

**Florida Health Care Plans  
Code of Conduct**

**“Our Values in Action”**

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# Florida Health Care Plans Our Code of Conduct Summary

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## A Message from our Chief Executive Officer

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Dear Fellow Team Members:

Florida Health Care Plans has been built on the belief that we all want to do the right thing as we conduct our business affairs in the pursuit of excellence in health care. This Code of Conduct, which we will often refer to as ***Our Values in Action***, is designed to increase your awareness of general compliance issues and business ethics as they apply to health care. It also provides a way for all of us to better understand how FHCP conducts its business affairs – both today and in the future. The information contained in this document will expand upon what you already know and help clarify areas that may have been unclear.

If you have any questions or concerns regarding the Code, several channels are available to assist you. It is suggested you discuss the issue with your supervisor first. If you are uncomfortable going to your supervisor, you may try to speak with another member of the management team or the Compliance Officer. In the training you will receive, you will be given information on how to contact the Compliance Officer or other member of our Compliance Committee. You may also call FHCP's Ethics and Concerns Help Line:

Florida Health Care Plans .....(386) 615-4080

Florida Health Care Plans is committed to providing you with a work place that encourages and supports open, honest communication and trust among each and every member of our organization. The *Our Values In Action* initiative demonstrates that commitment and allows us to take an active role in safeguarding our tradition of strong moral, ethical and legal standards of conduct.

We thank you for helping put ***our values into action***.

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## **Florida Health Care Plans Our Code of Conduct Summary**

### *Our Values in Action*

We value an ethical, honest and positive work place and putting these values into action depends on every member of our organization.

*For details, see [page 2](#).*

### *Compliance with Laws, Rules, Regulations and our own Policies*

We are committed to full compliance with all federal, state and local laws and regulations. We will immediately and directly report any actual or perceived violation of this Code of Conduct in accordance with our reporting policy.

We will also comply with our own policies, standards and procedures. This includes those that apply Company-wide and those that apply within a department.

*For details, see [page 2](#).*

### *Relationships with Patients and Health Plan Members*

We are expected to know and understand the rights of the individuals we serve, and to provide care in a manner that recognizes and preserves the individual's right to treatment with dignity and respect.

We will provide treatment to all individuals who have an emergency medical condition, and we will not delay treatment in order to inquire about the individual's method of payment.

Our patients will be informed of their right to make advance directives relating to health care and have them followed within the limits of the law.

*For details, see [page 3](#).*

### *Relationships with Customers, Suppliers and Third Party Payers*

We are committed to providing services that meet established quality standards and our contractual obligations.

We have a duty to disclose current, accurate and complete cost and pricing data and to be honest in all representations to the public and our business associates.

We will refrain from engaging in unfair practices that might restrict competition, such as discussion of pricing with competitors.

We will not offer or pay anything of value to induce someone to refer a patient or use FHCP services.

We are committed to ensuring that claims for reimbursement are accurate, that patients receive timely bills, and all questions regarding their bills are answered.

When we submit time or expense reports or use time clocks, we do so in a complete, accurate and timely manner. We will not misrepresent time worked or the costs incurred by the enterprise.

*For details, see [pages 4-6](#).*

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## **Florida Health Care Plans Our Code of Conduct Summary**

### *Using the Organization's Resources*

We will not contribute or donate FHCP funds, products, services, use of facilities or other resources to any political cause without prior approval.

Charitable contributions received from others must directly benefit FHCP. We will not accept contributions in exchange for favorable treatment or a commitment to purchase supplies or services.

We will not seek to gain an improper business advantage by offering courtesies such as entertainment, meals, transportation or lodging to our business associates.

We will not solicit or accept education grants that create even the appearance of impropriety.

We will not use FHCP resources for personal reasons.

*For details, [see page 7.](#)*

### *Avoiding Abuses of Trust*

We will not accept cash or anything of substantial value from patients, patient family members or from someone seeking to do business with FHCP.

We will avoid outside employment, financial interests, investments or other outside activities that impair our productivity or decision-making while at our FHCP job.

We will not trade in the securities of any company on the basis of non-public information acquired through our relationship with FHCP.

*For details, [see pages 8-10.](#)*

### *Safeguarding Information*

We will strictly safeguard all confidential information with which we are entrusted. We will not use, discuss or disclose such information except to serve our patients, carry out our job duties, or as required or allowed by law. This responsibility extends beyond the period of employment.

We will safeguard computer access codes from unauthorized use or disclosure. We will protect electronic information by using computers responsibly and in accordance with our appropriate use policies.

We will not use, copy or distribute copyrighted information and other intellectual property in violation of applicable laws or contractual obligations.

*For details, [see pages 10-11.](#)*

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## **Florida Health Care Plans Our Code of Conduct Summary**

### ***Workplace Conduct and Employment Issues***

We will report any incidences of discrimination, abuse or sexual harassment involving patients, visitors or team members.

We are committed to providing job opportunities to applicants and team members without discrimination. We will not discriminate based on race, ethnicity, national origin, religion, gender, gender identity, age, mental or physical disability or medical condition, sexual orientation, claims experience, medical history, evidence of insurability (including conditions arising out of acts of domestic violence), disability, genetic information, or source of payment. We will comply with laws governing the hiring of former government employees.

We will comply with workplace safety regulations and standards and participate in safety education and training.

Team members who are required to do so will maintain and hold their license or certification in a current and active status.

We will maintain a drug and alcohol-free workplace, and strictly control the distribution and use of prescription drugs and controlled substances.

*For details, see [pages 11-12](#), [Appendix A](#).*

### ***Program Implementation***

To oversee our Compliance Program, FHCP has a Compliance Officer, and a Compliance Committee to oversee the program.

