

A smiling male healthcare professional with dark hair, wearing light blue scrubs, stands in a brightly lit hospital hallway with his arms crossed. The hallway has a wooden door on the left and framed artwork on the right. The background is softly blurred, showing the perspective of the hallway with overhead lights.

Code of Ethics



Intermountain
Healthcare

Healing for life®

Dear Caregiver,

As a caregiver at Intermountain Healthcare, you are part of an exemplary and ethical organization. Patient trust is fundamental to our mission of helping people live the healthiest lives possible. Caregiver trust serves as the foundation for a healthy workplace and our ability to fulfill our mission.

Our values as an organization demand personal responsibility from each of us to fully understand and follow the rules and requirements that apply to our work. This Code of Ethics booklet details our high standards and provides a reference to guide you in your responsibilities.

As caregivers in our ethical organization, we give up the right to stay silent about any questionable activity. Leadership will support you when you speak up immediately through the channels outlined within this Code of Ethics.

Thank you for doing your part to deliver extraordinary care to our patients and members and for sustaining a culture of integrity at Intermountain.



Sincerely,

A handwritten signature in black ink, appearing to read 'Marc Harrison', written in a cursive style.

Marc Harrison, MD
President and CEO
Intermountain Healthcare

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Code of Ethics Overview

This Code of Ethics booklet provides guidelines and expectations about Intermountain's standards. Specific subjects are highlighted to illustrate what to watch for and to provide guidance on how to handle these and other similar situations. Specific policies are identified that provide additional details about the standards. Please review these documents and refer to the Policy Library often. The Policy Library is available on Intermountain.net.

Caregivers (which include employees, clinicians, trustees and volunteers), suppliers, contractors and other business partners of Intermountain must accept personal responsibility to act with the utmost integrity in all business activities and adhere to the policies, regulations, and laws that govern their work.

Violations of our Code of Ethics — or the underlying laws, regulations, and Intermountain policies — may result in corrective action up to and including termination of employment, suspension of privileges, termination of business relationships, civil or criminal liability, and/or financial penalties.



Ethics Standards

- We model Intermountain's values of integrity, trust, excellence, accountability, and mutual respect.
- We treat each other, our patients and members, business partners, suppliers, and competitors fairly.
- We endeavor to know, abide by, and understand the specific laws, policies, and procedures that apply to our jobs, roles, assignments, and us as individuals.
- We are empowered and responsible to speak up with concerns about compliance and ethical issues.
- We ask for help when we have questions or concerns about a situation.
- We report observed and suspected violations of laws or policies to:
 - our supervisor, manager, or director
 - our Area Compliance Team
 - the Human Resources Department, *askHR*
 - the Legal Department
 - the Corporate Compliance Officer, or
 - the 24-hour Compliance Hotline at 1.800.442.4845
- We coordinate investigations of potential violations through appropriate channels.
- We notify the Compliance Department immediately if we are sanctioned or excluded by the government from participation in any government-funded program.

Protecting Privacy and Confidentiality

➔ WE PROTECT PRIVACY AND CONFIDENTIALITY.

While working or providing a service for Intermountain or SelectHealth, we are committed to safeguarding the privacy of patient and member information. This obligation applies even after we are no longer employed by or associated with Intermountain or SelectHealth.

We routinely collect personal information about our patients and members in order to provide care. We understand how sensitive this information is and maintain its confidentiality accordingly. Consistent with privacy laws, we access, use and disclose patient-identifiable information only to care for or serve the patient or member, obtain payment for his or her care, or as allowed by law.

In certain situations, Intermountain may use health information for other limited purposes, such as for research or analysis. When this is the case, we will only do so as the law or the patient permits.

Suppliers who process confidential information on behalf of Intermountain Healthcare are required to comply with our privacy and security policies and all applicable laws and regulations. Suppliers are authorized to access, use and disclose only the minimum necessary protected health information (PHI) needed to provide their contracted services.

Policies: Confidentiality Policy; Critical Sensitive PHI Policy; PHI Authorization Policy; PHI Disclosure Treatment Payment Operations Policy; PHI Emergency Disclosure Policy; PHI Friends Family Disclosure Policy; PHI Legal Disclosure Policy; PHI Minimum Necessary Policy; PHI Safeguards Policy; Social Media Policy

Intermountain's Access and Confidentiality Agreement describes our responsibility to not access or disclose information about our patients or members without proper authorization. This applies even after our employment or association with Intermountain or SelectHealth ends.

Clinicians should only access patient information where an established care provider relationship exists, a new patient relationship is developed, or a request for consultation or authorized quality review is made.

➔ WE USE CARE WITH CONFIDENTIAL AND PROPRIETARY INFORMATION.

We protect confidential and proprietary information by:

- Following Intermountain's policies related to protecting such information.
- Properly disposing of information which no longer needs to be maintained.
- Taking appropriate safeguards when transporting or transmitting information.
- Knowing and complying with agreements signed to protect the confidentiality of information – we are responsible for knowing what these agreements require and abiding by them.

*Policies and Guiding Documents: Confidentiality Policy;
Transporting Sensitive Critical Information Procedure*



Secure Transportation of Information

- Whenever possible, convert paper documents into an encrypted electronic format with password protection for transport.
- Use encrypted mobile media such as a thumb drive. Send password or encryption keys separately from the media.
- Secure information and place it out of view (e.g., in a briefcase, backpack, or trunk of a car).

