Dear Colleagues,

At Logan Health, we take great pride and honor in caring for the communities where we live and serve. We are grounded by a clear and straightforward commitment to advancing medicine and enhancing care. That very commitment is laid out in the Logan Health Code of Conduct.

Our Code of Conduct is the foundation of our Compliance Program. It serves as a guide for each of us, individually and as an organization. It establishes standards on how we should behave with our stakeholders, patients, fellow employees, community, physicians and regulators.

We expect everyone to read, understand and follow the Code of Conduct. Everyone, at every level of the organization, is responsible and accountable for compliance and behaving in an ethical manner. The Code of Conduct is not expected to give an itemized list of do’s and don’ts. It is intended to support each of us in navigating and using good judgment in our decisions.

You are a critical member of our team and play an important role in our future. Thank you for your commitment to a strong culture of compliance at Logan Health.

Sincerely,

Craig Lambrecht, MD
President & CEO
LOGAN HEALTH MISSION

Improve health and quality of life by delivering exceptional, compassionate care with an outstanding experience for all.

LOGAN HEALTH VISION

To be the center for health and healing for our communities, where access to high quality, outstanding care helps achieve healthier and more fulfilling lives.

Logan Health employees, volunteers, board members, vendors and contracted staff should serve as role models in the fulfillment of our mission, vision and core values, which define the Logan Spirit.

COMPLIANCE MISSION STATEMENT

The mission of Logan Health Compliance Department is to be trusted advisors who support Logan Health and our facilities to promote an environment of ethical behavior and reflect our commitment to advancing medicine and enhancing care.
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Compliance is everyone’s job at Logan Health and we appreciate your contributions to making us an outstanding health care provider.
Program Overview and Standards of Behavior

Logan Health’s Compliance Program is based on the seven elements of an effective compliance program, as set forth by the Health and Human Services (HHS) Office of Inspector General (OIG) in its model hospital compliance program guidance. These seven elements are also reflected in the federal sentencing guidelines established by the U.S. Department of Justice. The following summarizes the structure of our program and its relevance to the seven elements based on the Logan Health Compliance Plan.

**Element 1: Policies and Procedures**

The Code of Conduct demonstrates the organization’s ethical attitude supported with policies and procedures that establish expectations for all staff to follow from a regulatory, risk, compliance and patient privacy perspective. The documents can be accessed through the electronic repository called PolicyStat.

**Element 2: Chief Compliance and Privacy Officer and Compliance Committee**

The Logan Health Board of Trustees, in conjunction with the Chief Compliance and Privacy Officer, are responsible for oversight of the Corporate Compliance Program. The Corporate Compliance Committee is maintained to provide guidance in the implementation of the Corporate Compliance Program and to advise and support the Chief Compliance and Privacy Officer, Adrienne Chase. Contact Adrienne at achase@logan.org with any questions or concerns.

**Element 3: Education and Training**

Annual education plans are developed for employees, students, providers, vendors/contractors, subcontractors, agents, volunteers and board members. Targeted education is provided based on need and/or new regulations.

**Element 4: Effective Communication**

Timely reporting of issues and concerns is an expectation of all employees and is the cornerstone of an effective compliance program.

A variety of methods exist to report compliance and privacy issues. All reports will be documented and investigated promptly by the Logan Health Compliance Department and/or in conjunction with Human Resources, Legal, Health Information Technology, Risk Management, etc. See the Duty to Report section on page 24 for more information.

**Element 5: Monitoring and Auditing**

A range of systems, procedures and documentation are monitored and audited by the Logan Health Compliance Department for adherence to our compliance policies, especially in areas we deem to be at high risk of potential non-compliance. This may include patient privacy, billing, coding, medical documentation, conflicts of interest, contracts, lease agreements and more.

**Element 6: Enforcement and Discipline**

Fairness, equity and consistency are key to enforcing the Code of Conduct and policies/procedures. Enforcement and discipline of non-compliance may include counseling, education, and/or disciplinary action up to and including termination depending on the intent, severity, frequency, risk and outcome of the non-compliant event.

**Element 7: Response and Prevention**

Our organization will not be a problem-free environment due to the complexity of understanding the regulations and choices individuals make. Logan Health offers tools and resources available for individuals to make the right choices and encourages a work environment of transparency. Responding to issues and taking preventive steps supports our reputation as a reliable, honest and trustworthy healthcare provider and community partner.
QUALITY OF CARE AND PATIENT SAFETY

Logan Health is an organization driven by a mission and vision of excellence in the provision of healthcare services to communities in Northwest Montana. Through the guidance of our system’s core values, the Quality and Patient Safety Plan provides a framework upon which an integrated and comprehensive program to monitor, assess and improve the quality and safety of patient care delivered can be evaluated. The plan is a collaborative one with acute care services, clinical programs, risk management, medical staff, and nursing staff.

