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INTRODUCTION

Dear Valued iCare Team Member,

At iCare, it is our vision to be the national leader for advanced managed care programs serving people with complex health and social needs. We understand that this vision can only be achieved if each of us commit daily to performing our work with the highest level of ethics and integrity.

Aligned with iCare's Vision, Mission, and Core Values, our Code of Conduct has been developed to help you better understand the expectations for each of us to conduct iCare business in a compliant, lawful and ethical manner. The Code is fundamental to iCare's Compliance Program and provides the framework for iCare's compliance policies and procedures. Please use the Code as a guide and reference tool to help you make the right decisions on the job.

We ask that each of you make a personal commitment to read and abide by the Code. If you have any questions regarding the Code, or how to apply it, please contact your supervisor or the Compliance Department.

After reading the Code, you will be asked to confirm your commitment to and understanding of the Code and iCare's expectations.

We thank you for your continued support and participation in fulfilling iCare's Mission and Vision and your ongoing commitment to improving the health and wellbeing of our members.

Sincerely,

Tom Lutzow
President,
Chief Executive Office

Teri Zywicki
Chairman of the Board

Jill Fisher
Director of Compliance,
Compliance Officer

Liz Bartlett
VP, General Counsel
Privacy Officer

Vinay Pandey
VP, Chief Information Officer
Security Officer
iCARE’S MISSION

Mission

The Mission of iCare is to improve the quality of life for individuals with unique and complex medical, behavioral, and human service needs while providing value to our customers and stakeholders, embracing the diversity and dignity of those we serve.

History

Independent Care Health Plan was formed in 1994 as a joint venture between Humana Wisconsin Health Organization Insurance Corporation and the Milwaukee Center for Independence.

Purpose

To measurably improve the health of iCare members through personalized, sustained and integrated coordination.
iCARE CORE VALUES

**Inspire Wellbeing**
- I motivate Members to peak health
- I listen to what is important to Members
- I build partnerships to achieve health outcomes
- I promote wellbeing as a personal habit

**Brave New Solutions**
- I imagine Member-unique solutions
- I optimize care resources
- I share best practices
- I drive continuous improvement

**Radiate Compassion**
- I am sensitive to Member preferences
- I withhold judgments that may cloud decisions
- I foster inclusion of Members with diverse needs
- I make iCare feel like home

**Thrive Together**
- I celebrate the successes of shared responsibility
- I lead, even when no one’s looking
- I honor iCare’s legacy of integrity
- I am an “Effectiveness Multiplier”
## WHO TO CONTACT

### COMPLIANCE

<table>
<thead>
<tr>
<th>YOUR CONCERN</th>
<th>YOUR CONTACTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Any compliance and ethics concerns.</td>
<td>- Jill Fisher, Director of Compliance, Extension 4764</td>
</tr>
<tr>
<td>- Possible Fraud, Waste, and Abuse.</td>
<td>- Mary Rafel, Compliance Specialist, Extension 1173</td>
</tr>
<tr>
<td>- Contract language or regulatory interpretations.</td>
<td>- Julie Wallace, Compliance Specialist, Extension 7516</td>
</tr>
<tr>
<td>- Compliance Work plan or Risk Assessment questions or concerns.</td>
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### SECURITY

<table>
<thead>
<tr>
<th>YOUR CONCERN</th>
<th>YOUR CONTACT</th>
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<tbody>
<tr>
<td>- Information Technology security questions and concerns.</td>
<td>- Vinay Pandey, Security Officer, Extension 5602</td>
</tr>
<tr>
<td>- Lost mobile communication devices</td>
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</tr>
</tbody>
</table>
## PRIVACY & LEGAL

**YOUR CONCERN**
- Use and disclosure of protected health information.
- Other confidentiality concerns.
- Privacy and Security Incidents.
- Contract review.
- Legal and company liability questions.
- Subpoenas and attorney requests for information.
- Intellectual Property

**YOUR CONTACT**
- Liz Bartlett, Privacy Officer & General Counsel, Extension 1089

## HR

**YOUR CONCERN**
- Employment or workplace issues.
- Conflicts of Interest.
- Compensation and Benefits.
- HR policy guidance and interpretation.

