



PruittHealth Premier Standards of Conduct

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Table of Contents

Leadership Statement	3
Introduction	3
Applicability & Scope	4
Business Ethics and Conduct.....	4
Privacy.....	5
Marketing.....	6
Financial Endeavors	6
Regulatory Relationships.....	7
Workplace Conduct.....	7
Documentation.....	8
Sanctioned Screening & Exclusions	8
Internal Compliance Audit and Plan Monitoring.....	8
Conflict of Interest & Gifts.....	8
Prohibition of Improper Payments	9
Political Contributions.....	10
Compliance Training	11
Fraud, Waste, and Abuse	11
Violations of the Standards of Conduct.....	12
Reporting Potential or Detected Noncompliance or Fraud, Waste, and Abuse & Investigating Issues..	13
PruittHealth Premier Medicare Compliance Officer Contact Information	15
Compliance Hotline and Compliance Contact Information.....	15
Policy of Non-Intimidation and Non-Retaliation.....	16
Standards of Conduct Acknowledgement	16
PruittHealth Premier Standard of Conduct Attestation.....	17
References.....	18

Leadership Statement

PruittHealth Premier leaders accept the responsibility to create and maintain a culture of compliance throughout the workplace. Our leaders understand that establishing a culture of compliance is not easy but necessary. We recognize that compliance, ethical behaviors, and business practices, as well as program integrity starts at the top and trickles down to all colleagues and partners in our organization. These critical elements must be integrated into every interaction that takes place in our organization, and with every communication we have with our Plan members, with our colleagues, board members, with our business associates, regulatory agencies, contractors, subcontractors and first tier, downstream and related entities (FDRs). Compliance is everyone's responsibility.

Personalized attention and compassionate care for our members is behind all we do.

Neil Pruitt

Chairman and Chief Executive Officer

PruittHealth Premier

Introduction

The PruittHealth Premier Compliance Program is specifically tailored to unique operations and circumstances. PruittHealth Premier ensures enterprise-wide oversight through the following:

- The PruittHealth Premier Medicare Compliance Officer reports directly to the Chief Compliance Officer, who in turn reports to the Plan Chief Executive Officer.
- The Medicare Compliance Officer works to administer and oversee PruittHealth Premier's Compliance Program activities and operational requirements. The Medicare Compliance Officer is responsible for establishing formal and informal reporting processes to monitor the level of compliance with the Centers for Medicare & Medicaid Services' (CMS) required contractual performance standards.

PruittHealth Premier maintains certain policy and reference documents to guide its employees with respect to their day-to-day conduct and performance. The information addresses expectations of conduct in areas where improper activities could damage PruittHealth Premier's reputation and otherwise result in serious adverse consequences to PruittHealth Premier and to the involved partners (*i.e.*, employees). This document represents PruittHealth Premier's Standards of Conduct (hereafter referred to as "Standards"). These Standards describe the overarching principles and values of the organization. Compliance with these Standards is the responsibility of all PruittHealth Premier partners and business associates, as well as key vendors such as first tier,

downstream, and related (FDRs) entities performing services on behalf of PruittHealth Premier.

PruittHealth Premier expects all partners and business associates to conduct themselves in an ethical manner, and to report all instances of noncompliance and potential fraud, waste, and abuse (FWA) through appropriate mechanisms. These Standards identify how issues can be reported and that such reporting can be done anonymously and confidentially, and without fear of retaliation. Reported issues will be addressed and corrected in a timely manner. In addition, compliance and ethics are valued at the highest levels of authority within the organization.

As PruittHealth Premier continues to grow, and as federal and state laws change, the need may arise and PruittHealth Premier reserves the right to revise, supplement, or rescind any policies or portion of these Standards as it deems appropriate, in its sole and absolute discretion. Employees will be notified of changes to these Standards as they occur.

A partner's actions under these Standards are significant indications of the individual's judgment and competence. Accordingly, those actions constitute an important element in the evaluation of the partner for position assignments and promotion. Correspondingly, insensitivity to or disregard of these Standards' principles will be grounds for appropriate management disciplinary action.