➤ WE USE CARE WITH PROTECTED HEALTH INFORMATION THAT IDENTIFIES EITHER PATIENTS OR MEMBERS.

Protected health information includes any information that could identify patients or members. This identifiable information is not only their name, medical record number, health plan number, or picture. For example, a date of treatment or zip code in combination with health-related information such as diagnosis or procedure would be protected health information.



Policies and Guiding Documents: PHI Facsimile Procedure; PHI Minimum Necessary Policy; PHI Safeguards Policy; Privacy Agreements Policy; Privacy Rule Administration Policy, Secure Email Procedure; Transporting Sensitive Critical Information Procedure.

If there is a privacy breach of patient information, regulations require that we notify the individual and the federal government. A breach may include inappropriate access to family members' or coworkers' records. It is possible that if you inappropriately access information, the individual may deduce from the notification that you are the person responsible for the breach.

Do not discuss a patient's information with friends, family, or through social media. Discussing or describing patients or members through social media is against the law, and it destroys trust between patients and caregivers.

The Privacy Office, Area Compliance Teams, Human Resources, and the Compliance Hotline can help address questions and concerns.

Accessing your own treatment information through your job-related system access when the information is not needed for your job responsibilities is a violation of our Information Systems Security Policy.

Appropriate access to your own health information is made through *MyHealth*, the Health Information Management Department, or requesting a copy of your records from the facility that provided the treatment.

Special proxy access for dependents' health information may be available through *MyHealth*.

➤ WE RESPECT THE PRIVACY OF
CO-WORKERS WHO BECOME OUR PATIENTS.

When caregivers become our patients, they are entitled to the same privacy and other rights as any other patient. A patient's caregiver status should not impact their care or the confidentiality of their health information.

Policies: Confidential Policy; Critical Sensitive PHI Policy; PHI Authorization Policy; PHI Disclosure Treatment Payment Operations Policy; PHI Emergency Disclosure Policy; PHI Friends Family Disclosure Policy; PHI Legal Disclosure Policy; PHI Minimum Necessary Policy; PHI Safeguards Policy; Social Media Policy

Accessing treatment information of a family member, coworker, or friend through your job-related system access, when the information is not needed for your job responsibilities, is a HIPAA violation.



➔ WE SUPPORT CAREGIVER PRIVACY.

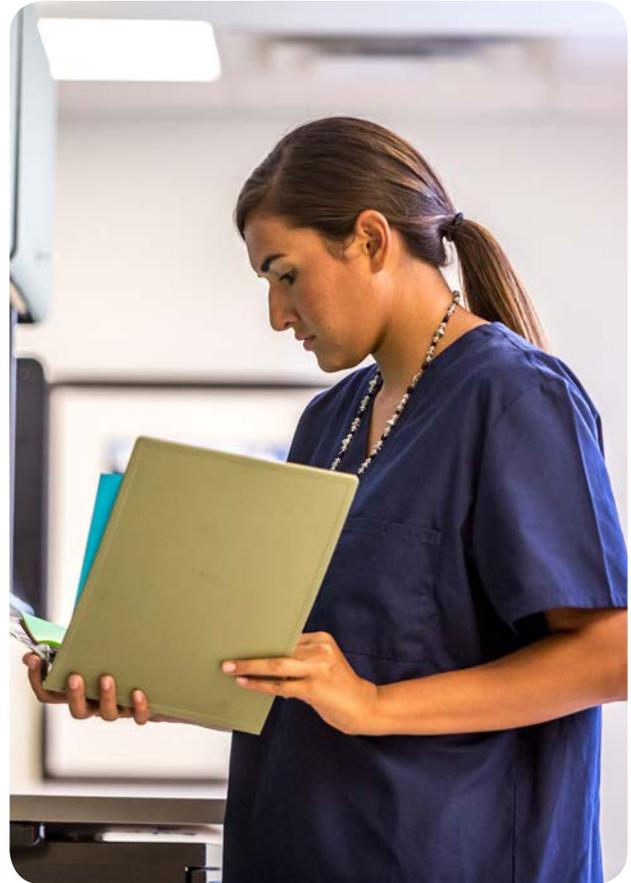
Just as we are careful to ensure that our patients' information is not disclosed through photos and video recordings, we use the same care to protect our caregivers' privacy. We may be asked by patients and others to be included in their photos or videos. We understand that these images can be used at the sole discretion of the individual recording the image. Accepting the invitation to be a part of the image is at the caregiver's discretion. Caregivers may decline the invitation to be included in the image.

Policy: Visual Image Audio Recording Policy

➔ WE SAFEGUARD PERSONNEL INFORMATION.

We recognize that our personnel records contain sensitive information. Intermountain will not disclose these records outside of the company, except upon an individual's own request, for a legitimate business reason, or as required by law.

Policy: Personnel Record Policy



➔ WE MAINTAIN COMPUTER AND NETWORK SECURITY AND PROTECT THE CONFIDENTIALITY OF INFORMATION CONTAINED ON INTERMOUNTAIN'S COMPUTER AND NETWORK SYSTEMS.

We only use and access Intermountain's systems as necessary to perform our assigned functions. Intermountain's computer systems are critical to help provide care to patients and members. To protect these systems, we comply with Intermountain's policies related to computer and network security. Passwords must be changed every year. They must be kept confidential and not shared with anyone.