Every team member has a duty to report issues or concerns they believe may be a violation of this Code of Conduct, federal, state or local laws or internal policies and standards. No adverse action or retribution will be taken against a team member because he/she reports a concern or suspected violation.

New team members will attend Corporate Ethics and Compliance training as part of their orientation. Annually, team members will attend additional education on a variety of topics, including the Code of Conduct.

Team members will sign or electronically submit a Statement of Understanding of the Code of Conduct upon initial employment and annually thereafter.

Internal audits and investigations relating to compliance will be conducted in many areas, including, but not limited to, computer usage, billing and financial reporting.

Strict adherence to the Code of Conduct is vital. Violations may result in discipline ranging from a warning and reprimand, to discharge from employment.

*For details, see [pages 13-14](#), [Appendix A](#), [Appendix B](#).*

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## Introduction

The reputation of FHCP is dependent on our successful and ethical operation. Therefore, it is critically important that we all meet the highest standards of legal and ethical conduct.

To protect FHCP's reputation and to promote consistency in how we conduct ourselves, we have established this Code of Conduct as part of the *Our Values In Action* initiative. The purpose of this Program is to safeguard our tradition of strong moral, ethical and legal standards of conduct. We accomplish this by preventing and detecting problems that may result in a liability, and taking corrective action promptly when problems are found. Our organization's conduct must conform to the highest ethical standards and be in accordance with all applicable laws, rules and regulations. This also applies to all team members of FHCP.

This Code of Conduct establishes the general policies and standards with which we are expected to comply as a condition of employment. The policies and standards referred to in this document are not meant to cover all situations. Any doubts or questions concerning a particular situation should be referred either to your immediate supervisor, another member of the management team, the Compliance Officer, or a member of the Compliance Committee.

Every team member is expected to understand and comply with the rules and standards established by this Code of Conduct. The standards of conduct that govern FHCP's relationship with the government are applicable to all of FHCP's team members, regardless of their job duties or business unit. Interpretations or exceptions to this Code of Conduct may be made only by a member of the Compliance Committee. A team member who violates any provision of this Code of Conduct will be subject to disciplinary action, up to and including discharge from employment. In addition, promotion of and adherence to this Code of Conduct and to the *Our Values In Action* initiative will be one criterion used in evaluating the performance of supervisors, managers, and other high-ranking team members.

**"Genuine success does not come from proclaiming our values, but from consistently putting them into daily action."**

- Kenneth Blanchard & Michael O'Connor, from *Managing By Values*



## **Our Mission**

The mission of Florida Health Care Plans is to provide FHCP members with health care related services through dedicated employees and service partners who manage both the quality and the cost of health care.

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## **Our Vision**

The vision of Florida Health Care Plans is clear: To set the standard for managed health care in our community. Florida Health Care Plans (FHCP) strives to be acknowledged as a health care leader, pioneer and advocate by our members, employees and service partners.

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## **Our Values**

We value an ethical, honest and positive work place, and putting these values into action depends on every member of our organization. You can help FHCP maintain the highest standards of ethical excellence and corporate citizenship by being alert to situations that may harm patients, staff, visitors or the organization. Because our values are at the center of everything that goes on in our organization, we will often refer to our Code of Conduct, Compliance Plan, Anti-Fraud Plan policy (LD012), Antitrust Plan policy (LD013), and our Conflicts of Interest policy (LD004) as ***Our Values in Action*** since collectively these documents establish and convey expected standards of conduct for all employees.

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## **Compliance with Laws and Regulations**

We are committed to full compliance with all federal, state and local laws and regulations. We will immediately and directly report any actual or perceived violation of this Code of Conduct in accordance with our reporting policy discussed in more detail below under Implementation. Also, we will comply with all laws and regulations related to licensure, certificate of need, and participation in government health care programs.

### **Federal Government Contracts**

Entities that have a contract with the federal government, such as a Medicare contract, are subject to certain rules. These rules differ dramatically from the rules that govern entities such as those considered by the Medicare program to be Participating Providers (i.e. hospitals and skilled nursing facilities). For example, any entity that has a contract with the federal government in excess of \$25,000 must be an affirmative action employer. FHCP expects that all employees will adhere to federal government contracting guidelines and report any suspected violations of those standards.

### **Federal Health Program Participation Requirements**

All federal health programs have program participation requirements by which entities must abide in order to continue participation in the program. For example, with the creation of the Medicare Advantage Program, new participation requirements were created including expanded beneficiary and provider protections, new enrollment requirements, and the creation of quality requirements. All FHCP employees must keep abreast of these participation requirements, conduct themselves accordingly, and report any actions that are inconsistent with these requirements.

## HMO Licensure

FHCP is licensed by the Department of Financial Services as a Health Maintenance Organization. In order for FHCP to retain its licensure, the DFS has set forth numerous rules and regulations by which FHCP must conform. In the broadest sense, FHCP is the steward of our members' healthcare dollars and we must conduct ourselves in a manner that will allow the greatest level of benefits to our membership. Any FHCP employee that observes conduct inconsistent with this ideal must report such act(s).

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## **Compliance with Our Own Policies and Standards**

We are committed to full compliance with our own policies, standards and procedures. This includes those that apply Company-wide, and those that are department specific. Team members will be made aware of these policies and procedures during general orientation, and, if applicable, orientation within the department where they work.

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## **Relationships with Patients and Members**

### *Advance Directives*

Our patients will be informed of their right to make advance directives and have them followed within the limits of the law. We shall comply with all policies and procedures and federal and state laws and regulations governing advance directives.

