

## **TOWER HEALTH VENDOR CODE OF CONDUCT**

This Vendor Code of Conduct (“Code”) is applicable to the business partners of; Phoenixville Hospital, LLC; Pottstown Hospital, LLC; Reading Hospital (including Reading Hospital Rehabilitation at Wyomissing), Tower Health at Home, Tower Health Urgent Care, TowerDirect, and Tower Health Medical Group, who provide goods and/or perform services for one or more of the hospitals (“Hospital”). Hospital recognizes our responsibility to conduct all our business in accordance with legal and ethical standards. This Code communicates our minimum standards to which we expect all our Vendors to adhere when doing business with us. It is Vendor’s responsibility to ensure that all of its personnel, and authorized subcontractors, who conduct business with us are apprised of the contents of this Code and conduct themselves accordingly. If a Vendor fails to comply with this Code, it may result in the loss of Vendor’s privileges and exclude Vendor from further transactions with Hospital, at its discretion.

### **1.0 Legal Compliance**

Our Vendors must comply with all federal, state, and local laws and regulations, and our policies applicable to the Vendor’s business and the rendering of services to Hospital. We expect our Vendors to use good judgment and common sense in complying with all applicable laws, rules, and regulations.

Vendor will immediately report, in good faith, any activity or conduct that it discovers through the course of its services that violates or could violate Tower Health’s Compliance Plan or otherwise raises a compliance concern. Please see Section 17 for reporting instructions.

### **2.0 Conflict of Interest**

Conflicts of interest, or the appearance of conflicts, between Vendor and any Hospital personnel should be avoided. Hospital employees must act in the best interests of Hospital and must have no relationships, financial or otherwise, with any Vendor that might conflict or appear to conflict with the employees’ duty to act in Hospital’s best interest. If a Vendor’s employee has a family or other personal relationship with a Hospital employee, or if a Vendor has any business or other relationship with a Hospital employee, the Vendor must disclose this fact to Hospital and discuss whether there might be a conflict of interest to resolve. It is not possible to list every type of conflict of interest; however, when in doubt, the Vendor should timely notify Hospital with the facts of the situation so that we may attempt to mitigate or resolve the conflict.

### **3.0 Gifts, Gratuities, and Kickbacks**

When doing business with Hospital, Vendors are prohibited from exchanging gifts or gratuities with Hospital employees beyond common business courtesies. Our employees may accept gifts that do not exceed the value of \$50 in any one-year period. Gifts or items of any value must never be offered to or accepted from government employees.

Under no circumstances is a Vendor allowed to accept or give kickbacks when obtaining or awarding contracts, services, referrals, goods, or business. A kickback means to willfully offer,

receive, request or pay anything of value, even nominal value, in order to induce or reward referrals of business including goods or services.

We expect all Vendor representatives in the pharmaceutical, medical supply, and medical device industries to adhere to the code of conduct on interactions with healthcare professionals as published by the Pharmaceutical Research and Manufacturers of America (PhRMA) and Advanced Medical Technology Association (AdvaMed), as applicable.

#### **4.0 Privacy and Security**

Hospital and its Vendors are required to maintain the privacy and security of Hospital patients and personnel in accordance with federal and state laws and regulations and Hospital's privacy and security policies.

Vendors whose work requires access to, the use of, or disclosure of Protected Health Information ("PHI"), as defined by the Health Insurance Portability and Accountability Act (HIPAA), implementing regulations, and any ensuing amendments, are required to sign Hospital's Business Associate Agreement or equivalent.

Vendors are responsible for ensuring that their employees and contractors who provide goods and/or services to Hospital know about and comply with these privacy and security requirements and, as required, sign relevant agreements evidencing the same. Vendors are required to immediately report privacy and security incidents to the Compliance Hotline; see Section 17.

Information Security Vendors have a responsibility to manage risk and implement reasonable and appropriate security measures. In the event that a security incident does occur, we expect Vendor to cooperate fully with Hospital in, and not limited to, any investigation, needed notifications, mitigation, and corrective action, and according to any relevant requirements contained in the Business Associate Agreement between Vendor and Hospital. Because cybersecurity threat is a critical consideration, we expect that our Vendors will be:

- Continuously analyzing cyber threats and vulnerabilities;
- Exercising due diligence to monitor their environment for any impacts;
- Educating their workforce so everyone understands the importance of security controls and notification; and
- Implementing effective administrative, technical and physical controls and assessing the effectiveness of those controls.

#### **5.0 Proprietary and Confidential Information**

Vendors with access to any proprietary or confidential Hospital information, including but not limited to pricing, costs, operating systems, technology, business plans, and strategy, must sign Hospital's Non-Disclosure/Confidentiality Agreement, or equivalent.

#### **6.0 Fair Competition**

Hospital expects that Vendor develops and provides its products and services in a fair, ethical,  
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and legal manner.

### **7.0 Accuracy of Records**

Vendors must maintain accurate and complete records of all matters related to its business with Hospital, and shall make these records available to Hospital in accordance with applicable law, regulation, and contractual requirements. In addition, all records should be stored for the period of time required by relevant laws, rules, and/or regulations.

