



Care1st Health Plan Arizona, Inc./ ONECare by Care1st Health Plan Arizona, Inc.

Standards of Conduct

Introduction

As Care1st employees, we have a responsibility to display total integrity in our actions on behalf of Care1st. Integrity is the basis of our reputation as individuals, and it is the basis of our reputation as an arranger for the provision of health care services.

Care1st Standards of Conduct are intended as a guide to our decisions and actions. But no set of standards or written rules can substitute for the good judgment, common sense and personal integrity required to meet the challenges of our daily work.

The Standards of Conduct reflect our organization's BASIC VALUES. In summary, these BASIC VALUES are:

- To arrange for the provision of quality, cost-effective health care services to our diverse patient community;
- To be honest, trustworthy and reliable in all relationships;
- To be responsive to the needs and justifiable expectations of the health care professionals who are a part of our team;
- To pursue profitability and growth;
- To treat all our employees with respect;
- To comply with all applicable legal, regulatory, and contract requirements; and
- To prevent fraud, waste and abuse in health care programs we are involved in.

Care1st Standards of Conduct must be observed by all its employees. No Care1st employee, regardless of rank, may allow personal preferences, inconvenience or competitive pressures to compromise adherence to Care1st Standards of Conduct.

In addition, Care1st expects contractors, subcontractors, providers, enrollees and all others who either contract with Care1st or receive benefits from it to act in a manner that is both ethical and compliant. Care1st staff is expected to monitor the actions of all parties to assure adherence to these Standards of Conduct.

Violating Care1st Standards of Conduct is a serious matter that may lead to disciplinary action up to and including termination. For employees, this may include a full range of disciplinary actions ranging from warnings and reprimands to suspension without pay and termination of employment. For contractors, this may include cancellation of their Care1st contracts. For enrollees, this may include loss of their Care1st membership.

No employee or agent of Care1st has any authority to act contrary to the provisions of these Standards of Conduct or direct or condone violations by any other employee or agent.

The Standards of Conduct is a living document that will be revised periodically to ensure proper communication of our expectation pertaining to ethics, compliance and prevention of fraud and abuse. Care1st reserves the right to revise this handbook as necessary to meet the company commitment to corporate integrity.

In addition to the Standards of Conduct, Care1st also has an Employee Handbook describing Personnel Policies and Procedures, and a Compliance Program that contains information on complying with legal and ethical standards. Additionally, Care1st from time to time, issues statements of policy directed at legal or business matters relevant to

particular parts of its business and general policies on managing and motivating its work force. Copies of these policies and procedures can be reviewed by contacting your supervisor or via the intranet. All employees are expected to maintain ongoing compliance with all statements of policy, procedure and practices of Care1st as well as with lawful and ethical business practices, whether or not they are specifically mentioned in this Standards of Conduct.

If you have a question about these Standards of Conduct or about any Care1st policy or practice, raise the question with your supervisor or manager, Department Head, the Human Resources Department, or the Market Compliance Officer. If they are unable to answer all your questions, they will identify the correct source of information, direct you to the appropriate procedures to follow, and provide additional information as necessary. Your inquiries will be handled confidentially, up to the limits imposed by the law. If you wish to call anonymously with any question or concern, feel free to call the Compliance Hotline at 1-866-364-1350, or you may contact or write either the Human Resources Director or the Market Compliance Officer.

If you wish to raise an issue or concern covered in this publication, such as a legal compliance issue, an ethical or integrity issue, or one involving actual or potential health care fraud, waste and abuse, use the following process:

- Ask yourself if the action is ethical and legal.
- If you are in doubt, ask your supervisor. If you are not comfortable discussing the issue with your supervisor, discuss the issue with a higher-level manager or Department Head. If you do not feel comfortable taking this step, discuss the matter with the Human Resources Director, the Market Compliance Officer or call the Compliance Hotline at 1-866-364-1350.

