

# Code of Conduct

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**Excelin Health, LLC**

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# Letter from our CEO

Alicia Marr, RN, BSN



## Excelin Code of Conduct Statement

Excelin Health has a strong commitment to our clients, referral partners, and communities. Our ability to deliver highly skilled, compassionate home health & hospice service across multiple states is grounded in principles of integrity, professionalism, and accountability. Our success & reputation depend heavily on this commitment. To be honest, no success is valuable if it is not achieved the right way.

At Excelin, we use the Code of Conduct to guide our daily activities. This is the cornerstone of our culture and defines the principles of our organization. As you read the Code of Conduct, be thoughtful and reflect on its meaning. I challenge you to not only practice the Code but promote it every day.

If you have any questions about the Code of Conduct, I urge you to contact your supervisor, Director of Human Resources or Compliance Officer. We want you to feel comfortable about Excelin's high ethical standards, integrity, and professionalism.

Alicia Marr,

RN, BSN

Chief Executive Officer  
Excelin Health

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# Code of Conduct

Code of business conduct & ethics.

Our proud tradition of  
doing what is fair, right, and legal.



## Introduction to the Code of Conduct

The Board and staff of Excelin Health, LLC (EH) recognize the worth, dignity, potential, and uniqueness of each individual served. While pursuing these endeavors, we will make every reasonable effort to protect the health, safety, rights, and welfare of those who seek our services, as well as the community at large. The specification of ethical standards enables the Board to clarify to current and future Board members and staff, as well as those serviced by the programs operated by the Agency, the nature of ethical responsibilities held in common by the Board, staff, and client.

This code of conduct provides guidance to all EH Board members, employees, and independent contractors and assists us in carrying out our work within ethical and legal standards. These obligations apply to our relationships with clients, care givers, affiliated physicians, third-party payors, independent contractors, vendors, consultants, and one another. This code is a critical component of EH's ethics and compliance program and was developed to ensure that we meet ethical standards and comply with applicable laws and regulations, including but not limited to Stark Laws, Anti-kickback Statute, Health Insurance Portability and Accountability Act (HIPAA), and the False Claims Act.

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## We Expect from Our Employees

### Employee Standard

The moral, ethical, and legal standards of EH staff are personal matters to the same degree as they are for any other citizen, except as to those which may compromise the fulfillment of our EH responsibilities, reduce the trust in the agency held by the public, or compromise the employment guidelines set forth in the Agency Administrative Manual procedures. We hold a position of public trust and are responsible to the communities we serve. We must be willing not only to conduct EH business conscientiously and openly, but also subject our own activities to public scrutiny. As visible representatives whose conduct directly affects the public's perception of the agency, we must adhere to high moral, ethical, and legal standards. To protect public confidence in EH, we will avoid public behavior that is clearly in violation of accepted moral and legal standards. We will conform to the rules and regulations of service provisions as outlined in the State and Federal government, and our Accreditation Programs. In providing services, we will avoid any action that may violate or diminish the legal and civil rights of clients or of others that may be affected by that action. It is the responsibility of each EH employee to preserve the organization's assets including staff time, materials, supplies, equipment, and information. Organizational assets are to be maintained and operated for business-related purposes.

We trust you to do the right thing. The Code of Conduct provides general guidance, but it is not all inclusive. This guidance is not a substitute for reading, understanding, and following healthcare laws, regulations, the EH policies and procedures, business practices, and processes. If an issue seems unclear, you should seek help from your supervisor.

If that does not clear up the matter, you should seek further assistance by reaching out to your manager, human resources, CEO, Compliance Officer, Compliance Hotline, or board until the issue is clearly resolved.

### Professional Standard

Staff members who occupy positions that require licensure or certification must possess the minimum qualifications required by law. EH staff can neither claim nor imply professional qualifications that exceed those possessed and are responsible for correcting any misrepresentation or misunderstanding of these qualifications by others. You must deliver only those services for which you are qualified. Professional growth is continuous and must be nurtured by an active training and recruitment program jointly shared by the program and the professional and demonstrates dedication to the advancement of the services we provide. Ethical behavior by EH staff is dictated by the appropriate licensing agency. When information becomes available which raises doubt regarding the ethical behavior of a professional colleague, a report must be made in accordance with the EH Compliance Plan. Colleagues and individuals retained as independent contractors in positions which require professional licensures, certifications or other credentials are responsible for maintaining the current status of their credentials and will comply at all times with Federal and State requirements applicable to their respective disciplines. To ensure compliance, EH will require current licensure. EH will not allow any staff or independent contractor to work without valid, current licenses, or credentials.