### *Patients' and Members' Rights*

All team members are expected to know and understand the rights of the individuals we serve. It is our policy to provide care in a manner that recognizes and preserves the individual's right to impartial treatment with respect and dignity. Healthcare services will be based on identified healthcare needs and access to care will be provided. We will not discriminate in the delivery of health care services based on race, ethnicity, national origin, religion, gender, gender identity, age, mental or physical disability or medical condition, sexual orientation, claims experience, medical history, evidence of insurability (including conditions arising out of acts of domestic violence), disability, genetic information, or source of payment. Rights of patients also include:

<p>The right to receive a written copy of their rights</p> <p>The right to personal and informational privacy</p> <p>Freedom from abuse, harassment and unreasonable restraint</p> <p>The right to know the identity and professional status of individuals providing services</p> <p>When in a health care facility<sup>1</sup>, the right to know what support services are available and the right to access those services</p> <p>The right to consult with a specialist at his/her own expense</p> <p>The right to be informed of any research or experimentation affecting treatment, and the right to refuse to participate in such activities</p> <p>The right to receive complete and accurate information concerning his or her diagnosis and treatment</p>	<p>The right to participate in ethical issues that arise out of his or her care</p> <p>When in a healthcare facility<sup>1</sup>, the right to communicate with people outside the facility within reasonable limits</p> <p>The right to informed participation in health care decisions, including plans of care and explanations of medically significant risks and probable duration of incapacitation</p> <p>The right to refuse treatment to the extent permitted by law</p> <p>When services are billable to a patient, member or third party, the right to request and receive an itemized bill and explanation of the bill regardless of the source of payment</p> <p>The right to a prompt and reasonable response to a question or request</p> <p>The right to express a grievance and receive a response</p>
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## Relationships with Customers, Suppliers and Third Party Payers

### *Quality of Service*

We are committed to providing services that meet all of our contractual obligations and established standards for quality. These include those established by our own policies and, where applicable, those of NCQA.

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<sup>1</sup> For purposes of this section, health care facility means a hospital, hospice, or long-term care facility.

### ***Contract Negotiation***

The submission to a federal government customer of a representation, quotation, statement or certification that is false, incomplete or misleading can result in civil and/or criminal liability. The individuals involved and any supervisors who condone such practices may also be sanctioned. We have an affirmative duty to disclose current, accurate and complete cost and pricing data where such data are required under appropriate federal or state law or regulation. Those involved in the pricing of contract proposals or the negotiation of a contract must ensure the accuracy, completeness and currency of all data generated and given to supervisors and others. We must also be honest in all representations made to customers and suppliers, both governmental and commercial.

### ***Marketing and Advertising Activities***

Our marketing and advertising activities, including written marketing materials and oral representations by employees, agents, or business partners, should always be clear, complete, and accurate. There are special rules that apply to certain state and federal lines of business (e.g., Medicare, Marketplace, and State of Florida) which need to be reviewed by Marketing and Compliance. In all marketing and advertising activities, we will offer only factual information or documented evidence to the general public. We will not distort the truth, make false claims, engage in unfair comparative advertising, nor will we unduly attack or disparage another health care provider. In addition, all direct-to-consumer marketing activities require legal review in advance if they involve giving anything of value to a patient, health plan member or potential source of referrals and should not exceed nominal value. "Nominal value" is currently defined by CMS as an item worth \$15 or less.

### ***Anti-Competitive Practices***

Our business activities must comply with federal and state antitrust laws that are designed to ensure competition and to preserve the free enterprise system. Activities that may implicate antitrust laws include agreements or understandings among competitors to

- Fix prices or price-related terms;
- Allocate customers, services or territories; or
- Refuse to deal with a supplier or customers except on collectively determined terms; or

Antitrust laws may also be implicated in market surveys, trade associations, joint ventures and other legitimate business collaborations.

This is a highly complex area, and this document cannot cover all situations in which antitrust laws may apply. Team members should take special care in this area, and promptly refer any questions to management, or a member of the Compliance Committee, who should then consult General Counsel.

For more information, refer to FHCP's Antitrust Plan policy (LD013).

### ***Anti-Kickback Statutes***

Federal and state laws prohibit the offering of a kickback to an entity or person to induce that person to purchase services from or refer a patient to FHCP. The laws also prohibit anyone from accepting a kickback. As this is a highly complex area, this document cannot list all situations in which the anti-kickback laws may apply. Therefore, we must take special care in this area, and promptly refer any questions to a member of the Compliance Committee, who should refer the question to General Counsel.

Examples of the types of actions that could violate the federal Medicare/Medicaid anti-kickback statute and similar state laws include the following:

- Offering or paying anything of value to induce someone to refer a patient to FHCP, including, but not limited to, the routine waving of copayments;
- Offering or paying anything of value to anyone in marketing FHCP's services;
- Soliciting or receiving anything of value for the referral of FHCP patients to others;
- Giving or receiving free goods or discounts, except as permitted under applicable laws and regulations.

### ***Billing, Reimbursement and False Claims***

We are committed to ensuring that our billing and reimbursement practices comply with all federal and state laws, regulations, guidelines and our own policies. Claims for reimbursement must be accurate and reflect current payment methodologies. We are committed to ensuring that patients/members receive timely bills and that all questions regarding their bills are answered promptly.

FHCP has adopted various policies and procedures to ensure compliance with federal and state health benefit programs as well as rules relating to private insurance. For further information concerning these policies, discuss with your supervisor, the Compliance Officer, if applicable, or contact a member of the Compliance Committee. Examples of the types of actions that could violate the federal and state false claims statutes include:

- Filing a claim for services that were not rendered at all or were not rendered as described on the claim form;
- Filing a claim for services that were rendered, but the service did not meet insurance coverage requirements;
- Submitting a claim containing information you know to be false such as incorrect diagnosis or procedure codes;
- Submitting a false cost report or rate request; and
- Misusing Social Security or Medicare symbols, emblems or names in marketing.