**YOUR CONTACTS**
- Jessica Schneider, Director of HR, Extension 7504
- Jenny Cook, HR Generalist, Extension 1068
- Joanna Porterfield, HR Specialist, Extension 5496
2. iCARE’S COMPLIANCE PROGRAM

Quick Policy Reference:
- CO-001 Compliance Program
- CO-002 Compliance Training
- CO-003 Investigating Possible Violations
- CO-004 Corrective Action Plans
- PHI-005 Privacy & Security Training
- HR-027 Disciplinary Policy

Our daily commitment to uphold iCare’s Mission and Core Values is demonstrated throughout our Compliance Program. It is your responsibility to fully participate in iCare’s Compliance Program, as we are all responsible for compliance within iCare.

Independent Care’s Compliance Program consists of the seven required elements outlined in the Code of Federal Regulations (42 CFR §422.503(b)(4)(vi) and §423.504(b)(4)(vi)). Below is a high-level overview of each element as it relates to iCare.

1. Written Policies, Procedures, and Standards of Conduct

Independent Care has both written policies and procedures as well as this Code of Conduct. Our Code of Conduct serves as a general compliance guide and resource, while our policies and procedures provide more detailed guidance on how specific topics are handled within iCare. Key policies relating to iCare’s Compliance Program are summarized and referenced within the Code. It is your responsibility to be familiar with this Code, iCare’s key compliance policies, and those policies and procedures related to your specific role within iCare. Both the Code and iCare’s policies and procedures are always available for review on iCare’s intranet site.

iCare’s Compliance Program (CO-001)

iCare’s Compliance Program Requirements also extend to our First Tier, Downstream, and Related Entities, or FDRs. FDRs are individuals or entities iCare contracts with to provide health care or administrative services related to our Medicare contract. Examples include our provider network, our claims processor and our pharmacy benefits manager.

To learn more about iCare’s oversight of FDRs, visit our FDR Compliance website at www.icarehealthplan.org/compliance.
2. Compliance Officer, Compliance Committee and High Level of Oversight

Independent Care has a dedicated Compliance Officer and Compliance Committee to oversee iCare's Compliance Program. The Compliance Committee consists of representatives from all areas of iCare. The Compliance Officer serves as the Chair of the Compliance Committee and provides reports directly to the CEO and the Audit and Compliance Committee of the Board of Directors. For more information on iCare's Compliance Department and Compliance Committee, please visit the Compliance Page of iCare's intranet site.

This Code of Conduct and iCare's Annual Compliance Workplan are reviewed and approved by the Board of Directors - illustrating the importance of compliance to those at the highest level of authority in iCare.

3. Effective Training and Education

Training is a key component of iCare's Compliance Program. At iCare, all employees (including full-time, part-time, temporary, contracted, intern, and volunteer) receive Compliance Orientation and Privacy and Security Training. iCare's Compliance Orientation includes an overview of this Code of Conduct, iCare's Compliance Program expectations, protections and reporting mechanisms, and fraud, waste, and abuse basics. All training requirements are met within 60 days of hire and annually thereafter.

Independent Care's Compliance Training Policy is CO-002. Independent Care’s training materials are always available for review on the Compliance Page of the intranet.

4. Effective Lines of Communication

Effective communication within iCare is essential. For communication to be effective, information must travel from management to employees and business partners, as well as travel from employees and business partners to management.

Management communicates in a variety of ways, including email distributions, newsletters, mailings, physical postings of information, individual and group meetings, trainings, in-office mobile display monitors, iCare's intranet and internet websites, and written contracts.

What should I Report?

Compliance concerns can be defined as any apparent or potential fraudulent, illegal, or unethical behavior, including violations of laws, regulations, contract requirements, or iCare policies.

Examples include:

- You become aware of a coworker falsifying information for a report to CMS.
- You hear a coworker trying to convince another coworker not to report a concern.
- A member calls and reports there are records of services they did not receive appearing on their monthly Explanation of Benefits (EOB).

Please note: this may be the result of a simple administrative or billing error but should be reported for investigation to ensure the incorrect information is not the result of potentially fraudulent behavior.
Employee and business partner communication to management is also key to effective communication. Independent Care’s compliance program creates a system for employees and business partners to ask questions about laws and company policies as well as report compliance concerns. More information on communication responsibilities is outlined under the “Reporting Concerns: Your Duties to /Care, /Care’s Duties to You” section.

Independent Care also strives to keep communication lines open to and from members, including providing education on how to identify and report potential Fraud, Waste, and Abuse. Independent Care uses member materials, newsletter, social media, and their website to communicate with our members.

5. Well Publicized Disciplinary Standards

Disciplinary action can result from failure to fully participate in /Care’s Compliance Program. Full participation in /Care’s compliance program includes reporting any and all potential compliance concerns, participating in required training and assisting in investigations and the resolution of compliance concerns as needed.

