

MEDICAL HOME NETWORK
Compliance Policies and Procedures Manual

EC.008 – NON-RETALIATION POLICY

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| SECTION: | ETHICS AND COMPLIANCE | LAST REVISION DATE: | 10.08.2019 |
| SUBJECT: | Non-Retaliation Policy | LAST REVIEW DATE: | 10.08.2019 |
| POLICY NUMBER: | EC.008 | APPROVED BY: | Compliance & Risk Management Committee |

I. PURPOSE

The purpose of this policy is to reinforce our commitment to preventing and protecting our work force members from retaliation for good faith actions in reporting alleged violations of laws, rules, policies, or procedures applicable to MHN, participating in an associated internal investigation, or assisting appropriate authorities in investigating possible wrongdoing.

II. POLICY

It is our policy to encourage an environment of open communication. MHN work force members are obligated and encouraged to report in good faith all information regarding alleged improper or wrongful activity that may constitute:

- Discrimination or harassment
- Fraud
- Unethical or unprofessional business conduct
- Research misconduct
- Non-compliance with our policies or procedures
- Circumstances involving substantial, specific or imminent danger to health or safety
- Violations of local, state or federal laws and regulations or
- Other illegal or improper practices.

We are committed to encouraging timely disclosure of such concerns and prohibiting retribution or retaliation against any workforce members who report such concerns in good faith. We prohibit retaliation (defined as an adverse action taken because an individual has engaged in protected activities), threats of retaliation, discharge, or other discrimination including, but not limited to, discrimination in compensation or terms and conditions of employment for good faith reporting of such concerns.

III. PROCEDURAL GUIDELINES

- A.** Work force members should timely report evidence of any alleged improper retaliatory acts by contacting their immediate supervisor or the President and CEO. If a work force member is not comfortable addressing their concerns to one of these individuals, please contact our legal counsel or use the anonymous reporting mechanisms available through the third-party reporting vendor; contact information for these parties is listed in EC.001. All reports will be handled as promptly and discreetly as possible, with facts made available only to those who need to know to investigate and resolve the matter.

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Compliance Policies and Procedures Manual

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- B. Retaliatory acts can include employment actions, such as termination, demotion, suspension, denial of promotions, threats, bullying, creating a hostile work environment.
- C. Retaliatory acts do not include disciplinary actions taken because of a work force member's own violations of laws, rules, policies, or procedures, or negative comments that are supported by a workforce member's poor work performance or work history.
- D. Our workforce members are expected to be truthful and cooperative in investigations involving potential wrongdoing.
- E. An MHN workforce member who is found to have knowingly made false accusations or given false information during an internal investigation may be subject to disciplinary action, up to and including termination.

IV. RELATED POLICIES

- EC.001 - Code of Business Conduct and Ethics
- EC.003 - Conflicts of Interest Policy
- EC.007 - Reporting Compliance Issues
- EC.009 - Deficit Reduction Act Compliance
- EC.010 - Internal Handling of Hotline Calls
- MHN Employee Manual

V. REFERENCES AND ACCREDITATION AUTHORITIES

- United States Sentencing Commission, [Guidelines Manual](http://www.ussc.gov/Guidelines/2012_Guidelines/Manual_PDF/2012_Guidelines_Manual_Full.pdf), §8B2.1 ("Effective Compliance and Ethics Program) (Nov. 2012), available at:
http://www.ussc.gov/Guidelines/2012_Guidelines/Manual_PDF/2012_Guidelines_Manual_Full.pdf
- Basic Compliance Program resources available on the HHS OIG website:
<https://oig.hhs.gov/compliance/101/index.asp>
- Compliance Program Guidance, available at:
<https://oig.hhs.gov/compliance/compliance-guidance/index.asp>

VI. REVIEW STATEMENT

MHN will maintain the status of this activity and conduct audits as appropriate to ensure compliance. This policy will be reviewed every two years or in timely response to changes in local or federal regulations. Modifications to the policy will be made as needed.