Policies and Guiding Documents: Information Classification Policy; Information Systems Acceptable Use Policy; Information Systems Access Control Procedure; Information Systems Security Policy; Password Management Information Systems Procedure; PHI Facsimile Procedure; Secure Email Procedure; Security Policy; Transporting Sensitive Critical Information Procedure

Intermountain's property includes computers, the phone system, email, and Internet access. Our access to Intermountain's information systems is a privilege and not a right of any caregiver.

Employees who witness or become aware of password sharing must report the activity to their manager or supervisor, cybersecurity or to Corporate Compliance.

We are accountable for all activities that occur under our login including actions involving poor judgment or illegal activities.

Computer Access Security

- Never share your password.
- Use passwords, access codes, and screensavers.
- Close the browser when you are finished.
- When using a shared computer log in and out.
- Log off computers when you are finished or are away from the computer.
- Do not store passwords on white boards, sticky notes, notepads, under keyboards, or posted in or around workstations.

Accessing illegal, offensive, or violent content may result in the termination of access to Intermountain's information systems resources and may also result in termination of employment and criminal liability.

Providing a Healing Environment

➔ WE PROVIDE A RESPECTFUL, CARING, AND HEALING ENVIRONMENT FOR PATIENTS AND FAMILIES.

We help patients understand and exercise their rights.

We keep patients - and, when permission is given, their families and others - informed of options in directing their care, treatment, and services.

We listen with sensitivity and consider the informed preferences of patients, including informed decisions to discontinue care, treatment, and services.

We offer clinical and ethical consultations to patients and families if a conflict arises during a patient's treatment.

We protect our patients' dignity; respect their cultural, psychological, and spiritual values; and safeguard their personal information.

We honor each patient's choice of providers for post-hospital services.

Policies: Advance Care Planning Policy; Hospital Visitor Policy; Life Sustaining Treatment Policy; Patient Choice Policy; Patient Rights Policy



➤ WE ARE COMMITTED TO NON-DISCRIMINATION AND ACCESSIBILITY FOR OUR PATIENTS, MEMEBERS, AND VISITORS.

We comply with applicable state and federal laws. We do not discriminate against any individual based on age, race, color, ethnicity or national origin, religion, creed, language, disability, socioeconomic status, sex, sexual orientation, gender identity or expression, or veteran status in providing care and services.

Policies: Communication Assistance Policy; Discrimination Grievance Procedure; Non Discrimination Policy; Patient Rights Policy; Service Animal Policy

➤ WE ASSIST INDIVIDUALS SEEKING SERVICES WITH SPECIAL COMMUNICATION NEEDS.

We are committed to ensuring that all individuals, including those who have limited English proficiency, have meaningful access and equal opportunity to our services and programs.

We are committed to making reasonable accommodations to ensure effective communication with individuals with disabilities. This also includes an obligation to provide

effective communication to a patient's or member's companion who is an individual with a disability. Potential disabilities that may require communication accommodations include, but are not limited to, impaired hearing, sight, and learning disabilities such as dyslexia.

Policy: Communication Assistance Policy

If you believe discrimination has occurred, please make a report to the facility's Civil Rights/504 Coordinator, your Area Compliance Team, or the Compliance Hotline. Patients and other individuals may also report grievances to the Civil Rights/504 Coordinator.

We provide communication assistance aids and services in a timely manner and free of charge. Aids and services that may be provided include, but are not limited to, qualified sign language interpreters, written information in alternate formats, foreign language interpreters, and information translated into other languages.

When communication assistance is needed, we use one of Intermountain's qualified interpreters. If a patient or family member insists on using someone other than a qualified interpreter (such as a family member or friend), a qualified interpreter should still be present to ensure that legal, consent, or other critical information is interpreted appropriately.

Supporting a Positive Work Environment

➔ WE ARE COMMITTED TO EQUAL OPPORTUNITY EMPLOYMENT AND NON-DISCRIMINATION.

We do not discriminate or make employment decisions based on a person's race, color, ethnicity, religion, gender, sexual orientation, gender identity, national origin, age, disability, protected military or veteran status, pregnancy, or genetic information.

Policies: Equal Employment Opportunity Affirmative Action Policy; Non-Discrimination Harassment Retaliation Free Workplace Policy

➔ WE MAINTAIN OUR REQUIRED LICENSES, PRIVILEGING, AND PROFESSIONAL CREDENTIALS TO PERFORM OUR JOBS.

We understand the scope of practice that our licensure or credentials permit us to perform and stay within those boundaries. When a job requires a license or specific credentials, we only allow individuals with current and valid

licenses and credentials to perform those functions. We do not employ or contract with individuals who have been excluded* from participating in federally funded healthcare programs, nor are they permitted to practice or bill through Intermountain.

** Exclusion checks are run against State Medicaid databases, the Department of Health and Human Services Office of Inspector General's List of Excluded Individuals/Entities and the System for Award Management list maintained by the US General Services Administration.*

Policies: Background Screening Policy; License Verification Policy; Sanction Screening Policy

➔ WE ARE COMMITTED TO FAIR PRACTICES AND EQUAL OPPORTUNITY EMPLOYMENT.

We are committed to recruiting the most qualified caregivers from a diverse pool of applicants. Talent and performance serve as the basis for advancement within Intermountain.