Failure to participate puts our members, our company, and yourself at risk. Disciplinary action will be appropriate to the seriousness of the violation, up to and including termination of employment. All disciplinary action will be applied timely, fairly, and consistently.

Reporting your own misconduct will not exempt you from disciplinary action. However, your willingness to self-report will be taken into consideration.

Independent Care’s HR-027 Disciplinary Policy, outlines /Care’s four step disciplinary process of a verbal warning, written warning, final warning, and termination notice.

6. Effective System for Routine Monitoring and Identification of Compliance Risks

Independent Care completes an annual risk assessment to help determine the auditing and monitoring priorities for the annual Compliance Workplan. Auditing and monitoring is a collaborative process including all departments and our business partners, such as our claims processor and pharmacy benefits manager. The Workplan is approved by the Board of Directors and posted on Compliance Department page of the intranet. If you have questions about /Care’s Workplan or Risk Assessment please contact the Compliance Department.

What is a compliance risk?
The potential for regulatory penalties or loss of reputation due to the company’s failure to comply with a law or regulation. For example, a compliance risk could result from not having a policy in place or having a policy in place that is not followed. If you identify any compliance risks, please bring them to the attention of your supervisor or the Compliance Department.
7. Procedures and System for Prompt Response to Compliance Concerns

Independent Care has processes in place to ensure all compliance concerns are addressed and corrected. Compliance policies CO-003 Investigating Possible Violations and CO-004 Corrective Action Plans outline iCare's processes for responding to compliance concerns. Reports are made to the appropriate regulators when significant noncompliance is identified.
3. YOUR ROLE IN COMBATING FRAUD, WASTE, & ABUSE

Quick Policy Reference:

CO-003 Investigating Possible Violations
CO-013 Fraud, Waste & Abuse Prevention & Detection
LGL-003 Office of Inspector General (OIG) Exclusion Review
BOD-004 Whistleblower Policy

Here at iCare, you play a key role in helping to prevent, detect, and correct instances of Fraud, Waste, and Abuse (FWA).

What is Fraud?

- Fraud is defined as an intentional and willful deception or misrepresentation, including that the deception could result in some unauthorized benefit or payment, or any act that constitutes fraud under applicable State or Federal law.

What are Waste & Abuse?

- Waste and Abuse can be defined as practices inconsistent with sound fiscal, business, or medical practices, such as inappropriate utilization, mismanagement, and inadequate oversight of services.
- Abuse occurs when unintentional behavior results in higher payments or services than an individual or entity is entitled.
- Waste is the inappropriate utilization or inefficient use of resources.
- Both can result in unnecessary cost to healthcare programs and unnecessary reimbursement for services that are not medically necessary or fail to meet professionally recognized standards for healthcare.
Examples of Fraud, Waste & Abuse

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<tr>
<th>Fraud</th>
<th>Waste &amp; Abuse</th>
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<tbody>
<tr>
<td>• Lost/stolen/loaned ID card used by someone other than beneficiary to receive services</td>
<td>• Providers billing for services that are not medically necessary</td>
</tr>
<tr>
<td>• Drug seeking or doctor shopping (i.e. seeking opioids or other pain medications from several providers)</td>
<td>• Providers including a refill with a prescription that may not be medically necessary</td>
</tr>
<tr>
<td>• Providers billing for services not rendered</td>
<td>• Members using the ER for services rather than seeing their primary care physician</td>
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The key distinction between Fraud, Waste and Abuse is intent.

Prevention occurs by following our policies and procedures, including this Code, and staying informed and knowledgeable about how to identify FWA through training and other communications from iCare. You play a key role in detecting and correcting FWA by reporting issues, concerns, and suspicious activity. By reporting concerns promptly, you also help to correct and prevent detected issues from recurring.

How does iCare prevent Fraud, Waste and Abuse?

All departments are charged with understanding the laws, rules & regulations associated with FWA. Here are some examples:

- **Prior Authorization** – Reviews requests for services and determines whether they are medically necessary to prevent medically un-necessary services from being provided
- **Claims** – Reviews claims from providers and ensures that they are processed correctly (no bundling, etc.)
- **Care Management** – Review member claims as part of the health risk assessment and serve as main point of contact for our members – allows for early detection of claims that look unusual or unrelated to member’s typical health care needs and a comfortable place for member to disclose potential concerns
- **Pharmacy** – Reviews member pharmacy claims regularly for suspicious activity (e.g. out-of-state, unusual prescriptions, irregular transactions, etc.)
Laws that Govern Fraud, Waste & Abuse Prevention