OVER ARCHING OBJECTIVES:

• Create an inspiring and supportive environment and culture that fosters high-quality, safe, transparent and compassionate care through focus on the patient and employee experience. This can be accomplished through building the capacity of the Logan Health Board and executive leadership to articulate a persuasive and consistent message on the central role of quality in system performance.

• Improve value by achieving exemplary outcomes that matter to patients while lowering the per capita costs of care and anticipating changes in the dynamic healthcare environment.

• Create a system-wide quality reporting and improvement structure that provides actionable data to system leadership, and to clinicians and operational leaders engaged in quality improvement.

• Develop a meaningful and commonly applicable set of metrics that reliably track quality across care settings.

• Build a collaborative platform that enables clinical and operational leaders to readily share, adopt and implement best practices across the system.

• Engage patients in their own care to improve clinical outcomes, increase patient satisfaction and decrease healthcare costs.

• Ensure the success and effectiveness of ongoing system quality improvement by building the expertise and capacity of quality improvement staff.
PATIENT PRIVACY

One of the most important rights of our patients is the right to privacy. The Health Insurance Portability and Accountability Act (HIPAA) protects a patient’s Protected Health Information (PHI) from unauthorized access, use and disclosure.

We only discuss or share PHI with those who have a right or need to know. We avoid discussing PHI in public areas. We proactively safeguard patient information by adhering to the HIPAA regulations and our privacy and security policies and procedures. Logan Health staff must never use or disclose confidential patient information in a manner that violates the privacy rights of our patients. Violations may result in disciplinary action up to and including immediate termination.

INAPPROPRIATE ACCESS TO PROTECTED OR SENSITIVE INFORMATION

Inappropriate access can occur when someone gains access to protected or sensitive information without the need or permission to do so. Information assets are monitored on a continuous basis to identify abuse, misuse, or unauthorized access. Logan Health policies dictate disciplinary actions for inappropriate access. Common examples of inappropriate access include:

- Accessing the electronic medical record of a patient that is not directly related to your role and job duties.
- Accessing your own medical record or that of your family or friends.
- Accessing user or department file shares that are not yours or part of your role approval.

SOCIAL MEDIA

Most likely, you have an account with Facebook, Twitter, LinkedIn or some other type of social media. Posting any protected or sensitive information on social media can be grounds for dismissal, if the appropriate authorization processes have not been followed. Other infractions include using social media to bully or embarrass fellow staff members, posting false information about Logan Health and associated facilities, engaging in illegal activity or divulging confidential business information. (See section on Workplace Rules regarding business information.) Be sure to read Logan Health’s policies and guidelines on use of social media.

INFORMATION TECHNOLOGY SYSTEMS

Our information technology systems contain sensitive and private information, therefore it is critical that you understand your role in properly safeguarding electronic information. These systems should be used primarily for business purposes.

Our Logan Health computer systems are monitored on a continuous basis. This monitoring includes, but is not limited to emails, internet access, medical record access, and systems access.

Logan Health systems may not be used for viewing or transmitting pornographic or other offensive material, or for threatening, harassing, spreading rumors, or actively supporting or opposing a candidate for public office. The Logan Health HIT (Health Information and Technology) and Logan Health Compliance Department work collaboratively to monitor Logan Health systems. If it is detected that a staff member viewed inappropriate websites, sent explicit emails, or accessed PHI inappropriately, Human Resources and the department manager will contact the staff member. Various levels of discipline will apply.
INFORMATION SECURITY

Information security addresses how we protect electronic patient and company information. Examples include programs to protect outsiders from unauthorized access to our system and databases and granting appropriate user access to electronic medical records. Everyone plays a role in keeping information safe. All workforce members are required to complete annual education on information security policies and procedures. For more information on information security, password protection and encryption, see Logan Health policies in PolicyStat under the area of Administrative Information Management or contact the Health Information Department.

QUESTIONS AND ANSWERS

Q. I am an employee of Logan Health. May I access my family member’s electronic health record to monitor them? How about if I am the minor patient’s parent or legal guardian?

A. No. When you have a family member or friend receiving care, you may not use your status as an employee to access their records. You must go through the process to obtain medical information like any non-employee family member or friend. When you are a parent or a family member, you must act like any other patient or family member.

Q. When I am speaking to a patient, and friends or family members are in the treatment room, do I assume the patient has given permission to discuss their care in front of these persons, or do I need to ask them to leave the room?

A. Do not assume it is okay to speak in front of other people in the room with the patient. Ask the patient if it is okay to discuss their care, such as diagnosis, medications, treatment plans, etc., in front of other person(s). If information that may embarrass the patient needs to be discussed, then ask the person(s) to leave the room before beginning the discussion.