Partners who become aware of any substandard health care services being provided or non-compliance must immediately report the incident, via one of the mechanisms set forth in this Standard of Conduct.

Applicability & Scope

These Standards apply to all PruittHealth Premier (the Plan) partners,, which includes all current employees including, those who have job duties related to the Plan's Part C and D operations, as well as members of the governing body (i.e., Board of Directors) responsible for oversight of the Medicare program under the direct control of the Plan, whether or not they are paid by the Plan. The Standards outlined in the Standards of Conduct are applicable to FDRs as defined by CMS.

Business Ethics and Conduct

The successful business operation and reputation of PruittHealth Premier is built upon the principles of fair dealing and ethical conduct of our partners. Our reputation for integrity and excellence requires careful observance of the spirit and letter of all applicable laws and regulations, as well as a scrupulous regard for the highest standards of conduct and

personal integrity. PruittHealth Premier's success is dependent upon trust of stakeholders we interact with including our members, partners, providers, vendors, regulators, and the communities we serve. And we are dedicated to preserving that trust of all of the above noted stakeholders. Partners are expected to conduct themselves in a way that will merit the continued trust and confidence of the stakeholders with whom we interact.

PruittHealth Premier will comply with all applicable laws and regulations. As such, partners are expected to conduct business in accordance with the letter, spirit, and intent of all relevant laws and to refrain from any illegal, dishonest, or unethical conduct. We will make every effort to:

- Operate “transparently” demonstrating openness, cooperation, honesty, and integrity in our day-to-day relationships with members, providers, and regulatory agencies.
- Operate “free of conflict” and work to avoid actual and appearances of impropriety.
- Respect each member's dignity, privacy, and rights, and will treat each member with consideration, courtesy, dignity, privacy and respect in a culturally sensitive manner.
- Uphold the members’ right to receive quality healthcare services without discrimination and otherwise comply with all laws, regulations, and policies related to nondiscrimination in all of our business practices.
- Be attentive in our evaluation of our health delivery service programs to ensure we are meeting or exceeding standards of practices.

In general, the use of good judgment, based on high ethical principles, will guide each partner with respect to lines of acceptable conduct. If a situation arises in which it is difficult to determine the proper course of action, the matter should be discussed openly with the partner’s immediate supervisor and, if necessary, with the PruittHealth Premier Medicare Compliance Officer. Disregarding or failing to comply with this standard of business ethics and conduct could lead to disciplinary action, up to and including possible termination of employment.

Privacy

PruittHealth Premier will strictly adhere to all aspects of the Health Insurance Portability and Accountability Act (HIPAA) privacy laws. At PruittHealth Premier we are committed to using and disclosing member information only for its intended purposes. Confidential and proprietary information of PruittHealth Premier and CMS will only be accessed, used, or disclosed by partners as needed to perform specific job responsibilities. Partners will be provided access only to those systems where there is a “need to know,” and only the minimum necessary amount of information will be accessed. It is expected that partners will hold in confidence any and all confidential and property information as it pertains to

PruittHealth Premier, our members, and partners.

Marketing

PruittHealth Premier is committed to investing in its marketing endeavors. We recognize that our members are vulnerable. Compliance with all State and CMS marketing regulations is expected. All marketing materials will be carefully developed and reviewed to ensure that they comply with all CMS requirements prior to printing or use. PruittHealth Premier commits to using CMS-issued “Model Letters” and communications whenever possible. We are committed to being truthful in all marketing practices and prohibit:

- The use of deceptive marketing practices;
- Misuse of marketing or competitor information;
- Using marketing materials that have not been appropriately approved;
- Using misleading or discriminatory enrollment practices;
- Using door-to-door solicitation or cold calling potential members including to those in facilities, hospitals, or emergency rooms;
- Misrepresenting the Medicare Advantage or Prescription Drug Plan being marketed;
- Offering beneficiaries cash payment or any other remuneration as inducement to enroll in a plan; and
- Any other sales or marketing practice that is prohibited by CMS.