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## What We Expect from Our Leaders

As with all of the EH employees, we expect our leaders to follow this Code of Conduct. Those entrusted with leadership of EH, including all directors, managers, and supervisors, are expected to serve as an example of these standards. Leadership is expected to ensure that those on their team have sufficient information to comply with laws, regulations, and internal policies, and to make available any resources needed to resolve ethical dilemmas. Leadership is entrusted with the duty to create a culture within EH that promotes the highest standards of ethics and compliance, and this culture must encourage everyone in the organization to raise concerns when ethical issues arise. Ethical and compliance behavior will not be sacrificed in pursuit of business objectives.

## What We Expect from Our Business Partners

We require our business partners (board members, medical staff members, allied health professionals, practice employees, volunteers, contracted individuals and groups, vendors, and students, etc.) interacting with any EH entity to observe the same level of integrity, responsible business conduct, and compliance with the law as EH employees. Employees should provide such third parties with a copy of the EH Code of Conduct.

We promote competitive procurement to the maximum extent practicable. Our selection of consultants, 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.

Purchasing decisions will be based 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.

We manage our consulting, 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. EH recognizes the potential for conflict of interest in contractual relationships involving other Healthcare providers, educational institutions, and payors. All contracts are monitored for potential conflict of interest. When identified, conflicts of interest are resolved during contract negotiations.

We comply with contractual obligations not to disclose vendor confidential information unless permitted under the contract or otherwise authorized by the vendor or law.

## Relationships with Clients

### Quality of Care

We are committed to the delivery of safe, effective, efficient, compassionate, and satisfying client care. We shall provide quality care to all clients without regard to race, creed, color, sex, religion, sexual orientation, gender expression, age, disability, political affiliation, or national origin. We treat all clients with warmth, respect, and dignity, and provide care that is both necessary and appropriate. We recognize and respect the diverse backgrounds and cultures of our clients and make every effort to

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equip our caregivers with the knowledge and resources to respect each client’s cultural needs. We are committed to following all applicable policies, laws, and licensing/accreditation requirements relating to quality of care and client safety. We uphold the professional standard of care, report client safety concerns, and engage in quality improvement activities.

### Client Rights

The rights and responsibilities of clients are defined in the Administrative Policy and Procedure Manual. These procedures cover the client’s rights to access care, to considerate and respectful treatment during care, to know about and participate in decisions about their care, to participate in ethical decision making arising in the course of care, to security, personal privacy and confidentiality of information, to designate a decision when appropriate, to access protective services, and to know when their care is affected by relationships with another Healthcare organization.

EH will comply with all State and Federal laws regarding confidentiality. Should a conflict between the two arise, the more stringent law will apply. We will comply with rules, standards, and regulations promulgated by the State, Federal Government, and our Accreditation Programs. Disclosure of confidential information may only be made in accordance with HIPAA guidelines for treatment, payment, and healthcare operations (TPO), a specific consent signed by the client, a properly executed court order, or in an emergency in which failure to disclose information may present a risk to the client or others, or under exceptions allowed by State and Federal law. When a client’s condition or situation indicates that there is a clear and imminent danger to the client or others, we must take reasonable

steps to inform responsible authorities to safeguard the client and others.

### Workplace/Client Relationships

Our primary obligation is to respect the integrity and to promote the welfare of the client. We must be aware of the relationship between staff and client to avoid engaging in activities that seek to meet our personal needs at the expense of the client. EH staff will not engage in nor condone sexual harassment of clients. EH will continually strive to safeguard the individual rights and personal dignity of clients. Any EH employee aware of any situation in which harm may occur due to relationships or commitments that conflict with the interest of a client and/or EH Code of Conduct and policies must contact their supervisor immediately. All EH employees must comply with program requirements related to any activity with individuals being served. Any action taken by an EH employee that is not part of the client’s care (care plan) or treatment must be reported immediately to their supervisor. Sexual contact, not limited to sexual intercourse, between clients and EH staff is expressly prohibited. Should information be available that such contact has occurred; it will be reported in accordance with Administrative Policy and Procedure Manual procedure.

