

**PAWNEE VALLEY COMMUNITY HOSPITAL
CODE OF CONDUCT**

TABLE OF CONTENTS

Introduction.....4

Associates’ Compliance Responsibilities.....5

Reporting6

Principle 1 - Patient Care and Treatment7

 Standard 1.1 Quality of Care and Patient Safety

 Standard 1.2 Medical Decision Making

 Standard 1.3 Patient Rights

 Standard 1.4 Patient Financial Assistance

Principle 2 - Compliance with Health Care Laws.....9

 Standard 2.1 Submission of Claims to Federally Funded Health Care Programs

 Standard 2.2 Tax-Exempt Status

 Standard 2.3 Anti-Kickback Statute

 Standard 2.4 The Stark Law

 Standard 2.5 Patient Inducements

 Standard 2.6 HIPAA Privacy and Security Rules and Kansas Health Information Technology Act (K.S.A. 65-6821, *et seq.*)

 Standard 2.7 Licensing Requirements

 Standard 2.8 EMTALA

 Standard 2.9 Controlled Substances

Standard 2.10 Safe Medical Devices Act.	
Standard 2.11 Mandatory Reporting Obligations	
Standard 2.12 Government Inquiries and Investigations	
Standard 2.13 Accreditation	
Standard 2.14 Nondiscrimination in Health Programs and Activities	
Principle 3 - Compliance with Other Laws	16
Standard 3.1 Health and Safety	
Standard 3.2 Environmental Compliance	
Standard 3.3 Discrimination and Inappropriate Conduct in the Workplace	
Standard 3.4 Weapons, Illegal Drugs, and Alcohol	
Standard 3.5 Antitrust	
Standard 3.6 Copyright	
Standard 3.7 Record Retention	
Standard 3.8 Identity Theft	
Principle 4 – Confidentiality	19
Principle 5 - Business Ethics	20
Standard 5.1 Honest Communications	
Standard 5.2 Business Transactions	
Standard 5.3 Advertising and Marketing	
Standard 5.4 Patient Billing	
Standard 5.5 Conflict Resolution	
Standard 5.6 Relationships Among Associates	

Standard 5.7 Social Media	
Standard 5.8 Legal Representation	
Standard 5.9 Fundraising	
Principle 6 - Protection of Assets	23
Standard 6.1 Accuracy of Records	
Standard 6.2 Contracts	
Standard 6.3 Internal Controls and Financial Reporting	
Standard 6.4 Business Expenses	
Standard 6.5 Personal Use of Corporate Assets	
Standard 6.6 Intellectual Property Rights and Obligations	
Standard 6.7 Use of Computers, Communications Systems, and Related Equipment	
Standard 6.8 Political Activity	
Principle 7 - Conflicts of Interest	26
Standard 7.1 Disclosure Statement	
Standard 7.2 Outside Financial Relationships	
Standard 7.3 Services for Competitors/Vendors	
Standard 7.4 Former Personnel of Fiscal Intermediary/Medicare Administrative Contractor	

INTRODUCTION

The Corporate Ethics and Compliance Program for Pawnee Valley Community Hospital is comprised of policies, procedures, and processes that put into practice the Board of Directors' commitment to conduct all operations in a manner consistent with all applicable legal requirements and the highest ethical standards.

As part of this Program, the Board of Directors has adopted this Code of Conduct to provide standards by which Associates¹ shall conduct themselves to protect and promote organization-wide integrity and enhance Pawnee Valley Community Hospital's ability to achieve its mission. Every Associate is required to adhere to this Code of Conduct as a condition of his or her continued relationship with Pawnee Valley Community Hospital (employment or otherwise).

Various departments within Pawnee Valley Community Hospital, including Administration and the Compliance Department, have developed policies and procedures implementing the principles and standards contained in this Code of Conduct, and Associates are expected to be knowledgeable of and comply with those policies and procedures. To the extent that any policy or procedure is inconsistent with the principles and standards contained herein, that policy or procedure is superseded by this Code of Conduct.

Those Associates who also are members of Pawnee Valley Community Hospital's Medical Staff are obligated to adhere to the Medical Staff Bylaws and related policies and procedures, which have been reviewed and approved by the members of the Medical Staff and the Board of Directors. To the extent any provision of this Code of Conduct is inconsistent with the Medical Staff Bylaws and/or related policies and procedures, such provision is superseded by the relevant provisions of the Medical Staff Bylaws and/or related policies and procedures.

The activities of Pawnee Valley Community Hospital, and of each Associate with regard to Pawnee Valley Community Hospital's affairs, are conducted in a complex world of laws and regulations. It is the responsibility of each Associate to ensure that his or her behavior complies with all applicable laws, regulations, this Code of Conduct, and related policies and procedures. If an Associate encounters a situation that is not clearly defined in this Code of Conduct, that individual should review the particular circumstances with the Corporate Compliance Director or the Chief Legal Officer. All Associates should review this Code of Conduct from time to time to make sure that these policies and procedures guide their actions on behalf of Pawnee Valley Community Hospital.

Nothing in this Code of Conduct is intended to nor shall be construed as providing any additional employment or contract rights to any Associate or other person.

¹ "Associate" includes Pawnee Valley Community Hospital directors, officers, employees, physicians, volunteers, students, trainees, independent contractors, and others who perform work for Pawnee Valley Community Hospital regardless of the location at which they work, including Pawnee Valley Community Hospital affiliates, whether or not they are compensated for such services.

ASSOCIATES' COMPLIANCE RESPONSIBILITIES

Every Associate shall take an active role in preventing, detecting, and correcting any conduct or activity that potentially violates applicable laws and regulations, ethical standards, or internal policies and procedures.

LEARN

First, all new Associates are required to attend orientation where they are educated on compliance-related issues. All Associates are also required to attend annual educational meetings, actively attend in-service and departmental meetings, and engage in thoughtful review of written materials that are made available to Associates from time-to-time.

ASK

Second, an Associate who has a question concerning a compliance-related issue must seek assistance from the Corporate Compliance Director or the Chief Legal Officer. An Associate should pursue such inquiry until he or she receives an adequate response.

REPORT

Third, an Associate who suspects inappropriate conduct shall report such activities to the Corporate Compliance Director or the Chief Legal Officer. An Associate should make such report even if his or her supervisor has directed otherwise.

COOPERATE

Fourth, every Associate shall cooperate fully with any internal or external investigation concerning alleged non-compliance. An Associate shall actively participate in identifying, implementing, and refining appropriate remedial measures to correct non-compliance and proactive strategies to prevent or detect any future non-compliance.