We are committed to providing the best possible care to all of our patients. This includes treating our patient’s information with care, including maintaining every patient’s confidentiality and keeping their protected health information secure.
The health care industry is complex and heavily regulated. There are numerous laws and regulations that apply to health care and hospitals. The purpose of this chapter is not to explain every applicable law in great detail, but to briefly highlight the laws of greatest compliance concern and provide you with additional resources.

We will uphold all laws and regulations. If there is a doubt as to the legality of any action, seek advice from your supervisor or manager, and as appropriate, the Logan Health Chief Compliance and Privacy Officer and/or the Legal Department before taking that action.

ANTI-KICKBACK AND STARK

Anti-kickback and Stark federal and state laws and regulations govern the relationship between hospitals and physicians and anyone else who may refer patients to Logan Health.

If relationships with physicians are properly structured, but not diligently administered, this failure may result in violations of the law. Issuance of payments to physicians under agreements must be supported by all required documentation (e.g., time sheets). Any arrangement with a physician must be structured to ensure compliance with legal requirements, our policies and procedures, and with any operational guidance that has been issued.

ANTI-TRUST AND UNFAIR COMPETITION

We believe that the welfare of consumers is best served by economic competition. Our policy is to compete vigorously, aggressively, and successfully in today’s increasing competitive business climate; and to do so in compliance with all applicable anti-trust, competition, and fair dealing laws. We seek to excel while operating honestly and ethically.

Anti-trust laws are designed to preserve a competitive economy and promote fair and vigorous competition. These laws could be violated by discussing our business with a competitor (such as how our prices are set), disclosing the terms of supplier relationships, allocating markets among competitors, agreeing with a competitor to refuse to deal with a supplier, or disclosing the wage rates we pay our employees. Employees involved in marketing, sales, purchasing, contracts, or in discussions with competitors have a particular responsibility to ensure that they understand our standards and are familiar with applicable competition laws. Because these laws are complex, employees should consult with the Logan Health Legal Department when questions arise.

DOCUMENTATION, BILLING AND CODING

Logan Health employees are responsible for ensuring our bills accurately reflect the services rendered and supplies used to treat our patients. Policies, procedures, and systems

Logan Health adheres to all state and federal laws and regulations governing the health care industry.
are in place to facilitate accurate billing to government and other payers in compliance with federal and state laws and regulations. We prohibit any employee or agent from knowingly presenting or causing to be presented claims for payment or approval that are false, fictitious or fraudulent. Services are billed based on a provider order, thorough documentation of care, medical necessity and accurate coding.

Only bill for services that are properly ordered, performed and documented.

Logan Health facilities do not routinely waive co-payments or deductible payments, except in strict conformity with specific Logan Health policies.

When any payer agreement requires the collection of co-payments and/or deductible amounts, these amounts are collected as required by the agreement. Decisions to waive any co-payment or deductible must be disclosed and implemented in accordance with Logan Health policy.

Code what you do, do what you code.

CONTRACTS

Logan Health accurately specifies the services to be provided, benefits to be received, realistic time commitments, and reasonable compensation rate(s) in all contracts.

All contracts are reviewed by the Legal Department, or external legal counsel approved by the Legal Department, prior to issuance in accordance with Contract Administration A525 policy. Contracts comply with applicable federal, state and local laws, including, without limitation, the Anti-Kickback Statute, Stark Law and/or any other federal health care program requirements or the regulations and guidance related to those statutes. Documentation of fair market value analysis and business rationale is completed for applicable agreements outlined in the policy. All contracts are documented in the electronic repository for contracts.

All contracts must be in writing and current.

FALSE CLAIMS ACT

The Deficit Reduction Act contains specific requirements regarding entities that receive more than $5 million annually from Medicaid. The law requires that entities covered by the law have specific policies dealing with matters of fraud and abuse. In addition, employees and contractors are to be informed about a federal law known as the False Claims Act, a civil anti-fraud statute providing that any person who knowingly submits or causes the submission of false claims for government funds or property is liable for damages and penalties. Entities that knowingly violate this law can be liable for triple damages and penalties in excess of $10,000 to $20,000 per claim. The False Claims Act contains provisions for individuals who are known as “relators” or whistleblowers. The law provides certain protection for employees who are retaliated against by an employer because the employee filed a whistleblower lawsuit. See False Claims Act A315 policy for more information.
**INELIGIBLE INDIVIDUALS AND ENTITIES**

We do not contract with, employ, accept volunteers or bill for services rendered by an individual or entity that is excluded, suspended, debarred or ineligible to participate in federal health care programs; or is suspended or debarred from federal government contracts or programs. At onboarding and monthly thereafter, we search the Department of Health and Human Services’ Office of Inspector General, General Service Administration, and state lists of excluded and ineligible persons. Employees, vendors, board members, volunteers, students and privileged practitioners are required to report to the Logan Health Compliance Department if they become excluded, debarred, or ineligible to participate in federal health care programs.