### ***Charging of Costs & Time***

When we submit time or expense reports, or use time clocks, we must be careful to do so in a complete, accurate and timely manner. We must also be careful to ensure that hours worked and costs incurred are applied to the correct accounts. We must not allow another person to use a time clock on our behalf, and we should not log time worked while on personal business off the premises.

A signature on a time sheet or time clock transaction is a representation that the time reported accurately reflects the time worked. The supervisor's signature on a timecard or expense report is a representation that it has been reviewed. It also shows that we have verified the validity and correctness of the hours or expenses reported. Supervisors must avoid placing pressure on team members that could lead them to believe that deviations from appropriate time reporting or cost charging practices will be condoned. We will not accept such practices.

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## **Using the Organizations' Resources**

### ***Making Political Contributions***

We will not contribute or donate FHCP funds, products, services, use of FHCP facilities or other resources to any political cause, party or candidate without the advance written approval of the Chief Executive Officer. However, team members may make voluntary personal contributions to any lawful political causes, parties or candidates as long as the individual does not represent that such contributions come from FHCP. In addition, the individual making a contribution must not obtain the money for the contribution from FHCP for the sole purpose of making such a contribution.

### ***Providing Business Courtesies to Customers or Sources of Customers***

Our success in the marketplace results from providing quality services at competitive prices. We do not seek to gain an improper advantage by offering business courtesies such as entertainment, meals, transportation or lodging to customers, referral sources or purchasers of FHCP services. We should never offer any type of business courtesy to a referral source or a purchaser for the purpose of obtaining favorable treatment or advantage. To avoid even the appearance of impropriety, we must not provide any referral source or purchaser with gifts or promotional items of more than nominal value.

For more information, please refer to FHCP's Conflicts of Interest policy (LD004).

Except for additional restrictions that apply in the federal or state government area as noted below, we may pay for reasonable meal, refreshment and/or entertainment expenses for referral sources and purchasers of FHCP services. Such transactions may occur only occasionally, and may not be solicited by the recipient. They must not be intended to or likely to affect the recipient's business decisions with respect to FHCP. We may provide or pay travel or lodging expenses of a customer or source of customers, but only with the advance approval of the Chief Executive Officer. If the courtesy is for other than a directly related business purpose, advice from a member of the Compliance Committee should be sought.

### ***Educational Activities Grants***

Managers and others who are in a position to represent FHCP shall not receive educational grants that create even the appearance of impropriety. To avoid a conflict, we will follow "Gifts to Physicians from Industry" guidelines adopted by the American Medical Association's Council on Ethical and Judicial Affairs. Interpretative guidelines regarding educational grants may be obtained from the FHCP Compliance Department.

### *Charitable Contributions*

All charitable contributions received from vendors must directly benefit FHCP. Under no circumstances may a check be made payable to an individual at FHCP. We shall not accept any donations that are in conjunction with a marketing effort or sales promotion. Under no circumstances shall donations be accepted that require FHCP to use the donation to purchase supplies from the vendor making the contribution.

### *Government Customers*

FHCP is a party to contracts with various governmental agencies. Examples include provider contracts wherein we provide services to or on behalf of the Medicare and Medicaid programs, either directly or as a subcontractor. It is essential that all team members are knowledgeable of, and comply with, all of the applicable laws, rules and regulations of governmental agencies with which we do business. We will not provide or pay for any meal, refreshment, entertainment, travel or lodging expenses for government team members without the prior approval of a member of the Compliance Committee. Governmental agencies may also have restrictions on the provision or acceptance of business courtesies, including meals and refreshments. FHCP's team members doing business with government agencies are expected to know and respect these restrictions.

### *Accurate Books and Accounts*

Federal and state laws and regulations require our contracts with government and non-government customers and our financial reporting and records to accurately reflect our business transactions. All of FHCP's financial transactions must be properly authorized by management, and accurately and completely recorded on FHCP's books and records. Financial records and reports will be prepared and maintained in accordance with generally accepted accounting principles under an established system of internal controls. We will not make false, incomplete or unsupported corporate entries in our books. No undisclosed or unrecorded corporate funds will be established for any purpose, nor will FHCP's funds be placed in any personal or non-corporate account. Finally, all corporate assets must be properly protected. Periodically, property records will be compared with the actual property, and action taken to reconcile any variances.

### *Personal Use of the Organization's Resources*

It is everyone's responsibility to safeguard the organization's resources, including time, materials, equipment, and information. It is not permissible to use the organization's resources for personal reasons without authorization from a supervisor. Occasional use of some items, like telephones, is permissible. Likewise, any community or charitable use of the organization's resources must be approved in advance by your supervisor. Under no circumstances should non-business use of the organization's resources interfere with your job duties or the job duties of others.

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## **Avoiding Abuses of Trust**

Team members must avoid any activity that might interfere or appear to interfere with decision-making in situations where the team member's personal interests conflict with FHCP's interests or the interests of FHCP's customers or suppliers.

***Conflict of Interest***

A conflict of interest (COI) may arise when personal interests or personal gain potentially influences or interferes with your business decision making or professional responsibility. It is the goal of FHCP to have our business conducted in such a manner so as to avoid even the appearance of a COI in our business dealings and relationships.