An Associate shall be evaluated for compliance with these obligations. Failure to perform these job responsibilities shall be a basis for discipline up to and including termination (employment or otherwise).

REPORTING

Pawnee Valley Community Hospital shall not tolerate any form of retaliation against an Associate who, in good faith, raises questions concerning legal or ethical duties and/or reports any suspected incident of non-compliance, either internally or to any government entity. All such information reported by an Associate internally shall be kept confidential to the extent confidentiality is possible throughout any resulting investigation.

An Associate seeking an answer to a compliance-related question or wanting to report a suspected incident of non-compliance should contact one of the following:

- HaysMed's Corporate Compliance Director – (785) 623-5589
- HaysMed's Compliance Helpline – (785) 623-6311 (you may leave a message)
- Hays Medical Center's Compliance Department Internet Address – compliance@haysmed.com
- Writing the Corporate Compliance Director at P.O. Box 8100, Hays, Kansas 67601

An Associate wishing to report anonymously to any of the listed telephone numbers must dial a "9" to access an outside line (if calling from any Pawnee Valley Community Hospital-owned facility), then dial the number indicated above.

Any reports sent to the Internet e-mail address will show the address of the transmitting computer. An Associate should not report a known or suspected violation by Internet e-mail if complete anonymity is desired.

Pawnee Valley Community Hospital shall make reasonable efforts to protect the anonymity of the person making such a report.

PRINCIPLE 1 - PATIENT CARE AND TREATMENT

Pawnee Valley Community Hospital is committed to providing the highest quality patient care and protecting patient safety. Associates shall treat patients in a manner that preserves their dignity, autonomy, self-esteem, civil rights, and involvement in their own care.

Standard 1.1 – Quality of Care and Patient Safety

Pawnee Valley Community Hospital’s mission is to provide the best in compassionate care. A commitment to quality of care and patient safety is an obligation shared by all Associates. Pawnee Valley Community Hospital shall strive for compliance with various standards relating to quality of care and patient safety, including the Medicare Conditions of Participation, the standards and surveys of DNV Healthcare, Inc., the consensus measures of the National Quality Forum, the Agency for Healthcare Research and Quality indicators, and the initiatives of the Institute for Healthcare Improvement.

Standard 1.2 – Medical Decision Making

Pawnee Valley Community Hospital shall use standard clinical criteria to determine whether to treat an individual with specific interventions. Clinical decisions, including tests, treatments, and other interventions, shall be based on identified patient needs, and shall not in any way be based on the manner in which Pawnee Valley Community Hospital compensates or shares financial risk with its leaders, managers, clinical staff, or licensed practitioners. The medical necessity of all treatments and procedures recommended by Associates will be adequately documented in the patient record.

Standard 1.3 – Patient Rights

Upon admission, all Pawnee Valley Community Hospital patients shall receive a copy of Pawnee Valley Community Hospital’s Statement of Patient Rights and Responsibilities. Associates shall respect patient rights in the performance of their job duties. Patients have the right to make informed decisions regarding their medical care and the right to refuse or accept treatment.

Pawnee Valley Community Hospital shall provide care and treatment to patients without regard to the race, color, national origin, religion, age (unless age is a factor necessary to normal operations or the achievement of any statutory objective), sex (including pregnancy, sexual orientation, and gender identity), genetic information, communication needs, or disability (including developmental disability) of such person, or any other classification prohibited by law. Associates shall respect each patient’s cultural heritage and needs. Pawnee Valley Community Hospital shall make available appropriate resources for its patients with limited English proficiency or who otherwise require auxiliary aids and services.

Patients and their representatives shall be accorded appropriate confidentiality, privacy, security and protective services, opportunity for resolution of complaints, pastoral counseling, and visitation rights. Pawnee Valley Community Hospital shall maintain appropriate processes for prompt resolution of patient grievances.

No Associate shall solicit or encourage monetary tips, personal gratuities, or gifts from patients or their family members, and are prohibited from accepting monetary tips or gratuities (including gift cards). An Associate may accept a personal gift of nominal value (less than \$35) from a patient or their family members but should share any such gift with co-workers to the fullest extent possible. Pawnee Valley Community Hospital expects its Associates to exercise good judgment and discretion in accepting gifts, and Associates should direct any questions regarding acceptable gifts to the Corporate Compliance Director or the Chief Legal Officer. If a patient wishes to present a monetary gift, he or she should be referred to the Corporate Compliance Director or the Pawnee Valley Community Hospital Foundation.

Standard 1.4 – Patient Financial Assistance

Pawnee Valley Community Hospital shall maintain a written patient financial assistance policy which includes eligibility criteria, the basis for calculating amounts charged to patients, and the method for applying for financial assistance. Pawnee Valley Community Hospital shall employ measures to widely publicize the policy within its service area. Pawnee Valley Community Hospital shall not engage in extraordinary collection actions against an individual until it has determined whether such individual is eligible under its financial assistance policy.

PRINCIPLE 2 – COMPLIANCE WITH HEALTH CARE LAWS

Pawnee Valley Community Hospital shall conduct its operations in compliance with state and federal laws and regulations specific to health care providers. Pawnee Valley Community Hospital shall cooperate with any government inquiry concerning its compliance with such rules.

The health care industry is one of the most highly regulated segments of the U.S. economy. While an Associate is not expected to have expert knowledge of all legal and regulatory requirements that may apply to his or her work, each Associate shall be sensitive to relevant legal issues. An Associate who is uncertain about how legal requirements apply in a particular situation shall seek guidance from the Corporate Compliance Director or the Chief Legal Officer.

The following standards summarize some of the important legal requirements applicable to health care providers and the impact of those requirements on Pawnee Valley Community Hospital's operations. An Associate shall comply with all laws and regulations in the performance of his or her job duties, regardless of whether they are specifically addressed here.

Standard 2.1 – Submission of Claims to Federally Funded Health Care Programs

There are multiple federal and state laws controlling how providers submit claims to government payors and are reimbursed for services provided to beneficiaries of government health care programs (e.g., Medicare, Medicaid, TRICARE). It is important that Pawnee Valley Community Hospital and its Associates comply with these requirements. If they do not, then Pawnee Valley Community Hospital may not receive reimbursement for services rendered to patients; or, if it receives reimbursement, it may be asked to repay the reimbursement with additional penalties assessed for not following the applicable requirements.

The federal False Claims Act ("FCA") prohibits the submission of false, fraudulent, or misleading claims for payment to any government entity including, but not limited to, the following: (1) claims for services not rendered; (2) claims which characterize the service differently than the service actually rendered; (3) claims for services that were not medically necessary; (4) claims for which there is inadequate documentation in the medical record; and (5) claims which do not otherwise comply with applicable program or contractual requirements.

