

SOUTHWEST REGIONAL REHABILITATION CENTER CODE OF CONDUCT

I. INTRODUCTION

Southwest Regional Rehabilitation Center ("the Center") is committed to providing quality care to our patients. As part of this endeavor, we must demonstrate consistently that we act with absolute integrity in the way we do our work and conduct our business.

This Code of Conduct (the "Code") is intended as a means of providing guidance to ensure that our work is done in an ethical and legal manner. It emphasizes the shared common values, which guide our actions. It contains resources to help resolve any questions about appropriate conduct in the work place. Please review it thoroughly. Your adherence to its spirit, as well as its specific provisions, is absolutely critical to our future.

If you have questions regarding this Code or encounter any situation, which you believe violates the law, Center policy, or the provisions of this Code, you should immediately consult your supervisor, a member of the Compliance Committee, a member of the Management Team, the Corporate Compliance Officer, or call the Compliance Hot Line at (269) 441-4170. You have our personal assurance there will be no retribution for asking questions or raising concerns about the Code or for reporting possible improper conduct.

We are committed to the ideals expressed within this Code of Conduct. We are equally committed to assuring that our actions consistently reflect our words. In this spirit, we want this organization to be a family of men and women of shared values, and we expect all of our colleagues' actions to reflect the high standards set forth in this Code of Conduct. We also understand, however, that no code of conduct can substitute for our own internal sense of fairness, honesty, and integrity. We ask you to assist us and all of our colleagues in this organization in supporting the values and principles, which are critical to our achieving our Mission.

II. MISSION AND VALUES STATEMENT

- 2.1. Above all else, we are committed to the care and improvement of human life. In recognition of this commitment, we continue to strive to deliver high quality, cost effective health care services in collaboration with and support of other organizations within the community we serve. In pursuit of our Mission, we believe the following value statements are essential and timeless.
 - a. We recognize and affirm the unique and intrinsic worth of each individual.

- b. We treat all those we serve with respect, compassion and kindness.
- c. We act with absolute honesty, integrity, and fairness in the way we conduct our business and our professional service.
- d. We trust our colleagues as valuable members of our healthcare team and pledge to treat one another with loyalty, respect, and dignity.

III. PURPOSE OF OUR CODE OF CONDUCT

- 3.1. This Code of Conduct is intended to provide guidance to all Center team members, volunteers, and medical staff (collectively referred to as "Colleagues") and to assist us in carrying out our daily activities within appropriate ethical and legal standards. These obligations apply to our relationships with patients, affiliated physicians, third-party payers, subcontractors, independent contractors, vendors, consultants, and one another.
- 3.2. This Code is a critical component of the Center's overall Compliance Program, and has been developed to ensure that we meet our ethical standards and comply with applicable laws and regulations, including federal health care program requirements.
- 3.3. The Code is intended to be a statement that is comprehensive and easily understood. In some instances, the Code deals fully with the subject covered. In many cases, however, the subject discussed has so much complexity that additional guidance is necessary for those directly involved with the particular area to have sufficient direction. In this regard, we remind everyone that a full copy of the Corporate Compliance Program, as well as the Center's policies and procedures, is readily available to all colleagues and can be referred to for additional guidance in many areas.
- 3.4. Though the concept of management autonomy is promoted with all our affiliates, consultants, etc., the policies and practices set forth in this Code are mandatory and must be followed by all.

IV. LEADERSHIP RESPONSIBILITIES

- 4.1. While all Colleagues are obligated to follow our Code, we expect our Board of Trustees, Officers, Managers and Medical Staff to lead by example and help to create a culture within the Center that promotes the highest standards of ethics and compliance. This culture must encourage everyone in the organization to raise concerns when they arise. We must never sacrifice ethical and compliant behavior in the pursuit of business objectives.