Unless advance written permission is given by the Chief Executive Officer, no team member may have an employment, consulting or other business relationship with a competitor, customer or supplier. In addition, team members may not invest in any competitor, customer or supplier (except for moderate holdings of publicly-traded securities), unless such investment is approved in advance. Advance written permission is also required before one may invest in any privately held company or entity that performs services for FHCP that employs providers who may refer patients to FHCP, or to which FHCP patients may be referred. However, employment with a competitor of FHCP is permitted so long as such employment is not in a management or administrative capacity, and no other factors that may give rise to a conflict of interest are present. Factors that may give rise to a conflict include any of the following:

- The outside interest places one in the position of representing (or appearing to represent) FHCP;
- The outside interest involves services substantially similar to those FHCP provides or is considering making available;
- The outside interest lessens the efficiency, alertness or productivity normally expected of team members in their jobs;
- The outside interest is with an individual or entity whose services are employed by FHCP;
- The outside interest is with an individual or entity that refers patients to FHCP, or with an individual or entity who provides services for or employs a source of referrals; or
- The outside interest is with an individual or entity to which patients of FHCP may be referred (for example, a provider of ancillary services).

Here are more basics to remember related to Conflicts of Interest:

- All outside employment that raises any question in this regard must be disclosed and approved in advance by the Chief Executive Officer or Compliance Committee.
- Disclose conflicts by completing a COI disclosure statement when hired, annually, and when your situation changes.
- Disclose any situation where you have been convicted of a crime of dishonesty or a breach of trust.

For more information, please refer to FHCP's Conflicts of Interest policy (LD004).



### ***Acceptance of Business Courtesies***

Offering or accepting business gifts or entertainment is generally discouraged because it creates a perception of an inappropriate relationship or conflict of interest even if the intent is innocent and has no influence on your business judgment. In addition to perception, there are various circumstances where the offer or acceptance of a gift, including anything of value: cash, entertainment, gift cards, tickets to events, travel, or other favorable treatment, is illegal or, at a minimum, creates a conflict of interest. When applying FHCP's Code of Conduct guidance as it relates to offering or accepting gifts, a good rule of thumb is that we should never accept anything of value from patients, patient family members, or from someone currently doing or seeking to do business with FHCP, if the gratuity is offered or may appear to be offered in exchange for favorable treatment. To avoid even the appearance of impropriety, do not accept any gifts or promotional items of more than nominal value. Gifts received that are more than nominal in value must be reported to a member of the Compliance Committee. Generally, "more than nominal value" means greater than \$50 in the aggregate annually.

A team member may accept meals, drinks or entertainment only if such courtesies are unsolicited, infrequently provided and reasonable in amount. Such courtesies must also be directly connected with business discussions, unless an exception is approved by a supervisor. Do not accept reimbursement for lodging or travel without the express written approval of the manager responsible for the unit or group.

### ***Procurement of Goods and Services***

Part of protecting FHCP's assets includes making sure that purchase of goods and services are done thoughtfully and make the best use of our limited resources. You are required to use company approved methods of procurement when purchasing business related goods and services. The goal of FHCP's procurement process is to ensure that the best value purchases are made based on quality, price, service, and reliability. Here are some basics to remember relating to the Procurement of Goods and Services:

- All purchases of goods and services must follow FHCP Administration procedures.
- A business associate agreement (BAA) or BAA language must be included in agreements/contracts if PHI is being exchanged.

For more information or questions related to the procurement of goods and services, please contact FHCP's Procurement Manager in Holly Hill.

### ***Insider Trading***

No team member may trade in the securities of any company, or buy or sell any property or assets, on the basis of non-public information acquired through employment in FHCP, whether such information comes from FHCP or from another company with which FHCP has a confidential relationship.

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## **Safeguarding Information**

### ***Privacy and Confidential Information***

Team members must strictly safeguard all confidential information with which they are entrusted. We may never discuss such information outside the normal and necessary course of FHCP's business. In particular, all team members must protect the privacy of our patients and health plan members, and the confidentiality of all information related to their care, and any past, current or future medical condition. Team members also have an obligation to respect and protect the "super-confidential" nature of records regarding substance and alcohol abuse, mental health services, sexually transmitted disease and HIV/AIDS diagnosis and treatment records. Personal information about patients, fellow team members, medical staff and others with whom we do business should not be discussed except with those with a genuine need to know, and who have agreed to keep this information confidential. Here are some basics to remember related to Privacy and Confidential Information:

- FHCP complies with all applicable federal and state privacy laws.
- Team members must protect all health, financial, and/or employment information. This includes information such as names, addresses, telephone numbers or any other data that can be used to identify an individual and may only be accessed, used, and/or disclosed as permitted by state and federal privacy laws.
- Limit access, use, and disclosure of information to the minimum amount of information necessary to achieve the intended purpose of the access, use, or disclosure.
- Report any known or potential breach of privacy or a non-permitted use or disclosure to FHCP's Compliance Department in person, by phone, by email or anonymously through the Ethics and Concerns Helpline at 386-615-4080.

### ***FHCP's Restricted Information***

It is FHCP's policy to control the dissemination of FHCP's proprietary information. Except as specifically authorized by management pursuant to established procedures, do not disclose to any outside party any non-public business, financial, personnel, commercial or technological information, or plans or data acquired during employment at FHCP. During the term of employment at FHCP, a team member should disseminate this type of information only to individuals having a "need to know" and should protect the information from access by unauthorized personnel. Upon termination of employment, an individual may not copy, take or retain any documents containing FHCP's restricted information. The prohibition against disclosing FHCP's restricted information extends beyond the period of employment as long as the information is not in the public domain. An individual's agreement to continue to protect the confidentiality of such information after the term of employment ends is considered an important part of that person's obligations to FHCP.