A provider also violates the FCA if he or she submits a claim that he or she knows (or should know) is false to obtain payment from a federally funded health care program. Finally, a provider that does not refund any payment received to which the provider is not entitled within sixty days of discovering such overpayment also violates the FCA.

There are stiff penalties assessed against providers for violating these federal and state laws. The provider has to repay the overpayment and may be liable for (1) three times the amount of the claim or overpayment, and (2) a penalty of \$13,946 to \$27,894 (based on rate of inflation) per claim.

Under the FCA, a private party may bring an action on behalf of the United States. These individuals, known as "qui tam relators," may receive between 15 and 30 percent of the proceeds from an FCA action or settlement.

The FCA provides protection to qui tam relators who are discharged, demoted, suspended, threatened, harassed, or in any other manner discriminated against in the terms and conditions of their employment as a result of their furtherance of an action under the FCA. Remedies include reinstatement with comparable seniority as the qui tam relator would have had but for the discrimination, two times the amount of any back pay, interest on any back pay, and compensation for any special damages sustained as a result of the discrimination, including litigation costs and reasonable attorneys' fees.

A similar federal law is the Program Fraud Civil Remedies Act of 1986 (the "PFCRA"). It provides administrative remedies for knowingly submitting false claims and statements. A violation of the PFCRA results in a maximum civil penalty of \$5,000 per claim plus an assessment of up to twice the amount of each false or fraudulent claim.

The Kansas False Claims Act authorizes the Kansas Attorney General to initiate civil prosecutions against anyone who submits a false claim or false record for payment to the State of Kansas, including the Medicaid program. A provider can also be subject to liability under the Kansas False Claims Act and the Kansas Medicaid Fraud Control Act for the submission of false, fraudulent, or misleading claims. Under the Kansas FCA, violators are liable for three times the amount of damages in addition to civil penalties of up to \$11,000 per violation. The statute also provides protections for whistleblowers (qui tam relators), although it does not contain a mechanism for a whistleblower to receive a share of any recovery or settlement.

The Kansas Medicaid Fraud Control Act makes it unlawful for a person to submit false and fraudulent claims to the Kansas Medicaid program. Violation of this statute is a criminal offense punishable by substantial fines and imprisonment, and violators may be liable for payment of full restitution to the State plus interest and all reasonable expenses.

An Associate involved in the delivery of patient care shall be responsible for producing and maintaining complete, timely, and accurate documentation in the appropriate medical record and submitting complete, timely, and accurate charges for all medical goods and services provided to patients. An Associate involved in coding and billing will be trained, qualified, and knowledgeable in coding and billing functions and will submit claims in compliance with all applicable requirements. Associates performing coding and billing functions will remain aware of areas of risk.

An Associate who has any reason to believe Pawnee Valley Community Hospital has submitted improper claims to or received payments to which it is not entitled from any federally funded health care program shall report such information to the Corporate Compliance Director or the Chief Legal Officer immediately. Pawnee Valley Community Hospital shall promptly and thoroughly investigate such matter, and determine what amount, if any, must be refunded. All refunds shall be made in a timely manner, but in no event more than sixty (60) days following identification of the overpayment. Additionally, Pawnee Valley Community Hospital shall take appropriate action to prevent any improper claims or payments in the future.

Standard 2.2 – Tax-Exempt Status

As a non-profit entity, Pawnee Valley Community Hospital has a legal and ethical obligation to engage in activities to further its charitable purpose and ensure that its resources are used to further the public good rather than the private or personal interests of any individual. Pawnee Valley Community Hospital's non-profit partners and affiliates have the same obligation. Pawnee Valley Community Hospital and its non-profit partners and affiliations shall not be involved in political campaigns nor engage in substantial lobbying activities. They shall not enter into any compensation arrangements in excess of fair market value, shall accurately report payments to appropriate taxing authorities, and file all tax and information returns according to applicable laws and regulations.

Pawnee Valley Community Hospital shall conduct a community health needs assessment and adopt an implementation strategy to meet identified needs on a regular basis (at least once every three years in accordance with IRS Notice 2010-39); establish and publicize its financial assistance policy; limit charges for patients who qualify for financial assistance to those amounts generally charged to those with insurance; and forgo extraordinary collection actions against an individual before Pawnee Valley Community Hospital makes a reasonable effort to determine if a patient is eligible for financial assistance under the financial assistance policy. Pawnee Valley Community Hospital will assist its non-profit partners and affiliates in this process as necessary.

Pawnee Valley Community Hospital shall track and accurately report its activities which provide community benefit including, but not limited to, charity care, community health improvement services, community benefit operations, health professionals' education, and research. Pawnee Valley Community Hospital will assist its non-profit partners and affiliates in this tracking and reporting process as necessary.

Standard 2.3 – Anti-Kickback Statute

The federal Anti-Kickback Statute prohibits offering or making any payment in exchange for the referral of Medicare and Medicaid business. Courts have broadly construed this law to include virtually anything of value given to an individual or entity if one purpose of the remuneration is to influence the recipient's reason or judgment relating to referrals. Violating the Anti-Kickback Statute puts Pawnee Valley Community Hospital and its Associates at risk of both potential civil and criminal liability.

Pawnee Valley Community Hospital does not provide remuneration (in the form of cash payment, gift card, discount, gift, contribution, or otherwise) in exchange for referrals or as an inducement for referrals. Pawnee Valley Community Hospital accepts patient referrals and admissions based solely on the patient's clinical needs and Pawnee Valley Community Hospital's ability to render necessary services. Pawnee Valley Community Hospital does not pay or offer to pay any health care provider for referral of patients.

Pawnee Valley Community Hospital does not accept payments for referrals that it makes. No Associate shall solicit or receive anything of value, directly or indirectly, in exchange for the referral of a patient. Similarly, when making patient referrals to another health care provider, Pawnee Valley Community Hospital shall not take into account the volume or value of referrals

that the provider has made (or may make) to Pawnee Valley Community Hospital. In the event an Associate is offered remuneration in exchange for referrals, the Associate shall contact the Corporate Compliance Director or the Chief Legal Officer immediately.

Any transaction involving another health care provider, whether formal or informal, shall be scrutinized for compliance with the Anti-Kickback Statute. All such transactions shall be based on fair market value for the goods or services provided and documented in writing. For example, rentals of space and equipment must be at fair market value without regard to the volume or value of referrals that may be received by Pawnee Valley Community Hospital, and such relationship must be documented in writing. An Associate who has any question or concern about the propriety of Pawnee Valley Community Hospital's relationship with a physician, another hospital, or any other health care provider, or needs assistance with documenting the relationship in writing, shall contact the Corporate Compliance Director and the Chief Legal Officer immediately.