**EMTALA**

The Emergency Medical Treatment and Labor Act (EMTALA) is a federal statute that addresses how hospitals deliver emergency medical services to the public. Known as the “anti-dumping” law, it prohibits a hospital Emergency Department or Birth Center from delaying care, refusing treatment, or transferring a patient to another hospital based on the patient’s ability to pay for services.

Anyone who comes on to hospital property seeking emergency medical care or is in active labor will be provided with a timely medical screening examination by an appropriate qualified medical professional. If the medical screening exam results in the determination that an emergency medical condition exists, then the patient is provided with the necessary stabilizing treatment or appropriate transfer. We do not delay the medical screening examination and necessary stabilizing treatment in order to seek financial and demographic information.

Patients determined to have an emergency medical condition are only transferred to another hospital at the patient’s request or if the patient’s medical needs cannot be met at the Logan Health hospital (e.g., we do not have the capacity or capability). Patients are only transferred after they have been stabilized within the capabilities and capacity of the transferring hospital, and are formally accepted for treatment at the receiving hospital.

See Emergency Medical Treatment and Active Labor Act (EMTALA) A313 policy for more information.

**ENVIRONMENTAL COMPLIANCE**

It is our policy to comply with all environmental laws and regulations as they relate to our operations. We preserve our natural resources to the fullest extent reasonably possible. We comply with all environmental laws and operate our facilities with the necessary permits, approvals, and controls. We work diligently to employ proper procedures to provide a good environment of care and to prevent pollution.

In helping Logan Health comply with these laws and regulations you are responsible for understanding how your job duties may impact the environment. You must adhere to
all requirements for the proper handling of hazardous materials, and immediately alert your supervisor of any situation that may be potentially damaging to the environment.

Always err on the side of caution when handling chemicals that might be harmful to you or others.

GOVERNMENT INVESTIGATIONS

From time to time, government officials may contact Logan Health on-site or remotely to investigate potential issues. An employee who receives notice or is asked to participate in an interview should immediately contact the Chief Compliance and Privacy Officer or the Legal Department. See Government Investigation A330 policy for more information.

QUESTIONS AND ANSWERS

Q. I discovered a coding error in the billing system and corrected it. What obligations do I have to determine if other claims were submitted in error?

A. You should immediately notify your supervisor or Logan Health Compliance Department of your discovery so any potential error can be determined and corrected.

Q. I work in the business office and have noticed that rent is not being paid by a physician who is renting office space from the hospital. Is this a problem?

A. This could be a violation of the Anti-kickback Statute and subject both the hospital and the physician to criminal penalties. Rent must not only be collected, it must be at fair market value. You should bring this matter to the attention of your supervisor, contact Logan Health Compliance Department or call the Integrity Helpline.

Q. I sometimes attend trade shows or professional meetings where I run into old friends who work for our competitors. Are there any subjects that I should avoid?

A. Avoid anything that affects competition in the marketplace, including pricing, profit margins or credit and billing practices. Stay away from any business discussions with our competitors.

Q. As a newly hired nurse in our home health agency, I noted that some of the patients I visit did not appear to be homebound. Should I report this?

A. Yes, you should report your observation to your supervisor, Logan Health Compliance Department or the Integrity Helpline so they can take action to ensure these services are not being billed until the issue is resolved.
WORKPLACE RULES

Our goal is to create a positive work environment for all workforce members based on mutual respect and open lines of communications. We need you to help us create that environment by working with your co-workers and peers to create a culture where patient safety and quality will flourish. This chapter covers the required workplace rules to ensure we continue to be a great place to work.

If you observe anyone violating these rules, you have a duty to report the violation to your supervisor, the Human Resources Department or the Integrity Helpline. We will not tolerate retaliation or harassment against any workforce member who raises a concern in good faith.

Do not disclose confidential or proprietary company information.

CONFIDENTIALITY OF BUSINESS INFORMATION

As a workforce member, you must safeguard Logan Health business information. Business information includes, but is not limited to, billing records, computer data, contracts, emails, financial records, internal communications, letters, marketing plans, personnel records, and prices. If you use business information as part of your job, you have a duty to safeguard this information and keep it confidential. The same measures of safe-guarding PHI also apply to safeguarding business information.

CONFLICTS OF INTEREST

A conflict of interest is any activity which involves, or appears to involve, an arrangement that is in conflict with the best interests of Logan Health. You may have a conflict of interest if your outside activities or personal interests influence, or appear to influence, your ability to make objective decisions on behalf of Logan Health. There may not be anything wrong with having a conflict of interest. Our objective is to manage conflicts of interest.

