

<b>DEPARTMENT</b> : Ethics and Compliance	POLICY DESCRIPTION: Code of Conduct
	Distribution and Training
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	1/1/01, 3/15/02, 5/1/02, 2/15/03, 4/15/03, 8/1/03,
	1/30/04, 4/15/04, 8/31/05, 1/1/06, 2/1/06, 7/1/06,
	1/1/09, 2/1/2012, 7/1/12, 1/1/13, 3/1/14, 1/1/18,
	6/1/22, 1/1/23
EFFECTIVE DATE: June 1, 2023	REFERENCE NUMBER: EC.011
APPROVED BY: Ethics and Compliance Policy Committee	

**SCOPE**: All Company-affiliated facilities including, but not limited to, hospitals, ambulatory surgery centers, physician practices, home health agencies, hospice agencies, service centers, and all Corporate Departments, Groups and Divisions.

**PURPOSE**: To establish requirements for distributing, collecting acknowledgments, conducting orientation and annual refresher training of the Company's Code of Conduct (Code) for Company colleagues and Qualifying Individuals.

## POLICY:

- 1. Code Distribution: Within 30 days of being hired, each new employee and non-employee Vendor Partner staff working through HealthTrust Workforce Solutions (HWS) must receive a copy of or be provided the opportunity to electronically review the Code; acknowledge such review; acknowledge that the Code represents mandatory policy; and agree to abide by the Code. This is typically accomplished through the Orientation Code Training described below.
- 2. Orientation Code Training
  - a. Each new employee must receive Orientation Code Training within 30 calendar days of becoming a new employee using the course developed by the Corporate Ethics and Compliance Department.
  - b. New Employees are required to receive only Orientation Code Training in the year they were hired. They will receive Refresher Code Training in successive calendar years.
  - c. Should an employee fail to receive Orientation Code Training within thirty (30) calendar days of becoming a new employee, the employee must receive the training immediately, and the fact that the employee did not receive the training in a timely fashion and the name of the employee's supervisor and an action plan for resolution must be reported:
    - for a hospital employee, to the facility chief executive officer (CEO) and Division Ethics and Compliance Officer (DECO);
    - for an employee at the Corporate office, to the Company's Senior Vice President and Chief Ethics and Compliance Officer; or
    - for an employee in any other setting, to individuals in positions equivalent to the facility CEO and DECO.
  - d. All non-employee Vendor Partner staff working through HWS are required to take Orientation Code Training prior to working in a Company-affiliated facility.
- 3. Refresher Code Training
  - a. Each year by October 31<sup>st</sup>, current Employees must receive Refresher Code Training developed by the Corporate Ethics and Compliance Department.



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- b. Should any employee fail to take Refresher Code Training by October 31st, the employee will receive disciplinary action.
- c. Employees managing people are responsible for routinely checking HealthStream to ensure their employee group is completing training timely. If an employee does not complete the Refresher Code Training by October 31<sup>st</sup>, the name of the employee's supervisor and an action plan for resolution must be reported:
  - for a hospital employee, to the facility CEO and DECO. In addition, colleagues who participate in the hospital department director incentive plan must have their department in full compliance with the training requirements related to this policy to be eligible to receive their incentive;
  - for an employee at the Corporate office, to the Company's Senior Vice President and Chief Ethics and Compliance Officer; or
  - for an employee in any other setting, to individuals in the positions equivalent to the facility CEO and DECO.
- d. An employee on leave as of October 31<sup>st</sup>, who did not complete refresher training prior to taking leave, must receive the current year's refresher training within 30 calendar days of their return. If the employee's 30-day period crosses over into a new calendar year, and the refresher training is completed in the new calendar year, the completion will satisfy the training requirements for both years.
- e. All non-employee Vendor Partner staff working through HWS, regardless of the number of hours they work in a Company-affiliated facility, are not required to take the Refresher Code Training. An annual Code of Conduct Reminder Notice shall be sent to Vendor Partners to distribute to their employees working through HWS. The notice should include a link to the Code and a summary of key HCA Healthcare Code provisions. By October 31<sup>st</sup>, the Vendor Partner should acknowledge they have completed the distribution.
- 4. All Qualifying Individuals must receive the Code or be provided the opportunity to review it electronically, sign the acknowledgment card or be provided the opportunity to acknowledge the review electronically and receive training in accordance with this Policy.