Any employee, plan member, prospective member or business partner who becomes aware of prohibited marketing practices being used by any PruittHealth Premier partner or other stakeholder must report the practice immediately to the Medicare Compliance Officer.

Financial Endeavors

PruittHealth Premier will work to ensure that all communications and representations in billing are accurate, complete, and truthful, and comply with applicable laws and regulations to the best of our ability. This means that we are committed to:

- Paying our providers timely and correctly for clean claims submission.
- Ensuring that payments or other benefits to providers be supported by proper documentation that demonstrates the services were provided, on the correct date of service, as billed.
- Providing access to quality health care without discrimination at prices which are reasonable and competitive.

Further, the Plan expects every employee to use only legal and legitimate competitive practices in the promotion of the Plan's business and executing contracts that clearly specify the Plan's Compliance expectations for program integrity.

Any employee, plan member, prospective member or business partner who becomes aware of prohibited financial practices being used by any Plan partner, provider or other FDR is required to report the practice immediately to the Medicare Compliance Officer or directly to CMS.

Regulatory Relationships

PruittHealth Premier regards all regulatory and accreditation agencies as our partners in providing the highest level of quality care for our beneficiaries. As such we expect our partners:

- To refrain from making deliberate false statements to a government agency or other regulatory body – doing so will risk termination of employment or contractual relationship with PruittHealth Premier and possible criminal penalties.
- To certify and attest that all reports or other information required to be provided to any federal, state, or local government agency shall be filed timely, accurately, and in conformance with the applicable laws and regulations governing such report or information.
- Will comply fully with all law enforcement agencies and cooperate with any governmental audit or investigation.

Workplace Conduct

PruittHealth Premier will treat all partners with respect, dignity, fairness, and courtesy. We recognize that our partners constitute the Plan. Our organization constantly seeks to create a productive environment in which fairness, equal opportunity and professional development are constantly nurtured for each employee as well as having a strong commitment to creating engaged employees who are critical in making our company a success.

We vigilantly strive to be a responsible employer, by providing opportunities for professional satisfaction, pride in work, and career growth for our employees. We maintain a drug-free workplace and are an equal opportunity employer. We offer equal hiring, benefit, compensation, training, and advancement opportunities and have a strong desire to promote from within, regardless of religion, color, genetic information, or ethnic group.

Documentation

PruittHealth Premier partners will document information consistent with applicable federal, state, and local government agency requirements. Every effort shall be made to maintain information and documentation consistent with regulatory requirements at minimum, and in some instances permanently by Corporate standards and practices. Documents or emails on litigation-hold must be coordinated at the direction of the Medicare Compliance Officer, Chief Compliance Officer, and Legal Counsel.

Sanctioned Screening & Exclusions

An excluded person or entity is one that is not allowed to participate in Medicare, state Medicaid or any federal health care programs for any reason. Most commonly, these are individuals that have been found guilty of fraudulent billing or misrepresentation of credentials. PruittHealth Premier cannot, directly or indirectly, employ or contract with any excluded person or entity, this includes FDRs. The Plan, Plan partners and FDRs must ensure that no persons or entities contracted or affiliated with them is “excluded.” If a person or entity contracted with the Plan, plan partners or FDRs becomes excluded, PruittHealth Premier must immediately stop such person or entity from directly or indirectly providing any covered services for reimbursement to Plan members.

Internal Compliance Audit and Plan Monitoring

PruittHealth Premier is committed to the ongoing and regular monitoring of compliance with regulatory requirements and policies, including monitoring and auditing of our contracted FDRs to verify their compliance. Much of this monitoring effort is achieved by internal audits of issues that have regulatory or compliance implications. The Plan also routinely seeks other means of ensuring and demonstrating compliance with laws, regulations, and Plan policy.