### Discharges

EH will terminate services to clients when such services are no longer required. However, we will not terminate services without appropriate discharge procedures. Services can only be terminated if the client no longer needs the services, is not benefiting from services, fails to comply with an agreed upon plan of treatment, creates an unsafe environment for EH employees, or when a client with a known ability to pay refuses to do so or fails to apply

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for a payer source, and maintain that source when eligibility is almost certain.

## Client Information

### Accuracy of Information

We keep accurate records about our clients, clinical procedures, and financial transactions. It is the responsibility of each of us, when engaged in recordkeeping on behalf of EH (including medical records and client bills), to be accurate, timely, and honest. We retain documents for the length of time described in our document retention policies.

### Research

EH may participate in research endeavors only in accordance with prior approval from the Board. We are committed to responsible conduct in research matters. Research undertaken by our physicians and professional staff is conducted within legal and ethical standards. We are committed to research integrity in disseminating appropriate, valid scientific results in accordance with applicable regulations and guidelines.

## Complying with Laws and Regulations

EH complies with the laws and regulations that govern our industry. Healthcare is a highly regulated industry with numerous laws applying to the work that we do. EH employees, Board, contractors, and sub-contractors are responsible for knowing and complying with laws that relate to the performance of their job, whether or not they are specifically addressed in this Code of Conduct. The following are

key laws and statutes in healthcare compliance that impact EH.

### Criminal Healthcare Fraud Statute

The Criminal HealthCare Fraud Statute prohibits:

(1 knowingly and willfully defrauding any healthcare benefit program; and,

(2 using false statements to obtain funds held by a Federal Healthcare Program.

### Healthcare Fraud, Waste, and Abuse (FWA)

Fraud includes obtaining a benefit through intentional misrepresentation or concealment of material facts. Waste includes incurring unnecessary costs as a result of deficient management, practices, or controls. Abuse includes excessively or improperly using government resources. EH does not condone FWA at any level.

### Billing, Coding, and Reviews

EH complies with all Federal and State regulations to properly ensure the preparation and submission of accurate and complete claims. We will not submit false, fraudulent, or misleading information to the government or any third-party payer to obtain payment for a service. We prohibit any employee, representative or subcontractor from knowingly presenting or causing to be presented claims for payment that are false, fictitious, or fraudulent. All subcontractors who perform billing or coding services must have the appropriate skills, training, quality assurance process, systems, necessary procedures, and knowledge of Federal and State regulations to ensure that all billings are correct. EH is committed to maintaining current and accurate billing.

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EH has in place policies and procedures which assure that clients are billed only for those services and care which are provided. Both internal and external auditing of accounts is conducted to verify the accuracy of client accounting procedures. As part of our documentation effort, current and accurate medical records will be maintained. EH prohibits any staff from knowingly presenting or causing to be presented claims for payment or approval that are false, fictitious, or fraudulent.

EH business involves contracts with government programs that require the submission of certain reports of operational costs. We will comply with Federal and State laws relating to all cost reports. These laws and regulations define what costs are allowable and outline the appropriate methodologies to claim reimbursement for the cost of services provided to program beneficiaries. EH will be forthright in dealing with billing inquiries. Requests for information will be answered with complete, factual, and accurate information. We will cooperate with and be courteous to all government inspectors/surveyors/visitors and provide them with the information to which they are entitled when requested and or during an inspection/survey.

We will not interfere with reviews, inspections, investigations, hearings, or related activities. This includes taking action to discourage or prevent someone else from cooperating with the activity. During a government inspection, you must never omit significant information, conceal, destroy, or alter any documents, lie, or make misleading statements to the government representative. We will not attempt to cause another colleague to fail to provide accurate information or obstruct, mislead, or delay the communication of information or records relating to a possible violation of the law.

EH will provide employees with information and education on the applicable laws and regulations.

