 <b>Envision</b> HEALTHCARE — PIONEERING THE DELIVERY OF CARE —	Policy No.: 3		
	Created: 1/2007	Reviewed: 8/2019	Revised: 8/2019

# REPORTING POTENTIAL ISSUES OR AREAS OF NON-COMPLIANCE

ETHICS & COMPLIANCE DEPARTMENT

## **SCOPE:**

Applies to all Envision Healthcare colleagues. For purposes of this policy, all references to “colleague” or “colleagues” include temporary, part-time and full-time employees, independent contractors, clinicians, officers and directors.

## **PURPOSE:**

To provide an overview of the responsibilities both colleagues and the Ethics & Compliance Department have to ensure Envision Healthcare and its subsidiaries’ and affiliates (the “Envision” or “Company”) operate within the parameters of all applicable healthcare laws and regulations.


## **POLICY AND PROCEDURE:**

### **I. INTRODUCTION**

Adherence to the Corporate Ethics & Compliance Program is vital. Accordingly, violations of law or the Ethics & Compliance Program will not be tolerated. Violators will be subject to corrective action in accordance with any applicable collective bargaining agreements and other applicable policies and procedures of the Company. Management is responsible for ensuring that colleagues are aware of and adhere to the provisions of the Code of Business Conduct & Ethics manual (the “Code”) and the Ethics & Compliance Program. For clarification or guidance on any point in the Code or related to the Ethics & Compliance Program generally, please contact a matter of the Ethics & Compliance Department.

### **II. DUTY TO REPORT AND COMPLIANCE OFFICER INVESTIGATIONS**

Colleagues are expected to report any suspected violations of the Code, Ethics & Compliance Program, or other irregularities to their supervisor, manager, or a member of the Ethics & Compliance Department. The Company has established a confidential

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Disclosure Program enabling colleagues to disclose any practices or procedures that the colleague believes may be inappropriate. These issues may relate to possible Medicare and Medicaid Fraud or Abuse, federal, state or local laws or regulations, or Company policies and procedures. The Company requires the internal review of any such disclosure and will conduct that proper follow-up.


The Company takes all reports of non-compliance seriously. Reports may be made in one of four ways:

- Through the Ethics and Integrity Helpline at 877-835-5267;
- In person, through contact with a supervisor, Human Resources, the Chief Compliance Officer, or other Ethics & Compliance Department colleague;
- By e-mail, to:  
[complianceconcerns@envisionhealthcare.com](mailto:complianceconcerns@envisionhealthcare.com); or
- In writing, to the Chief Compliance Officer at:  
Chief Compliance Officer  
1A Burton Hills Blvd.  
Nashville, TN 37215

No adverse action or retribution of any kind will be taken by the Company against a colleague solely because he or she reports in good faith a suspected violation of the Code, Ethics & Compliance Program or other irregularity by any person other than the reporting colleague. The Company will attempt to treat such reports confidentially and to protect the identity of the colleague who has made a report to the maximum extent consistent with fair and rigorous enforcement of the Code and the Ethics & Compliance Program.

Any manager, supervisor, or other high-ranking colleague who receives a report of a suspected violation or irregularity shall contact a member of the Ethics & Compliance Department.

Upon receipt of the suspected Code or compliance violation, the Ethics & Compliance Department shall immediately begin an investigation. The investigation by Ethics & Compliance personnel shall include interviews and the review of relevant documents. If the Chief Compliance Officer believes that the integrity of an investigation may be compromised because of the presence of colleagues under investigation, the colleague(s) allegedly involved in the misconduct may be removed from his/her present work activity, with or without pay, pending the outcome of the investigation, and after consultation with the Chief Compliance Officer and relevant management personnel.

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### **III. CONFIDENTIALITY AND ANONYMITY IN REPORTING**

#### A. Confidentiality

The Ethics & Compliance will maintain confidentiality of the subject matter reported to the extent that it will not impair the investigation.

#### B. Anonymity

In reporting potential concerns or possible misconduct, individuals may elect anonymity or provide their identity along with the substance of their report substance. Concerned individuals may reach out to the Ethics & Compliance Department via the Compliance helpline number or email, both listed above in Section II. The Ethics and Compliance Department will, within the limits of the law, honor requests for anonymity for individuals who report concerns or possible misconduct.


### **IV. DISCLOSURE LOG**

The Chief Compliance Officer (or designee(s)) shall maintain a disclosure log. Each disclosure shall be recorded in the log within two business days of its receipt. The disclosure log shall include a summary of each disclosure received (whether anonymous or not), the status of the respective internal reviews, and any corrective action taken in response to the internal reviews.

### **V. CORRECTIVE ACTION**

The Ethics & Compliance Department will work with managers and supervisors to inform any colleague of allegations that may have been filed against him or her arising from a violation of the Ethics & Compliance Program. Such notification may be delayed pending the outcome of any internal investigation the Chief Compliance Officer deems appropriate. The colleague will be given the opportunity, as appropriate, to state his or her position before any corrective action is imposed.

If the Ethics & Compliance Department determines that a colleague has clearly violated the law, Code or Ethics & Compliance Program, that colleague shall be subject to appropriate corrective action as determined by the applicable supervisors and Human Resources Department.

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The extent of the corrective action will depend on the seriousness of the offense. A record of the event and the corrective action imposed shall be maintained in the colleague's personnel file.

Corrective action will be taken against a violator's manager(s) or supervisor(s) to the extent that circumstances reflect inadequate supervision or a lack of due diligence. In addition, managers and supervisors may be sanctioned for failing to detect non-compliance with applicable policies and legal requirements, where reasonable diligence on the part of the manager or supervisor would have led to the discovery of any problems or violations and given the Company the opportunity to correct them earlier. A record of the event and the discipline imposed against the manager or supervisor shall be maintained in his or her personnel file.

**VI. RETALIATION**

Retaliation will not be tolerated against any colleague. Corrective action will be taken against any colleague who retaliates, directly or indirectly, against a colleague who makes a good faith report of a violation of law, Code or the Ethics & Compliance program.

**VII. POLICY REVIEW**

The Ethics & Compliance Department will review and update this Policy when necessary in the normal course of its review of the Company's Ethics & Compliance Program.