Standard 2.4 – The Stark Law

The federal Stark Law (named after the sponsor of the legislation) prohibits a physician from making referrals for hospital inpatient and outpatient services if the physician has any financial relationship with that hospital entity, unless that financial relationship meets certain limited exceptions. For example, a hospital is permitted to offer certain limited business courtesies to medical staff members. Pawnee Valley Community Hospital shall comply with the Stark Law in all of its financial arrangements with physicians. Any financial arrangement between Pawnee Valley Community Hospital and a referring physician shall be reviewed and approved in advance by the Chief Legal Officer and shall be monitored to ensure ongoing compliance with the Stark Law. Violating the Stark Law puts Pawnee Valley Community Hospital and its Associates at risk for potential civil liability.

The Stark Law differs from the federal Anti-Kickback Statute in a multitude of ways. Some of the key differences include that the Stark Law applies only to physicians (and their immediate family members in some circumstances), it is only a civil statute, and it is a strict liability-based statute. Strict liability means that intent is not required to violate the statute. Even good intentions can result in a violation of the Stark Law, thus it is paramount to be very mindful of how any arrangement with a physician may implicate the law, and the Chief Legal Officer must be consulted to facilitate structuring the relationship to meet the requirements of the Stark Law and its exceptions.

Standard 2.5 – Patient Inducements

Federal law also prohibits Pawnee Valley Community Hospital from offering or transferring anything of value to any person eligible for federally funded health care benefits if Pawnee Valley Community Hospital knows or should know such inducement would cause the eligible person to choose to receive federally reimbursable items or services from Pawnee Valley Community Hospital except as specifically permitted by law.

In light of this prohibition, no Associate acting on behalf of Pawnee Valley Community Hospital shall give anything of value to any patient or prospective patient unless such gift has been

reviewed and approved in writing by the Corporate Compliance Director or the Chief Legal Officer.

Pawnee Valley Community Hospital shall not provide gifts, and services or waive deductibles, co-payments, or otherwise provide financial benefits to patients in return for business. Pawnee Valley Community Hospital may provide free or discounted local transportation in accordance with the federal Anti-Kickback Statute safe harbor for established patients as long as all required elements of the safe harbor are satisfied. Pawnee Valley Community Hospital shall not permit professional discounts, and courtesy discounts are permitted only in limited circumstances. Under certain circumstances, Pawnee Valley Community Hospital may provide appropriate financial accommodations to patients (*e.g.*, permitting monthly payments over time) based solely on the financial needs of the patient or offer prompt-pay discounts. All patient account balances shall be resolved using Pawnee Valley Community Hospital documented collection policies and procedures.

Standard 2.6 – HIPAA Privacy and Security Rules and Kansas Health Information Technology Act (K.S.A. 65-6821, et seq.), and Kansas Security Breach Law (K.S.A. 50-7a01, et seq.)

Pawnee Valley Community Hospital shall devote necessary resources to ensure compliance with the federal regulations and state law concerning the security and privacy of protected health information. An Associate shall actively participate in appropriate training to enable the Associate to perform his or her job duties in compliance with these legal requirements. Pawnee Valley Community Hospital will strive to utilize electronic health information in a secure and reliable manner.

An Associate who becomes aware of any unauthorized use or disclosure of protected health information shall report the matter to the Privacy Officer immediately. Any Associate who becomes aware of any information security incident (including a potential breach of protected health information) shall report the matter to the Information Security Officer immediately.

All Associates must use, access, disclose, and transmit protected health information in accordance with Pawnee Valley Community Hospital’s HIPAA Privacy and Security policies and procedures. Associates may access protected health information only as necessary to perform his or her job duties.

Standard 2.7 – Licensing Requirements

Pawnee Valley Community Hospital shall remain in compliance with all state and federal licensing requirements for health care facilities, including, but not limited to, the applicable Medicare Conditions of Participation. An Associate who is licensed by a state agency (*e.g.*, registered nurse, physical therapist) shall be personally responsible for maintaining such licensure.

Standard 2.8 – EMTALA

Pawnee Valley Community Hospital shall comply with the requirements of the Emergency Medical Treatment and Labor Act (“EMTALA”) in providing medical screening examinations and

care for emergency medical conditions, regardless of an individual's citizenship, legal status, or ability to pay.

When a person presents at a dedicated emergency department for a non-scheduled visit and requests medical examination and/or treatment, Pawnee Valley Community Hospital shall provide such person with an appropriate medical screening examination to determine whether the person has an emergency medical condition, regardless of the person's citizenship, legal status, or ability to pay.

If a patient is diagnosed as having an emergency medical condition, Pawnee Valley Community Hospital shall provide medical treatment within its capabilities to stabilize the medical condition. If Pawnee Valley Community Hospital does not have the capabilities to stabilize the patient, it shall make an appropriate transfer to a facility having such capabilities. Pawnee Valley Community Hospital shall not discharge an unstable patient with an emergency medical condition unless such person refuses medical examination and/or treatment. In such a case, the Associate should ask the patient to sign that he or she is leaving against medical advice ("AMA"), and the Associate shall document such AMA in the patient's record.

Pawnee Valley Community Hospital shall not refuse to accept an appropriate transfer of an individual with an emergency medical condition who requires specialized capabilities or facilities if Pawnee Valley Community Hospital has the capacity to treat the individual.

Standard 2.9 – Controlled Substances

Some Associates have access to prescription drugs, controlled substances, and other medical supplies. Per Pawnee Valley Community Hospital policy, access to controlled substances is limited to Associates who are properly licensed and who have express authority to handle them. The use of these items is governed by government regulations and must be administered pursuant to an appropriate order. It is extremely important that these items be handled properly by authorized individuals to minimize risk to patients and Pawnee Valley Community Hospital. Associates shall carefully follow the recordkeeping and documentation procedures established by their departments and the pharmacy. If an Associate suspects the diversion of drugs from Pawnee Valley Community Hospital by another Associate or any other person, the Associate shall report the matter immediately to the Risk Manager.

Standard 2.10 – Safe Medical Devices Act

Pawnee Valley Community Hospital is committed to participation in this governmental program to prevent patient injury from medical devices by reporting appropriate events to the device manufacturer and/or the Food and Drug Administration. Any event in which a patient is injured by a device should be reported to Pawnee Valley Community Hospital's Risk Manager, and such reports shall be handled pursuant to established policies and procedures.