Policies: Employee Complaint Resolution Policy; Employee Selection Policy; Equal Employment Opportunity Affirmative Action Policy

➤ WE KEEP OUR WORKPLACE SAFE.

We follow Intermountain's policies regarding workplace safety. We make sure Intermountain campuses are safe places for patients, members, visitors, and caregivers. We complete required safety training. If we see a hazardous condition, we respond appropriately.

We comply with all laws, regulations, and Occupational Safety and Health Administration standards. As required, we report certain injuries, inspections, illnesses, and motor vehicle accidents.

Policies: Background Screening Policy; Disruptive Behavior Workplace Violence Policy; Driver Safety Procedure; Employee Education Policy; Facility Access Policy; Hazardous Materials Policy; Immunization Policy; Weapon Policy; Workplace Safety Policy



➤ WE DOCUMENT AND REPORT EVENTS SO THAT WE CAN IMPROVE OUR PROCESSES AND REDUCE THE RISK OF HARM.

When an unexpected event impacts, or may impact, the quality of patient care or the safety of our patients, members, visitors, or ourselves, we report these incidents through the appropriate channels.

Policy: Event Reporting Policy

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➤ WE ADDRESS INAPPROPRIATE AND DISRUPTIVE BEHAVIORS.

We treat each other with honesty and respect. We do not tolerate violence, threats of violence or any form of discrimination or harassment. We have processes in place to address inappropriate or disruptive behaviors and performance issues through our corrective action processes and medical staff bylaws.

Policies: Disruptive Behavior Workplace Violence Policy; Employee Corrective Action Policy; Non-Discrimination Harassment Retaliation Free Workplace Policy

We are expected to act professionally and refrain from making comments, gestures, or acting in any manner that can be construed as harassing or disruptive. Retaliation against anyone reporting inappropriate behaviors in good faith is strictly prohibited.

➔ WE OBSERVE AN ALCOHOL- AND DRUG-FREE WORKPLACE.

When we report to work, we do so fit for duty and free from the influence or impairment of alcohol and drugs.

Policies: Drug Testing Policy; Fit for Duty Policy

➔ WE DISPLAY APPROPRIATE IDENTIFICATION.

We wear an Intermountain or SelectHealth identification badge at all times while on duty. The badge being worn is applicable to our on-duty role. If we have a secondary role, we wear the applicable badge when performing that secondary role.

Policies and Guiding Documents: Facility Access Policy; Identification Badge Procedure; Professional Appearance Policy

➔ WE ENCOURAGE APPROPRIATE REPORTING RELATIONSHIPS.

We avoid working relationships where one family member reports directly to another family member (including one's spouse, parents, siblings, grandchildren, etc.). In addition, an employee who is involved in a romantic or intimate relationship with another employee may not supervise the employee with whom he or she is involved.

If any of these situations develop, we let management know so that the situation can be resolved. We also disclose to management any of these relationships we have with an Intermountain supplier or business partner.

Policies and Guiding Documents: Conflict of Interest Policy; Employing Relatives Policy; Reporting Relationships Guideline; Supplier Relations Policy



➔ WE REFRAIN FROM SOLICITING CAREGIVERS, PATIENTS, MEMBERS, OR VISITORS FOR UNAUTHORIZED PRODUCTS OR SERVICES.

We do not solicit other caregivers, patients, members, or visitors for unauthorized products, memberships, or other causes during scheduled work time or in work areas. Work time includes both our working time and the time when others are working. Unauthorized promotional material may not be distributed in patient care areas at any time, for any purpose.

Policy: Solicitation Policy

Prohibited solicitation and distribution activities include the following:

- Displaying items for sale in work areas or engaging in any other formal or informal sales activities related to a personal business.
- Placing decals on facility fixtures, ID badges, property and/or equipment.

Leaving unauthorized literature, sign-up sheets, order sheets, buttons, stickers, coupons, etc. in work areas is not distribution; it is considered littering and is prohibited.



Safeguarding Intermountain's Interests

➤ WE ARE HONEST WITH INTERMOUNTAIN FUNDS.

We are careful with Intermountain funds to make sure they are used effectively. We:

- Abide by company policies and procedures for the secure handling of Intermountain funds.
- Accurately prepare financial records.
- Ensure that any funds we spend or approve reflect the appropriate use of Intermountain resources.

Policies: Approval Authority Expenditures Policy; Attendance Policy; Business Mileage Policy; Business Mileage Homecare Policy; Business Travel Policy; Cash Disbursement Policy; Cash Receipts Policy; Credit Card Program Policy; Fraud Policy; Residual Fund Policy; Time Worked Policy



All caregivers, suppliers and contractors have a responsibility to immediately report any known or suspected irregularity. Irregularities include, but are not limited to:

- misrepresentation of payroll time and attendance
 - inappropriate alteration of financial documents
 - misappropriation of funds
 - misuse of Intermountain supplies, services, or other resources
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➤ WE PROTECT COMPANY ASSETS.

We respect and use Intermountain's resources for legitimate business reasons and encourage others to do the same. Intermountain's resources include, but are not limited to, property, funds, information, records, intellectual property, clinical and business equipment, computer systems, telephones, and the company name.

Policies: Asset Disposition Policy; Cell Phone Data Device Medical Group Policy; Cellular Device Policy; Intellectual Property Distribution Policy; Intellectual Property Policy; Technology Resource Management Policy

All care and testing is appropriately documented and charged. We do not use Intermountain resources for free self-testing or treatment.