V. COMMITMENT TO INTERESTED PARTIES

- 5.1. The Center affirms the following commitments:
- a. To the community it serves –The Center is committed to understanding the particular needs of the community it serves and to providing the community with safe, quality, and cost-effective medical care. The Center recognizes that it has a responsibility to assist people in need and proudly supports charitable contributions and worthy causes within the community it serves.
 - b. To its patients –The Center will provide safe, quality and cost-effective medical care that is compassionate and promptly delivered.
 - c. To its colleagues –The Center is committed to a work environment, which treats all individuals with fairness, dignity, and respect, and affords them an opportunity to develop professionally, in a setting in which all ideas are valued.
 - d. To its employed and affiliated physicians –The Center is committed to a work environment, which has excellent facilities, modern equipment and outstanding professional support.
 - e. To its third-party payors –The Center will work with its third-party payors in a manner, which reflects its commitment to contractual obligations and reflects its shared concern for quality healthcare, efficiency and cost effectiveness.
 - f. To its volunteers –The Center recognizes that voluntary assistance to the needs of patients and their families is an integral part of the fabric of healthcare, the Center is committed to ensuring that its volunteers understand the value of their volunteer work and receive recognition for their volunteer efforts.
 - g. To its regulators - The Center is committed to an environment in which compliance with rules, regulations, and sound business practices are woven into the corporate culture. The Center accepts the responsibility to self-govern and monitor adherence to state and federal laws and to its Program and Code of Conduct.

VI. RELATIONSHIPS WITH OUR HEALTHCARE PARTNERS

6.1. Patients

- a. Patient Care and Rights - Our Mission to provide quality health care and services to all of our patients.

1. We treat all patients with respect and in a manner that preserves their dignity, autonomy, self-esteem, civil rights, and involvement in their own care.
2. We provide equal access to compassionate care and treatment to all patients regardless of race, color, religion, sex, age, sexual orientation, physical or mental disability, source of payment, national origin, or other classifications protected by law.
3. We will provide patients with clinical care that is appropriate, safe, and in compliance with applicable professional standards and patient health care needs, not on patient or organization economics.
4. We assure patients' involvement in all aspects of their care and obtain informed consent for treatment. As applicable, we will provide each patient with a clear explanation of care including, but not limited to, diagnosis, treatment plan, right to refuse or accept care, care decision dilemmas, estimates of treatment costs, alternative care plans, and an explanation of the risks and benefits associated with available treatment options.
5. We will accord patients and their representative's appropriate confidentiality and privacy.
6. We will provide opportunities for patients to voice their concerns and complaints and strive to alleviate patient concerns and resolve patient complaints.
7. Center colleagues will continue to receive education on patient rights issues and their role in supporting patient's rights.

b. Patient information

1. We collect information about patients' medical condition, history, medication, and family illnesses to provide the best possible care.
2. We realize the sensitive nature of patient information and are committed to maintaining its confidentiality.
3. We will not use or disclose protected health information unless the patient has provided written authorization to the use or disclosure, or the use or disclosure is necessary to

serve the patient or to perform one's job function, or the use or disclosure is required by law.

4. We will never use or disclose confidential information in violation of the privacy rights of our patients.
5. We will not deny a patient's legal right to access their medical records.

6.2. Affiliated Physicians

- a. Business Arrangements. Any business arrangement with a physician must be structured to ensure precise compliance with legal requirements. Such arrangements must be in writing and approved by the Center's legal counsel.
- b. Referrals. In order to legally and ethically meet all standards regarding referrals and admissions, the Center will not pay for referrals, nor accept payment for referrals that we make. Individuals affiliated with the Center are prohibited from soliciting or receiving anything of value, directly or indirectly, in exchange for the referral of patients. Similarly, when making patient referrals to another healthcare provider, Center colleagues may not take into account the volume or value of referrals that the provider has made (or may make) in return.