Standard 2.11 – Mandatory Reporting Obligations

Numerous federal and state laws and regulations require Pawnee Valley Community Hospital and/or Associates to disclose certain information to specified government officials. For

example, health care providers must report suspected incidents of child abuse to the Kansas Department of Children and Families. An Associate with a legal obligation to report certain information to a government agency shall follow Pawnee Valley Community Hospital's policy to report in a timely and complete manner.

Standard 2.12 - Government Inquiries and Investigations

Health care providers often are the subjects of government investigations targeting alleged billing improprieties or violations of the aforementioned laws. The mere fact a government agent makes inquiries concerning Pawnee Valley Community Hospital's practices does not mean Pawnee Valley Community Hospital has engaged in any wrongdoing. No communication, whether oral or written, submitted to a government entity should ever occur that would mislead the government entity or its agent, either directly or indirectly. An Associate shall be familiar with and comply with Pawnee Valley Community Hospital's policy and procedure concerning the proper handling of government inquiries and investigations. The Associate should also consult with Pawnee Valley Community Hospital's Chief Legal Officer related to the government inquiry immediately.

Standard 2.13 – Accreditation

In addition to federal and state laws, Pawnee Valley Community Hospital is committed to compliance with accreditation standards adopted by DNV Healthcare, Inc. An Associate shall deal with all accrediting bodies in a direct, open, and honest manner. No action should ever be taken in relationships with accrediting bodies that would mislead the accreditor or its survey teams, either directly or indirectly.

Standard 2.14 – Nondiscrimination in Health Programs and Activities

Pawnee Valley Community Hospital will adhere to the requirements of Section 1557 of the Affordable Care Act and will not segregate, delay, or deny services or benefits on the basis of race, color, national origin, religion, age (unless age is a factor necessary to normal operations or the achievement of any statutory objective), sex (including pregnancy, sexual orientation, or gender identity), genetic information, communication needs, or disability (including developmental disability) in the delivery of services to its patients, regardless of whether the individual is in the country lawfully or not. Pawnee Valley Community Hospital will not delay or deny effective language assistance services to individuals with limited English proficiency. All limited English proficiency services will be provided free of charge. Individuals will be treated consistent with their gender identities. Auxiliary aids and services will be provided free of charge and in a timely manner to individuals with disabilities to facilitate access to care and services. Any patient grievance arising from the Section 1557 Nondiscrimination requirements will be promptly investigated by the Corporate Compliance Director.

PRINCIPLE 3 – COMPLIANCE WITH OTHER LAWS

Pawnee Valley Community Hospital shall conduct its operations in compliance with state and federal laws and regulations applicable to businesses and employers.

In addition to those laws and regulations applicable to health care providers, Pawnee Valley Community Hospital also shall comply with those legal requirements applicable to most businesses and employers. The following standards summarize some, but not all, of those legal requirements and the impact of those requirements on Pawnee Valley Community Hospital's operations. An Associate shall comply with all laws and regulations in the performance of his or her job duties, regardless of whether they are specifically addressed here.

Standard 3.1 – Health and Safety

An Associate shall be familiar with all applicable health and safety laws and regulations, and shall act in compliance with the letter and spirit of those requirements at all times. An Associate shall immediately advise his or her supervisor of any serious workplace injury or any situation presenting a danger of injury so timely corrective action may be taken to resolve the issue.

Standard 3.2 – Environmental Compliance

Pawnee Valley Community Hospital shall operate its facilities with the necessary permits, approvals, and controls. An Associate shall adhere to all requirements for the proper handling of hazardous materials, and immediately alert supervisors to any situation regarding the discharge of a hazardous substance, improper disposal of hazardous and medical waste, or any other situation which may be potentially damaging to the environment. An Associate shall strive to utilize resources appropriately and efficiently and to recycle where possible and otherwise dispose of all waste in accordance with applicable laws and regulations and Pawnee Valley Community Hospital policy.

Standard 3.3 – Discrimination and Inappropriate Conduct in the Workplace

Pawnee Valley Community Hospital believes that the fair and equitable treatment of patients, Associates, and other persons is critical to fulfilling its vision and goals. It is the policy of Pawnee Valley Community Hospital to recruit, hire, train, promote, assign, transfer, lay off, recall, and terminate Associates based on their own ability, achievement, experience, and conduct without regard to race, color, religion, sex (including pregnancy, sexual orientation, or gender identity), national origin, age, disability, genetic information, veteran status, or any other classification prohibited by law.

Pawnee Valley Community Hospital shall not tolerate any form of harassment or discrimination based on race, color, religion, sex (including pregnancy, sexual orientation, or gender identity), national origin, age, disability, genetic information, or any other classification prohibited by law. An Associate shall not engage in inappropriate conduct or disruptive conduct in the workplace. An Associate shall report any harassment, discrimination, inappropriate conduct, or disruptive conduct in the workplace of which they are aware pursuant to the reporting

methods outlined above. Allegations of harassment, discrimination, inappropriate conduct, or disruptive conduct shall be investigated promptly pursuant to applicable policies and procedures.

Standard 3.4 – Weapons, Illegal Drugs, and Alcohol

No Associate shall bring any weapon of any kind into the workplace. Pawnee Valley Community Hospital prohibits the use, sale, dispensing, or possession of illegal drugs by its Associates, whether on or off the premises of Pawnee Valley Community Hospital. Illegal drugs include prescription drugs used in a manner inconsistent with package directions. No Associate shall report to work under the influence of illegal drugs or alcohol, nor shall any Associate report to work with an impairment resulting from the use of over the counter or prescription medications. An Associate may be asked to submit to a drug or alcohol test at any time deemed appropriate by Pawnee Valley Community Hospital and permitted by law.

Standard 3.5 – Antitrust

Federal and state antitrust laws are designed to create a level playing field in the marketplace and to promote fair competition. Discussions with competitors concerning Pawnee Valley Community Hospital's business can violate these laws. Prohibited subjects of conversation include any aspect of pricing, terms of supplier relationships, Pawnee Valley Community Hospital's services in the market, key costs such as labor costs, and marketing plans. No Associate shall discuss with any competitor market allocation or refusals to deal with certain suppliers.

In general, an Associate shall avoid discussing sensitive topics with competitors or suppliers, unless proceeding with the advice of the Corporate Compliance Director or the Chief Legal Officer. An Associate shall not provide any information in response to oral or written inquiries concerning antitrust matters without first consulting the Corporate Compliance Director or the Chief Legal Officer.

Standard 3.6 – Copyright

Copyrighted materials such as books, magazines, computer software, and recordings are protected by federal law. Unauthorized copying may constitute copyright violation. Copying is allowed for educational and research purposes. An Associate who desires to reproduce copyrighted material should receive permission from his or her supervisor prior to doing so. Use of any computer software without an appropriate license is strictly prohibited.