Conflict of Interest & Gifts

Partners have an obligation to conduct business within guidelines that prohibit actual or potential conflicts of interest. These Standards establish the framework and general direction within which PruittHealth Premier wishes the business to operate. Where necessary, partners should seek further clarification on issues related to the subject of acceptable standards of operation. Contact the PruittHealth Premier Medicare Compliance Officer for more information or for any questions concerning conflicts of interest.

Transactions with outside firms must be conducted within a framework established and controlled by the executive level of PruittHealth Premier. Business dealings with outside firms should not result in unusual gains for those firms. Unusual gains refer to bribes, product bonuses, special fringe benefits, unusual price breaks, and other windfalls designed to ultimately benefit the employer, the partner, or both. An actual or potential conflict of interest occurs when an employee is in a position to influence a decision that may result in a personal gain for that partner or for a relative as a result of PruittHealth Premier's business dealings. For the purposes of these Standards, a relative is any person who is related by blood or marriage, or whose relationship with the employee is similar to that of persons who are related by blood or marriage.

No "presumption of guilt" is created by the mere existence of a relationship with outside firms. However, if partners have any influence on transactions involving purchases, contracts, or leases, it is imperative they disclose any such relationships to PruittHealth Premier management as soon as possible so that safeguards can be established to protect all parties. Personal gain may result not only in cases where a partner or relative has a significant ownership in a firm with which PruittHealth Premier does business, but also when a partner or relative receives any reward, bribe, substantial gift, or special consideration as a result of any transaction or business dealings involving PruittHealth Premier.

You must not offer or provide a gift to gain an unfair advantage with a business partner. In addition, you should not seek or accept a gift of greater than nominal value from anyone soliciting business from or doing business with PruittHealth Premier or its parent or related companies— or from any person or entity in competition with PHP.

For more information on Plan policies and procedures, as well as reporting requirements, and permissible activities are outlined in the Plan's Conflict of Interest policy.

Prohibition of Improper Payments

PruittHealth Premier expects all partners to use only legitimate practices in commercial operations and in promoting PruittHealth Premier's position on issues before governmental authorities. As stated below, "kickbacks" or "bribes" intended to induce or reward favorable buying decisions and governmental actions are unacceptable and prohibited.

No partner of PruittHealth Premier or any Network or Representative acting on PruittHealth Premier's behalf shall, in violation of any applicable law, offer or make directly or indirectly through any other person or firm any payment of anything of value (in the form of compensation, gift, contribution, or otherwise) to:

- Any person or firm employed by or acting for or on behalf of any customer, whether private or governmental, for the purpose of inducing or rewarding any favorable action by the customer in any commercial transaction; or any governmental entity, for the purpose of inducing or rewarding action (or withholding of action) by a governmental entity in any governmental matter;
- Any governmental official, political party or official of such party, or any candidate for political office, for the purpose of inducing or rewarding favorable action (or withholding of action) or the exercise of influence by such official, party or candidate in any commercial transaction or in any governmental matter.

In utilizing consultants, agents, sales representatives or others, PruittHealth Premier will employ only reputable, qualified individuals or firms under compensation arrangements, which are reasonable in relation to the services performed. Consultants, agents, or representatives retained in relation to the provision of goods or services to the federal government must agree to comply with all laws, regulations, and PruittHealth Premier policies governing partner conduct.

The provisions of this section are not intended to apply to ordinary and reasonable business entertainment or gifts not of substantial value, customary in local business relationships and not contrary to the law as applied in that environment. Managers are expected to exercise sound discretion and control in authorizing such business entertainment and gifts.

When customer organizations, governmental agencies, or others have published policies intended to provide guidance with respect to acceptance of entertainment, gifts, or other business courtesies by their employees, such policies shall be respected.

Political Contributions

PruittHealth Premier will not make any contribution to any political party or to any candidate for political office in support of such candidacy except as provided in these Standards and as permitted by law.

In the United States, federal law strictly controls corporate involvement in the federal political process. Generally, federal law provides that no corporation may contribute anything of value to any political party or candidate in connection with any federal election.