➔ WE ARE RESPONSIBLE WITH COMPANY TIME AND RESOURCES.

We use our time at Intermountain to further the company's mission. We accurately report and record our time. Misuse of paid time or Intermountain resources may be considered theft from Intermountain.

Policies: Discount Restriction Policy; Employee Corrective Action Policy; Fraud Policy

We clock in at the kiosk closest to our work area. When we clock in, we are at our work site and ready to begin work. We never clock in for someone else.

Accepting Terms and Conditions, including online click-through agreements, can be considered a contract between Intermountain and another party. Care must be taken when accepting any obligation that could bind Intermountain. If you have questions, consult with your supervisor.

➔ WE PROTECT INTERMOUNTAIN'S INTELLECTUAL PROPERTY.

We encourage caregivers and affiliated providers to create

and develop new inventions, processes, and technologies. To protect Intermountain's interests, caregivers and affiliated providers must not disclose Intermountain's proprietary materials or information unless authorized by applicable Intermountain policies, procedures, or guidelines or by Intermountain's Intellectual Property Office.

Policies: Intellectual Property Distribution Policy; Intellectual Property Policy

Intermountain values innovation that leads to extraordinary healthcare. Guidelines are in place to appropriately reward innovators and developers.

➔ WE REVIEW AND SIGN CONTRACTS BASED ON SIGNING AUTHORITY.

We sign or agree to contracts only if we are authorized by Intermountain policy to do so. Contracts obligating Intermountain are required to receive a legal review, unless specifically exempted in the policy. This applies to all legally enforceable agreements that create an obligation for Intermountain.

Policy: Contract Policy

➔ WE USE APPROPRIATE COMMUNICATION CHANNELS.

We work with our Marketing and Communications Department to ensure accuracy as we prepare public presentations or media interviews. We do not act as a spokesperson for Intermountain without approval. We forward all media requests to Marketing and Communications.

Requests by external entities to record video on Intermountain property are coordinated through Marketing and Communications.

Policies and Guidance Documents: Intermountain Style Guide; Video Style Guidelines; Social Media Policy; Visual Image Audio Recording Policy

➔ WE PROTECT OUR BENEFITS.

We responsibly use company benefit plans for ourselves and other covered individuals and provide accurate information when doing so. We take steps to make sure that ineligible individuals are not covered under our plans.

Policies and Guidance Documents: Benefit Eligibility Policy; Family Medical Leave Policy; Fringe Benefit Reporting Policy; Human Resources Health Insurance Handbook



➔ WE DISCLOSE POSSIBLE CONFLICTS OF INTEREST.

We identify situations where our personal interests may conflict with those of Intermountain and disclose them.

A conflict of interest may arise if we have a personal or financial interest that could interfere or compete with the interests of Intermountain, or if we are in a situation to use our position with the company for personal gain. A conflict may also arise if a family member or other close relation owns or works for a company that does business (or competes) with Intermountain.

We disclose any circumstance that could be perceived as a conflict of interest, even if we do not think the situation would violate Intermountain's guidelines.

Policies: Conflict of Interest Policy; Intellectual Property Policy

Potential conflicts of interest:

- Outside employment. Working in a job with assignments like those performed for Intermountain, or that may conflict with Intermountain jobs or assignments.
- Payment for participating in activities, speeches, or forums that are related to our jobs or assignments.
- Participating on a board of directors for a non-Intermountain entity.



Ensuring Fair and Ethical Business Practices

➔ WE ARE RESPONSIBLE IN OUR LOBBYING EFFORTS.

Lobbying government officials is a sensitive activity requiring strict controls. For this reason, Intermountain Government Relations directs any lobbying efforts. We do not provide, receive, or solicit gifts from government or legislative officials or lobbyists.

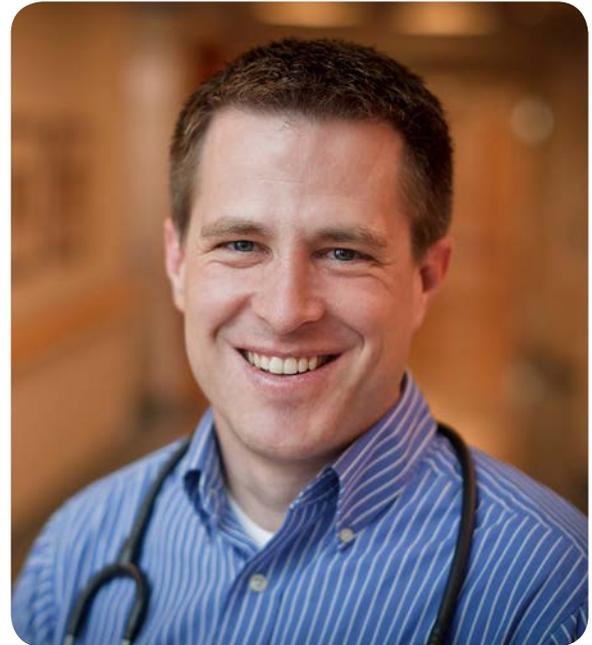
Policies: Direct Lobbying Contractor Policy; Direct Lobbying Employee Policy; Expenditure Reporting Lobbyist Policy

➔ WE ENCOURAGE INDIVIDUALS TO TAKE AN ACTIVE INTEREST IN GOVERNMENT PROCESSES.