### [False Claims Act](#)

The False Claim Act (FCA ) is a Federal law that makes it a crime for any person or organization to knowingly make a false record or file a false claim regarding any Federal Healthcare program, which includes any plan or program that provides health benefits, whether directly, through insurance or otherwise, which is funded directly, in whole or in part, by the United States Government or any state healthcare system. The definition of “knowing” includes not only actual knowledge, but also instances in which the person acted in a way that encourages ignorance or dismissal of the truth. No specific intent to defraud is required.

### [Whistleblower Provision of the False Claims Act](#)

The FCA helps to prevent fraud by those who do business with the Federal government. The FCA rewards and protects whistleblowers who expose companies, individuals, and contractors who defraud the government with respect to government funds. The filing of such a complaint is known as a qui tam.

### [Anti-Kickback Statute](#)

In some industries, it is acceptable to reward those who refer business to you. However, in the Federal Healthcare programs, paying for referrals is a crime. The law prohibits asking for or receiving anything of value in exchange for referrals of federal healthcare program business.

Healthcare anti-kickback laws provide important safeguards, and it is our responsibility to understand and uphold these laws.

An example of an illegal kickback is providing a

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direct, indirect, or disguised payment in return for referring clients.

### Physician Self-Referral Law

The Physician Self-Referral Law, commonly referred to as the Stark Law, prohibits physicians from referring clients 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 applies. Financial relationships include both ownership/investment interests and compensation arrangements.

“Designated health services” are defined as:

- Clinical laboratory services
- Physical therapy, occupational therapy, and speech-language pathology services (outpatient)
- Radiology and certain other imaging services
- Radiation therapy services and supplies
- DME supplies
- Parenteral and enteral nutrients, equipment, and supplies
- Prosthetics, orthotics and prosthetic devices and supplies
- Home Health Services
- Outpatient prescription drugs
- Inpatient and outpatient hospital services

### Exclusion Statute

The government maintains a list of individuals and companies that have been determined to be excluded from the ability to participate in Federal Healthcare programs. There are numerous

reasons why individuals/companies are excluded. Some examples are convictions of criminal offenses, client abuse, fraud, and defaulting on school loans. No payment from any Federal Healthcare program will be made for items or services that are provided by excluded individuals/companies. EH cannot employ, contract with, or have any services provided by an excluded individual/company.

### Health Insurance Portability and Accountability Act (HIPAA)

HIPAA regulations, which protect the privacy and security of client information, apply to all of EH interactions with client information. Clients have the right to expect that their medical information will remain confidential. Under HIPAA regulations and EH policy, you must not reveal any personal or confidential client information unless you have a legitimate business or client care purpose.

### Social Media

Any EH employee participating in social networking from a personal computer, laptop, smart phone, etc.... should be mindful of the information they disclose on these sites. Social networking sites allow photographs, videos, and comments to be shared with thousands of other users. Employees must comply with State and Federal Laws. Employees are not to post any information or engage in any online activity that violates applicable HIPAA, local, State, or Federal laws. EH prohibits posting confidential information on social media accounts, client names, or any information that could identify the client.

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## Conflicts of Interest

EH discloses and appropriately manages conflicts of interest. Employees must report any actual or potential conflict of interest. Conflicts of interest are situations in which employee personal considerations may affect, or have the appearance of affecting, our loyalty and ability to fulfill our responsibilities to EH. Depending on the circumstances, a “conflict of interest” might include employment outside of EH with a competitor in violation of our policies, supervising a close relative, accepting gifts from a vendor, client, or fellow provider, or causing EH to contract with vendors with whom you have a personal or financial interest. If you have questions about what might be a conflict of interest, review EH’ policies and speak with your supervisor or the Compliance Officer.

## Receiving and Offering Gifts and Gratuities

The rules for gifts and gratuities put precautions in place to prevent any impropriety or damage to EH’s reputation, which is central to preserving our integrity. The basic rule is simple: Never accept a gift, favor, service, or entertainment if your acceptance could be viewed as influencing a business decision or action. Use good judgment about accepting gifts. Only gifts that are ordinary, customary expressions of business courtesy (i.e. pens, highlighters, mouse pads, notepads etc.) may be accepted. Avoid accepting anything with more than a nominal value, \$25.00 or less. If possible, share any gifts with your coworkers. In addition, employees and directors of EH may not attempt to influence the decisions of others by offering them money, services, or other things of value.