6.3. Subcontractors, Suppliers, and Institutions

- a. The Center must manage its subcontractor and supplier relationships in a fair and reasonable manner, consistent with all applicable laws and good business practices.
- b. The Center will promote competitive procurement of supplies and services to the maximum extent practicable.
 1. The selection of subcontractors, suppliers, and vendors is made on the basis of objective criteria including quality, technical excellence, price, and delivery, adherence to schedules, service, and maintenance of adequate sources of supply.
 2. Purchasing decisions are based upon the supplier's ability to meet our needs and not on personal relationships and friendships.
 3. The Center will always employ the highest ethical standards and business practices in source selection, negotiation,

determination of contract awards, and the administration of all purchasing activities.

- c. The Center's policy is that all contractors and vendors who provide items or services to the Center must comply with all applicable laws and Center policies. The Center's colleagues who work with consultants, contractors, and vendors or who process their invoices, should be aware that the Center's compliance policies apply to outside companies as well. Center colleagues are encouraged to monitor carefully the activities of outside contractors and report any irregularities, questions, or concerns to the Compliance Officer.

VII. COMPLIANCE FOR ALL COLLEAGUES

7.1. Generally.

- a. The Center provides varied health care services and may provide these services only pursuant to appropriate federal and state laws and regulations.
- b. We will comply with all applicable laws and regulations. All colleagues, including all medical staff members, privileged practitioners, and contract service providers must be knowledgeable about and ensure compliance with all laws and regulations, including all state and federal health care program requirements and the Center's Policies and Procedures including this Code of Conduct and policies referenced in it.
- c. All colleagues are expected to immediately report violations or suspected violations of any law or regulation to a supervisor, member of management, or the Corporate Compliance Officer.
- d. Center colleagues will be informed about stated areas of potential compliance concern. The Center will be diligent, in the face of state and federal agency guidance, about reviewing these elements of our system to ensure their correctness.
- e. The Center will attempt to provide its colleagues with the information and education they need to comply with all applicable laws and regulations. The Compliance Officer can provide colleagues with information on the governing laws and regulations and can direct questions or concerns to the proper person.

7.2. Federal and State Tax-Exempt Status

- a. The Center is a not-for-profit entity that is exempt from federal

taxation pursuant to Section 501(c)(3) of the Internal Revenue Code.

- b. All Colleagues who contract with or on behalf of the Center must do so in a manner that is consistent with the federal tax-exempt status.
- c. The Center's federal tax-exempt status may be in jeopardy if it is excluded from participation in the Medicare and Medicaid program.
- d. Violations of any law or regulation governing the Medicare and Medicaid program, the anti-referral provisions of any state or federal law by Colleagues will not be tolerated.
- e. Violations of the aforementioned laws may subject the Center and the Colleague involved to criminal prosecution and significant civil penalties.
- f. Supervisors must ensure that colleagues that report to them receive adequate education of how the laws and regulations affect their duties. Supervisors must also make certain that colleagues are aware of their duty to report suspected violations.
- g. All Colleagues must make a good faith effort not to jeopardize the Center's exemption from certain state and local taxes, including but not limited to, state income tax, state sales tax and local real estate taxes.

7.3. Billing for Services

- a. Coding and Billing for Services. The Center will take great care to assure that all billings to government and to private insurance payors reflect truth and accuracy, and conform to all pertinent federal and state laws and regulations.
 - 1. All Colleagues are prohibited from knowingly presenting, or causing to be presented, claims for payment or approval, which are false, fictitious, or fraudulent.
 - 2. The Center will operate oversight systems designed to verify that claims are submitted only for services actually provided and that services are billed as provided. These systems will emphasize the critical nature of complete and accurate documentation of services provided. As part of our documentation effort, we will maintain current and accurate medical records.
 - 3. Each Colleague who is involved in submitting charges,

preparing claims, billing and documenting services is expected to maintain the highest standards of personal, professional, and institutional responsibility.

- i. Each of these individuals is expected to monitor compliance with applicable billing rules.
- ii. Any false, inaccurate, or questionable claims should be reported immediately to a supervisor or to the Corporate Compliance Officer.

