



| Manual/Library Name: | No: COMP-RCC 4.21 | |
|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Regulatory Compliance | Page: 1 of 5 | |
| Title: Internal Reporting of | Effective Date: 09/22/2021 | |
| Potential Compliance Matters | Previous Versions: 10-05-20; 05-11-18; 12-6-17; 2-10-17; 11-30-12; 10-12-11; 06-01-09; 08-01-08; 03-20-07; 01-23-07; 09-13-04; 07-26-04 | |
| | Approved By: Executive Leadership Team | |
| | Approval Date: 09/20/2021 | |

I. Scope:

This policy applies to Tenet Healthcare Corporation and its subsidiaries and affiliates other than Conifer Holdings Inc. and its direct and indirect subsidiaries (each, an "Affiliate"), any other entity or organization in which Tenet or an Affiliate owns a direct or indirect equity interest of greater than 50%, and any entity in which an Affiliate either manages or controls the day-to-day operations of the entity (each, a "Tenet Entity") (collectively, "Tenet").

II. Purpose:

To establish a process to report and investigate Potential Compliance Matters, including any concerns related to Tenet's Code of Conduct, Tenet's policies and procedures, Tenet's Quality, Compliance and Ethics Program Charter ("Charter"), laws and regulations relating to Federal Health Care Programs, including but not limited to the Anti-Kickback Statute and Stark law and/or any possible violations of the federal securities laws.

III. Definitions:

Federal Health Care Program: Any plan or program that provides health benefits, whether directly, through insurance, or otherwise, which is funded directly, in whole or in part, by the United States Government including, but not limited to: Medicare, Medicaid/MediCal, managed Medicare/Medicaid/MediCal, TriCare/VA/CHAMPUS, SCHIP, Federal Employees Health Benefit Plan, Indian Health Services, Health Services for Peace Corp Volunteers, Railroad Retirement Benefits, Black Lung Program, Services Provided to Federal Prisoners, and Pre-Existing Condition Insurance Plans (PCIP).

Potential Compliance Matter (PCM): A potential violation of our values, our Code of Conduct, our policies and procedures, the requirements of Tenet's Compliance Program Charter, or laws and regulations relating to Federal health care programs. Tenet's Code of Conduct and Exhibit A provide some examples of PCMs.

IV. Policy:

Tenet requires all employees, volunteers, governing board members and contractors to report PCMs immediately upon discovery or notification of the same.





| Manual/Library Name: | No: COMP-RCC 4.21 | |
|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Regulatory Compliance | Page: 2 of 5 | |
| Title: Internal Reporting of | Effective Date: 09/22/2021 | |
| Potential Compliance Matters | Previous Versions: 10-05-20; 05-11-18; 12-6-17; 2-10-17; 11-30-12; 10-12-11; 06-01-09; 08-01-08; 03-20-07; 01-23-07; 09-13-04; 07-26-04 | |
| | Approved By: Executive Leadership Team | |
| | Approval Date: 09/20/2021 | |

All Tenet employees have the right to report a PCM, and they will not face retribution or retaliation for good faith reporting of concerns. Any Tenet employee who engages in retaliatory behavior will be subject to disciplinary action up to and including termination.

V. Procedure:

- A. Except for notices of government investigation, Tenet employees may report PCMs to an immediate supervisor, Department Director, Facility Compliance Officer, assigned Regulatory or Operations Counsel, Tenet's Chief Compliance Officer or designee, or the Ethics Action Line (EAL). Notification protocols outlined in AD 1.24 Notification to Corporate Office are required for identified regulatory or accrediting organization activity.
 - a. The Ethics Action Line is an anonymous reporting mechanism and is available 24 hours a day, 7 days a week by calling 1-800-8Ethics (1-800-838-44270), by email at ethics@tenehealth.com, mobile app or through links on the employee portal.
 - b. A supervisor or Department Director receiving a report of a PCM is responsible for immediately escalating the report to the Facility Compliance Officer or Chief Compliance Officer as appropriate.
- B. The Chief Compliance Officer, Facility Compliance Officer, Compliance Investigations Officer or designee is responsible for ensuring an incident report is opened in the compliance tracking module, as appropriate, and the matter is fully investigated, documented and resolved, including reporting to outside agencies and/or plan sponsors as needed, prior to closing the matter in the compliance tracking module.