While similar laws apply in some states and their political subdivisions, in many jurisdictions in the United States, corporate contributions to candidates and political parties in connection with state and local election campaigns are lawful.

This policy is not intended to prevent the communication of PruittHealth Premier views to legislators, governmental agencies, or to the general public with respect to existing or proposed legislation or governmental policies or practices affecting business operations. Moreover, under these Standards, reasonable costs incurred by PruittHealth Premier to establish or administer political action committees or activities organized to solicit voluntary political contributions from individual partners are not regarded as contributions to political parties or candidates, where PruittHealth Premier may lawfully incur such costs.

Compliance Training

The Medicare Compliance Officer, in conjunction with managers and directors, is charged with ensuring that all their employees receive compliance and fraud, waste and abuse training within 90 days of their date of hire and annually thereafter. As a condition of employment, all new partners will receive these Standards along with the required compliance training within the first 90 days of hire. Existing PruittHealth Premier partners will receive these Standards at least annually or upon revisions.

Fraud, Waste, and Abuse

PruittHealth Premier is committed to the responsible stewardship of our resources, and maintaining a comprehensive plan for detecting, preventing, and correcting FWA. To that end, the Plan encourages any individual who is aware of, or suspects acts of FWA of resources in any departmental area, by any provider, or with any entity that PruittHealth Premier contracts with, such as in the Medicare program, to report such acts to the PruittHealth Premier Compliance Officer.

FWA are special types of potential compliance issues. FWA is a big problem in the Medicare and Medicaid Programs, and we are obligated to report any FWA issues we see in our day-to-day jobs. FWA can be committed by various stakeholders, including but not limited to providers, brokers, health plans, pharmacies, pharmacy benefit management companies, our members, and even our fellow partners.

In addition, it is illegal to knowingly present, or cause to be presented, a false or fraudulent claim or statement to the government (False Claims Act). False claims, fraud, dishonesty, or criminal conduct of any sort, on the part of any employee, officer, director,

or anyone doing business with the Plan, will not be tolerated.

The Centers for Medicare & Medicaid Services defined Fraud, Waste and Abuse accordingly:

- **Fraud** is knowingly and willfully executing, or attempting to execute, a scheme or artifice to defraud any health care benefit program or 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.
- **Waste** is the overutilization of services, or other practices that, directly or indirectly, result in unnecessary costs to the Medicare program. Waste is generally not considered to be caused by criminally negligent actions but rather the misuse of resources.
- **Abuse** includes actions that may, directly or indirectly, result in: unnecessary costs to the Medicare Program, improper payment, payment for services that fail to meet professionally recognized standards of care, or services that are medically unnecessary. Abuse involves payment for items or services when there is no legal entitlement to that payment and the provider has not knowingly and/or intentionally misrepresented facts to obtain payment. Abuse cannot be differentiated categorically from fraud because the distinction between “fraud” and “abuse” depends on specific facts and circumstances, intent and prior knowledge, and available evidence, among other factors.

Our job is to be able to identify FWA and to report it when we do identify it!

Violations of the Standards of Conduct

The Plan is committed to ethical and legal conduct that is compliant with all relevant laws and regulations and to correcting wrongdoing wherever it may occur in the organization. Each employee has an individual obligation and responsibility for reporting activity by any partner or vendor that appears to violate applicable laws, rules, regulations, or these Standards. Violations of these Standards are grounds for discharge or other disciplinary action, adapted to the circumstances of the particular violation and having as a primary objective furtherance of PruittHealth Premier’s interest in preventing violations and making clear that violations are neither tolerated nor condoned.

Disciplinary action will be taken, not only against individuals who authorize or participate directly in a violation of these Standards, but also against:

- Any partner who may have deliberately failed to report a violation of these Standards;
- Any partner who may have deliberately withheld relevant and material information concerning a violation of these Standards; and

- The violator's managerial superiors, to the extent that the circumstances of the violation reflect inadequate leadership and lack of diligence.