Overview of the Care1st Standards of Conduct

1. Policy on Non-Retaliation for reporting Fraud, Waste and Abuse

Care1st encourages employees to report any concerns. However, sometimes employees may not feel comfortable notifying any issue for fear of retaliation or harassment. That is the reason Care1st prohibits any employee from engaging in any type of retaliatory action against an employee who reports a concern. Care1st also prohibits any employee from engaging in any type of retaliatory action against a provider, vendor, or other first tier, downstream or related entity (FDR) of Care1st . Any manager, supervisor or employee who engages in retaliation or harassment is subject to discipline, which may include termination of employment on first offense. Employees are expected to report to the Market Compliance Officer any type of retaliatory behavior towards them by any member of Care1st team regardless of the rank or title of the person conducting the harassment. The Market Compliance Officer will seek the appropriate resolution process.

This does not mean an employee will be excused from the consequences of improper behavior or inadequate performance by reporting his or her conduct. It does mean that the consequences of improper behavior or inadequate performance will not be made more severe because an employee has made the report regarding his or her behavior.

Reference: Compliance policy 1006 Methods for Reporting Compliance Issues

2. Providing Quality Health Care Services

General Standard of Quality

- We shall arrange for the provision of quality health care services that respond to individual, family and community needs.
- As arrangers of health care services upon whom members depend for their health and safety, we must diligently take note of deficiencies or errors, even those that seem small or insignificant. You should promptly report such matters to your supervisor or manager.
- We are responsible for insuring that the provision of health care services and products comply with all applicable laws, regulations and standards. This includes complying with state and federal legislation regarding patients' rights.

Standard of Quality Care

- We shall uphold sound standards in all our services and oversight programs regarding patient care. When particular credentials are required, we will verify that our employees have these credentials.
- Care1st contracted providers shall assess the requirements and needs of their members and fulfill their obligations by providing appropriate services. When it is practical, they shall seek input from members and their families, medical providers, and referral sources.
- Care1st and its contracted providers shall maintain records and documentation to meet the requirements of facility policies, and all laws and regulations.

Quality in Community Service

- Care1st shall seek to educate and inform the community about health issues available through Care1st contracted providers and our Health Education staff.
- Care1st shall contribute to the advancement of health care services by Care1st contracted providers by improving their own skills through their participation in professional education and development programs.

3. Compliance with Legal Requirements

Care1st shall uphold all laws and regulations. If there is a doubt as to the legality of any action, we shall seek advice from our supervisor or manager. We shall only pursue business opportunities that are legal and consistent with Care1st Standards of Conduct.

Accuracy of Records, Payments and Billing

- We shall prepare and maintain all member, provider and company data, records, and reports accurately and truthfully to the best of our ability. Recordkeeping shall adhere to applicable standards. Since many records must be retained for specific time periods, we shall take precautions to preserve such records in accordance with applicable laws and regulations.
- Before making payment for services, we shall require proper documentation that the services were in fact provided. Any claim for payment or reimbursement that is false, fraudulent, or otherwise inaccurate, is prohibited.
- Because of the trust placed in us by members, providers and others, we must always strive to maintain accurate financial records.
- If we observe any record or payment that is not accurate, we shall specify the services that are not accurate and we shall promptly report the problem to a Care1st supervisor or manager authorized to address the situation. If an employee prefers not to report this to a supervisor or manager, he or she should call Care1st Compliance Hotline at 1-866-364-1350.
- We shall accurately specify the services to be provided, realistic time commitments, and reasonable compensation rate(s) in all contracts.
- We shall seek review of all contracts prior to issuance. Many factors determine the required level of review, and some contracts may require review by approved outside counsel. All agents, vendors, and contractors who have or desire business relationships with Care1st are expected to abide by Care1st Standards of Conduct.
- We shall make payments to clinicians, institutions and referral sources only under the terms of the Care1st contract with them.