VI. Enforcement:

All employees whose responsibilities are affected by this policy are expected to be familiar with the basic procedures and responsibilities created by this policy. Failure to comply with this policy will be subject to appropriate performance management pursuant to all applicable policies and procedures, up to and including termination. Such performance management may also include modification of compensation, including any merit or discretionary compensation awards, as allowed by applicable law.

VII. References:





| Manual/Library Name: | No: COMP-RCC 4.21 | |
|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Regulatory Compliance | Page: 3 of 5 | |
| Title: Internal Reporting of | Effective Date: 09/22/2021 | |
| Potential Compliance Matters | Previous Versions: 10-05-20; 05-11-18; 12-6-17; 2-10-17; 11-30-12; 10-12-11; 06-01-09; 08-01-08; 03-20-07; 01-23-07; 09-13-04; 07-26-04 | |
| | Approved By: Executive Leadership Team | |
| | Approval Date: 09/20/2021 | |

Code of Conduct (DTR)

Quality, Compliance, and Ethics Program Charter (DTR)

AD 1.24 Notifying Home Office of Regulatory/Accreditation Contacts (Policy)

COMP-RCC 4.35 Reporting of Overpayments to Federal Health Care Programs (Policy)

HR.ERW.08 No Retaliation (Policy)

COMP-RCC 4.21.PR.06 Significant Events Review Committee (SERC) (Procedure)

VIII. Attachments

Examples of Potential Reportable Compliance Matters





| Manual/Library Name: | No: COMP-RCC 4.21 | |
|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Regulatory Compliance | Page: 4 of 5 | |
| Title: Internal Reporting of | Effective Date: 09/22/2021 | |
| Potential Compliance Matters | Previous Versions: 10-05-20; 05-11-18; 12-6-17; 2-10-17; 11-30-12; 10-12-11; 06-01-09; 08-01-08; 03-20-07; 01-23-07; 09-13-04; 07-26-04 | |
| | Approved By: Executive Leadership Team | |
| | Approval Date: 09/20/2021 | |

Exhibit A – Examples of Potential Compliance Matters

| Is Documented, Charged and Billed Correctly | | | |
|---------------------------------------------|---------------------------------------------------|-------------------------|--|
| Inappropriate coding | Inappropriate charging/billing | | |
| Inappropriate claims submission | Inappropriate charge code selection/charge master | | |
| False or fraudulent documentation matters | Concerns raised by Medicare Administrative | | |
| | Contractor | | |
| Is Provided in an Approved Facility | Promotes Patient Rights | Is Reimbursed Correctly | |
| Accreditation matters | HIPAA or Patient Privacy matters | Overpayments | |
| Provider Based status | EMTALA matters | Cost reporting matters | |

Is Provided Without Financial Incentives

Physician Arrangement matters, such as potential violations of the Stark law or Anti-kickback statute Potential failure to meet Business Operations standards (Accounting, Sarbanes-Oxley, etc.)
Patient Inducement

| Is Medically Necessary | Is Provided by Qualified Physicians/Staff |
|-----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|
| Medical necessity matters Correct level of care | Medical Staff Credentialing and Privileging Appropriate licensed staff |
| Failure to utilize Tenet-required compliance software (e.g., CARDS, Order Checker, MASS, INTERQUAL, etc.) | Approprime ucensea sugj |

| Meets Quality Standards | | |
|-------------------------|----------------|--|
| Quality of care matters | Drug diversion | |

Note: This list contains examples of high-level categories of potential PCMs and is by no means exhaustive. If you have any questions regarding whether a matter is reportable, please contact your Compliance Officer or the Ethics and Compliance Department.