Standard 3.7 – Record Retention and Litigation Hold Directives

Pawnee Valley Community Hospital is required by law to maintain certain types of medical and business records, usually for a specified period of time. Failure to retain such documents for such minimum periods could subject Pawnee Valley Community Hospital to penalties and fines, cause the loss of rights, obstruct justice, place Pawnee Valley Community Hospital in contempt of court, or put Pawnee Valley Community Hospital at a serious disadvantage in litigation. Pawnee Valley Community Hospital has established controls to assure retention for required periods and timely destruction of records. Associates shall comply with the records retention and destruction schedule for the area in which they work.

When litigation is threatened or filed against Pawnee Valley Community Hospital or any of its Associates, the law imposes a duty upon Pawnee Valley Community Hospital to preserve all documents and records that pertain to the issues. This includes retention of electronic records. As soon as Pawnee Valley Community Hospital is made aware of pending or threatened litigation, a litigation hold directive will be issued. Such directive overrides any records retention schedule that may have otherwise called for the transfer, disposal, or destruction of the relevant documents. No Associate who has been made aware of a litigation hold directive may alter or delete an electronic record (including e-mail messages) or destroy a paper record that falls within the scope of that hold. Violation of such directive may subject an Associate to disciplinary action, up to and including termination (employment or otherwise), as well as personal liability for civil and/or criminal sanctions by the courts or law enforcement agencies.

Standard 3.8 – Identity Theft

Pawnee Valley Community Hospital has access to consumers' confidential financial information. The misuse or diversion of this information can cause devastating financial loss for such individual and may expose Pawnee Valley Community Hospital to significant liability. Pawnee Valley Community Hospital shall develop and implement appropriate procedures to detect, prevent, and mitigate identity theft. Violation of such procedures may subject an Associate to disciplinary action, up to and including termination (employment or otherwise).

PRINCIPLE 4 - CONFIDENTIALITY

An Associate shall execute and abide by the Pawnee Valley Community Hospital Confidentiality Agreement. A copy of the Confidentiality Agreement is attached hereto as Exhibit A and incorporated herein by reference.

PRINCIPLE 5 - BUSINESS ETHICS

In furtherance of Pawnee Valley Community Hospital's commitment to the highest standards of business ethics and integrity, an Associate shall accurately and honestly represent Pawnee Valley Community Hospital and shall not engage in any activity or scheme intended to defraud anyone of money, property, or honest services.

Standard 5.1 - Honest Communication

Pawnee Valley Community Hospital requires candor and honesty from Associates in the performance of their responsibilities. No Associate shall make false or misleading statements to any person or entity, including other Associates, concerning any aspect of Pawnee Valley Community Hospital's operations.

Standard 5.2 – Business Transactions

Business transactions with vendors, contractors, and other third parties shall be transacted free from offers or solicitation of gifts and favors or other improper inducements in exchange for influence or assistance in a transaction or even the appearance of any such impropriety. An Associate shall be familiar with and comply with Pawnee Valley Community Hospital's policy and procedure concerning interactions with vendor representatives, which is attached hereto as **Exhibit B** and incorporated herein by reference.

Standard 5.3 – Advertising and Marketing

Pawnee Valley Community Hospital shall market and advertise its services fairly, honestly, and in a non-deceptive manner, stressing their value and merits. An Associate shall not use tactics that misrepresent Pawnee Valley Community Hospital or that unfairly undermine the products and services of a competitor. This includes the use of disparaging comments or innuendoes.

Standard 5.4 - Patient Billings; CMS Price Transparency; No Surprises Act

The importance of submitting proper claims to federally funded health care programs is addressed in Standard 2.1. The same standards of conduct apply with respect to claims for services provided to persons with private insurance and self-pay patients.

Services shall be billed using billing codes that accurately describe the services that were provided and will be based upon appropriate documentation. Pawnee Valley Community Hospital shall strive to comply with all contractual requirements for all payers. Pawnee Valley Community Hospital shall provide complete, timely, and accurate responses to all reasonable inquiries concerning patient bills. Pawnee Valley Community Hospital shall utilize established policies and procedures to resolve any dispute concerning such bills.

Pawnee Valley Community Hospital shall cooperate fully with any duly authorized third-party audit of patient accounts. Pawnee Valley Community Hospital shall respond promptly to any reasonable request for information from any such auditor in compliance with established policies and procedures.

Pawnee Valley Community Hospital will strive to submit accurate claims and information. All documentation, including medical records, will be organized in a legible form so that they can be audited and reviewed. Associates will determine the applicable ICD-10 code (or successor version) to support a procedure or service. Pawnee Valley Community Hospital will provide each patient with the appropriate level of treatment regardless of the payment source or level of reimbursement Pawnee Valley Community Hospital receives.

Pawnee Valley Community Hospital expects payment of all co-insurance, co-pays, and deductibles from its patients. As previously mentioned in Standard 2.5, these will not be waived. Patients who assert an inability to pay will be required to complete the financial hardship documentation process and demonstrate that their payment for services rendered would place an undue financial hardship on the patient.

The Patient Accounts Department has the responsibility of tracking, recording, reporting, and initiating repayment on accounts owed refunds. The Patient Accounts Department will determine which accounts are owed refunds. The amount of refund will be verified to ensure accuracy. If it is determined that Pawnee Valley Community Hospital owes a refund to a patient or third-party payer, repayment will be initiated immediately. The Patient Accounts Department will provide a credit balance monthly report to the Corporate Compliance Director to verify that refunds are being appropriately returned to payors.

Pawnee Valley Community Hospital shall make a reasonable collection effort on all unpaid accounts unless the patients are determined to be financially indigent. Those accounts that cannot be collected after such efforts have been exhausted shall be presented to the Director of Patient Accounts or the Chief Financial Officer for write-off approval.

Pawnee Valley Community Hospital will strive to comply with the CMS Price Transparency Rule and No Surprises Act. Self-pay and uninsured patients will be offered a good faith estimate in compliance with the No Surprises Act. Pawnee Valley Community Hospital will not engage in balance billing of out-of-network patients unless permitted under the No Surprises Act or state law.

Standard 5.5 – Conflict Resolution

Conflicts among Associates regarding job responsibilities, accountabilities, policies, practices, and procedures that are not managed effectively by the organization have the potential to threaten health care safety and quality. An Associate shall promptly address and resolve internal conflicts which undermine a productive workplace using established procedures and mechanisms.