**False Claims Act**

- Prohibits knowingly submitting a false or fraudulent claim for payment or approval to the government, including knowingly making a false record or statement to get a false or fraudulent claim paid
- False Claims Acts are at both State and Federal levels
- You have the right to report concerns anonymously, confidentially, and without fear of retaliation or intimidation. Please reference BOD-004 Whistle Blower Policy

**Anti-Kickback Statute**

- Prohibits payment of kickback or other remuneration
- Remuneration is any sort of reward or compensation, financial or otherwise
- Examples include: bribes, gifts, entertainment, rebates, services, discounts, etc. in return for referring or recommending a service paid by Medicare or Medicaid
- Certain safe harbors exist

**Physician Self-Referral Law (a.k.a Stark)**

- The Physician Self-Referral Law prohibits a physician from making a referral for certain designated health services to an entity in which the physician, or a member of his or her family, has ownership or an investment interest or a compensation arrangement
- Certain safe harbors exist

**What are the Consequences?**

Like any law, if you break it there are consequences. Fraud is a crime. It wastes billions of dollars of Medicare and Medicaid funding each year and can jeopardize the safety and well-being of its victims. There are **severe consequences** for perpetrators, including:

- Civil monetary penalties (CMP)
- Criminal conviction/fines
- Civil prosecution
- Loss of license
- Imprisonment
- Exclusion from Federal Health Programs

**What is Exclusion?**

Exclusion is when the government prevents an individual or entity from participating in federal health care programs. No payments using federal funding may be made for items or services furnished, ordered, or prescribed by an excluded individual or entity. Exclusion may result from the following:
• Criminal charges related to FWA
• Physical abuse convictions
• Felony convictions related to controlled substances
• Failure to maintain license
• Failure to pay student loans

Independent Care ensures that all employees, subcontractors, and the governing body are screened prior to hire or contracting and monthly thereafter against the Office of Inspector General List of Excluded Individuals and Entities (OIG LEIE list) and the General Services Administration’s Excluded Parties List System (GSA EPLS).

➢ If you suspect an iCare employee, provider, or vendor may be excluded, you must immediately notify the Compliance Department

**Member Safety**

Independent Care is committed to member safety. If you are aware of a member drug-seeking or participating in other risk-taking behaviors that threaten the member’s health or well-being, the concern must be addressed in the member’s care plan. Any concerns related to fraud, waste, and abuse, such as drug-seeking or unusual claims activity, should be reported to the Compliance Department. Any patterns of continued non-compliance with the care plan should be documented and discussed with your supervisor.

Employees who are aware of medical errors, such as medication mismanagement or quality concerns with any provider should immediately report the issue(s) to the Director of Quality Improvement and the Chief Medical Officer.
4. REPORTING CONCERNS

Quick Policy Reference:
- CO-003 Investigating Possible Violations
- CO-013 Fraud, Waste & Abuse Prevention & Detection
- PHI-013 Privacy Security Event Reporting
- BOD-004 Whistleblower Policy

Your Duty to Report

It is your duty to promptly raise any questions or report any compliance concerns. Independent Care enforces a strict zero tolerance policy for any acts of intimidation, retaliation, or retribution for asking questions, raising issues, and reporting concerns in good faith.

Anyone who reports a compliance concern is protected by iCare’s Whistleblower policy.

Types of Concerns

- Potential fraud, waste or abuse (FWA) (see Section 3 on Fraud, Waste & Abuse definitions & examples)
- Privacy concerns
- Security concerns regarding HIPAA

Who to Report Concerns To

Before reporting any concerns, ask yourself the following:

- Do I think someone I work with or a member or provider committed fraud, waste or abuse? And if so, why?
  - This is a **compliance referral** and would be sent to the Compliance Officer
- Did I accidentally send a document with personal information of one of our members to the wrong individual? Did I witness someone else do this?
  - This is a **privacy concern** and would be sent to the Privacy Officer
- Did I accidentally open an email with malware or some other infectious software?
  - This is a **security concern** and would be sent to the Security Officer
Depending on how you answer any of the above questions you should work with your manager or supervisor (if possible and if you feel comfortable) to gather as much information as possible on the issue or question at hand and submit accordingly.

If you choose to initially contact your supervisor/manager, they may be aware of additional information, such as others having similar issues, and will ensure your concern is routed to the appropriate place for handling.

If you have made a report to your supervisor and the issue has not been addressed, or if you have concerns about reporting the issue to your supervisor/manager, you may contact the Compliance Department or Privacy Officer.

