



CODE OF CONDUCT

Effective September 2019

Last Reviewed March 2022

Dear National Jewish Faculty and Staff:

At National Jewish Health we are committed to ethical and legal business practices. This commitment is consistent with our core values and is essential to our mission. The Code of Conduct (Code) Handbook illustrates how our core values and our standards of business ethics are intertwined.

We hope this Handbook will serve as your guide to understanding the legal and business ethical issues we face every day, and how commitment to our Value Statements can guide us in dealing with these issues. The Code is the cornerstone of our Corporate Compliance program.

Because our Compliance Program rests on our Mission, Vision and Values, it must be incorporated into our daily activities and support our tradition of caring for our patients, our communities, and each other. We strive to deliver healthcare compassionately and to act with absolute integrity in the way we do our work and the way we live our lives. Adherence to the Code's spirit, as well as its specific provisions, is critical to our future.

I urge you to join me in actively participating in ensuring National Jewish continues to be a leader in providing quality healthcare in our community by adhering to the standards in this Code of Conduct. Thank you for your continued dedication and support in making National Jewish Health an organization of which we will always be proud.

Sincerely,

A handwritten signature in black ink, appearing to read "M. Salem". The signature is fluid and cursive, with the first name "M." and the last name "Salem" clearly distinguishable.

Michael Salem, MD, FACS
President, Chief Executive Officer
National Jewish Health

Table of Contents

<p>MISSION, VISION, CORE STATEMENTS..... 4</p> <p>CORPORATE COMPLIANCE..... 5-6</p> <p style="padding-left: 20px;">Program Structure</p> <p style="padding-left: 20px;">Introduction</p> <p style="padding-left: 20px;">Purpose of the Code</p> <p>QUALITY OF CARE 7</p> <p style="padding-left: 20px;">Patient Care</p> <p>FRAUD AND ABUSE 8-9</p> <p style="padding-left: 20px;">Definition and Examples of Fraud</p> <p style="padding-left: 20px;">Definition and Examples of Abuse</p> <p>CONFIDENTIALITY..... 10-11</p> <p style="padding-left: 20px;">Patient Information</p> <p style="padding-left: 20px;">Proprietary Information</p> <p style="padding-left: 20px;">Information Security and Confidentiality</p> <p>PROTECTION OF ASSETS 12-13</p> <p style="padding-left: 20px;">Electronic Media</p> <p style="padding-left: 20px;">Intellectual Property Rights and Obligations</p> <p>BUSINESS COURTESIES..... 14-16</p> <p style="padding-left: 20px;">General</p> <p style="padding-left: 20px;">Gift and Gratuities</p> <p style="padding-left: 20px;">Business Inducements</p> <p style="padding-left: 20px;">Government Personnel</p> <p>POLITICAL ACTIVITIES AND CONTRIBUTIONS..... 17</p> <p>CONFLICTS OF INTEREST..... 18-19</p> <p style="padding-left: 20px;">General</p> <p style="padding-left: 20px;">Avoiding Conflicts of Interest</p> <p style="padding-left: 20px;">Physician Relationships</p> <p style="padding-left: 20px;">Subcontractors and Suppliers Relationships</p>	<p>INELIGIBLE PERSONS 20</p> <p>MARKETING PRACTICES..... 21</p> <p style="padding-left: 20px;">Antitrust</p> <p>CONDUCTING RESEARCH 22</p> <p>FINANCIAL REPORTING & RECORDS... 23</p> <p>RECORD KEEPING 24</p> <p>CODING AND BILLING..... 25</p> <p style="padding-left: 20px;">Coding and Billing Guidelines</p> <p>THE FALSE CLAIMS ACT..... 26-27</p> <p>INTERNAL INVESTIGATIONS OF REPORTED VIOLATIONS..... 28-29</p> <p style="padding-left: 20px;">Audit and Monitoring</p> <p style="padding-left: 20px;">Government Investigations</p> <p>WORKPLACE GENERAL ENVIRONMENT..... 30</p> <p style="padding-left: 20px;">General Harassment</p> <p style="padding-left: 20px;">Sexual Harassment</p> <p style="padding-left: 20px;">Discrimination</p> <p style="padding-left: 20px;">Drug Free Workplace</p> <p>PERSONAL OBLIGATIONS TO REPORT..... 31</p> <p>RESOURCES FOR GUIDANCE AND REPORTING CONCERNS..... 32</p> <p>ACKNOWLEDGEMENT PROCESS 33</p> <p style="text-align: center;"><u>ADMINISTRATION AND APPLICATION OF THIS CODE OF CONDUCT</u></p>
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All National Jewish Health employees, volunteers, Board members and Trustees, vendors and anyone else affiliated with National Jewish Health are expected to abide by the standards set forth in this Code and to conduct the business and affairs of National Jewish in a manner consistent with our Values Statement.