If we choose to participate in a political process outside of our job responsibilities, we will do so as individuals and not as representatives of Intermountain. It is our responsibility to report any lobbying activity on behalf of Intermountain Healthcare to the Government Relations Department for appropriate reporting.

Policy: Political Contributions SelectHealth Policy

If a caregiver is reimbursed for attending any event where a legislator is in attendance, the event needs to be reported to the Intermountain Government Relations Department.



➔ WE ACT AS A RESPONSIBLE NOT-FOR-PROFIT ORGANIZATION.

As a not-for-profit organization, we engage in activities to further our charitable and social welfare mission, including responsible financial activities. This means we:

- Avoid compensation arrangements in excess of fair market value.
- Avoid actions that inappropriately create revenues for Intermountain, such as intentionally billing claims incorrectly.
- Submit accurate financial reports to appropriate taxing authorities.
- File all tax returns and information in a manner consistent with applicable laws.

We are bound by local, state, and federal tax law to make sure that we operate for the benefit of the community and not for the benefit of any private individual or group. All payments and business dealings must be reasonable and may not provide an excessive financial benefit to any party.

Policies: Community Benefit Policy; Compliance Policy; Debt Derivative Policy; Financial Assistance Policy; Philanthropy Policy; Tax Exempt Bond Policy

Not-for-profit organizations are formed to operate for the benefit of the communities they serve. Surplus funds are used to cover operating expenses and are typically reinvested to further charitable and social welfare causes.

In exchange for these charitable activities, the organization is exempt from paying many federal, state, and local taxes. To retain tax exemption, a not-for-profit organization must meet rigorous standards established by tax authorities.

Intermountain's community benefit includes providing charity care (services provided at reduced or no cost), funding school and community-based clinics, sponsoring health fairs, giving to other not-for-profit health-related organizations, etc.

➔ WE MAINTAIN OUR COMMUNITY'S CONFIDENCE BY COMPETING FAIRLY IN THE MARKET.

We comply with antitrust laws. These laws are designed to promote fair competition. For example, we risk violating these laws by discussing certain aspects of Intermountain's business with a competitor such as how we establish our prices, the terms of supplier relationships, or agreeing with a competitor to refuse to do business with a supplier. We seek the advice of Intermountain's Legal Department prior to discussing potentially sensitive topics with competitors or suppliers.

Policies: Confidentiality Policy; Supplier Purchasing Payment Policy

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➔ WE FOLLOW ALL LAWS AND REGULATIONS.

We are committed to knowing, understanding, and abiding by all laws, regulations, and Intermountain policies that apply to our jobs or assignments. We refrain from conduct that may violate any laws pertaining to fraud, waste, and abuse of government funds.



We are required to report all suspected violations through the proper internal channels for investigation. Intermountain management will report violations of law to the appropriate authorities.

Policies: Compliance Policy; Compliance Violation Reporting Policy; False Claims Prevention Policy; Fraud Policy; Insider Trading Policy

The Federal False Claims Act makes it illegal for any person or organization to knowingly make or file a false claim for payment from the federal government. Provisions allow an individual who knows that a false claim was submitted for payment to file a lawsuit in federal court on behalf of the government.

➔ WE ENSURE ACCURACY OF RECORDS AND REPORTING.

We ensure that our records are accurate and not misleading. Intermountain's credibility is judged in many ways, including the accuracy and completeness of our records. These include business records such as financial transactions and reports, and personnel, insurance, and medical records. We depend on accurate and reliable information to make responsible business decisions.

Policies: Coding Ethics HIM Policy; Medical Record Coding Policy; Medical Record Content Policy

We comply with local, state, and federal laws relating to the accuracy and completeness of all records. We retain our records according to legal requirements and Intermountain's record retention schedules. We are honest, objective, and accurate in our recordkeeping. If we make mistakes, we will follow standard protocol to correct them and will not hide them. Altering documentation of any type to hide or mislead the users of the information is unacceptable. Coding and billing records are created based on accurate documentation that supports each claim.

We create, approve, and archive records to document our work, including the services rendered to patients, members, and others; work performed by employees, contractors, and others; and purchases made from suppliers.

Policies: False Claims Prevention Policy; Record Management Policy

Several government agencies have implemented time-sensitive error reporting requirements. Our reporting obligations may begin the minute any Intermountain caregiver knows of an error. Call the Compliance Hotline at 1.800.442.4845 as soon as a mistake in billing or breach of patient confidentiality is suspected.

We do not alter documentation to hide errors or mislead the users of the information.

All medical procedures and tests must be entered into the medical record including date and time, and if required, authenticated by the author/owner.

➔ WE COOPERATE WITH AND DOCUMENT GOVERNMENT INQUIRIES AND INVESTIGATIONS.

Intermountain is regulated by state and federal agencies. From time to time, we may encounter officials responsible for regulating various aspects of healthcare or other business practices.

If we receive a request for information from a government investigative agency, external surveyor, or enforcement agency, either on-site or through correspondence, we take the following steps:

- Notify our manager and/or administrator.
- Refer to and follow Intermountain's *External Inquiry Guideline*.
- Call the Compliance Hotline at 1.800.442.4845, the Legal Department at 1.801.442.3430, or our Area Compliance Team.
- Carefully preserve documents related to a known or possible government investigation.