Section 1557

Section 1557 is the nondiscrimination provision of the Affordable Care Act (ACA). The law prohibits discrimination on the basis of race, color, national origin, sex, age, or disability in health programs or activities that receive Federal financial assistance or are administered by an Executive agency or any entity established under Title I of the ACA. The final Section 1557 regulation incorporates existing civil rights obligations, but mandates more specific requirements for accessibility by persons with limited English proficiency (LEP)

Section 1557 makes it unlawful for any health care provider that receives funding from the Federal government to refuse to treat an individual – or to otherwise discriminate against the individual – based on race, color, national origin, sex, age or disability.

- Care1st views nondiscrimination practices – whether by race, color, religion, sex, sexual orientation, national origin, age, disability, veteran status, or any characteristic protected by law – as essential to realizing our commitment to quality, community and service.
- Care1st employees must observe and comply with all nondiscrimination rules. No Care1st employee, regardless of rank, may allow personal preferences to compromise adherence to the nondiscrimination provisions.
- For members with LEP, Care1st, at the point of contact, makes members aware that translation services are available when a member needs interpretation services in another language in order to communicate. Care1st provides translations of member material in accordance with AHCCCS and CMS requirements.
- Care1st makes benefit coverage decisions based on medical necessity and does not exclude, delay or deny services or benefits on the basis of race, color, national origin, sex, age, or disability.
- Care1st has a zero tolerance for violating nondiscrimination rules.

Other Legal Responsibilities

- We must never use, directly or indirectly, inside information for personal gain or the gain of others. Inside information is information about Care1st business not generally available to the public and gained through an individual's position at Care1st. Information need not be confidential or proprietary to be considered inside information. Inside information includes but is not limited to member's information, protected health information (PHI), provider contracts, provider membership eligibility lists, Care1st financial reports etc.
- Care1st prohibits any payment or receipt of any payment which may be viewed as a bribe, kickback, or inducement. A bribe or kickback is any payment or incentive offered with the intent of influencing a decision on grounds not directly related to business merits.

4. Ethical Compliance

Care1st Standards of Conduct statements provide general information about Care1st's stance on ethics. It does not replace Care1st policies, procedures or practices. More importantly, it cannot take the place of honest and open discussion.

When you have a question about these Standards or another ethics concern, your Department Director is often closest to the situation and best able to help you. However, Care1st recognizes that you may be uncomfortable raising certain questions with your Department Head. You are welcome to contact the Human Resources Department, the Market Compliance Officer, or the State President directly.

The Human Resources Department, Market Compliance Officer and the State President handle inquiries confidentially up to the limits imposed by the law. You may also call Care1st Compliance Hotline anonymously at 1-866-364-1350 to voice your ethics'

concern. Care1st supervisors and managers have a special obligation to be open to employee concerns about ethics. Even if an employee raises an uncomfortable question or criticizes you, you must welcome the employee's questions or concerns and, as appropriate, seek assistance in addressing them.

Care1st Standards of Conduct is a living document which will be updated periodically. If you have suggestions for improvement that are not addressed, please contact the Human Resources Director at ext 1840, or the Market Compliance Officer at ext. 8302.

5. Responsible use of Assets

We shall protect Care1st assets and assets entrusted to us by others, against loss, theft and misuse. In order to maintain the ability for Care1st to provide services cost effectively, Care1st assets must be carefully protected.

Responsible Use of Care1st Assets

- We shall preserve Care1st assets, property, facilities, equipment and supplies. This includes all Care1st property, whether owned or leased. Care1st tangible and intangible property includes office equipment, computers, Internet access, vehicles, supplies, reports and records, computer software, intellectual property and facilities.
- We will use company assets for Care1st business purposes only. Company property (including copies of company documents) must not be removed from company premises, unless it is necessary to do so to perform your job. If removed from company premises, prior approval must be received from the Department Head, Director or manager and HR/Facility Department. The property must be returned when no longer needed off-site.
- Those in supervisory or management roles shall establish procedures to ensure accountability for company assets and authorize only the correct use of these assets.
- We shall dispose of surplus, obsolete or junked property according to company policies and as directed by management instructions. Incorrect disposal of property is a misuse of Care1st assets.