## PROCEDURE:

- 1. Each Facility Ethics and Compliance Officer (ECO) shall ensure a process is established at their facility, and the Corporate Ethics and Compliance Department shall establish and maintain a process for the Corporate Office to:
  - a. Provide a copy of, or the opportunity to electronically review, the Code to each new fulltime employee within 30 calendar days of employment;
  - b. Provide a copy of, or the opportunity to electronically review, the Code to each new parttime or *per diem* employee or Qualifying Individual;



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- c. Collect a signed Code acknowledgment card from, or provide the opportunity to acknowledge review electronically by, all persons provided a copy of or electronic access to the Code pursuant to this policy and maintaining record of such acknowledgment via Code of Conduct training records in the HealthStream Learning Center (HLC);
- d. Conduct Orientation Code training within 30 calendar days of an individual becoming a new employee or Qualifying Individual using training materials and guidance provided by the Corporate Ethics and Compliance Department. Specific guidance on conducting Orientation training is provided in the Orientation facilitator's guide on the company's intranet site.
- e. Conduct Refresher Code Training annually for all Current Employees and Qualifying Individuals subject to this policy, using training materials and guidance provided by the Corporate Ethics and Compliance Department. Specific guidance on conducting Refresher training is provided in the Refresher facilitator's guide on the company's intranet site.
- f. Report the Supervisor's name of any employee who fails to take Orientation Code Training within 30 calendar days of an individual becoming a new employee or fails to take Refresher Code Training timely and an action plan for resolution to the:
  - Facility CEO and DECO for a hospital employee;
  - Senior Vice President and Chief Ethics and Compliance Officer for a corporate employee; or
  - An individual in the position equivalent to the facility CEO and DECO for any other setting.
- g. Follow appropriate disciplinary action for employees who fail to complete the required Refresher Code Training by October 31<sup>st</sup>.
- 2. Facilitator materials for all Code training are made available to ECOs at appropriate times and are maintained on the Company's Intranet site at Ethics & Compliance in a password-protected format.
- 3. Code of Conduct Orientation and Refresher training must be tracked using the HLC.
- 4. Whenever the Code of Conduct is reissued, communication of the changes must be provided pursuant to instructions from the Corporate Ethics and Compliance Department.

## **DEFINITIONS:**

**New Employee**, for purposes of this policy, means any newly hired individual, or any individual who previously worked for a Company-affiliated facility but has not worked as an employee or contractor for the Company-affiliated facility within the 180 calendar days preceding hire.



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Notwithstanding the above, this term does not include part-time or *per diem* employees who are not reasonably expected to work more than 160 hours in the calendar year, except that any such individuals shall be considered a new employee subject to the requirements of this policy, at the point when they in fact work more than 160 hours during the calendar year. This definition applies exclusively to this policy and for the determination of Code of Conduct training requirements.

Please note: Any individual terminated for failure to receive Refresher Code of Conduct training in one year and re-hired in the next is considered a new employee for purposes of this policy regardless of the number of days of break in service.

**Current Employee**, for purposes of this policy, means any individual who is employed by the Company at the time the Refresher Training is assigned for the calendar year and is reasonably expected to work more than 160 hours in the calendar year or who in fact works more than 160 hours in the calendar year.

**Qualifying Individual**, for purposes of this policy, means (i) any officer, director, or employee of an HCA Healthcare-affiliated facility; **or** (ii) any agent, contractor or other individual who is expected to furnish services in an HCA Healthcare affiliated facility in excess of 160 hours per calendar year.

Members of some boards of joint ventures between the Company and other entities are considered **governing directors** and, therefore, are considered Qualifying Individuals. Members of most hospital boards of trustees and surgery center governing boards are **non-governing directors** and are not considered Qualifying Individuals.

Regardless of the number of hours they are providing services in a Company-affiliated facility, Non-employee Dependent Healthcare Professionals (DHPs) and Tier 1 Non-Employees, as defined in the Vetting Dependent Healthcare Professionals and Other Non-Employees Policy, COG.PPA.003, are not considered Qualifying Individuals for purposes of this policy. If a facility wants to provide Code of Conduct training to DHPs and Tier 1 Non-Employees, they may do so, but such training is not a requirement of this policy.

## **REFERENCES:**

- 1. Code of Conduct
- 2. Vetting Dependent Healthcare Professionals and Other Non-Employees Policy, <u>COG.PPA.003</u>
- 3. Discipline, Counseling, Corrective Action, HR.ER.008