4. We do not:

- i. Bill for items and services not rendered or not medically necessary;
- ii. Misrepresent the type or level of service rendered;
- iii. Bill for services rendered by other providers; or
- iv. Misrepresent a diagnosis in order to obtain payment.

b. Cost Reports. As a result of its participation in various government insurance programs, the Center is required to submit certain reports of its costs of operation. Federal and state laws define what costs are allowable and outline the appropriate methodologies to claim reimbursement for the cost of services provided to program beneficiaries. The Center will comply with all federal and state laws relating to the filing of its cost reports.

c. Billing Questions or Conflicts. When Colleagues receive a question from a patient or third party payer about an invoice or charge, they will promptly review and address the question, if authorized to do so, or will refer the matter to an individual who is so authorized.

7.4. Political Activity

- a. Political contributions and activities may jeopardize the Center's tax-exempt status. Therefore, no funds or assets, including the work time of any team member, will be loaned, contributed or made available directly or indirectly, to any political party or to the campaign of any candidate for federal, state, or local office.
- b. As private citizens, Center Colleagues may participate in the political process. It is important to separate personal political activities in order to comply with the appropriate rules and regulations relating to lobbying or attempting to influence

government officials. When speaking on public issues, team members must be clear that comments or statements made are those of an individual and not of the Center.

- c. The Center may speak out on issues that impact our business and senior management is responsible for developing our position on legislative and regulatory matters.
- d. If you have any questions, concerns, or if you are contacted by legislators, the press, regulators, or other third parties regarding our position on public issues, please refer them to the Center's President and CEO or the Chief Operating Officer.

7.5. Antitrust

- a. Antitrust laws are designed to preserve and foster fair and honest competition within the healthcare industry. To accomplish this goal, the language of these laws is deliberately broad, prohibiting such activities as "unfair methods of competition" and agreements "in restraint of trade". Such language gives enforcement agencies the right to examine many different business activities to judge the effect on competition.
- b. The Center's policy requires full compliance with all antitrust laws. No Colleague, under any circumstances, has the authority to approve a violation of the law. Anyone who willingly violates, or knowingly permits a subordinate to violate any antitrust law, is subject to disciplinary action, including dismissal.
- c. The greatest danger for antitrust violations comes from contacts with competitors. Therefore, you should take care when disclosing information concerning the demographic information of the patients, services provided by the Center, future business plans of the Center, prices, reimbursements or employee's salaries.

7.6. Marketing and Advertising

- a. Marketing and advertising activities may be conducted to educate the public, provide information to the community, increase awareness of Center services or for recruitment purposes. The Center will only present truthful, fully informative, and non-deceptive information through its marketing and advertising resources and materials.

7.7. Fund Raising

- a. The Center does not authorize any individual or business to use its'

name in any fund-raising activities not previously approved by appropriate management.

- b. Colleagues cannot make any false, deceptive, or misleading statement in connection with a solicitation of funds or a sale of goods or services to benefit the Center.
- c. It is against Center policy to use any sponsor or endorsement in connection with fund-raising activities unless the sponsor or endorsement has been verified and approved by appropriate management.

7.8. Copyrights

Individuals associated or affiliated with the Center may only make copies of copyrighted materials pursuant to Center policies on such matters.

7.9. Government Inquiries and Investigations

- a. The Center will be forthright in dealing with governmental and third party inquiries and investigations.
- b. Authorized requests for information will be answered with complete, factual, and accurate information, and all individuals on behalf of the Center will cooperate with and be courteous to all investigators and provide them with the information to which they are entitled.
- c. Individuals shall never conceal, destroy, or alter any documents, lie, or make misleading statements.
- d. Colleagues shall not prevent another colleague from providing accurate information, or obstruct, mislead, or delay the communication of information or records relating to a possible violation of law.
- e. All communications and activities under this Section shall be coordinated with the Center Compliance Officer.

7.10. Accrediting Bodies

The Center deals with all accrediting bodies in a direct, open and honest manner. No one should ever take any action in connection with relationships with accrediting bodies that could mislead the accreditor or its survey teams, either directly or indirectly. Where the Center has or determines to seek any form of accreditation, obviously all standards of the accrediting group are important and must be followed.