### *Use of Electronic Systems*

Many team members will be provided with access to one or more of the organization's computer systems. Computer access codes are the equivalent of a signature. Identification codes and passwords provided to access computer systems must never be disclosed to another. Team members must not attempt to learn another's access code, nor attempt to access a computer system with an access code other than their own. Compromised access codes must be reported to your supervisor immediately. Team members must not use any computer outside the scope of their job responsibilities. For example, using the computer to browse patient records out of curiosity is strictly prohibited.

The Internet, electronic mail, voice mail and facsimile machines are also used throughout FHCP. These electronic messaging systems are for business purposes only. Since complete privacy cannot be guaranteed when using an electronic messaging system, sensitive information must not be transmitted nor stored on these systems. Specific I.S policies (MIS003-MIS010 and MIS017) have been developed for the use of computers, the Internet, and electronic messaging systems.

### *Retention of Records*

It is a good business practice to retain records in a consistent, systematic and reliable manner so that they can be retrieved promptly when required. During the course of business operations, Florida Health Care Plan, Inc. (FHCP) generates large caches of information. Such data may be in many forms including paper, electronic, or other recordable media. After such information has been used for its intended purpose, it maintains value to FHCP, its members/patients and/or providers. It is the policy of FHCP to retain records in accordance with federal and state regulations. Failure to keep records in good order can result in negative consequences for FHCP. All team members who create, receive, use or manage the company's records must comply with FHCP policy RR014—Record Retention and Record Retention Schedule in the Rights and Responsibilities folder in the Vigilant Policy Center (VPC).

Here are some basics to remember related to the Retention of Records:

- All records (electronic or paper) are subject to a retention period.
- Records are not specific to any media or format. They may be (a) paper forms, reports, correspondence, and files; (b) computer files such as spreadsheets, databases, Word documents and email messages; or (c) information in other formats such as video, audiotape and photographs.
- Make sure you manage, retain and destroy all business records in a manner that supports ongoing business operations and compliance with various accounting, audit, legal, regulatory and tax requirements.
- Do not destroy, discard, withhold, or alter records pertinent to any legal matter, governmental audit or investigation. Criminal penalties can result from these actions.
- Follow legal hold notices sent out by regulatory agencies. A legal hold notice requires the preservation of certain records under special circumstances such as litigation, government investigation, or audits and supercedes FHCP's Record Retention Policy and Schedule.

### ***Government Proprietary and Source Selection Information***

FHCP will not solicit nor will it receive any sensitive proprietary internal government information, including budgetary, program or source selection information, before it is available through normal channels.

### ***Copyrights and Intellectual Property***

Copyright holders have certain rights which are protected by law and that prohibit the unauthorized duplication and distribution of copyrighted works. In this digital age, it is much easier to create, use, copy and distribute information than in the past but many people are unaware of the copyright restrictions and responsibilities that arise when using the media materials that seem almost universally available.

Most commercially available books, periodicals, articles, electronic media and software are subject to copyrights or licenses. Contracts with our business partners contain provisions that require us to protect their intellectual property. Unauthorized disclosure, copying, or distribution of intellectual property could lead to severe fines and penalties under Federal copyright and contract laws. Team members may only make copies or disclose copyrighted or protected materials after receiving permission to re-print such material from the “owner” of the copyright.

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## **Workplace Conduct and Employment Issues**

### ***Harassment and Discrimination***

Discriminatory harassment is misconduct based on race, color, religion, national origin, disability, sex, age, gender identity or expression, sexual orientation, veteran status or marital status. FHCP supports a work environment free of discriminatory practices or sexual harassment involving patients, visitors or co-workers. It is the policy of FHCP that team members and their work environment shall be free from all forms of harassment. These behaviors include inappropriate jokes, slurs, and intimidation.

Sexual harassment in any form is not tolerated, including unwelcome sexual advances, request for sexual favors, and other verbal or physical conduct of a sexual nature. Any team member, who believes a team member, manager, supervisor or physician is subjecting him/her to sexual harassment, or their employment is being adversely affected by such conduct, should report such incidents to their supervisor, department manager, the team member relations supervisor, or human resources manager. Team members may contact the Human Resources Department for specific reporting procedures.

### ***Workplace Diversity and Equal Employment Opportunity***

FHCP is enriched with the diversity of ethnic groups from all segments of our community. This diversity is reflected within the FHCP workforce. Treating team members fairly with respect and dignity is woven into the FHCP culture. All persons are entitled to equal employment opportunities, and FHCP is committed to providing job opportunities to applicants and team members without regard to race, ethnicity, national origin, religion, gender, gender identity, age, mental or physical disability or medical condition, sexual orientation, claims experience, medical history, evidence of insurability (including conditions arising out of acts of domestic violence), disability, genetic information or source of payment. Our policy of nondiscrimination prevails throughout every aspect of the employment process, including recruitment, selection, placement, training, compensation, promotion, transfer, and termination.

### ***Health and Safety***

FHCP is committed to maintaining a safe and healthy workplace that is free from hazards and promotes a productive working environment. FHCP will provide an environment that is safe for patients, visitors, team members, volunteers and medical staff. To meet this objective, FHCP will comply with all governmental regulations and safety standards as prescribed by State and Federal regulatory agencies. Safety education and training is provided for all staff members and is an ongoing process. FHCP's safety official or safety committee will provide guidance on safety issues, as well as promotion of and administration of the safety policies to ensure a safe environment. Policies and procedures are in place to provide mechanisms for reporting incidents or addressing safety issues in a timely manner.