Independent Care does offer an anonymous reporting option that may be used via an Alertline, which is discussed below.

**Leading by Example**

While all employees are responsible for conduct consistent with this Code, managers/supervisors have the additional responsibility to lead by example, to assist their staff with information and resources, to resolve ethical dilemmas, and maintain an ethical culture within our organization.

Managers/Supervisors are expected to take immediate action upon receiving a report of illegal or unethical conduct. Managers should contact the following people as appropriate to the situation:

- **Employment Issues** – contact Human Resources or General Counsel
- **Regulatory or Contract Compliance** – contact the Director of Compliance
- **Fraud, suspected illegal, dishonest, fraudulent or unethical activities** – contact the Director of Compliance or General Counsel (Privacy Officer)

If you are uncomfortable discussing an issue with your manager/supervisor, you are encouraged to report the situation anonymously using the mechanisms outlined below.
iCare's Reporting Mechanisms

Independent Care offers many options for reporting concerns, questions, or referrals. All referrals may be made **anonymously**:

1. iCare Compliance Alertline – 1-877-564-9614 - [Click Here to Report]
2. Compliance Referral Form - [Click Here to Report]

For providers or members who wish to make a referral directly, they may use the Report Concerns form on iCare’s internet page.

If you have a concern about a potential HIPAA breach or security issue/breach, you can use the Privacy/Security Event Report Form.

All reports are kept anonymous and confidential to the fullest extent possible for iCare to investigate the concern. Independent Care will take reasonable measures to protect the confidentiality of anyone making a report. Unless the identity of that person reporting a compliance or ethics issue is necessary to conduct an investigation, the identity of that person will not be disclosed. If it must be disclosed in order to conduct the investigation, that person’s identity will be disclosed only on a need-to-know basis.

Whistleblower Protections

Independent Care has committed to providing a workplace conducive to open discussion of its business practices and regulatory compliance and enforces a **strict zero tolerance policy for acts of intimidation, retaliation, or retribution for asking questions, raising issues, and reporting concerns in good faith**.

Any individual who intimidates or retaliates against a reporting individual should be immediately reported to the Human Resources Department or Director of Compliance and will be subject to disciplinary action, up to and including termination.

The right to report without fear of retaliation is addressed in a board-level policy, **BOD-004, iCare's Whistleblower Policy**.
What happens after you report?

After a compliance concern is reported, iCare strives to provide the reporter information regarding the expectations of a timely response, confidentiality, non-retaliation and progress reports as applicable. All reports are addressed upon receipt to ensure timely reporting to regulators, as needed.

All reports are handled according to iCare’s **CO-003 Investigating Possible Violations** policy.

Duty to Participate

Your duty to participate in iCare’s compliance program includes assisting with compliance investigations and the resolution of issues as needed. If you take part in any such investigation, including interviews, you must tell the truth and give complete and clear information.

You must never hide, destroy, or change documents, lie or make misleading statements. You are strictly prohibited from any attempts to cause a coworker to fail to provide correct and complete information.

Consistent with applicable law as well as the facts and circumstances of the particular case, you may be asked to keep information you provide or receive as part of an investigation strictly confidential. Should you fail to keep information confidential after being requested to do so, discipline may result.
5. CONFLICTS OF INTEREST

Quick Policy Reference:

- **CO-017 Conflict of Interest**
- **CO-018 Consultant Committee Member Conflict of Interest**
- **BOD-001 Conflict of Interest**

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**Conflict of Interest (CO-017)**

To ensure all business decisions and actions you take are based on the best interests of iCare and our members, you must avoid any conflict or appearance of conflict between iCare’s interests and any personal interests.

Areas of conflict of interest (5 CFR §2635.204(a)) include gifts and entertainment, personal relationships, and business relationships.

**Examples of conflict of interest can include:**

- Accepting or giving any gifts, other than those of nominal value ($20.00 or less), excessive or unusual entertainment, or other favors from an entity looking to do business with iCare or from an iCare competitor.

- Gifts of perishable items may be accepted but must be placed in a common area.

- If a gift is offered that is not within these guidelines, you must kindly decline with gratitude and explain accepting such a gift is against company policy.

- Outside employment or business relationship with a business associate or competitor of iCare.

- Relatives employed by or in a business relationship with a business associate or competitor of iCare.
There are also rules for giving and receiving gifts between iCare employees and members. Gifts of a nominal value ($20 or less) may be given or received, when appropriate. Gifts of nominal value may include a snack or beverage or a homemade craft or card. If you have questions about whether or not a gift is appropriate, please contact the Compliance Department. Gifts related to Company incentive programs are not included in this policy.