VIII. BUSINESS INFORMATION AND INFORMATION SYSTEMS

8.1. Accuracy, Retention, and Disposal of Documents and Records

Everyone is responsible for the integrity and accuracy of the Center's documents and records, not only to comply with regulatory and legal requirements but also to ensure that records are available to reflect and/or defend our business practices and actions.

- a. We will not alter or falsify information on any record or document.
- b. We will retain and only destroy medical and business documents and records in accordance with the law and our record retention policy.
 1. Medical and business documents include paper documents such as letters and Memos, computer-based information such as e-mail or electronic medical records, and any other medium that contains information about the organization or its business activities.

8.2. Confidential Information

- a. Confidential information about the Center's operations is a valuable asset.
 1. Confidential information, includes personnel data maintained by the organization, patient lists and clinical information, pricing and cost data, information pertaining to affiliations, financial data, research data, strategic plans, marketing strategies, techniques, employee lists, vendor agreements, proprietary computer software, and other information about the Center's operations.
- b. Although one may use confidential information to perform one's job, it must not be shared with third parties unless proper authorizations have been executed and the third party has a legitimate need to know this information and has agreed in writing to maintain the confidentiality of the information.
- c. This provision does not restrict the right of a colleague to disclose, if he or she wishes, information about his or her own compensation, benefits, or terms and conditions of employment.

8.3. Electronic Media and Communication Systems

- a. All Center electronic media and communication systems, including

computer hardware and software, telephone, email, Internet, and voice mail are the property of the organization and are to be primarily used for business purposes.

- b. Although the Center permits limited and reasonable personal use of electronic media and communications systems, colleagues should not assume these communications are private.
- c. Patient or confidential information should not be transmitted through email or the Internet unless appropriate security measures are in place and Center policy permits such transmission.
- d. Colleagues who abuse our electronic media and communications systems or use them excessively for non-business purposes may lose these privileges and be subject to disciplinary action.

8.4. Financial Reporting and Records

The Center has established and maintained a high standard of accuracy and completeness in the documentation and reporting of all financial records. These records serve as a basis for managing its business and are important in meeting its obligations to patients, colleagues, shareholders, suppliers, and others and are necessary for compliance with tax and financial reporting requirements.

- a. All financial information must reflect actual transactions and conform to generally accepted accounting principals.
- b. The Center maintains a system of internal controls to provide reasonable assurances that all transactions are executed in accordance with management's oversight and are recorded in a proper manner so as to maintain accountability of the organization's assets.

IX. WORKPLACE CONDUCT AND EMPLOYMENT PRACTICES

9.1. Conflict of Interest

A conflict of interest may occur if your outside activities or personal interests influence or appear to influence your ability to make objective decisions in the course of your job responsibilities. A conflict of interest may also exist if the demands of any outside activities hinder or distract you from the performance of your job or cause you to use Center resources (i.e., time, computers, facilities, supplies) for non-Center purposes. It is your obligation to ensure that you remain free of conflicts of interest in the performance of your responsibilities at the Center. If you

have any question about whether an outside activity might constitute a conflict of interest, you should obtain the approval of your supervisor before pursuing the activity.

9.2. Controlled Substances

Some Colleagues routinely have access to prescription drugs, controlled substances and other medical supplies. Many of these substances are governed and monitored by specific regulatory organizations and must be administered by physician order only. It is extremely important that these items be handled properly and only by authorized individuals to minimize risks to us and to patients. If you become aware of the diversion of drugs from the Center or from another institution, organization, or source associated or affiliated with the Center, you must report the incident immediately.

9.3. Diversity and Equal Employment Opportunity

- a. Our colleagues provide us with a wide complement of talents, which contribute greatly to our success. We are committed to providing an equal opportunity work environment where everyone is treated with fairness, dignity, and respect. We will comply with all laws, regulations, and policies related to non-discrimination in all of our personnel actions. Such actions include hiring, staff reductions, transfers, terminations, evaluations, recruiting, compensation, corrective action, discipline, and promotions.
- b. No one shall discriminate against any individual with a disability with respect to any offer, or term or condition, of employment. We will make reasonable accommodations to the known physical and mental limitations of otherwise qualified individuals with disabilities.