Conflicts of interest not only extend to your personal interests, but also the interests of immediate family member. For example, if your sister-in-law owns a catering company and you are in charge of arranging for a catered event at the hospital, you may have a conflict of interest with the catering company.

What this means is you must remove yourself from the decision to select the caterer; however, it does not mean the hospital cannot use the caterer. In this example, there is a conflict of interest and removing yourself from the catering decision is a way of properly managing that particular conflict of interest.
WORKPLACE RULES
– CONTINUED –

If a deal or relationship feels or looks like a conflict of interest, it probably is and should be disclosed and resolved.

In order to properly manage any potential conflicts, and to protect you from any accusations that you may have improperly acted on a conflict of interest, we have a policy that requires all workforce members to annually report any actual or potential conflicts they may have now or might have in the future. By properly disclosing your conflicts, we are able to manage the conflicts of interest and ensure our business transactions are fair to all parties involved. The disclosure form is attached to the Conflict of Interest A304 policy.

COPYRIGHTS AND INTELLECTUAL PROPERTY

Print and electronic materials (including photography, audio recordings, video recordings, and software) are usually protected by copyright laws. Logan Health workforce members are expected to respect and comply with these laws, which ensure those who created these materials receive proper credit and compensation for their work. We do not reproduce articles, pamphlets, software or other electronic materials without written permission from the writer or publisher, or by purchasing the correct license for its use.

• We maintain proper licenses from performing rights organizations to play copyrighted music or video in public areas.
• We do not make copies of copyrighted magazines, books, or other publications without having prior permission or a blanket license.
• We do not use trademarks or logos of other organizations without prior permission.
• We do not make copies of licensed software for distribution without having a license.
• We do not take photographs, video or audio recordings of people for use in our promotional or educational publications and presentations without proper consent.

DIVERSITY AND EQUAL OPPORTUNITY

Our workforce is diverse and includes people from many places and ancestries. Their talents and different viewpoints contribute greatly to our success. We are committed to providing an equal opportunity work environment where everyone is treated with fairness, dignity, and respect. Accordingly, we do not discriminate based on race, color, religion, sex (including sexual orientation, gender identity and pregnancy), age, national origin, protected veteran status, disability, genetic information or any other characteristic protected by law. Our policy applies to all personnel actions such as hiring, staff reductions, terminations, transfers, evaluations, recruiting, compensation, corrective action, discipline, promotions, and training.
HARASSMENT

We are committed to providing a work environment that is free of harassment. Harassment of any kind is strictly prohibited; including harassment on the basis of race, color, religion, national origin, age, sex, sexual orientation, gender identity, disability, genetic information, veteran status, or other characteristic protected by law.

Harassment may take on many forms, but the most common forms include:

• verbal conduct such as epithets, derogatory jokes or comments, slurs or unwanted sexual advances, invitations or comments;
• visual conduct such as derogatory and/or sexually- oriented posters, photography, cartoons, drawings or gestures;
• physical conduct such as assault, unwanted touching, blocking normal movement or interfering with another person because of sex, race, or any other protected characteristic.

Logan Health strongly urges the reporting of all incidents of discrimination, harassment, or retaliation, regardless of the offenders' identity or position. Individuals who believe they have experienced conduct contrary to Logan Health policy or who have concerns about such matters should file their complaints with any member of management, your Human Resources Business Partner, or the Integrity Helpline. Reporting harassment to an Employee Assistance Program (“EAP”) counselor is not sufficient since information an employee provides to the EAP is not shared with Logan Health. Logan Health cannot intervene and rectify inappropriate situations unless it is made aware.

Report all cases of discrimination to the proper Logan Health official to ensure appropriate resolution.

GIFTS

Logan Health employees are expected to remain above reproach in their business dealings, are encouraged to err on the side of prudence, and to avoid even the appearance of impropriety. It is critical to avoid the appearance of impropriety when giving to or accepting gifts from individuals who do business with or are seeking to do business with Logan Health. We will never use gifts or other incentives to improperly influence relationships or business outcomes.

Accordingly, Logan Health policies set forth the parameters for receiving and giving gifts to those with whom we do business. If the gift or entertainment would influence, or reasonably appear to others to be capable of influencing the employee’s judgment in conducting business affairs with the donor, then it should not be accepted. Should there be any question regarding this policy you should seek advice from your supervisor or the Logan Health Compliance Department. This policy applies to family members of an employee as well. Gifts to, or accepted from, an agent of any governmental or accrediting agency are not acceptable. This does not affect gifts given to an employee by Logan Health.
Vendors
Per Logan Health policy, staff are allowed to accept certain types of gifts from vendors within a designated limited dollar amount per person per incident per year. This gift must be for an item or service, such as a clock or fruit basket. You cannot accept gift cards, cash or cash equivalents, such as checks or savings bonds. If a vendor offers you free overnight travel, you must get advance permission from your supervisor and the Logan Health Chief Compliance and Privacy Officer. See Business Gifts and Entertainment A334 policy for more information.