Mission Statement

Our Mission since 1899 is to heal, to discover, and to educate as a preeminent healthcare institution. We serve by providing the best integrated and innovative care for patients and their families; by understanding and finding cures for the diseases we research; and by educating and training the next generation of healthcare professionals to be leaders in medicine and science.

Vision Statement

Our Vision is to be the global leader in the research and treatment of respiratory, immune, and related diseases. We pursue this vision by pioneering individualized medicine programs which embrace the paradigm shift from reactive medicine to proactive, personalized healthcare. These programs enable us to integrate the provision of outstanding patient care, the conduct of novel basic, translational, and clinical research, and the education of healthcare and research professionals. Through our efforts, we seek to achieve cures for patients who seek treatment and to bring new knowledge and discoveries to help people worldwide.

Values Statement

RESPECT

We will recognize the worth, quality, diversity, and importance of each other, the people we serve, and the institution.
We will do our work with our customer's interest in mind.

BENEFICENCE

We will continually practice goodwill. We care about the welfare of others and respect their feelings. We will be positive and mutually supportive toward one another. Standards of fairness will be upheld, and harmful behavior toward others will not be tolerated.

INTEGRITY

We will be honest and forthright and meet the highest ethical standards. Integrity is never compromised.

EFFICIENCY

We will be mindful of our accountability to ourselves, our benefactors, our patients, and the public in using our resources wisely and prudently.

EXCELLENCE

We will work together to be the very best in everything we do. Quality comes first. Even if we cannot do everything, what we choose to do, we will do well.

Corporate Compliance

PROGRAM STRUCTURE

The Corporate Compliance Program is intended to demonstrate the absolute commitment of National Jewish Health (“NJH”) to the highest standards of character and integrity. That commitment reaches all levels at NJH. Included are the Board of Directors, Officers, Managers, Staff, Faculty, Affiliates, and Volunteers. Our goal is to continue to enhance our culture which promotes the highest standards of ethics and compliance. We expect all who work at NJH, including affiliated partners, consultants and business visitors (such as vendors) will follow our policies and procedures and the standards set forth in this Code.

NJH is committed to maintaining an organizational and accountability structure which assures compliance with governmental laws, rules and regulations, and supports the organization’s ethical standards and code of conduct. We will have no tolerance for fraud, or abuse.

BOARD OF DIRECTORS

The overall accountability for NJH’s Corporate Compliance Program rests with NJH Management and the Audit Committee of the Board of Directors.

CHIEF COMPLIANCE & PRIVACY OFFICER

The General Counsel serves as the Chief Privacy and Compliance Officer. The Chief Privacy and Compliance Officer and Compliance Office serves as the focal point for compliance activities at NJH. The Chief Privacy and Compliance Officer has direct access to the President/CEO, external legal counsel, outside volunteers and the Board of Directors, and reports regularly to the Audit Committee of the Board of Directors.

CORPORATE COMPLIANCE REPORTING

The Audit Committee is a committee of the Board of Directors of NJH. The Audit Committee is comprised of NJH Board Members with backgrounds in various business leadership roles and NJH senior managers. The Committee will make recommendations and suggestions on policies, procedures and practices pertaining to the Corporate Compliance Program and receive reports on various audit and compliance related matters. The Chief Privacy and Compliance Officer serves on this Committee. The committee is chaired by a NJH Board member.

