paper documents such as letters and memos, computer-based information such as e-mail or computer files on disk or tape, radiology films and any other medium that contains information about patient care, the organization or its business activities. It is important to retain and destroy records only according to our policy. Mercy employees must not tamper with records. Additionally, no one may remove or destroy records prior to the specified date without first obtaining permission as outlined in the Mercy record retention policy.

These common rules apply to all documents:

- Do not falsify facts or make false records
- Create only those records that are necessary and required by law
- Only give records, with proper authorization, to people who have a legal "right to know" the information.
- Preserve patient confidentiality and only use records for their intended purpose
- Keep records as long as the law requires, depending on the type of record
- Dispose of records in accordance with our record retention policy.

Coding and Billing...

At Mercy policies, procedures, and systems to facilitate accurate billing to government payer, commercial insurance payers, and patients have been implemented. These policies, procedures and systems conform to pertinent federal and state laws and regulations. Mercy employees or agents are prohibited from knowingly presenting, or causing to be presented, claims for payment or approval, which are false, fictitious, or fraudulent.

In support of accurate billing, medical records must provide reliable documentation of the services rendered. It is important that all individuals who contribute to medical records provide accurate information and do not destroy any information considered part of the official medical record.

COURAGE

*We dare to take the risks
our faith demands of us.*

Accurate and timely documentation also depends on the diligence and attention of physicians who treat patients in our facilities. Physicians must provide us with complete and accurate information in a timely manner.

Any subcontractor engaged to perform billing or coding services is expected to have the necessary skills, quality control processes, systems, and appropriate procedures to ensure all billings for government, commercial insurance, and self-pay programs are accurate and complete.

In accordance with our Corporate Compliance program all billing and coding activities are subject to review and audit by Compliance.

CODING AND BILLING GUIDELINES

Some examples to ensure accurate coding, billing, and collection practices:

- Use codes that accurately describe the services that were ordered by physicians or physician extenders and actually provided to patients.
- Submit bills for payment that are properly coded, documented, and billed in accordance with all applicable laws and regulations.
- Do not submit claims for payment or reimbursement of any kind that are fraudulent, abusive, inaccurate or medically unnecessary.
- In the event a billing error is discovered immediate action must be taken to correct the error, alert the payer and promptly refund any payments not due to Mercy.
- Maintain honest and accurate records of all services provided to patients.
- All medical information must be properly documented in patient records and complies with medical necessity requirements.
- Ensure all diagnoses or clinical indications used for billing are for the current episode of care.

INTEGRITY

*We keep our word and are faithful
to who we say we are.*

THE FALSE CLAIMS ACT — A FEDERAL LAW THAT PROTECTS WHISTLE-BLOWERS

The federal False Claims Act (31 USC 3 729-33) 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 where the government would not pay.

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. The State of Florida has a False Claims Act that allows 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 and State of Florida False Claims Act. The penalty can be up to three times the value of the False Claim, plus from \$5,500 to \$11,000 in fines, per claim with the federal law and \$5000 to \$10,000 in fines per claim with State of Florida Law.

Whistle-blowers protections. The State of Florida and federal False Claims Acts protect 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 must file a lawsuit against their employer in Federal or State Court (as appropriate). In the case of federal law, 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. In the case of State Law, if the employer retaliated, the court can order the employer to reinstate the employee to the same or equivalent position he/she held, and pay the employee back pay and attorney’s fees.

JUSTICE

We advocate for a society in which all can realize their full potential and achieve the common good.

Our Policy

- Mercy Hospital expects that our employees who are involved with creating and filing claims for payment for services that we provide will only use true, complete and accurate information to make the claim.
- Mercy Hospital expects that anyone with a concern about a possible False Claim at a Mercy Hospital facility will use the Reporting Process immediately so that Mercy Hospital can investigate and correct any errors.
- Mercy Hospital's policy on non-retaliation protects our associates from adverse action when they do the right thing and report any genuine concern.
- Mercy Hospital will investigate any allegation of retaliation against an employee for speaking up, and will protect and/or restore rights to anyone who raised a genuine concern.

Our Promise. Our employees work hard to ensure that every claim for payment for the care we provide is correct and accurate, so that we do not violate the law, or break the trust we maintain with our patients and communities.

Internal Investigations of Reported Violations...

Mercy will investigate all reported concerns promptly and confidentially to the extent possible. The Corporate Compliance Office will coordinate any findings from the investigations and recommend corrective action or changes that need to be made consistent with this Code, Mercy policies and applicable laws, and regulations. All employees are expected to cooperate with audits, investigations and monitoring/corrective action plans.

Where an internal investigation substantiates a reported violation, it is the policy of Mercy Hospital to initiate corrective action, including, as appropriate, making prompt restitution of any confirmed overpayment amounts, notifying the appropriate governmental agency, instituting whatever disciplinary action is necessary, and implementing systematic changes to prevent a similar violation from recurring in the future at Mercy. All violators of the Code will be subject to disciplinary action. The precise discipline utilized will depend on the nature, severity and frequency of the violation and may result in any of the following disciplinary actions: **verbal or written corrective action, suspension or termination.**

COMMUNITY

We demonstrate our connectedness to each other through inclusive and compassionate relationships.