Patients
Gifts from patients or patients’ families are to be avoided. When a patient wishes to show their appreciation, it is encouraged that they do so by making a financial donation to the Logan Health Foundation. Where courtesy requires acceptance of a gift, it should be of modest value and shareable with co-workers if possible. Gifts to patients must never be solicited and must follow specific guidelines such as nominal value: less than $15 individually up to an aggregate value of $75 per year per patient; to promote access to care; for financial need; or for preventive care. The intent of any gift or service is not to influence patients to receive items or services payable by the federal or state programs. Gifts may not be provided in cash or cash equivalents. Gift certificates that can be exchanged for goods or services are acceptable; but gift certificates that can be exchanged for cash are not. Contact the Logan Health Compliance Department to assure guidelines are followed accordingly prior to any gifting.

Physicians
Under federal law, it is unlawful for any person to solicit, offer, pay for, or receive anything of value that would induce the referral of business to a hospital or other medical facility. If the item or service is reimbursable directly or indirectly, in whole or in part, under Medicare, Medicaid or another federal program, it should not be accepted.

Therefore, since physicians are individuals who refer patients to our facilities, any gifts to a physician must comply with the restrictions of the Stark Law and Federal Anti-kickback Statute, and are not to exceed those limitations. Under no circumstances will any gift, payment, or other thing of value be provided to a physician or physician’s family that in anyway could be construed as a payment for the referral of a patient or other business to Logan Health.

Any questions related to these guidelines should be directed to the Logan Health Legal Department or the Logan Health Chief Compliance and Privacy Officer.

ENTERTAINMENT
Entertainment is generally a social event (e.g., a meal, attendance at a sporting or cultural event, participation in a recreational activity, etc.) where business matters are discussed but is not the main purpose of the event. All business entertainment events must include some business discussion and a host from Logan Health must be present. The cost associated with such an event must not be excessive or extravagant in frequency or
amount in any calendar year. Entertainment may not be offered for the purpose of influencing or inducing the referral of business.

Any entertainment involving physicians or other persons who are in a position to refer patients or other business to our health care facilities must be undertaken in accordance with Logan Health policies and government regulations.

**NONMONETARY BENEFITS TO PHYSICIANS**

Nonmonetary benefits include any benefit to a physician or their immediate family member, irrespective of the form, including gifts and entertainment, but not cash or cash equivalents. The maximum annual dollar value of nonmonetary benefits provided to a physician or their immediate family member by Logan Health is established by the federal government. All nonmonetary benefits given to physicians must be reported to the Logan Health Compliance Department or entered into the expense reimbursement software in order to capture, monitor and control benefits in compliance with the annual nonmonetary benefits allowable by the government.

For more information on nonmonetary benefits and incidental benefits, see Nonmonetary Benefits Provided to Physicians A320 policy. For questions contact the Logan Health Compliance Department or the Legal Department.

**PERSONAL USE OF LOGAN HEALTH RESOURCES**

Logan Health resources, such as photocopiers, computers and paper, are meant for Logan Health use. However, it is permissible to use Logan Health resources, in a very limited way, as long as your supervisor consents to such use. Some examples of limited use include making occasional copies or limited personal use of email.

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**SUBSTANCE ABUSE**

For the safety of our patients, it is vital that we have a drug and alcohol-free workforce. Our policy is to perform drug testing upon hiring. We may also perform drug or alcohol testing randomly, if there is an on-site accident or other incident, or if there is a reasonable suspicion that a workforce member is under the influence of drugs or alcohol.

If you are taking a legally-prescribed prescription that may impair your performance, you must advise your supervisor immediately. Occupational Health Services can be contacted for the full list of medications that you must communicate to your supervisor. If you report to work under the influence of alcohol or drugs, you will be subject to disciplinary action, up to and including termination of employment.

Employees are prohibited from using, selling, distributing, possessing, or manufacturing illegal drugs, controlled substances, narcotics, or alcoholic beverages on Logan Health premises (including parking lots or work sites). Tobacco use on the Logan Health campus is prohibited.

Employees subject to the Drug-Free Workplace Act who are convicted of any criminal drug violation occurring in the workplace must report the conviction to the Human Resources Department within five days. Human Resources will take appropriate action as required by law.

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Treat all Logan Health property and equipment with care and respect.
Employees may be subject to disciplinary action, up to and including termination, for violations of this policy. Violations include, but are not limited to, possessing illegal or controlled substances and narcotics, or alcoholic beverages at work; being under the influence of those substances while working; using them while working; or distributing or illegally manufacturing or selling them on Logan Health premises and work sites.