The Plan is committed to ethical and legal conduct that is compliant with all relevant laws and regulations and to correcting wrongdoing wherever it may occur in the organization. Each partner has an individual obligation and responsibility for reporting activity by any employee, physician, subcontractor, or vendor that appears to violate applicable laws, rules, regulations, or these Standards.

All violators of these Standards 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:

1. Coaching
2. Training
3. Verbal counseling
4. Written counseling
5. Final written counseling
6. Termination

You are obligated to report known or suspected non-compliance or Fraud, Waste, and Abuse. If you do not report a situation that you reasonably should have identified as a potential compliance issue, you will be subject to disciplinary action. That is why we make it as easy as possible for you to report potential compliance issues.

Reporting Potential or Detected Noncompliance or Fraud, Waste, and Abuse & Investigating Issues

PruittHealth Premier is committed to complying with all applicable laws, including but not limited to those addressing noncompliance and FWA. Employees are expected to immediately report any potential false, inaccurate, or questionable issues to their supervisors or the PruittHealth Premier Medicare Compliance Officer in accordance with PruittHealth Premier's policies. Any partner who is requested to engage in any activity which is or may be contrary to the intent and spirit of these Standards must promptly report such information to his or her manager, or, if the partner was so directed by the manager, then to the PruittHealth Premier Medicare Compliance Officer. Likewise, any partner who acquires information that gives the partner reason to believe that any other partner is engaged in conduct forbidden by these Standards must promptly report such

information to his or her manager or, if the manager is engaged in such conduct, then to the PruittHealth Premier Medicare Compliance Officer.

PruittHealth Premier partners can use the following information to submit questions or reports of suspected or detected noncompliance or potential FWA.

- Notify your supervisor, manager, or director. Management, in turn, has an obligation to report suspected violations to the Medicare Compliance Officer.
- Notify the Medicare Compliance Officer. You may do this in person, by contacting the Chief Compliance Officer or the Medicare Compliance Officer.
- Through the compliance hotline, 24 hours a day, 7 days a week.

PruittHealth Premiers is committed to investigating all reported compliance concerns promptly and confidentially to the extent possible. We expect all partners and FDRs to cooperate with investigation efforts. The Plan will work with the appropriate staff to coordinate any findings from the investigations and immediately recommend corrective action or changes that need to be made.

Where an internal investigation substantiates a reported violation, it is the policy of the Plan to promptly initiate appropriate corrective action, including, as appropriate, making prompt restitution of any overpayment amounts, notifying the appropriate governmental agency, instituting whatever disciplinary action is necessary, and implementing systemic changes to prevent a similar violation from recurring in the future.

Methods for Reporting Potential and Detected Noncompliance and Fraud, Waste, and Abuse (FWA)	
Anonymous Hotline	1-844-317-9059
Confidential E-mail	compliance@pruitthealthpremier.com
Fax Number	1-833-572-2367
Mailing Address	Medicare Compliance Officer PruittHealth Premier P.O. Box 2190 Glen Allen, VA 23058-2190

PruittHealth Premier does not tolerate fraudulent or other dishonest behavior and will take appropriate investigative and corrective action upon receiving such reports. PruittHealth Premier is prohibited by law from retaliating in any way against any partner or contractor who in good faith reports a perceived problem, concern, or issue involving noncompliance or FWA, and will not take punitive action against an employee who reports such information.

Remember: Potential compliance issues exist when a business process or behavior does not follow or is inconsistent with the Plan’s Standards, laws, regulations, sub-regulatory guidance, and/or policies and procedures.