AUDIT AND MONITORING

Mercy is committed to the aggressive monitoring of compliance with its policies. Much of this monitoring effort is provided by the Corporate Compliance Department and Internal Audit, which routinely conducts internal audits of issues that have regulatory or compliance implications. Mercy also routinely seeks other means of ensuring and demonstrating compliance with laws, regulations, and Mercy policy.

GOVERNMENT INVESTIGATIONS

Mercy complies with the law and cooperates with any reasonable demand made in a government investigation. It is imperative, however, that we protect the rights of the Hospital and its personnel. If any employee receives an inquiry, a subpoena or other legal document regarding the Hospital's business, he/she immediately contacts his/her Department Head.

Sometimes it is difficult to tell when a routine government inquiry, audit, or review may escalate into a more formal and serious governmental investigation. We rely on the common sense and alertness of our employees to inform the Director of Corporate Compliance regarding the initiation of any governmental investigation.

Accordingly, if this process is followed, Mercy may then, on a case by case basis, determine its specific plan of response/action. The specific process by which Mercy normally handles governmental investigations and searches is set forth in the Governmental Investigations Policy.

As a general rule, it is a crime to obstruct an agent in the lawful exercise of his/her duties, including the exercise of a valid search warrant. Some other examples of unlawful behavior are altering or destroying documents sought in an investigation and falsely denying knowledge of information. If you notice any employees engaging in any prohibited conduct such as described previously, please immediately call the Corporate Compliance Department or the Compliance Hotline.

If you have concerns about any governmental investigation, you may contact your Department Head, the Hospital Administration or the Administrator On Call, via the hospital operator, or the Director of Corporate Compliance. You may contact the Director of Corporate Compliance directly or call the Corporate Compliance Hotline 1-877-Mercy-HL. Calls to the Hotline will be treated confidentiality and may, at the caller's request, be anonymous.

REVERENCE

We believe that each person is a manifestation of the sacredness of life.

Workplace General Environment...

GENERAL HARASSMENT

Every employee has the right to work in an environment free of unlawful harassment, abusive, threatening or intimidating behavior and discriminatory retaliation. Unlawful employment discrimination and harassment based on race, color, religion, national origin, age, gender, disability, marital status and sexual orientation is unacceptable, and therefore, prohibited. Mercy has a zero tolerance policy for unlawful harassment. Degrading, derogatory, humiliating remarks, comments, jokes, and slurs are considered inappropriate behavior and are not permitted at Mercy.

SEXUAL HARASSMENT

Unlawful sexual harassment is a violation of Hospital policy and prohibited. This prohibition includes unwelcome sexual advances or requests for sexual favors and other verbal or physical conduct of a sexual nature which occur when: (1) submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment; (2) submission to or rejection of such conduct by an individual is used as the basis for employment decisions affecting the individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creates an offensive, intimidating or threatening work environment. Sexual advances, requests for sexual favors or sexual propositions are examples of potentially harassing behavior.

DISCRIMINATION

Fair and equitable treatment of all employees, patients, and other persons is critical to fulfilling the mission and goals of Mercy. Patients are to be treated without regard to race, color, religion, gender, ethnic origin, age, disability, payer source or any other classification prohibited by law.

Mercy hires, recruits, trains, promotes, assigns, transfers, lays off and terminates employees based on such factors as their own ability, achievement, experience, and conduct without regard to race, color, religion, sex, ethnic origin, age or disability or any other classification prohibited by law.

Mercy does not discriminate against any individual with a disability with respect to any offer or term or condition of employment. We will make reasonable accommodations to the known physical or mental limitations of otherwise qualified individuals with disabilities.

STEWARDSHIP

*We care for and strengthen the ministry
and all resources entrusted to us.*

DISRUPTIVE BEHAVIOR

Disruptive behavior in the workplace can have a negative affect on Hospital operations and patient care. It impacts on the Hospital's ability to provide quality and safe healthcare to patients, staff relations, productivity and performance of the Hospital workforce.

Hospital Workforce is defined as and includes: members of the Hospital's Board of Trustees, Hospital Sponsors, senior executive staff, leadership team members, employed physicians, members of the medical staff, licensed independent practitioners, core staff members, contingency staff (contract labor and service personnel such as traveling nurses, agency personnel, outsourced service personnel, consultants and independent contractors, suppliers and vendors), and volunteers.

Disruptive Behavior is defined as conduct by a member of the Hospital workforce with another member or members of the workforce or with others at the Hospital (patients, family members, etc.) that is determined by the Hospital to be unacceptable, undesirable and unwelcome. This includes but not limited to behavior that is unprofessional, inappropriate, rude, disrespectful, intimidating, threatening or harassing conduct that may interrupt or interfere with the Hospital's ability to provide quality and safety of patient care or Hospital operations; tends to lead to disorder, disharmony, dissatisfaction and distress among others at the Hospital; has a detrimental or negative effect on the image and reputation of the organization or adverse impact on staff relations, collaborative teamwork, effective communications, productivity and/or the performance of a member or members of the Hospital workforce or the overall morale of those who work at Mercy Hospital.