There are strict rules about what may be offered to government employees. The rules depend on the nature of the relationship between iCare and the government employee. If you have questions about what can be provided to a government official please contact the Compliance Department.

Those at the highest level of authority, iCare's Officers and Board of Directors, are also subject to the same rules, but are governed by a separate board-level Conflict of Interest Policy, BOD-001.
6. PROTECTING OUR INFORMATION & OUR MEMBERS’ INFORMATION

Quick Policy Reference:

| PHI-001 General Use & Disclosure of PHI |
| PHI-002 Health Information Privacy Program |
| PHI-003 Identifying Protected Health Information |
| PHI-029 HIPAA Walkthroughs |
| LGL-002 Records Management Program |

Protecting Your Privacy & Our Members’ Privacy

As an employee of iCare, you are entrusted to protect our members’ privacy and confidentiality. It is the duty and obligation of each of us to safeguard the Protected Health Information (PHI) of our members. All employees and board members receive Privacy & Security Training upon hire/appointment and annually thereafter, as required by the Health Insurance Portability and Accountability Act (HIPAA).

Independent Care has numerous policies to ensure PHI is used and disclosed only as required and allowed by law. All policies pertaining to handling of PHI can be found on the iCare Staff Center Page under the Policy Library.

If you have any questions about the appropriate handling of PHI, please contact your supervisor/manager, iCare’s Privacy Officer or the Compliance Department.

Independent Care provides a variety of health care related services and supports to our members. These services must be provided according to applicable federal, state, and local laws.

Independent Care is subject to other laws as well as health care coverage regulations. The laws apply to all iCare employees, providers, and other contracts with business associates.
Handling an Incident or Breach

An incident or an event is a situation in which there may be an improper handling or use of PHI that results or may result in unauthorized disclosure. The Privacy Officer investigates all reported incidents and completes a risk assessment, as required by law, to determine if the incident rises to the level of a reportable breach.

A breach is a confirmed unauthorized use, access, acquisition or disclosure of PHI that compromises the security or privacy of the PHI based on the completion of a risk assessment.

All incidents and breaches are logged by the Privacy Officer. The Privacy Officer uses this log for tracking and trending to determine if additional education or new processes are needed for increased security. This log is also used to ensure all breaches are appropriately reported to regulating agencies as required by law.

If you come across a situation and you are unsure whether it is a Privacy or Security Incident, immediately contact the Privacy Officer for investigation.

For example:

- You find a folder in a conference room and you are unsure whether it contains PHI. You should not look at the folder's contents. Instead, give the folder to the Privacy Officer directly to investigate.

Good PHI Practices

- Always remember the minimum necessary rule. Access and disclose only the minimum amount necessary for the task at hand. If the request is outside the scope of your role at iCare, make sure to direct the request to the appropriate authorized individual.
- Ensure you have the appropriate authorization prior to releasing information.
- Check to make sure you are not required to document the disclosure you are making.
- Remember that certain records have extra protection under the law, including mental health records and those records related to substance abuse and HIV/AIDS.
- Always report any privacy or security incidents immediately to the Privacy Officer to ensure it is handled as required by law.
HIPAA Walk Throughs

Independent Care’s Legal Department, in conjunction with the Compliance Department, conducts HIPAA Walkthroughs as a monitoring activity. Findings are not reported to the Privacy Officer as incidents or to the HR Department as policy violations unless there are extenuating circumstances. However, findings are logged for tracking and trending and re-education is provided to the employee as appropriate. Findings may lead to disciplinary action depending on the severity.

How iCare Works to Prevent Breaches

Below are some examples of how iCare prevents breaches:

- **Identity Verification**
  - Employees are trained to always verify the identity and legal authority of those persons requesting disclosure of PHI.
  - Documentation may be required as a condition of disclosure.

- **Member Authorizations**
  - Uses and disclosures other than for purposes of TPO likely require a signed authorization.

- **Encryption**
  - Process of converting information or data into a code, especially to prevent unauthorized access.
  - Proper use of encryption can be the difference between an incident and a reportable breach.
  - At iCare we encrypt emails, compact discs, jump drives and mobile devices (cell phones, tablets, etc.).

In addition, we enforce good password habits, workstation protection best practices, proper disposal of documents containing PHI (as allowed by CMS and DHS), and ensuring that all mobile devices are used appropriately and secured.
Protection & Proper Use of iCare’s Assets and Proprietary Information

You are responsible for protecting iCare’s assets. Independent Care’s assets include not only physical property (such as computers and workstations), but intellectual property as well.