Caregivers must never:

- Conceal, alter, or destroy any relevant documents.
- Cause another caregiver to provide inaccurate information.
- Obstruct, mislead, or delay the communication of information or records relating to a possible violation of law.

Policies and Guidance Documents: External Inquiry Guideline; Record Management Policy

➔ WE SUPPORT INTERNAL AND EXTERNAL AUDITS.

Audits are routinely performed to assess areas for compliance. These audits are performed by internal and external auditors with experience in the area under review. When asked, we participate fully in these audits. If corrective action is needed, a written plan is developed and implemented to ensure compliance.

Policies and Guidance Documents: Compliance Audit Policy; External Inquiry Guideline

➔ WE INTERACT WITH SUPPLIERS HONESTLY.

We value our suppliers, as they play a role in the success of Intermountain. Suppliers include anyone providing products or services to Intermountain, including patient service and product providers, physician or clinician service and product providers, and technical, maintenance, inspection, delivery, and construction personnel.

Our selection of suppliers is based on their ability to meet our business needs, rather than on personal relationships and friendships, or on any inducements or personal offers.

We interact with our suppliers with honesty and integrity, which means we do not take kickbacks or bribes from them, nor do we offer such inducements to them. When working with suppliers, we do so free from conflicts of interest and are compliant with applicable laws and fair business practices.

Gifts of any kind from suppliers are discouraged and not solicited.

Policies and Guiding Documents: Business Courtesies Physician Family Policy; Business Entertainment Policy; Conflict of Interest Policy; Fraud Policy; Post-Acute Care Provider Procedure; Supplier Relations Policy; Supplier Selection Policy

Don't request additional items or services from suppliers over and above their contracted service. For example, don't ask for items such as pens, pencils, notepads, gift certificates, supplies, meals, etc.

Accepting or seeking anything of significant value from contractors or service providers should be reported (see Reporting Concerns or Misconduct in this Code of Ethics).

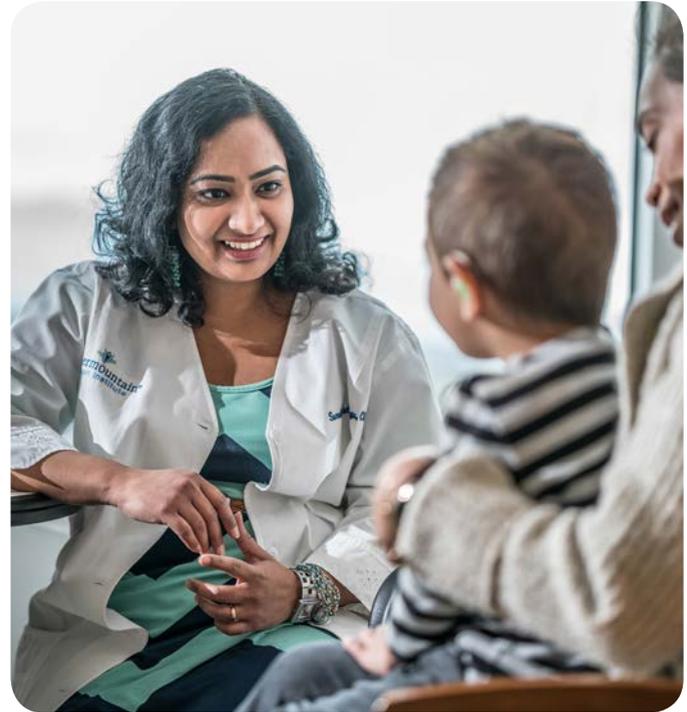


➔ WE EXERCISE GOOD JUDGMENT AND DISCRETION WHEN ACCEPTING GIFTS FROM PATIENTS AND MEMBERS.

We treat all of our patients and members with equal care and concern without the need for extra expressions of gratitude or rewards. We refer individuals wishing to give larger donations to Intermountain's Foundation.

In the event a patient or member gives an employee a non-perishable gift for recognition purposes of a value greater than \$25.00, the employee should seek guidance from their leader, and as needed, consult with Compliance and Human Resources. The final decision on acceptance of the gift will be made in alignment with our Code of Ethics.

Policies and Guiding Documents: Conflict of Interest Policy; Employee Gifts Policy; Post-Acute Care Provider Procedure; Supplier Relations Policy



➔ WE CAREFULLY REVIEW FINANCIAL RELATIONSHIPS WITH PHYSICIANS AND OTHER HEALTHCARE PRACTITIONERS FOR COMPLIANCE WITH THE ANTI-KICKBACK AND STARK LAWS.

Laws and regulations put strict requirements on financial relationships between Intermountain Healthcare and physicians. All financial agreements with physicians must be carefully reviewed and also approved by the Physician Contracting Department. There is risk whenever we give something of value (money, services, gifts, trinkets, etc.) to physicians, other providers, and the general public. Before we give anything away for free, or at a discount, we review the situation with our supervisor and Compliance.

Policies: Business Courtesies Physician Family Policy; Contract Policy; Discount Restriction Policy; Lease Use Agreement Management Policy; Marketing Medical Staff Members Policy; Medical Director Non Employed Physician Policy; Office Space Equipment Lease Policy; Physician Employment Policy; Physician Loan Policy; Physician Owned Entities Financial Arrangements Policy; Physician Part Time Employee Non Clinical Policy; Physician Personal Services Policy; Physician Purchase Arrangement Policy; Physician Recruitment Policy; Physician Voluntary Leadership Policy

We do not accept payments for referrals or authorizations to accept patients. We are not permitted to directly or indirectly solicit or receive anything of value in exchange for referring our patients to a provider.