Standard 5.6 – Relationships Among Associates

No Associate should be made to feel compelled to give a gift to any co-worker, and gifts offered and received should be appropriate to the circumstances. For example, an Associate should not give a lavish gift to his or her supervisor. No Associate should be made to feel compelled to participate in any fundraising activity or contribute to any charitable organization.

Standard 5.7 – Social Media

An Associate is personally and legally responsible for the content of information they post on social networking sites. Even when using privacy protection settings, an Associate should treat all postings as potentially public information.

An Associate shall adhere to all provisions of the Confidentiality Agreement when posting on any social networking site. The Confidentiality Agreement prohibits the disclosure of Pawnee Valley Community Hospital information that is not available to the general public, such as its marketing and strategic plans, confidential financial information, trade secrets, financial reports, clinical and quality data, vendor information and data. All applicable trademark and other intellectual property laws must be followed when posting on any social networking site. An Associate shall not post to any social networking site during working time unless an Associate's job description requires such posts to be made as part of maintaining a Pawnee Valley Community Hospital sponsored social networking page.

No Associate shall make any reference to or post any information relating to a Pawnee Valley Community Hospital patient, even if the patient is not identified by name or otherwise. An Associate may post information regarding a family member or friend *only if* the Associate's knowledge of such person's condition is based *solely* on personal experience, and not the Associate's employment or affiliation with Pawnee Valley Community Hospital.

When blogging or posting comments, messages, or other content regarding Pawnee Valley Community Hospital, the postings should not create the impression that the Associate is speaking in any official capacity on behalf of Pawnee Valley Community Hospital.

Standard 5.8 - Legal Representation

As appropriate, Pawnee Valley Community Hospital shall retain and rely upon the advice of qualified legal counsel with regard to specific legal matters. An Associate from whom information is requested by an attorney representing Pawnee Valley Community Hospital shall provide complete, timely, and accurate responses to each such request. An Associate shall maintain the confidentiality of any and all communications with legal counsel to preserve evidentiary privileges.

Standard 5.9 – Fundraising

In furtherance of its charitable purposes, Pawnee Valley Community Hospital conducts fundraising activities through the Pawnee Valley Community Hospital Foundation. Pawnee Valley Community Hospital complies with Kansas registration, recordkeeping, and reporting requirements with respect to its fundraising activities. Pawnee Valley Community Hospital requires that all solicitations of charitable contributions for Pawnee Valley Community Hospital or its affiliates be accomplished under the supervision of the Board of Directors. No Associate may utilize Pawnee Valley Community Hospital's name for any fundraising purposes unless approved in advance by the Board of Directors.

PRINCIPLE 6 - PROTECTION OF ASSETS

An Associate shall strive to preserve and protect the Pawnee Valley Community Hospital's assets by making prudent and effective use of Pawnee Valley Community Hospital's resources and properly and accurately reporting its financial condition.

Standard 6.1 – Accuracy of Records

An Associate is responsible for the integrity and accuracy of Pawnee Valley Community Hospital's documents and records (including paper documents such as letters and memos, computer-based information such as e-mail or computer files on disk or tape, the electronic health record (EHR), and any other medium that contains information about Pawnee Valley Community Hospital or its activities), not only to comply with regulatory and legal requirements but also to ensure that records are available to defend business practices and actions. No Associate shall alter, falsify, or purposefully omit information on any record or document. Corrections to any record or document shall be made pursuant to established policies and procedures.

Standard 6.2 – Contracts

An Associate shall comply with the requirements of Pawnee Valley Community Hospital's policy on the review, preparation, and administration of contracts. No Associate shall purport to enter into a contract on behalf of Pawnee Valley Community Hospital with any person or entity or modify an existing contract unless the Associate has been specifically authorized to do so.

Standard 6.3 – Internal Controls and Financial Reporting

Pawnee Valley Community Hospital shall maintain a system of internal controls to provide reasonable assurances that all transactions are executed in accordance with the management team's authorization and are recorded in a proper manner so as to maintain accountability of the organization's assets. Associates shall comply with these controls. All financial information shall reflect actual transactions and conform to generally accepted accounting principles. No undisclosed or unrecorded funds or assets shall be established. Any Associate who has concerns regarding compliance with internal controls or the accuracy of Pawnee Valley Community Hospital's financial reports shall report such concerns to the Corporate Compliance Director or the Chief Legal Officer.

Standard 6.4 – Business Expenses

If an Associate is authorized to incur business expenses on behalf of Pawnee Valley Community Hospital, such Associate is responsible for the accurate and timely reporting of such expenses. All expenditures shall be in accordance with applicable policies.

Standard 6.5 - Personal Use of Corporate Assets

An Associate shall refrain from using Pawnee Valley Community Hospital's assets for personal use. All operations of the organization shall be conducted in the manner designed to

further Pawnee Valley Community Hospital's interests rather than the personal interests of an individual Associate or any other person. An Associate is prohibited from the unauthorized use or taking of Pawnee Valley Community Hospital's equipment, supplies, materials, or services. Prior to engaging in any activity on company time which may result in remuneration to the Associate or the use of Pawnee Valley Community Hospital's equipment, supplies, materials, or services for personal or non-work-related purposes, an Associate shall obtain specific approval from an appropriate member of the Corporate Compliance Director or the Chief Legal Officer.

Standard 6.6 – Intellectual Property Rights and Obligations

Any work of authorship or invention created by an Associate during the scope of his or her employment or affiliation with Pawnee Valley Community Hospital shall be considered the property of Pawnee Valley Community Hospital, including any patent, trademark, copyright, trade secret, or other intellectual property right in such work of authorship or invention. An Associate shall assist Pawnee Valley Community Hospital in obtaining and enforcing intellectual property rights in his or her works of authorship and inventions, while associated with Pawnee Valley Community Hospital and thereafter.

Standard 6.7 – Use of Computers, Communications Systems, and Related Equipment

Pawnee Valley Community Hospital has implemented and maintains a number of safeguards to protect the confidentiality, integrity, and availability of information created, maintained, or received in electronic form. An Associate shall be aware of and adhere to such safeguards in performing his or her job duties. An Associate shall report any suspected breach of such security measures.

E-mail and voice-mail messages reflect the image of Pawnee Valley Community Hospital. An Associate should compose and deliver such messages in a professional manner that is similar to messages sent on Pawnee Valley Community Hospital letterhead. An Associate should keep in mind that electronic files and even voicemail may be subject to discovery and may subsequently be used in litigation or investigations involving Pawnee Valley Community Hospital or an Associate.