9.4. Harassment and Workplace Violence

- a. Each Center colleague has the right to work in an environment free of harassment. We will not tolerate harassment by anyone based on the diverse characteristics or cultural backgrounds of those who work with us. Degrading or humiliating jokes, slurs, intimidation, or other harassing conduct is not acceptable in our workplace.
- b. Any form of sexual harassment is strictly prohibited. This prohibition includes unwelcome sexual advances or requests for sexual favors in conjunction with employment decisions. Moreover, verbal or physical conduct of a sexual nature that interferes with an individual's work performance or creates an intimidating, hostile, or offensive work environment has no place within the Center.

- c. Harassment also includes incidents of work place violence. Work place violence includes robbery and other commercial crimes, stalking cases, violence directed at the employer, terrorism, and hate crimes committed by current or former colleagues. As part of our commitment to a safe work place for our colleagues, we prohibit colleagues from possessing firearms, other weapons, explosive devices, or other dangerous materials on the Center's premises. Colleagues who observe or experience any form of harassment or violence should report the incident to their supervisor, a member of management, or the Corporate Compliance Officer.

9.5. Work place Health and Safety

All Center facilities must comply with government regulations and rules and with Center policies and facility practices that promote the protection of work place health and safety. Our policies have been developed to protect you from potential work place hazards. You should become familiar with and understand how these policies apply to your specific job responsibilities and seek advice from your supervisor or the Safety Officer whenever you have a question or concern. It is important for you to advise your supervisor or the Safety Officer of any serious work place injury or any situation presenting a danger of injury so that timely corrective action may be taken to resolve the issue.

9.6. License and Certification Renewals

Colleagues and individuals retained as independent contractors in positions which require professional licenses, certifications, or other credentials are responsible for maintaining the current status of their credentials and shall comply at all times with federal and state requirements applicable to their respective disciplines. To assure compliance, the Center will require proof of current licensure or credential status. The Center will not allow any colleague or independent contractor to work without valid, current licenses or credentials.

9.7. Substance Abuse and Mental Acuity

To protect the interests of our colleagues and patients, we are committed to an alcohol and drug-free work environment. All colleagues must report for work free of the influence of alcohol and illegal drugs. Reporting to work under the influence of any illegal drug or alcohol, having an illegal drug in your system, or using, possessing, or selling illegal drugs while on Center work time or property, may result in immediate termination and/or loss of privileges, where applicable. The Center reserves the right to use drug testing as a means of enforcing this policy.

It is also recognized that individuals may be taking prescription drugs, which could impair judgment or other skills required in job performance. If you have questions about the effect of such medication on your performance consult with your supervisor.

9.8. Payments, Discounts and Gifts

a. Generally.

It is illegal for the Center or its affiliates to provide or accept “remuneration” in exchange for referrals of patients. The law also bars the payment or receipt of such remuneration in return for directly purchasing, leasing, ordering, or recommending the purchase, lease, or ordering of any goods, facilities, services, or items covered under the benefits of Medicare, Medicaid or other payor sources.

These “fraud and abuse” or “anti-kickback” laws are designed to prevent fraud in the Medicare and Medicaid programs and abuse of the public funds supporting the programs. The Center is committed to carefully observing the anti-kickback rules and avoiding any practice that may be interpreted as abusive.

Colleagues involved with finance functions, purchasing and facilities operation, laboratory, pharmacy, medical staff administration, and any activity that includes entering into a personal service contract are expected to be vigilant in identifying potential anti-kickback violations and bringing them or any related questions to the attention of the Compliance Officer.

b. Anti-Kickback laws

The federal and state anti-kickback laws are broadly written to prohibit the the Center and its representatives from knowingly and willfully offering, paying, asking, or receiving any money or other benefit, directly or indirectly, in return, for obtaining or rewarding favorable treatment in connection with the award of a government contract.