**Intellectual property** is defined as materials, inventions, or ideas that are copyrighted, trademarked, or patented and trade secret information. Intellectual property may include any of the following:

- Marketing Plans
- Contact Lists
- New business development proposals
- Computer Programs
- Policies & Procedures
- Financial Data
- Model of Care
- Business Strategies
- Other Confidential & Proprietary Documents

All such knowledge must be kept in the strictest confidence both during and after employment.

Record Retention

All iCare employees are expected to keep complete, accurate, and honest records. Failure to do so may have severe consequences, including disciplinary and legal action, as well as potential harm to iCare’s future business opportunities.

Independent Care is required by law to ensure that appropriate records are identified, maintained, and protected. Everyone is responsible for ensuring that complete and accurate records in each respective department are retained, stored, and subsequently destroyed in accordance with LGL-002 Records Management Program policy. Retention of documents beyond their required retention date is costly in terms of storage space (both physical and electronic).

Computer & Network Security

Independent Care’s business depends upon the continuous, efficient operation of its computer systems and networks and these assets represent a large investment. You are responsible for safeguarding the integrity of these resources by protecting passwords, IDs, and access to iCare’s computer systems and network.
You are prohibited from the following:

- Downloading unauthorized software or installing any program or unfamiliar attachment on your workstation, unless authorized by the IT Helpdesk;
- Downloading or storing digital media files that are not licensed explicitly to iCare

The purpose of these restrictions are two-fold:

- To maintain an accurate inventory of software and media assets that iCare owns; and
- To prevent viruses and malware that may be hidden in software from spreading within iCare’s network

These safeguards are in place to protect company assets from malicious products and avoid exposure to liabilities to digital content creators and software vendors for unlicensed use.

Refer to IT-001 Acceptable Use Policy for more information.

If you need a specific application for your workstation, submit a request to your supervisor/manager for approval and submit to the IT Helpdesk to ensure it is properly handled.

Remember: Any potential breaches of computer systems or network security should be immediately reported to the Security Officer for prompt investigation.

Mobile Communication Devices

Any and all mobile devices used to transfer Protected Health Information (PHI) or confidential and proprietary information of iCare must be appropriately encrypted and password protected per iCare’s Information Technology policies IT-002 IT Security Policy and IT-008 Remote Network Access. You must immediately notify the Security Officer/CIO, IT Helpdesk and Privacy Officer in the event the mobile device is lost or stolen.
7. MAINTAINING AN ETHICAL WORKPLACE

Quick Policy Reference:

- HR-004 Equal Employment Opportunity
- HR-017 Harassment
- HR-024 Standards of Conduct
- HR-027 Disciplinary Policy
- HR-039 Drug and Alcohol Use
- LGL-001 Contract Management

Independent Care strives to provide and maintain a workplace that reflects iCare’s commitment to ethics and integrity. Our aim is to treat each other and our business partners as we wish to be treated: with dignity and respect. This commitment extends to all areas of workforce conduct, including how we use and treat iCare’s facilities and property.

**Discrimination**

Independent Care complies with Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, gender identity, or sex. Independent Care is an equal opportunity employer.

*Independent Care has adopted all National Standards for Culturally and Linguistically Appropriate Services (CLAS). The National CLAS standards are intended to advance health equity, improve quality and help eliminate health care disparities by establishing a blueprint for individuals and health care organizations to follow.*

Independent Care does not exclude people or treat them differently because of race, color, national origin, age, disability, gender identity, or sex.

We are proud to offer a diverse work environment where people of all backgrounds and cultures bring innovative solutions to our members’ unique needs. As talented individuals working to our common goal, our differences shape our strength.

Our aim is to treat each other as we wish to be treated: with dignity and respect. Independent Care does not tolerate harassment or violence of any nature in the workplace.
Drug-Free Workplace

Independent Care is a drug-free and smoke-free workplace. Independent Care prohibits the use, possession, sale and distribution of drugs or alcohol, or reporting to work under the influence.

If iCare has reasonable cause to believe that you are under the influence of drugs or alcohol, you may be requested to promptly submit to a screening for alcohol and/or drugs. Refusal to take the test for the presence of drugs or alcohol or refusal to cooperate in a company investigation involving drugs or alcohol will result in disciplinary action up to and including discharge. If tested positive for any illegal substance, you will be terminated immediately.

➢ Please see iCare’s Employee Handbook and Human Resources Policies & Procedures for specifics related to these and other employment policies.