CODE OF CONDUCT INTRODUCTION

NJH is committed to providing the highest-quality health care services in a lawful and ethical manner. This fundamental commitment finds expression in our Mission, Vision and Values statements. NJH’s commitment helps maintain the trust and respect of patients and the communities we serve. To reinforce and strengthen this commitment, NJH 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 an enforcement priority for both the federal and state governments. NJH’s Corporate Compliance Program was developed in response to the risks that are inherent in such a complex system. The Program is 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.

NJH 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 NJH.

PURPOSE OF THE CODE

Our Code of Conduct, which has been adopted by the Board of Directors of NJH, provides guidance to all of us and assists us in carrying out our daily activities within appropriate ethical and legal standards. When referring to NJH employees throughout this document, it is meant to include staff, faculty, affiliates, and volunteers. 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 Statements, provides standards by which we will conduct ourselves in order to protect and promote integrity and to enhance NJH's ability to achieve its Mission.

This Code establishes the general policies and procedures all NJH 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 manager/supervisor or to the Compliance Office. As a condition of employment, every employee of NJH 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. 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 Policies and Procedures site of our Intranet (Spyderweb). Those policies expand upon or supplement many of the principles discussed in this Code of Conduct.

Quality of Care

PATIENT CARE

The mission and vision of NJH is to provide safe high quality patient care services. We strive by implementation of continuous performance improvement activities to assure that the services provided at NJH meet or exceed acceptable standards of both quality and patient safety and are available to those who need them within the limits of NJH'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 gender, race, color, sexual orientation, religion, disability, age, marital status, 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 responsibilities and 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 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 NJH (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.

Fraud and Abuse

NJH and its 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 billed but 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;
- Documenting medical necessity 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).

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 Centers for Medicare and Medicaid Services (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? and
- 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.

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 NJH 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 manager/supervisor or the Compliance Office.

NJH 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 NJH 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.

PROPRIETARY INFORMATION

Confidential NJH owned or operated information about NJH's strategies and operations is a valuable asset. Confidential information includes personal data maintained by NJH'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 our suppliers and sub-contractor information and proprietary computer software. Every NJH 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 (NJH) 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 NJH 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 procedures 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) NJH 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 NJH 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.

If an individual's employment or contractual relationship with NJH 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 NJH.

(Respect and Protect Confidential Information.)

Examples to ensure confidentiality:

- Honor the privilege of information about our patients at NJH 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 NJH property, facilities, and equipment is every employee's responsibility. Use and maintenance of these assets with the utmost care and respect, while guarding against waste, abuse, and theft is critical. One must be cost-conscious and alert to opportunities for improving performance while reducing costs. The use of NJH's time, material, or facilities for purposes not directly related to NJH business, or the removal or borrowing of NJH 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 NJH and are to be used primarily for business purposes in accordance with electronic communications policies, and standards. Users of computer and telephone systems should presume no expectation of privacy in anything they create, store, send, or receive on the computer and telephone systems, and NJH reserves the right to monitor and/or access communications usage and content consistent with our policies and procedures. (Please refer to NJH's "Electronic Communication Policy.")

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.

NJH's assets are to be maintained for business related purposes. As a general rule, the personal use of a NJH asset without prior supervisory approval is prohibited. Any community or charitable use of NJH's resources must be approved in advance by a supervisor. Any use of NJH's resources for personal financial gain unrelated to NJH'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 NJH shall be considered the property of NJH, 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 NJH's business, whether the employee was directed to produce the Development as part of the employee's work, whether the employee utilized NJH's intellectual property or resources at least in part to make the Development, and whether the employee

created the Development while being paid by NJH. If any Development created is copyrightable, then it will be considered a “Work for Hire” under the United States Copyright Act, with NJH being considered to be the author and owner of such work. (Please refer to NJH’s “Copyright and Trademark Policy”.)

When creating Developments for NJH, employees shall respect the intellectual property rights of others. Any works or inventions created by employees prior to employment by NJH shall be disclosed to NJH 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 NJH. Notwithstanding the foregoing, NJH shall have the right to deviate from this requirement under such circumstances as shall be delineated in contractual language.

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 NJH. This section does not pertain to actions between NJH and its employees or actions among NJH 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 NJH. It is not acceptable to use gifts or other incentives to improperly influence relationships or business outcomes.