The anti-kickback laws must be considered whenever something of value is given or received by the Center or its representatives or affiliates, that is, in any way connected to patient services. This is particularly true when the arrangement could result in over-utilization of services or a reduction in patient choice. Even if only one purpose of a payment scheme is to influence referrals, and otherwise it appears to be a legitimate, appropriate business arrangement, the payment may be unlawful.

Since there are many transactions that may violate the anti-kickback rules, the Center has adopted the following requirements to promote compliance

with the Anti-Kickback laws:

1. No one acting on behalf of the Center may offer gifts, loans, rebates, services, or payment of any kind to a person or entity who refers patients to the Center, or to a patient, without consulting the Compliance Officer.
2. Rentals of space and equipment must be at fair market value, without regard to the volume or value of referrals that may be received by the Center in connection with the space or equipment.
3. Agreements for professional services, management services, and consulting services must be in writing, have at least a one-year term, and specify the compensation in advance.
4. Payment based on a percentage of revenue should be avoided in many circumstances. Any questions about these agreements should be directed to the Compliance Officer.
5. Joint ventures with physicians or other health care providers, or investments in other health care entities, must be reviewed by the Compliance Officer.

c. Gifts and Business Courtesies

1. Colleagues must never solicit any tips, gifts or personal gratuities from patients.
2. Generally the Center discourages the acceptance of gifts, favors or hospitality from payors, vendors, suppliers, physicians and other healthcare providers; however, the acceptance of modest gifts or entertainment of nominal value is allowed so long as it complies with Center policy.
3. As a general rule, you may not ask for or take, directly or indirectly, for yourself or anybody in your household, any gift, gratuity, service, entertainment, travel, lodging, transportation, loan, loan guarantee, discount, or other thing of monetary value from anyone who has or is seeking a business relationship with the Center. There are limited exceptions to this rule, which are detailed in the Center's policy on Gifts and Business Courtesies.
4. The Center prohibits the use of gifts or other incentives to improperly influence relationships or business outcomes with

the Center. You may never give or offer to give cash or cash equivalents, such as gift certificates. The Center may sponsor events and offer reasonable and appropriate meals and entertainment in accordance with Center policy on Gifts and Business Courtesies.

5. Colleagues are expected to be familiar with and to consult the Center's policy on Gifts and Business Courtesies.

X. USING THE COMPLIANCE PROGRAM

10.1. Our Code of Conduct

The Code of Conduct outlines the appropriate behavior for all colleagues and is the heart of the Center's Corporate Compliance Program. The Code is intended to assist Center colleagues in carrying out their daily activities within appropriate moral, ethical, and legal standards. It is not intended to cover every situation, but is intended to help individuals make the right decisions and/or ask the right questions. This Code and associated policies also apply to the Center's relationships with subcontractors, independent contractors, vendors and consultants. Adherence to and support of the Center's Code of Conduct and participation in related activities and training will be considered in decisions regarding hiring, promotion; and compensation for all candidates and colleagues.

10.2. Duty to Know and Understand

It is the duty of all individuals to know and understand the ethical standards, legal standards, and Center policies applicable in performing their daily tasks.

10.3. Duty to Comply

It is the duty of all individuals to comply with applicable laws, rules, regulations, and the Code. Failure to do so may subject one to disciplinary action.

10.4. Duty to Report Actual or Suspected Violations

Individuals must report to their Supervisor or the Compliance Officer, actual or suspected violations by colleagues, vendors, and consultants of applicable law, rules, regulations, or the Code. The Center provides multiple reporting lines to ensure that individuals are comfortable with whom they communicate compliance issues.

10.5. Acknowledgement.

All colleagues must sign an acknowledgement confirming they have received a copy of the Center's Code of Conduct and Corporate Compliance Program and understand it represents mandatory policies of the Center. New colleagues will be required to sign this acknowledgment as a condition of employment.