### ***License and Certification Renewals***

To maintain quality standards of care, and to comply with appropriate federal, state or local laws, FHCP requires team members in certain categories to provide a current license or certification. FHCP validates each license or certificate upon initial employment and on a periodic basis thereafter. Independent contractors and other businesses that are required to be licensed, certified, or hold certain other credentials are responsible for keeping such credentials current. FHCP will not allow any team member, business or independent contractor to work in FHCP without valid credentials as required by law.

### ***Hiring of Federal and State Team members***

Complex rules govern the recruitment and employment of government team members into private industry. We must obtain prior clearance from the Human Resources Department to discuss possible employment with, make offers to, or hire (as a team member or consultant) any current or former government team member (military or civilian).

### ***Controlled Substances***

Licensed pharmacists and medical staff are the only individuals authorized to fill medication orders within FHCP. Some team members have access to prescription drugs, controlled substances, and other medical supplies. Many of these substances are governed and monitored by specific regulatory agencies and they must be administered by physician order only. To minimize risks to patients, it is important that these items are handled properly and only by authorized individuals. If anyone is aware of a deviation from our controlled substance policies and procedures, it must be reported immediately to their supervisor, pharmacy management, or the Compliance Officer.

### ***Refraining from Substance Abuse***

It is the policy of FHCP to provide team members and customers with a working environment that is free of the issues associated with the use and abuse of controlled substances and alcohol. The consumption, possession, sale or purchase of alcohol on FHCP property is prohibited with the exception of events in conference, meeting or recreational facilities and approved in advance by management. FHCP also prohibits team members from arriving at work under the influence of alcohol or a controlled substance. If a team member is found to be in violation of this policy, management will determine the appropriate disciplinary action, which may include termination.

## **Program Implementation**

### ***Oversight***

To oversee FHCP's Ethics and Compliance Program, a Compliance Officer/Privacy Officer and Compliance Committee have been appointed. The Compliance Officer/Privacy Officer reports to the President/Chief Executive Officer for FHCP. In addition to the Compliance Officer/Privacy Officer, the Compliance Committee is comprised of the President/Chief Executive Officer, Chief Medical Officer, Chief Financial Officer/Associate CEO, Chief Information Officer/Security Officer, and Legal/General Counsel. From time to time, team member representatives are invited to participate on the Committee, thus bringing a broad perspective to the Program.

### ***Reporting Issues and Concerns***

Every team member has an affirmative duty to report issues or concerns they believe may be in violation of this Code of Conduct, federal, state or local laws, or internal policies and standards. Several channels are available for reporting issues or concerns. If the issue or concern cannot be addressed through the normal chain of command, team members may contact the Compliance Officer, or a member of the Compliance Committee, or the Ethics and Concerns Help Line at (386)615-4080.

### ***Training***

Each new team member is required to attend Corporate Ethics and Compliance training as part of their general orientation. The initial training must be completed within 90 days of employment. Annually, team members are required to attend additional education on a variety of topics pertinent to their job, as well as general training on this Code of Conduct.

### ***Team Member Acknowledgment***

Team members will be required to sign a Statement of Understanding upon initial employment and then on a yearly basis (see Appendix B). Signing this Statement of Understanding will be done in conjunction with the initial training session. Team members are required to sign the Statement within ninety (90) days of initial employment, and then annually thereafter in conjunction with their annual team member performance appraisal.

### ***Auditing and Monitoring***

FHCP is committed to monitoring its activities on a continual basis. The Compliance Department and other compliance personnel conduct audits and investigations in a variety of areas relating to regulatory compliance. Findings may result in corrective action, disciplinary action or changes in our operations. In addition, performance improvement activities occur throughout FHCP, and individual departments are required to monitor their performance.

### ***Enforcement, Discipline and Corrective Action***

Strict adherence to this Code of Conduct is vital. Supervisors are responsible for ensuring that team members are aware of and adhere to the provisions of the Code of Conduct. For clarification or guidance on any area covered in the Code of Conduct, please consult the Compliance Officer or any other member of the Compliance Committee.

Upon receipt of credible reports of suspected violations or irregularities, the Compliance Officer or member of the Compliance Committee will initiate an investigation and recommend corrective action where appropriate. Violations of the Code of Conduct may result in discipline ranging from a warning and reprimand, to discharge, or where appropriate, disclosure to the appropriate government agency, retribution, or filing of a civil or criminal complaint. Disciplinary decisions will be made by operating management, according to the applicable disciplinary guidelines and subject to review by the Compliance Officer or the Director of Human Resources. Team leaders may also be disciplined for failing to adequately instruct team members, or for failing to detect non-compliance with applicable policies and legal requirements, where reasonable care would have led to discovery of the problem and an opportunity to correct it.

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### **Limitation on Effect of Code of Conduct**

Nothing contained in this Code of Conduct is to be construed or interpreted to create a contract of employment, either express or implied, nor is anything contained in this Code of Conduct intended to alter a person's status of "employment-at-will" with respect to FHCP.

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### **Amendments to the Code of Conduct**

From time to time, FHCP may amend the Code of Conduct, in whole or in part. Changes will be communicated through line management.

**"When aligned around shared values and united in a common mission, ordinary people accomplish extraordinary results."**

- Kenneth Blanchard & Micheal O'Connor, from *Managing By Values*

## **Appendix A - Questions and Answers**

### ***If I have a question about a policy or regulation, where can I go?***

It is suggested you discuss the issue with your supervisor first. If you are uncomfortable going to your supervisor, you may try to speak with another member of the management team or the Compliance Officer, or a member of the Compliance Committee. The Compliance Department maintains a resource library of policies, standards, statutes and regulations.

### ***How can I report an issue or suspected violation?***

Team members are expected to report any suspected violation of the Code of Conduct or other irregularities to their supervisor. If you are uncomfortable going to a supervisor, you may go to another member of management, or the Compliance Officer, or any member of the Compliance Committee.