Any entertainment or gift involving physicians or other persons who are in a position to refer patients to NJH 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. NJH employees must consult NJH 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 non-monetary gift, he/she should be referred to the appropriate manager/supervisor. To the extent possible, these gifts should be shared with the employees' co-workers. (Please refer to NJH's "Conflict of Interest – Management" and Conflict of Interest – Research" policy(ies) and "Staff/Patient Relationships Policy").

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:

1. The cost associated with the event is reasonable and appropriate.
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 NJH, consult our policies and seek appropriate approvals.

A perishable or consumable gift that is given to the 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 NJH's "Conflict of Interest – Management" and Conflict of Interest – Research" policy(ies), NJH's "Guidelines for Pharmaceutical and Medical Device Company Relationships" policy, from any individual or organization who has a business relationship with NJH. For purposes of this section, faculty 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 NJH is strictly prohibited.

Gifts Influencing Decision Making. NJH employees are not permitted to accept gifts, favors, services, entertainment or other things of value to the extent that decision making or actions affecting NJH 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 NJH is strictly prohibited. Any such conduct must be reported immediately to your manager/supervisor, the Compliance Office, Human Resources and/or the Compliance Hotline.

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 NJH and determined by NJH 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.

NJH 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 NJH management as being customary and acceptable and not an illegal or unethical payment.

In addition, we may provide gifts, entertainment and meals to NJH 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 manager/supervisor or the Compliance Office.

GOVERNMENT PERSONNEL

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

At times, NJH 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 NJH employees to interface on a regular basis with government officials. If making these communications on behalf of the NJH, be familiar with any regulatory constraints and observe them. Guidance is always available from the Compliance Office.

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 NJH to strictly comply with those laws and regulations.

Permissible exceptions are offering NJH advertising or promotional items of nominal value such as a coffee mug, calendar or similar item displaying the NJH 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

NJH 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 Compliance Office.

It is important to separate personal and corporate political activities in order to comply with appropriate rules and regulations relating to political activities. NJH 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 NJH in these activities. NJH employees cannot seek to be reimbursed by NJH for any personal contribution for such purposes.

NJH employees are not permitted to make any agreements to contribute any money, property or services of any officer or associate at NJH's expense. NJH 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 NJH to any political party or candidate.

NJH's political participation is limited by law. NJH 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 NJH property for use in the political campaign.

Conflicts of Interest

GENERAL

Executives, managers and supervisors, faculty staff, and Board members involved with strategic planning and other key employees owe a duty of undivided and unqualified loyalty to NJH. 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 NJH. (Please refer to NJH 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 NJH resources for other than NJH purposes. Any questions about whether an outside activity might be or appear to be a conflict of interest should be directed to your manager/supervisor or the Compliance Office.

NJH 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 NJH.

It is the policy of NJH to:

- Graciously decline any offers of money from patients, their families, visitors and others, which are not intended for benefit of NJH.
- 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 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 NJH.

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 manager/supervisor and Compliance Office.

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 NJH.
- Acceptance of gifts, payment, or services from those seeking to do business with NJH.
- 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 NJH 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 and our policies and procedures. All arrangements must be in writing and approved by the Compliance Office.

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 NJH 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.

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. NJH 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 one or more Group Purchasing Organizations (GPO).

Ineligible Persons

It is the policy of NJH 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 NJH. In order to ensure safeguards, NJH performs General Service Administration (GSA) checks and Office of The Inspector General (OIG) checks, as well as in-state business license checks, upon contracting, hiring, or initiating purchasing agreement with vendors.

Employees, vendors, and credentialed practitioners at one or more NJH facilities are required to report to NJH 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 sanctions policies for further guidance.)

Marketing Practices

ANTITRUST

Antitrust laws are designed to create a level playing field in the marketplace and to promote fair competition. These laws could be violated by discussing NJH 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, NJH 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

NJH 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. NJH protects the patients and respects their rights during research, investigations, and clinical trials.

Any NJH facility or employees engaging in human or animal subject research must do so with the approval of the NJH Institutional Review Board (IRB) and consistent with NJH policies regarding human subject research and IRB's. All human subject research at NJH will be reviewed by an Institutional Review Board (IRB).