PROFESSIONAL CONDUCT AND BEHAVIOR EXPECTATIONS

Logan Health employees, volunteers, board members, vendors and contracted staff should serve as role models in the fulfillment of our mission, vision and core values, which define the Logan Spirit.

- **Integrity**: In our actions and in our words, we approach every moment with integrity. We feel deeply the need to respect our patients and each other no matter the situation. We take ownership and responsibility to protect the organization and provide exceptional care for our patients.

- **Quality**: We provide evidence-based care that delivers on the patient’s individual needs ensuring that patients and caregivers are safe.

- **Service**: We are here to serve the needs of our patients and our communities by providing excellence in care at each and every interaction.

- **Compassion**: This is at the center of everything we do. Wherever and whenever people seek us, they will find open hearts, ready to listen in order to deliver patient-centered care.

- **Unity**: We are connected in our purpose, to each other and to our community. We create an environment where everyone is valued and respected for their contributions and we deliver a welcome, inclusive, seamless experience.

To foster a thriving culture, Logan Health prohibits behaviors that are unprofessional, disruptive and counter to our values, including:

- Physical threats
- Bullying
- Threatening, abusive, profane or similarly offensive language and/or verbal outbursts directed at patients, families, visitors, co-workers, volunteers, physicians or any other individual with whom an employee has contact
- Refusal to perform assigned tasks
- Uncooperative attitudes during routine activities
- Reluctance or refusal to answer questions, return phone calls
- Degrading or demeaning comments regarding patients, families, co-workers, physicians, Logan Health personnel or the organization
- Inappropriate physical contact with another individual that is threatening or intimidating
- Destruction of Logan Health property
- Derogatory comments about the quality of care being provided by Logan Health or a provider
Violations of the expected behaviors defined in the Code of Conduct will subject the individual to disciplinary action up to and including termination.

WORKPLACE VIOLENCE

We will maintain a violence-free work environment. Workplace violence may include harassment, assault, blackmail, and other acts that may threaten the safety of another person, impact another person's physical or psychological well-being, or cause property damage. Any workforce member who commits an act of violence is subject to discipline up to and including termination.

Firearms, explosive devices, fireworks, lasers, tasers, and other dangerous materials are prohibited on our property (with the exception of law enforcement officers and on-duty Logan Health security members).

QUESTIONS AND ANSWERS

Q. What qualifies as sexual harassment and what can I do if I believe that it is happening to me?
A. Sexual harassment includes any unwelcome or unwanted conduct of a sexual nature (verbal or physical) when submission to, or rejection of, this conduct by an individual is used as a factor in decisions affecting hiring, evaluation, promotion, or other aspects of employment; or the conduct substantially or unreasonably interferes with an individual's employment or creates an intimidating, hostile, or offensive work environment. You should report this conduct to management, your Human Resources Business Partner or the Logan Health Compliance Department.

Q. I work in the accounts payable department, I noted we purchased a gift of several hundred dollars for a physician who refers a lot of patients to us. Is this acceptable?
A. Gifts to physicians by a hospital are strictly limited by provisions of the Stark Law and Anti-kickback Statute. Should there be a question about such a gift, the matter should be brought to the attention of your supervisor, Legal or Logan Health Compliance Department. See Compliance with Stark and Anti-kickback Laws A325 policy and Nonmonetary Benefits Provided to Physicians A320 policy for more information.

Q. Are the results of drug tests kept confidential?
A. Yes. Drug test results will be carefully monitored to protect employee privacy and will be used only as needed to address the employee's particular situation, or as otherwise required by law.

Q. There is one office in my facility where offensive pictures are displayed. I have expressed my objections to the person responsible and the response I have received is, “Grow up.” What should I do?
A. You should contact your supervisor or the Human Resources Business Partner to have it investigated.
Logan Health includes a multitude of different businesses: hospitals, outpatient centers, home health agencies, clinical laboratories, and skilled nursing facilities, to name a few. Within each of these businesses there are complex, ever changing, rules and regulations that govern each type of service. Open discussion about issues without fear of retribution is vital to the effectiveness of our Compliance Program.

**DUTY TO REPORT**

Our Code of Conduct requires you to report suspected violations of our policies or the law without delay. Logan Health does not tolerate retaliation against any employee who reports issues or concerns in good faith. If an employee has knowledge of actual wrongdoing and does not report the activity, it will be considered a serious offense which can lead to disciplinary action, up to and including termination of employment.