Responsible Use of Assets of Others

- We shall protect member and provider property and information and handle all such property and information according to Care1st policies. Any mishandling of information or property must be promptly reported to a Care1st supervisor or manager. Information may be shared only with those authorized to receive such information and those with a legitimate need for the information.
- We shall protect proprietary information entrusted to us by actual and potential members, providers, vendors, referral sources, contractors, service providers and others. Such information shall be handled on a need-to-know acknowledgment of the recipient that the information is proprietary. Those in supervisory position or management roles shall include establishing procedures to ensure the accountability for the assets of others and authorize only the correct use of these assets.

6. Conflict of Interest

A conflict of interest exists when the loyalty of a Care1st employee is divided between his or her responsibilities to Care1st and to an outside interest.

The basic STANDARD for dealing with conflict of interest is simple:

If you believe a conflict of interest exists, treat the situation as if a conflict definitely exists until you have disclosed and resolved the potential conflict with your Department Director and the Market Compliance Officer.

No set of principles can cover every type of conflict of interest that may arise. The following Standards of Conduct guidelines address some important types of conflict of interest:

- We should also avoid direct responsibility for the hiring or supervision of a family member as well as entering into an employment or a financial relationship with a competitor of Care1st. We should avoid soliciting, offering, accepting or providing any consideration that might be construed as conflicting with Care1st business interests, such as meals, gifts, transportation or entertainment.
- We may not accept gifts exceeding \$75 in value. Gifts exceeding \$75 in value must be documented and reported to our supervisor or manager who will decide how such gifts should be handled. Meals and entertainment associated with legitimate business activities and of modest value are not prohibited, but must comply with Care1st policy.
- We must guard member and provider information against improper access or use by unauthorized individuals, such as individuals seeking financial gain from unauthorized access to this information.
- We must avoid any appearance of impropriety when dealing with providers, clinicians and referral sources. Cash gifts to providers, clinicians or referral sources are prohibited. Non-cash gifts to providers, clinicians or referral sources that exceed normal business courtesy and/or have a value exceeding \$75 are prohibited. If circumstances seem to dictate a gift exceeding this limit, prior approval must be obtained from the employee's department director/manager and the Market Compliance Officer and the reason for the gift documented.
- We must avoid any appearance of impropriety when dealing with
 - **federal government employees.** Cash gifts to federal government employees are strictly prohibited. Unsolicited non-cash gifts to government employees that do not exceed an aggregate value of \$20 or less are allowed (provided that the same federal employee does not receive more than \$50 worth of gifts from the same source in a calendar year). Modest items of food and refreshments (e.g., coffee and doughnuts) offered other than as part of a meal are allowed.¹
 - **State government employees.** Care1st employees may not offer or solicit, directly or indirectly, anything of economic value as a gift, gratuity, favor, entertainment, or loan that is, or may appear to be, designed to influence the employee's official conduct. Care1st may offer a state employee food, refreshments, or unsolicited advertising or promotional material of nominal value;²
- We shall maintain impartial relationships with actual and potential providers, vendors and contractors. We shall avoid exerting or appearing to exert influence on behalf of those with whom Care1st does business or may do business off friendship or any other relationship. Care1st employee and their families are

¹ EP Examination Process Guide - Section 3 - Initiation of an Examination - Regulations on Gifts From Outside Sources (www.irs.gov)

² ARS 38-504(C)

prohibited from soliciting gifts, loans, entertainment or anything else of value from a person or organization that does business or seeks to do business with Care1st.

- We shall not request nor offer any type of gift or incentive of any value to a government official or government employee.
- We are to avoid any violations of federal copyright laws, including, but not limited to computer software and published works and any other intellectual property.