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

It is the policy of NJH 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

NJH has established and maintains 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. NJH 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 organization's assets.

At NJH, 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. NJH 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. NJH employees in this area or impacted by this activity must seek clarification when needed in order to assure continued compliance. In addition, NJH's Finance Department employees must comply with applicable auditing, accounting, and financial disclosure laws. As part of NJH's open door policy employees are encouraged to discuss issues of concern with their manager/supervisor. Anyone having concerns regarding questionable accounting or auditing matters are required to report such matters to their manager/supervisor or to the Compliance Office.

Record Keeping

Record keeping should honestly and accurately document our actions. NJH 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 NJH 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.

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. NJH 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 NJH 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 NJH, 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. NJH 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.

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 the Compliance Office.

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 NJH.
- 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.

The False Claims Act – A Federal Law That Protects Whistleblowers

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.

Whistle-blowers protections. The 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.

Our Policy

- NJH 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.
- NJH expects that anyone with a concern about a possible False Claim at a NJH facility will contact their supervisor, the Compliance Office, or Corporate Compliance Hotline immediately so that NJH can investigate and correct any errors.
- NJH’s policy on non-retaliation protects our employees from adverse action when they do the right thing and report any genuine concern.
- NJH 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.

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

Internal Investigations of Reported Violations

NJH will investigate all reported concerns promptly and confidentially to the extent possible. The Compliance Office will coordinate any findings from the investigations and recommend corrective action or changes that need to be made consistent with this Code, NJH 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 NJH 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 NJH. 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.

AUDIT AND MONITORING

NJH is committed to the aggressive monitoring of compliance with its policies. Much of this monitoring effort is provided by the Compliance Office and Internal Audits. We routinely conduct internal audits of issues that have regulatory or compliance implications.

GOVERNMENT INVESTIGATIONS

NJH 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 NJH and its personnel. If any employee receives an inquiry, a subpoena or other legal document regarding NJH's business, he/she must immediately contact his/her manager/supervisor or the Corporate Compliance Officer.

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 Compliance Office regarding the initiation of any governmental investigation.

Accordingly, if this process is followed, NJH may then, on a case by case basis, determine its specific plan of response/action.

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 Compliance Officer or the Compliance Hotline.

If you have concerns about any governmental investigation, you may contact your manager/supervisor, Administration or the Administrator On Call, via the NJH operator, or the Compliance Office. You may contact the Compliance Office directly at compliance@njhealth.org or

call the Compliance Hotline 844-369-5635 or NJHealth.ethicspoint.com. Calls to the Hotline will be treated confidentially and may, at the caller's request, be anonymous.

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 gender, race, color, sexual orientation, religion, disability, age, marital status, or national origin is unacceptable and, therefore, prohibited. NJH 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 NJH.

SEXUAL HARASSMENT

Unlawful sexual harassment is a violation of NJH 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 NJH. Patients are to be treated without regard to gender, race, color, sexual orientation, religion, disability, age, marital status, or national origin.

NJH 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 gender, race, color, sexual orientation, gender identity, religion, disability, age, marital status, or national origin.

NJH 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.

DRUG and TOBACCO-FREE WORKPLACE

At NJH we are committed to maintaining a drug-free and tobacco free workplace. Drugs, tobacco and other substances that may compromise an employee's fitness for duty or impair his or her performance or the inappropriate or illegal use of drugs or other substances are strictly prohibited. It is the policy of NJH to subject those individuals that are reasonably suspected to be under the influence of drugs or other substances or to have violated NJH'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 NJH. 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.

Resources for Guidance and Reporting Concerns

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

NJH 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 Compliance Office at (303) 398-1466
- 2) Contact the Compliance Hotline at 844-369-5635 or NJHealth.ethicspoint.com

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

ACKNOWLEDGEMENT PROCESS

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

Adherence to and support of NJH'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 NJH'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 Compliance Department or Compliance Hotline 844-369-5635 or NJHealth.ethicspoint.com

Signature: _____

Print Name: _____

Department: _____

Date: _____

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