## Marketing

EH’s marketing and public relations activities are conducted with truth, accuracy, and fairness, recognizing our responsibility to our clients and the public. EH markets only Healthcare services which are available and within the scope of its licensure and accreditation. EH’s marketing practices must be conducted in compliance with the Anti-Kickback Statute.

## Safety and Environmental Preservation

### Workplace Safety

The health and safety of our clients and employees is an EH priority. EH will comply with workplace health and safety laws and report safety concerns. We follow EH policies for handling and disposing of hazardous materials and equipment. EH only accesses, handles, or prescribes controlled substances in accordance with EH policy.

EH complies with fitness for duty policies. We maintain a work environment free from violence and disruptive behavior.

### Harassment

All EH employees, clients and representatives have the right to an environment that is free of violence and harassment. Degrading or humiliating jokes, slurs, intimidation, or other harassing conduct is not acceptable.

EH will not tolerate a hostile work environment under any circumstances, regardless of whether the behavior takes place before, during or after normal working hours, inside or outside of the workplace.

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All forms of sexual harassment or inappropriate behavior are prohibited. Sexual harassment includes but is not limited to unwelcome sexual advances, requests for sexual favors in conjunction with employment decisions or verbal or physical conduct of a sexual nature.

Moreover, verbal, or physical conduct of a sexual nature that interferes with an individual's work performance or creates or has the potential to create an intimidating, hostile or offensive work environment is forbidden.

EH staff will not condone practices which result, or may result, in illegal or otherwise unjustifiable discrimination on the basis of race, creed, color, sex, religion, sexual orientation, gender expression, age, disability, political affiliation, or national origin in hiring, promotion or training.

Harassment also includes incidents of workplace violence. Workplace violence includes robbery, stalking, violence directed at the employer or a fellow employee, terrorism, and hate crimes committed by a current or former colleague.

As part of the commitment to a safe workplace, all employees, individuals served, and visitors are expected to maintain a safe working environment by following EH's rules and policies related to possessing and carrying firearms, other weapons, explosive devices, or any other dangerous material on EH's premises or in the home during a home visit.

If you observe or experience any form of harassment, report the incident to your supervisor, any other management personnel, and/or the Human Resource Department immediately. Such reports will be held in confidence, and the employee will be protected from harassment or retaliation for reporting this misconduct. EH will investigate all claims of harassment and take immediate and appropriate remedial action.

It is your responsibility as a complainant to ensure your concerns are acknowledged, thus if your initial report to your supervisor is not met with satisfactory response, you will then report the incident to the manager, human resources, CEO, Compliance Officer, Compliance Hotline, or board until the issue is clearly resolved.

### **Corporate Compliance**

The function of compliance falls under the title of Compliance Officer. The Compliance Officer is under the administrative leadership of the Chief Executive Officer, with a direct reporting line to the Board. It is their responsibility to maintain and enforce the agency's Code of Conduct, the Compliance Plan, and the Compliance Hotlines, along with partnering with business leaders to identify, assess and address compliance risks.

#### [How to reach the Compliance Officer](#)

The Compliance Officer for EH is Mildred Anderson. She can be reached by:

Phone: 361-772-6331

e-mail: [manderson@excelin.com](mailto:manderson@excelin.com)

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## Compliance Hotlines

We encourage calls to report suspected violations of EH's Compliance Plan, the Code of Conduct, or of Federal and State laws and regulations (e.g., improper coding or billing practices, etc.). The EH Compliance Plan and Code of Conduct are not intended to handle Human Resource issues such as salaries, wages, benefits, and personnel matters. For those issues, you should consult your employee handbook, the Human Resource Policies, and/or your Human Resources Representative.

The Compliance Hotline is intended to supplement, not replace, other channels for communicating questions and concerns within the Agency. It should be used when other avenues of communication have been exhausted, or you are uncomfortable with disclosing your identity when reporting a concern.