Always disclose and seek resolution of any actual or potential conflict of interest, whether or not you consider it an actual conflict.

7. Maintaining a Safe Work Environment

- We shall strive to maintain a safe work environment. Because of the commitment of Care1st to its members and providers, we strive to make this an environment that fosters privacy and security.
- We shall uphold all policies, procedures, laws, regulations, standards and practices intended to make the work environment safe.
- We shall uphold all policies, procedures, laws, regulations, standards and reporting requirements applicable to the environment's aspects of Care1st operations. This includes use of buildings, property and equipment.
- If we observe any practice or condition that may not meet Care1st policies and procedures or any laws, standards or regulations, we shall promptly report this to our supervisor, manager or an appropriate Care1st authority.
- We may not endorse any product or service on behalf of Care1st without explicit prior approval to do so.
- We shall strive to create a workplace free of sexual harassment. We recognize that sexual harassment is prohibited at our facility and programs, and we shall promptly report any observed instance of sexual harassment to our supervisor or manager.

Human Resources

- We shall encourage our fellow Care1st employees to develop their skills and potential and treat one another in a fair and respectful manner.
- We shall support Care1st equal employment and other employee development programs. Care1st prohibits discrimination on the basis of race, color, religion, sex, sexual orientation, national origin, age, disability, veteran status, or any characteristic protected by law. All employment-related decisions will reflect this firm commitment.
- Care1st will only hire individuals who have appropriate credentials and who have not been convicted of any felonies, including crimes related to health care, or who are listed by a federal agency as ineligible for participation in federally funded programs. Background checks will be conducted prior to the beginning of employment on all employees.
- We shall take advantage of opportunities to develop our skills, talents, knowledge and understanding of our jobs. Our commitment to providing quality services to our members and providers requires that each of us strive to improve his or her ability to perform their job function.

- We shall observe the standards of our professions and exercise judgment and objectivity. Significant differences of opinion in professional judgment should be promptly referred to his or her supervisor or manager. If an employee prefers not to report this to a supervisor or manager, he or she should call Care1st Compliance Hotline, 1-866-364-1350.
- Those who serve as supervisors and managers shall encourage employee input through regular meetings, through personal communication with employees, and through other communication vehicles. Every Care1st supervisor and manager has a responsibility to create a work environment in which ethical concerns can be raised and openly discussed.
- We shall show respect and consideration for one another, regardless of position, station or relationship.
- We recognize that changes in our society sometimes create family needs that conflict with work requirements. We shall work cooperatively to overcome such conflicts in ways that meet the needs of our fellow employees without compromising our commitment to quality.
- We recognize the diversity of Care1st employees, members, providers and communities as a valuable asset. Care1st views diversity – whether by race, color, religion, sex, sexual orientation, national origin, age, disability, veteran status, or any characteristic protected by law – as essential to realizing our commitment to quality, community and service.
- Any employee or agent of Care1st who has knowledge of activities that he or she believes may violate the law has an obligation, promptly after learning such activities, to report the matter to his or her immediate supervisor, Department Head, the Human Resources Department, the Market Compliance Officer or the State President. Reports may be made anonymously and employee will be protected to the extent allowed by law from any retaliatory action for truthful reports.
- It is the obligation of Care1st employees to report known violations. Failure to report or failure to detect violations due to negligence or reckless conduct and making false reports shall be grounds for disciplinary action, including termination. Any reports of harassment or other workplace shall be referred to the Human Resources Department.
- No employee, director or agent of Care1st may enter into any discussion, communication, or agreement with any representative or organization providing the same services concerning prices or charges, policies, discounts or allowances, other contracting terms and conditions, or wage and salary information without approval from the Market Compliance Officer or the State President. Responses to requests for such information in the form of third party surveys and questionnaires shall be approved prior to any response by the Market Compliance Officer and the State President.
- False accusations, false statements or/and untruthful reports will be dealt with severely, which may include termination of employment.