All computers, communications systems, and related equipment (including, but not limited to, computer files and drives, electronic mail, intranet service, internet access, and voicemail) are the property of Pawnee Valley Community Hospital and are to be used for business purposes. No personal use of computers, communications systems, and related equipment is permitted. There is limited personal use allowed for physicians and advanced practice providers due to the nature of their work schedules. An Associate should assume that such communications are not private.

Pawnee Valley Community Hospital reserves the right to periodically access, monitor, print, copy, and disclose the contents of computer files and drives and e-mail and voice-mail messages. Such action taken may only be done with the prior approval of the Chief Legal Officer.

An Associate shall not use Pawnee Valley Community Hospital computers, communication systems, or related equipment to send or receive any message or download or retrieve any materials (video or audio) that could be considered inappropriate or illegal under state or federal law. Pawnee Valley Community Hospital computers, communication systems, or

related equipment shall not be used to store, transmit, or receive messages or materials (video or audio) having language or images that may reasonably be considered offensive, harassing, demeaning, or disruptive to any Associate. Such prohibited conduct includes, but is not limited to, sexually explicit or derogatory comments or images, gender-specific comments, racial epithets and slurs, or any comments, jokes, or images that would offend someone or create a hostile work environment based on his or her race, color, sex (including pregnancy, sexual orientation, or gender identity), religion, national origin, age, or disability.

It is further prohibited to send or receive messages or materials on Pawnee Valley Community Hospital computers, communication systems, or related equipment in a way which includes the use of profane or offensive language or, in the judgment of management, is determined to be profane, demeaning, insulting, disruptive, threatening, intimidating, violent, defamatory, harassing, embarrassing, insubordinate, or otherwise inappropriate or unprofessional. Finally, an Associate shall not use Pawnee Valley Community Hospital computers and communication systems or related equipment to conduct a job search or open misaddressed mail.

Associates who abuse Pawnee Valley Community Hospital's computers, communications systems, or related equipment or use them excessively for non-business purposes may lose these privileges and may be subject to disciplinary action up to and including termination (employment or otherwise).

Standard 6.8 – Political Activity

No Associate shall use corporate resources, including e-mail and Internet access, for personally engaging in political activity. While an Associate may participate in the political process on his or her own time and at his or her own expense, an Associate shall not give the impression he or she is speaking on behalf of or representing Pawnee Valley Community Hospital in these activities.

PRINCIPLE 7 - CONFLICTS OF INTEREST

An Associate owes a duty of undivided and unqualified loyalty to Pawnee Valley Community Hospital. An Associate shall not use his or her position to profit personally or to assist others in profiting in any way at the expense of the organization.

Pawnee Valley Community Hospital recognizes that there is a potential for conflicts of interest. In conducting its business activities, Associates owe a duty of undivided and unqualified loyalty to Pawnee Valley Community Hospital. A conflict of interest may occur if an Associate's outside activities, personal financial interests, or other personal interests influence or appear to influence his or her ability to make objective decisions in performing his or her job responsibilities. A conflict of interest may also exist if the demands of any outside activity hinder or distract an Associate from the performance of his or her job responsibilities. Associates shall not use their positions to profit personally or to assist others in profiting in any manner at the expense of the organization. An Associate is obligated to ensure he or she remains free of any such conflict of interest.

Standard 7.1 – Disclosure Statement

Members of the Board of Directors, the Administrator, and other Associates holding senior management positions shall complete a conflict-of-interest disclosure statement. Any Associate having a direct or indirect ownership interest in companies doing business with Pawnee Valley Community Hospital or its partners and affiliates must complete a conflict-of-interest disclosure statement identifying the nature of their business interest.

Standard 7.2 -- Outside Financial Interests

While not all-inclusive, the following are examples of the types of activities by an Associate, or members of an Associate's household, which might cause conflicts of interest. Associates, therefore, shall not engage in these and similar activities.

1. Ownership in or employment by any outside concern that either provides services or supplies equipment to Pawnee Valley Community Hospital or its partners and affiliates, or with which Pawnee Valley Community Hospital competes, or to which Pawnee Valley Community Hospital provides products or services. This does not apply to stock or other investments held in a publicly held corporation, *provided* the value of the stock or other investments does not exceed 5 percent of the corporation's stock. Pawnee Valley Community Hospital may, following a review of the relevant facts, permit ownership interests which exceed this amount if management concludes such ownership interests will not adversely impact Pawnee Valley Community Hospital's business interest or the judgment of the covered person.
2. Involvement on behalf of Pawnee Valley Community Hospital or a partner or affiliate in any transaction in which an Associate or his or her household member has a substantial personal interest.

3. Disclosure or use of confidential, special, or inside information of or about Pawnee Valley Community Hospital or its partners or affiliates, particularly for personal profit or advantage of an Associate or his or her household member.
4. Competition with Pawnee Valley Community Hospital or its partner or affiliate, directly or indirectly, in the purchase, sale, or ownership of property or business investment opportunities.
5. Conduct of any business not on behalf of Pawnee Valley Community Hospital or its partner or affiliates with any vendor, supplier, contractor, or agency, or any of their officers or workforce members.
6. Serving as a director, officer, or trustee of any organization who is in direct competition with Pawnee Valley Community Hospital or its partners or affiliates. Directors, officers, and other Associates must obtain approval from the Administrator and the Corporate Compliance Director prior to serving as a director, officer, or trustee of an organization who is in direct competition with Pawnee Valley Community Hospital or its partners or affiliates.

Standard 7.3 – Services for Competitors/Vendors

No Associate, nor his or her household members, shall perform work, consult with, or render services for any competitor of Pawnee Valley Community Hospital (or its partner or affiliate) or for any organization with which Pawnee Valley Community Hospital (or a partner or affiliate) does business or which seeks to do business with Pawnee Valley Community Hospital outside of the normal course of his or her employment or affiliation with Pawnee Valley Community Hospital without the approval of the Associate's supervisor. Nor shall any such Associate be a director, officer, or consultant of such an organization, nor permit his or her name to be used in any fashion that would tend to indicate a business connection with such organization. Associates are prohibited from discussing the business affairs of Pawnee Valley Community Hospital (or its partners and affiliates) during their secondary employment. At no time shall an Associate have secondary employment which interferes in his or her satisfactory performance at Pawnee Valley Community Hospital (or its partners or affiliates).

Standard 7.4 – Former Personnel of Fiscal Intermediary/Medicare Administrative Contractor

In order for Pawnee Valley Community Hospital to comply with requirements of the Medicare program, every Associate must notify Human Resources or the Corporate Compliance Director if he or she was at any time during the year preceding his or her employment with Pawnee Valley Community Hospital employed by a Medicare intermediary or contractor in a managerial, accounting, auditing, or similar capacity.