PruittHealth Premier Medicare Compliance Officer Contact Information

Mailing Address	Medicare Compliance Officer PruittHealth Premier P.O. Box 2190 Glen Allen, VA 23058-2190
Phone	1-404-689-7966

Compliance Hotline and Compliance Contact Information

Phone	1-844-317-9059
Fax	1-833-572-2367
E-mail	compliance@pruithhealthpremier.com

If you are uncomfortable discussing your issue(s) with your supervisor or manager or wish to remain anonymous, you can call Compliance Hotline. The Hotline is a non-traceable number and there are no caller identification mechanisms in place. It is a method of reporting concerns confidentially and anonymously, if desired. The Plan will protect your anonymity to the extent permitted by law. The Hotline is available for anyone to call 24 hours per day, 7 days per week, and 365 days per year.

This line and website are not intended to replace your normal reporting process but serve as another resource for reporting issues and concerns of non-compliance, including if your manager’s act is the cause of your concern. Always remember the Medicare Compliance Officer has an open-door policy too. Hotline calls and communications are handled confidentially, and the caller is protected from any form of retaliation or retribution. Any type of report must be made in good-faith and any partner who deliberately makes a false accusation with the purpose of harming or retaliating against another employee will be subject to disciplinary action.

Policy of Non-Intimidation and Non-Retaliation

It is the policy of PruittHealth Premier to ensure that all partners who have concerns or suspect possible violations of these Standards, policies/procedures, laws, or regulations will be received openly and timely. It is the commitment of the Plan to ensure that there will be no intimidation or direct or indirect retaliation against anyone who, in good faith, reports an actual or suspected issue of non-compliance or who participates in an investigation of non-compliance.

Standards of Conduct Acknowledgement

It is important to PruittHealth Premier to ensure that we have a mechanism in place to demonstrate to anyone who has reason to ask, that we have taken our Compliance Program and subsequent training seriously and to further objectively show to any organization who asks, that all partners have taken Compliance Training education at very specific time intervals. We do that by asking you to acknowledge within PolicyTech that you have received, read and understand the PruittHealth Premier Standards of Conduct.

PruittHealth Premier Standards of Conduct Attestation

This is to attest that I have received, read, and understand the PruittHealth Premier Standard of Conduct. I understand that all partners are expected to abide by the Standards of Conduct and that the Code is not intended (and cannot be interpreted) as a guarantee of employment or a continuing business arrangement. I understand that it is a company requirement and my responsibility to report questions or concerns regarding laws, regulations, contract provisions, or policies related to or affecting PruittHealth Premier, and any actual or suspected non-compliance issues or concerns, via one of the reporting mechanisms set forth herein above.

I understand that I will not be subject to intimidation or retaliation for raising or reporting an actual or suspected issue of non-compliance. I understand that any violation of the Standard of Conduct may result in corrective action and/or disciplinary action up to and including termination of employment or business association.

References

- Title XVIII of the Social Security Act
- Medicare regulations governing Parts C and D found at 42 C.F.R. §§ 422 and 423 respectively
- Patient Protection and Affordable Care Act (Pub. L. No. 111-148, 124 Stat. 119)
- Health Insurance Portability and Accountability Act (HIPAA) (Public Law 104- 191)
- False Claims Acts (31 U.S.C. §§ 3729-3733)
- Federal Criminal False Claims Statutes (18 U.S.C. §§ 287,1001)
- Anti-Kickback Statute (42 U.S.C. § 1320a-7b(b))
- The Beneficiary Inducement Statute (42 U.S.C. § 1320a-7a(a)(5))
- Civil monetary penalties of the Social Security Act (42 U.S.C. § 1395w-27 (g))
- Physician Self-Referral (“Stark”) Statute (42 U.S.C. § 1395nn)
- Fraud and Abuse, Privacy and Security Provisions of the Health Insurance Portability and Accountability Act, as modified by HITECH Act
- Prohibitions against employing or contracting with persons or entities that have been excluded from doing business with the Federal Government (42 U.S.C. §1395w-27(g)(1)(G))
- Fraud Enforcement and Recovery Act of 2009
- All sub-regulatory guidance produced by CMS and HHS such as manuals, training materials, HPMS memos, and guides
- PruittHealth Premier Compliance Program Policies and Procedures
- Corporate Pruitt Compliance Program Policies and Procedures