Education and Training

- All employees will be provided with an orientation session addressing the organization stance on ethics, as well as expectations regarding Standards of Conduct within 30 days of hire.

- On an annual basis, employees are required to attend a mandatory refresher class specially created to keep employees updated with the Compliance Program.
- Special classes for our management team will take place on an ongoing basis.
- Managers and supervisors are to be knowledgeable in their areas of responsibility, policies and procedures. All managers and supervisors are to share the organization's commitment to excellence and integrity in all our business endeavors.
- Clinical, administrative or clerical staff involved in the preparation and/or submission of charge or billing data must be trained in coding and documentation practices.
- Billing policies and procedures must be written, approved by management, appropriately updated and made available to all employees involved in creating charge or billing data.

8. Preventing Fraud, Waste and Abuse in Health Care

This section will:

- ✓ Explain Federal and State laws (including those called "False Claims Acts") that define health care fraud and abuse and civil and criminal penalties for false claims;
- ✓ What Care1st is doing to detect and prevent health care fraud, waste and abuse;
- ✓ Your rights and responsibilities in detecting and preventing health care fraud, waste and abuse without retaliation.

Federal False Claim Act (FCA)

The Federal False Claims Act (FCA) is a federal statute that covers fraud involving any federally funded contract or program including Medicaid and Medicare.

The FCA establishes liability for any person who knowingly presents or causes to be presented a false or fraudulent claim to the U.S. government for payment.

The term "knowingly" means that a person, with respect to information:

- ✓ had actual knowledge of falsity of information in the claim, or
- ✓ acted in "deliberate ignorance" of whether or not the information was true, or
- ✓ acted in "reckless disregard" of the truth or falsity of the information in a claim.

It is not necessary that the person had a specific intent to defraud the government.

The FCA prohibits seven types of conduct:

1. **False Claim:** Filing false or fraudulent claims. A claim includes any request or demand for money that is submitted to the U.S. government or its contractors (like Care1st). A provider or hospital claim, or a vendor billing, submitted to Care1st involving Medicaid or Medicare programs counts as a claim.
2. **False Statement:** Making or using false statements or records.

3. **Conspiracy:** Conspiring with others to submit false claims that are actually paid by the government.
4. **Delivery of Less Property:** Delivering less property than the amount stated on the receipt or certificate.
5. **Delivery of Improper Receipt:** Delivering a receipt for property without knowing whether the information on the receipt is true.
6. **Unauthorized Seller:** Knowingly buying or receiving property from a government employee or official who is not authorized to sell it.
7. **Reverse false claims.** A reverse false claim involves using a false statement to conceal, avoid or decrease the amount of an obligation.

Common violations include double billing for services or items, submitting bills for services or items never provided are examples of false claims under the FCA.

The FCA also permits private citizens to file lawsuits on behalf of the federal government in cases where there is a false or fraudulent claim against a government program. In essence, these individuals are acting as “private attorney generals,” and are often referred to as “whistleblowers.” When whistleblowers file such suits they are also called “relators”. The law that allows individuals to file such suits is called “Qui Tam – or Whistleblower – Provisions”. Whistleblowers may receive a percentage ranging from 15-30% of amount recovered by the government if the suit is successful and certain legal requirements are met., and are protected from retaliatory action (such as employment reinstatement, back pay, interest on back pay and special damages) taken for filing a whistleblower action, investigating a false claim, providing assistance or testimony in investigations of false claims.

Health care providers and suppliers who violate the FCA can be subject to civil monetary penalties ranging from \$5,500 to \$11,000 for each false claim submitted. In addition to these civil penalties, providers and suppliers can be required to pay three times the amount of damages caused to the U.S. government. Criminal sanctions such as imprisonment also may be imposed. Finally, persons convicted under the FCA may be excluded from participating in federal health care programs.