If you wish to remain anonymous, you may submit a report through our Ethics and Concerns Help Line. Calls made to the Help Line should contain sufficient fact-based information for the Compliance Department to investigate the concerns raised. No attempt will be made to identify any individual who has called the Help Line. All calls received are promptly and confidentially investigated. The Help Line phone number is (386) 615-4080.

### ***Can I be disciplined for reporting an issue or concern?***

No adverse action or retribution of any kind will be taken by FHCP against any team member simply because he or she reports a suspected violation or raises a concern in good faith. Team leaders are advised that it is a team member's right to bring up issues, and that this shall never be cause for criticism, penalty or recrimination. Reports will be treated with dignity and respect and kept confidential to the maximum extent possible.

### ***What if my supervisor asks me to do something that I think is illegal or violates the Code of Conduct?***

If you know it's wrong, don't do it. Report the request to another member of Management, the Compliance Officer, or a member of the Compliance Committee.

### ***How do I know if an action or situation is unethical?***

Try answering these three questions with respect to the action or situation.

- Is it legal, that is, does it violate the Code of Conduct, another internal policy, or a law or regulation?
- Is it fair to all concerned?
- Does it feel right?

If the answer to any one of these questions is "no", it's time to ask someone for advice.



***Can I accept a \$100 gift from a patient?***

No. Cash gifts should never be accepted from a patient or from anyone with whom we do business. Non-cash gifts of nominal amount may be accepted. Sometimes, patients may be insistent or offended when their gift is not accepted. An alternative to a cash gift is to suggest the patient make a donation to a not-for-profit organization in the name of the team member, or provide a non-cash gift of a nominal amount to the department where the team member works.

***Can a department accept a “thank you” gift from a vendor with whom we have an established relationship?***

Yes, provided it is nominal in amount, has not been solicited, and is not intended to obtain favorable treatment for the vendor.

***Can a department solicit a charitable contribution from a vendor?***

Yes, provided the solicitation has the approval of management, and there is no promise, either express or implied, of favorable treatment for the vendor. Also, the charitable contribution must not benefit a specific individual. Charitable contributions may only be applied towards an activity related to the organization’s mission.

***A friend has asked me to look up medical information on a relative who was a past patient. Can I use the computer to provide the information?***

No. Patient information may only be released when authorized in writing by the patient. Generally, information relating to past patients may only be released by the Medical Records Department.

***I need to confirm a follow-up doctor’s appointment for a patient. Can I leave information about the appointment on the patient’s answering machine?***

Yes. If you leave a message on an answering machine or with another person in the household, you should do so in a way that does not disclose any information about the patient’s health status or care. The preferred approach is to leave a message with your name and phone number, so the patient can get back to you to for a one-on-one conversation. Another approach is to obtain the patient’s advance written permission to discuss health matters with a personal representative of the patient.

***Can I maintain a job outside of FHCP in addition to my FHCP job?***

In most cases, yes, you can maintain another job so long as it does not impair your performance or decision-making at your FHCP job. The Code requires team members to disclose and obtain permission for outside activities and relationships that may be perceived as a conflict of interest, such as relationships with competitors, customers or suppliers. Members of management and others with “discretionary authority” are required to disclose outside activities and financial relationships annually in writing.

For additional information, please refer to FHCP’s Conflicts of Interest policy (LD004).

*A sales representative asks me for a date every time he visits our facility. I have told him I'm not interested but he continues to ask and it's making me uncomfortable. What should I do?*

Unwelcome unsolicited advances of this type may be a form of sexual harassment. In its 1980 guidelines, the Equal Employment Opportunity Commission defined sexual harassment as "unwelcome and unsolicited conduct of a sexual nature including, but not limited to, unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when the conduct is either directly linked to the grant or denial of an economic quid pro quo (give me this for that), or where it has the purpose or effect of unreasonably interfering with the individual's work performance or creating a hostile, offensive and intimidating work environment."

You should report the situation to your supervisor who should then take corrective action. If the behavior continues, you should go to another member of management or the human resources department.

*I would like to use a Florida Health Care Plan computer and copy machine for some volunteer work I am doing for a civic organization. Is this permitted?*

The organization's resources may not be used for personal business without permission. Some charitable uses may be permitted so long as such use does not interfere with one's job duties or the duties of others. In any case, each use for such purposes must be approved in advance.

*A close relative owns a company seeking to do business with FHCP. He has asked me for information that could help him win a contract with FHCP. How should I handle this situation?*

This situation is addressed by the sections of the Code of Conduct that deal with "Conflict of Interest" and "FHCP Restricted Information". A family relationship with an individual doing business with FHCP could cause a conflict of interest if you are in a position to recommend or approve purchases from the company. If you provide the information requested, you would be disclosing confidential information and interfering with the competitive bidding process. Any conflict of interest must be disclosed to management, or a member of the Compliance Committee. Restricted information may only be disclosed through established channels. In this example, the relative should be directed to the Purchasing Department.

**"Our dreams, goals, ideas come from our values...If what we are doing does not come from what we care about most in life, it is meaningless."**

- G.Lynne Snead & Joyce Wycoff, from *To Do, Doing, Done*

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**Appendix B - Statement of Understanding**

Statement of Understanding is located behind “Tab 4” in this binder.

This Code of Conduct was prepared for all team members. We hope you will find it helpful whether you are a newcomer or a team member of long duration. We have tried to make this booklet as complete as possible. However, because ethics and compliance policies require almost constant updating to meet the needs of a changing environment, the policies stated here may be revised, amended or deleted as necessary. Changes will be reflected in a subsequent printing or communicated through line management.