EH Compliance Hotlines:

NAVEX Global

Toll Free: 844-660-3970

Online: <http://excelin.ethicspoint.com/>

## No Retaliation

You can report a violation without worry. If you make a compliance report in good faith, you will not face retaliation. Our policy forbids supervisors and other employees from engaging in retaliatory acts against anyone who reports a violation or cooperates in an investigation of a potential violation or concern. If you believe you have been retaliated against for raising a concern, immediately contact your supervisor, manager,

human resources, CEO, Compliance Officer, Compliance Hotline, or board until the issue is clearly resolved.

## Inquiries and Investigations

EH handles inquiries and investigations confidentially to the extent possible. The substance of your inquiry and your identity (if you choose to provide your name) are disclosed on a strict need-to-know basis and only as deemed necessary to conduct a proper investigation and to respond appropriately. When you ask a question, seek guidance, or raise a concern, you will receive a response if you have provided the means to do so. If a concern is substantiated, the situation will be resolved through appropriate corrective actions which may include, among other things, clarification of a company policy, additional training, facility or process change, and/or disciplinary action.

## The Corporate Compliance Program

### Program Structure

The Compliance Program is intended to demonstrate in the clearest possible terms the commitment of the Agency to the highest standards of ethics and compliance. There is oversight by the Board of Directors, Compliance Officer, and a Compliance Committee. All of these individuals and groups are prepared to support the standards set forth in this program.

The Code of Conduct is reviewed annually and whenever policy changes occur. Revisions will be made as needed to ensure continued alignment with regulatory requirements and organizational values.

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## Reporting Violations

Several options are available to report violations to the standards set forth in this Code. It is considered appropriate, but is not required, to report violations to your immediate supervisor first. The supervisor is obligated to forward your concerns to the Compliance Officer. It is your responsibility as a complainant to ensure your concerns are acknowledged and addressed.

## Personal Obligation to Report

EH is committed to ethical and legal conduct that is compliant with all relevant laws and regulations and to correcting wrongdoing wherever it may occur within the Agency. Every staff member has an individual responsibility for reporting any activity by any colleague, physician, subcontractor, or vendor that appears to violate applicable laws, rules, regulations, or this Code.

## Internal Investigations of Reports

All reports will be investigated promptly and confidentially to the extent possible. The Compliance Officer will coordinate any findings from the investigation and immediately recommend corrective actions or changes to be made. All staff members are expected to cooperate with investigation efforts.

## Correction Action

When an internal investigation substantiates a reported violation, it is the policy of EH to initiate corrective action, including, as appropriate, making prompt restitution of any overpayment amounts, notifying the appropriate governmental agency, instituting disciplinary action, and implementing

systemic changes to prevent a similar violation from recurring in the future at any EH office.

## Discipline

All violators of the Code of Conduct and EH Policies and Procedures will be subject to disciplinary action. The precise discipline used will depend on the nature, severity and frequency of the violation and may result in any of the following actions: education/re-education, performance improvement plan, verbal warning, written warning, termination and/or restitution.

## Internal Auditing and other Monitoring

EH is committed to the responsible monitoring of compliance with its policies. Internal auditing is done to assure compliance with issues that have regulatory or compliance implications. EH also routinely seeks other means of ensuring and demonstrating compliance with laws, regulations, and internal policies.

## Acknowledgment Process

EH requires all staff to acknowledge, be trained, and demonstrate competence in the Code of Conduct. Independent contractors are also required to adhere to this code as a condition of the contractual agreement. Adherence to and support of this Code and participation in related activities and training will be considered in decisions regarding hiring, promotion, and compensation for all staff.

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## Quarterly Compliance Newsletters

The Code of Conduct is more than a policy—it’s a living guide meant to shape our daily decisions, actions, and workplace culture. It reflects the values and expectations that define how we work together at EH.

Our Quarterly Compliance Newsletter brings the Code to life through real-world scenarios and frequently asked questions. These practical examples help illustrate how ethical and compliant behavior looks in everyday situations and strengthen our shared commitment to doing the right thing. Take time each quarter to read, reflect, and reach out with any questions. You’ll find the newsletter in our Relias training system.

The information contained in this handbook is not a contract and is subject to change. It is understood that explanations in this booklet cannot alter, modify, or otherwise change the controlling legal documents or general statutes in any way, nor can any right accrue by reason of inclusion or omission of any statement in this booklet.