A few examples of violations you should report include:

- Patient safety concerns or patient endangerment
- Patient complaints and grievances
- Potential EMTALA violations
- Billing or coding errors
- Harassment or a hostile workplace environment
- Theft or other criminal acts
- Concerns of patient privacy
- Alcohol and substance abuse
- Retaliation
- Conflict of interest
- Fraud
- Falsification of contracts

Always first consider reporting concerns to your direct supervisor. Other methods for reporting include:

- Calling or emailing the Logan Health Chief Compliance and Privacy Officer or the Logan Health Compliance Department
- Online reporting on the Logan Health Compliance Department page of the Wire (Logan Health staff Intranet)
- Integrity Helpline
- Internal Midas event reporting system
- Feedback provided via patient survey

**Integrity Helpline:**

1-844-760-5833

[mycompliancereport.com/LOGAN](mycompliancereport.com/LOGAN)

The Integrity Helpline is answered by an outside company that allows you to report your concerns anonymously without fear of retribution.

Logan Health has established an Integrity Helpline that is answered by an outside company to enable employees to report problems or concerns involving ethical or
compliance issues. The Integrity Helpline allows employees to report a concern anonymously – callers are not required to identify themselves. All calls will receive immediate attention and will be investigated in an appropriate manner. The Integrity Helpline is intended to supplement existing internal communication channels, and not intended to replace your management team, senior management or the Logan Health Compliance Department. The Integrity Helpline is available when you believe that you have exhausted normal Logan Health channels or feel uncomfortable about bringing an issue to your supervisor, manager, Human Resources Business Partner or the Logan Health Compliance Department.

**NON-RETALIATION/RETRIBUTION FOR REPORTING COMPLIANCE ISSUES**

Logan Health policy prohibits any employee from retaliating against another employee who has reported suspected wrongdoing in good faith. Every Logan Health employee has the responsibility to create a work environment in which ethical and legal concerns can be raised and openly discussed without fear of retaliation or retribution. This includes avoiding any action that might constitute retaliation or retribution against an employee who has reported a concern.

If you suspect that any Logan Health employee is engaging in acts of retaliation or retribution against another employee, immediately notify the Logan Health Compliance Department, or call the Integrity Helpline. Retaliation, or seeking retribution against a reporting employee may lead to disciplinary action, up to and including termination of employment on the first offense.

**Every employee has the responsibility to create an environment in which concerns can be openly discussed.**

**QUESTIONS AND ANSWERS**

Q. What happens when I call the Integrity Helpline?

A. The Integrity Helpline is available 24 hours a day, 7 days a week. You can communicate your concern through phone or web-based services. The Integrity Helpline is a confidential option provided by a third-party reporting service. Your concern is documented by an interview specialist which is then sent to the Logan Health Compliance Department. If you call the Integrity Helpline, your voice will not be recorded, but instead the interview specialist transcribes your message and sends it to the Logan Health Compliance Department.

Q. I had a dispute with my supervisor; therefore, I made a call to the Integrity Helpline alleging things I knew not to be accurate just to cause a problem. Are there consequences for my actions?

A. Yes, there can be serious consequences. The Integrity Helpline is for making legitimate complaints about suspected or possible wrongdoing by Logan Health or someone else. By making false or unfounded allegations, you may have caused undue hardships for a fellow employee and unnecessary use of valuable resources of Logan Health. We would consider this type of behavior unacceptable, and could lead to disciplinary action (up to and including termination of employment).

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Q. My coworker has photos on his personal phone of a patient in the hospital and texted the photos to me. If I reported this to the Logan Health Compliance Department, will I get in trouble for having the photos on my phone?

A. It is your duty to report this violation of patient privacy and Logan Health policy to your supervisor or the Logan Health Compliance Department and you will be commended for doing so. You will be asked to show the photos to the Logan Health Compliance Department for the resulting investigation followed by deleting the photos from your device.

Q. How will I know if anything has been done about my complaint?

A. If there were substantiated improprieties occurring, you will most likely see a change in the activities which you have reported. You can also call the Integrity Helpline to make an inquiry into the status of the investigation. During your initial call or web-based submission, you will receive instructions on how to retrieve available updates concerning your inquiry.

Q. I did not receive pay for the overtime I worked during the last pay period. Should I call the Integrity Helpline to get this resolved?

A. No. Calling the Integrity Helpline is not the place to address routine administrative matters. You should work with your supervisor and Human Resources Business Partner to resolve the issue. Should you call the Integrity Helpline, the investigation will begin by contacting your Human Resources Business Partner and supervisor, which could delay faster action had you gone to your supervisor and Human Resources Business Partner in the first place.
In most cases when you have a concern, you should contact your supervisor, the Logan Health Chief Compliance and Privacy Officer or your Human Resources Business Partner.

Logan Health
Chief Compliance and Privacy Officer:
Adrienne Chase, CSW, EJD, CHC, CHPC, CCEP

Logan Health Compliance Office:
(833) 594-0321 | ComplianceOffice@logan.org

Other resources that may help answer your questions:
Logan Health website: www.logan.org
Logan Health intranet: wire.logan.org
PolicyStat: KRH.policystat.com