Other Health Care Fraud Laws

Other laws that are designed to deter health care fraud include:

- ✓ Title 18, section 1347, of the United States Code which defines health care fraud as: “Whoever knowingly and willfully executes, or attempts to execute, a scheme or artifice –
 - (1) to defraud any health care benefit program; or
 - (2) to obtain, by means of false or fraudulent pretenses, representations, or promises, any of the money or property owned by, or under the custody or control of, any health care benefit program, in connection with the delivery of or payment for health care benefits, items, or services...”

- ✓ Arizona data laws pertaining to fraud and abuse include Arizona Revised Statutes (ARS) and the Arizona Administrative Code (AAC):
 - ARS 13-1802: Theft
 - ARS 13-2002: Forgery
 - ARS 13-2310: Fraudulent schemes and artifices
 - ARS 13-2311: Fraudulent schemes and practices; willful concealment
 - ARS 36-2918: Prohibited acts
 - AAC R9-22-1101: Civil Monetary Penalties and Assessments for Fraudulent Claims

Common Fraud and Abuse Areas in Managed Care

The following are common fraud and abuse areas in managed care:

- Marketing violations such as practicing prohibited marketing activities;
- Use of another's member ID card;
- Providing services which are not medically necessary;
- Billing for services not provided;
- Up coding and bundling in billing;
- Duplicate billing and payments;
- Charging Medicare patients amounts other than legally allowed co payments;
- Billing Medicaid members for covered services;
- Inaccurate reporting of utilization and encounter data; and
- License violations and non-disclosure of actions affecting licensure.

What Care1st is doing to detect and prevent Fraud, Waste and Abuse in its Health Care Programs?

Care1st has implemented a Compliance Program to help prevent fraud, waste and abuse in Medicaid, Medicare and other health programs..

The Compliance Program includes the following components:

- Appointment of a Market Compliance Officer who has primary responsibility for Care1st's Compliance program.
- A Compliance Committee that meets regularly to review compliance issues, assists in monitoring and implementing audit plans and training activities, and reports to the Board.
- Training and education of employees and contractors.
- Written policies and procedures on preventing/detecting fraud, waste and abuse.
- An annual audit plan that includes a list of all the monitoring and auditing activities for the calendar year.

Your Role in Preventing Health Care Fraud, Waste and Abuse

Employees must be familiar with the basic provisions of the FCA and other laws relating to health care fraud, waste and abuse, and the Compliance Program.

If you have any questions on any of these or like to learn more, you should consult your supervisor or the Compliance Department. Any employee who has knowledge of activities that he or she believes may cause fraud, waste and abuse of government funds and other resources dedicated to health care has an obligation, promptly after learning such activities, to report the matter to his or her immediate supervisor, Department Director, the Market Compliance Officer or the State President. Reports may be made anonymously and employees will be protected to the extent allowed by law from any retaliatory action for truthful reports. Failure to report or failure to detect violations due to negligence or reckless conduct and making false reports shall be grounds for disciplinary action, including termination.

9. Cooperation with Audits by Outside Agencies and Government investigations

Care1st employees will cooperate with audits by outside agencies and legitimate government investigations. If an investigator approaches a Care1st employee, he or she is to inform the person that he or she needs to notify Administration. To ensure verification of the investigator's credentials, Administration will take the necessary steps to confirm proper identification. Upon verification of the investigator's credentials, the Administration Department will follow proper procedures for cooperating with the investigation. The same procedure will apply for any type of search warrants or subpoenas for multiple records.

Employees are encouraged to cooperate in accordance with set policies and procedures. If at any time an employee feels that he or she is being intimidated by any government agent or outside agency investigator, he or she should notify their immediate supervisor or the Human Resources Department for assistance.

Care1st employees must not:

- Destroy or alter any company document or record in anticipation of request for the document or record by the government, an outside agency or court.
- Lie or make false or misleading statements to any investigator.
- Attempt to persuade any other company employee, or any other person, to provide false or misleading information to an investigator or to fail to cooperate with an investigation.