Mercy Hospital expects its entire workforce to engage in conduct that consistently conforms to conventional workplace etiquette. This includes but is not limited to consistently conducting oneself in an appropriate, professional and cordial manner and treating everyone with respect, courtesy and with dignity in all interactions and communications.

When a conflict arises, members of the Hospital workforce are expected to resolve issues and concerns effectively with the use of effective communication, problem resolution and conflict management skills. Any person working at Mercy Hospital who personally observes, witnesses or otherwise becomes aware of another person engaging in an incident or pattern of disruptive behavior is expected to promptly report the concern to his or her immediate supervisor, director or senior administrator, Manager of Employment and Employee Relations, Vice President of Human Resource Management or to the Corporate Compliance Hotline.

COMMITMENT TO THOSE WHO ARE POOR

We give priority to those whom society ignores.

DRUG FREE WORKPLACE

At Mercy we are committed to maintaining a drug free workplace. Drugs and other substances that may compromise an employee's fitness for duty or impair his or her your performance or the inappropriate or illegal use of drugs or other substances are strictly prohibited. It is the policy of Mercy to subject those individuals that are reasonably suspected to be under the influence of drugs or other substances or to have violated the Hospital's Substance Abuse Policy to a fitness for duty drug test. Failure to comply is grounds for termination. For these reasons, the unlawful, unauthorized or inappropriate manufacture, access, distribution, dispensation, possession use or sale of a controlled substance, legal or illegal drug or other substance is strictly prohibited. Employees are expected to report to work fit for duty and not in any manner impaired while performing the duties and responsibilities of the job.

Personal Obligations to Report...

We are committed to ethical and legal conduct that is compliant with all relevant laws and regulations and to correcting wrongdoing wherever it may occur at Mercy. Each employee has an individual responsibility for reporting any activity by any employee, physician, subcontractor or vendor that appears to violate applicable laws, rules, regulations, accreditation standards, federal healthcare conditions of participation or this Code. If a matter that poses serious compliance risk to the organization or that involves a serious issue of medical necessity, clinical outcomes or patient safety is reported, and if the reporting individual doubts that the issue has been given sufficient or appropriate attention, the individual should report the matter to higher levels of management or the Compliance Hotline until satisfied that the full importance of the matter has been recognized and addressed.

COURAGE

*We dare to take the risks
our faith demands of us.*

Resources for Guidance and Reporting Concerns...

To obtain guidance on a compliance issue or to report a concern, individuals may choose from several options. Mercy encourages the resolution of issues, including human resources related issues (e.g., payroll, fair treatment and disciplinary issues), through the proper channels.

Mercy makes every effort to maintain, within the limits of the law, the confidentiality of the identity of any individual who reports concerns or possible misconduct. Consistent with our Core Values there is a non-retaliation policy protecting anyone who reports a concern in good faith.



WHEN YOU BELIEVE THERE MAY BE A PROBLEM OR HAVE A PROBLEM...

- 1)** You may contact your Corporate Compliance Office at (305) 860-4675, (internally)ext. 4675.
- 2)** Visit the Compliance Intranet site Frequently Asked Questions or stop by the Compliance Office.
- 3)** Call the Compliance Hotline at 1-877-MERCY-HL.

This Hotline is completely confidential and is available 24 hours a day, 7 days a week.

WARNING SIGNS...

YOU ARE ON THIN COMPLIANCE ICE WHEN YOU HEAR:

- "Well, maybe just this once..."
- "No one will ever know..."
- "It doesn't matter how it gets done as long as it gets done."
- "It sounds too good to be true."
- "Everyone does it."
- "Shred that document."
- "We can hide it."
- "No one will get hurt."
- "What's in it for me?"
- "This will destroy the competition."
- "We didn't have this conversation."
- "We have always done it that way."

ACKNOWLEDGEMENT PROCESS

Mercy requires all employees to sign an acknowledgment confirming they have received the Code, understand it represents mandatory policies of Mercy and agree to abide by it. New employees are required to sign this acknowledgment as a condition of employment. Each Mercy employee is also required to participate in annual compliance training.

Adherence to and support of Mercy's Code of Conduct and participation in related activities and training is considered in decisions regarding hiring, promotion, and compensation for all candidates and employees.



RECEIPT AND ACKNOWLEDGMENT

I acknowledge that I have received my personal copy of Mercy Hospital's Code of Conduct (THE CODE). I understand that I am responsible for knowing and following it. I also understand that I am responsible for reporting any violations of The CODE to the appropriate management representative, Human Resources, or Corporate Compliance Department or Hotline (1-877-MERCY-HL).

Signature: _____

Print Name: _____

Department: _____

Date: _____

MERCY
Hospital

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