Social Media

Consistent with applicable law, you are prohibited from posting material that is discriminatory, violates iCare company policies, threatens violence or engages in similarly unlawful conduct. You are also prohibited from making comments to third parties about iCare or your fellow employees that are deliberately false or defamatory. Always remember to be sure that any posts you make do not violate the legally protected privacy of our members, or the confidentiality of iCare’s proprietary information and intellectual property.

Personal Use of Electronic Media

As a reminder, all communication systems, including iCare’s email, computer, internet and telephone systems, are company property. You may not use iCare communication channels to access, post, share, transmit, download, or otherwise distribute threatening or malicious materials or materials you know are false or sexually explicit.

This prohibition includes anything that would be a crime, promotes criminal activity or violates any laws. You may not use iCare communication channels to send chain letters, personal broadcast messages or copyrighted documents that are not approved for reproduction, to open incorrectly addressed email. Or to look for a job outside of iCare.

If you abuse the Company’s communication systems or use them excessively for non-business reasons in ways that interfere with either your performance or the performance of your coworkers, you may be subject to discipline.
Employee Privacy

At iCare, we strive to respect each other’s privacy. At the same time, the company needs to maintain an efficient work environment. While iCare does not routinely monitor personal communications, you should not expect communications in the workplace to be private. Company resources are intended for the use of company business. Excessive personal use of internet and email during time when an employee should be working is unacceptable.

Independent Care reserves the right to intercept, audit, copy, and review the contents of phone calls, emails, voicemails, and internet usage involving iCare resources, with or without prior notice. iCare reserves the right to search your workspace, including document and laptop cases provided by iCare, as well as monitor common areas. If necessary, iCare may also install and/or periodically use surveillance equipment to investigate specific instances of possible misconduct.

Contracting with the Government

Independent Care maintains contacts with both the state and federal government to provide services to our members. As a result, iCare is subject to multiple regulating agencies. Any communication between iCare and a regulating agency, including required periodic reporting, must be complete, fair, accurate, timely and understandable.

It is imperative that all iCare business and services are conducted according to contract requirements and applicable federal, state, and local laws. It is iCare’s goal to provide you with the information and education you need to fully understand and comply with all relevant contract requirements, laws and regulations through our training programs and policies and procedures, as well as other resources identified in this Code.

Questions about contract compliance and other applicable laws and regulations should be immediately addressed with your supervisor or the Compliance Department.

Business Relationships

Independent Care maintains a variety of business relationships with our First Tier, Downstream and Related Entities (FDRs), business associates, and other vendors. These relationships are essential to iCare’s business and success and we believe in doing business with companies and consultants who have ethical business practices.

You are expected to act professionally and in the best interest of iCare and our members when interacting with our business partners, including our health care providers and their staff. If you are having difficulty
working with a business partner or their staff, you should refer the matter to your supervisor to ensure the issue is resolved expeditiously and appropriately. Any quality of care concerns should be promptly reported to the Quality Improvement Department.

All contractual arrangements must be in writing and be approved in accordance with iCare’s LGL-001 Contract Management policy. All business relationships with a provider must comply with applicable legal requirements. Any personal relationship or other potential conflict of interest with business partners should be disclosed to Human Resources.

If you are unsure what legal requirements or standards may apply in a given situation, you are encouraged to consult with your supervisor, the Compliance Department, or General Counsel.

General Counsel

Information you give to the General Counsel relating to iCare business activities is generally protected by attorney-client privilege and is kept confidential. The attorney-client privilege belongs to the company (iCare), not to employees. Such information should not be shared with others, including other iCare employees, except on a need to know basis.

You should be aware that General Counsel, or an outside attorney hired by iCare, is representing the Company, not you personally. You should not consider anything you tell General Counsel or an outside attorney to be protected from disclosure in the interests of the Company.

Public Relations & Inquiries from the Government or the Media

Independent Care’s policy is to treat all our members and customers, including federal, state, and local governments with the standards of integrity described in this Code. We also strive to comply with all laws and regulations put in place to protect the public interest and cooperate with requests for information from government authorities and other external agencies.

If you receive a subpoena or similar request, you must promptly report it to the General Counsel, to safeguard the legal rights of all involved and ensure appropriate processing.

The official company spokesperson for iCare is the Vice President of Marketing and Sales. All questions from the media should be directed to that individual. If the Vice President of Marketing and Sales is not available, questions from the media should be directed to the President/CEO to ensure professional handling. Please see Section 1: Who to Contact in this Code of Conduct for more information.