We do not pay for referrals. We accept patient referrals and authorizations from other providers based on the patients' medical needs and our ability to render the needed services.



➔ WE RESPECT THE PROPRIETARY INFORMATION OF OTHERS.

Just as we protect our own confidential information, we respect the proprietary and confidential information of others. This includes written materials, software, music, and other intellectual property.

Policies and Guidance Documents: Information Systems Acceptable Use Policy; Intellectual Property Copyright Permission Procedure; Intellectual Property Distribution Policy; Intellectual Property Policy

Any software used at Intermountain must be licensed, approved and used as outlined in the software owner's license agreements.

Obtain copyright permission from the copyright holder prior to use. Permission is required for all nongovernmental or nonpublic domain materials, including print, audio, and video.

➔ WE ENSURE THE CONFIDENTIALITY OF MATERIAL NONPUBLIC INFORMATION.

Intermountain is actively engaged in new growth opportunities and at times may be involved in discussions with publicly traded companies. We will not communicate material nonpublic information, either directly or indirectly, to anyone, including family, friends, or acquaintances.

Policy: Insider Trading Policy

Material Nonpublic Information:

- Information is material if a reasonable investor would consider it important in deciding whether to buy, sell, or hold a security. Any information that is likely to affect the price of a company's securities is material, and any information that would motivate you or others to trade in a security is material.
- Information is nonpublic if it is not generally known by the public. Accordingly, if an individual becomes aware of information that is not widely available to the investing public, such information is nonpublic.



➤ WE FOLLOW ENVIRONMENTAL REGULATIONS.

We abide by all laws, regulations, and company policies relating to the protection of the environment. We strive to manage and operate our business in a manner that respects our environment, conserves natural resources, and complies with environmental laws and regulations. We are committed to the following best practices:

- Utilize resources appropriately and efficiently.
- Recycle where possible and dispose of all waste in accordance with applicable laws and regulations.
- Work cooperatively with the appropriate authorities to remedy any environmental contamination for which Intermountain Healthcare may be responsible.

Policies: Hazardous Drug Policy; Hazardous Materials Policy; Respiratory Protection Policy; Smoke Free Workplace Policy

Reporting Concerns or Misconduct

➔ WE REPORT SUSPICIOUS ACTIVITY, CONCERNS OF MISCONDUCT, AND DISRUPTIVE BEHAVIORS.

Each of us is responsible to report concerns and suspected misconduct that could violate Intermountain's Code of Ethics, state or federal laws, or Intermountain policy.

Any individual who reports a legitimate concern in good faith will be protected from retaliation or intimidation. We take concerns seriously and appreciate individuals who report concerns or misconduct.

Report concerns to:

- Your supervisor, manager, or director
- Your Area Compliance Team
- Your Human Resources Representative, *askHR*
- Intermountain's Legal Department
- The Corporate Compliance Officer

- Submit concerns through the Compliance Hotline mailbox (Compliance.Hotline@imail.org)
- Submit concerns through the confidential Compliance Online Reporting Tool found on Intermountain.net/Compliance
- Call the Compliance Hotline at 1.800.442.4845
 - The Hotline is staffed by a team of Compliance professionals and is available 24 hours a day, 7 days a week
 - We honor the reporter's request for anonymity
 - Interpretation services are available
- Call the vendor-staffed Hotline at 1.844.442.5844
 - Calls made to this number can also be anonymous

Information on reporting to other agencies is included in the *Compliance Violation Reporting Policy*.

Policies and Guidance Documents: Compliance Corrective Action Policy; Compliance Investigation Policy; Compliance Violation Reporting Policy; Disruptive Behavior Workplace Violence Policy; External Inquiry Guideline

In addition to reporting to the Compliance Hotline at 1.800.442.4845, medical staff concerns can be reported to Intermountain Physician Relations at 1.801.442.2840.

➔ THE KEY IS TO SPEAK UP.

We recognize that our daily work gives us each the opportunity to see problems before they become apparent to others or to management. Anyone who reports legitimate concerns will be protected from retaliation.

We pay attention to activity occurring in our work areas that may be a risk or harm to patients, employees, volunteers, other personnel, or data.

Suspicious activities and threatening behaviors need to be reported to the local facility's Security Department or Administration. Security or Administration will coordinate with local law enforcement when appropriate. Reportable activities and behaviors include:

- Individuals in work areas without identification badges
- Individuals requesting patient or member information without proper authorization
- Unattended personal belongings, boxes or bags
- Verbal threats of harm to self or others
- Any activity that might be a crime on the premises
- Acts of physical violence such as assault

Caregivers should contact local law enforcement when there is an imminent threat to the safety of others including:

- Bomb threat
- Terroristic threat
- Active shooter
- Use of weapons
- Any other credible threat of violence

Policies: Disruptive Behavior Workplace Violence Policy; Weapon Policy



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Intermountain Healthcare

Healing for life®

36 SOUTH STATE STREET 23RD FLOOR
SALT LAKE CITY, UTAH 84111
1.800.442.4845

Intermountain.CorporateCompliance@imail.org

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