### **8.0 Employment and the Workplace**

Hospital expects Vendor to treat all of its employees and Hospital's employees with dignity and respect. Vendor must not discriminate against, sexually harass, mentally or physically coerce, verbally abuse or threaten any of its or Hospital's employees.

Vendors are also expected to cooperate with Hospital in maintaining a work environment free of possession, use, or distribution of alcohol and illegal drugs, and are expected to adhere to all OSHA laws. While working on Hospital's premises, Vendor employees shall abide by Hospital's rules pertaining to safety and security. Hospital prohibits all vendors, contractors, visitors and those on its premises from carrying any firearm or weapon, with the exception of on-duty law enforcement or correctional officers.

### **9.0 Use of Hospital Physical Assets**

Vendors may use Hospital's property and physical assets only to provide services or to fulfill contractual obligations to Hospital, with advance permission from Hospital. This property includes but is not limited to computers, email, internet/intranet, fax, phone and copiers. Vendor and its employees are prohibited from using these assets to send, receive or view inappropriate material including offensive, threatening, biased, or sexually explicit material.

All Hospital assets must be returned at the termination of Vendor services, or whenever requested by Hospital.

Vendor and its employees will not download any (personal or other) software to Hospital computers without prior written authorization from the appropriate Hospital personnel. Copying or unauthorized use of unauthorized software may be a violation of federal copyright laws resulting in civil and/or criminal liability.

Any User IDs and passwords issued to Vendor and its employees are for the exclusive use of the intended recipient, and for the specific business use for which they are issued. User IDs and passwords may not be shared with others and should not be accessible by other unauthorized persons.

Vendors must also promptly report any activities that may compromise the security and confidentiality of Hospital's data and/or information systems.

### **10.0 Visitation Policy**

Vendor and any subcontractors who are granted access to Hospital locations understand that

access is a courtesy. Admittance to any Hospital location is a privilege, not a right. Vendor and any of its subcontractors that conduct business with Hospital must do so in accordance with all Hospital-established policies and guidelines.

All Vendors visiting a Hospital location must have a scheduled appointment. Vendor may not make unauthorized, unscheduled, or unaccompanied business visits or meetings within Hospital. Vendor is in violation of this Code if Vendor goes to another location after completing a scheduled appointment or drops in on staff.

Vendor may not enter any inventory or supply room/area unless escorted by a member of Hospital staff.

If Vendor or any of its subcontractors will enter any patient care areas, they must be a member of IntelliCentrics. In addition, if Vendor or any of its subcontractors will enter any pediatric care or pediatric educational areas, then Vendor, upon request, must provide Hospital with the results of a Child Abuse History Clearance.

### **13.0 Infection Control Policies**

Vendor personnel whose activities require access to direct patient care environments are required to adhere to Hospital's infection control policies and procedures applicable to the areas visited.

### **14.0 Publicity**

Vendors are not permitted to use Tower Health's or Hospital's name, trademarks, or logos and the like in any promotional or advertising material without Hospital's prior written consent from an authorized Hospital employee.

### **15.0 Government Contracts**

Vendors working directly or indirectly on government contracts (for example, Medicare, Medicaid, state or municipal government employee benefit programs, etc.) have a special obligation to know and comply with all the terms of the government contract. In addition, Vendors must not submit false or fraudulent claims for payment, make any false statements or representations, or do business with excluded individuals or entities. Vendors must cooperate fully with any government requests for information.

### **16.0 Eligibility to Participate in Federal and State Health Care Programs**

Hospital will not conduct business with any Vendor that is excluded, debarred, or ineligible to participate in federal or state health care programs such as Medicare and Medicaid, or whose officers, directors or employees are excluded from participating in federal or state health care programs.

### **17.0 Reporting Potential Misconduct**

A Vendor or any Vendor employee having knowledge of any actual or potential violations of this Code, relevant Hospital policies, any Vendor contract, or applicable laws and regulations related

to work performed for Hospital, must bring this to the attention of Hospital by contacting the Tower Health Compliance Hotline, which is available 24 hours a day/seven days a week, by phone (toll-free) at 1-855-261-6653 or online at [www.towerhealth.ethicspoint.com](http://www.towerhealth.ethicspoint.com).

Tower Health strictly enforces its non-retaliation policy, protecting those who, in good faith, report suspected wrongdoing. Likewise, Vendors must also protect their employees who, in good faith, report potential wrongdoing.

### **18.0 Fraud, Waste, and Abuse**

Hospital will promptly investigate any reports of alleged violations of law, regulations or Hospital policies involving a Vendor or Vendor's employees, including allegations of fraud, waste, and abuse involving federal or state health care programs. Vendors are expected to fully cooperate in such investigations and, where appropriate, in taking corrective actions in response to confirmed violations.

The Federal False Claims Act and similar state laws make it a crime to present a false claim to the government for payment. These laws also protect "whistleblowers" – people who report noncompliance or fraud, or who assist in investigations, from retaliation. Hospital policy prohibits retaliation of any kind against individuals exercising their rights under the Federal False Claims Act or similar state laws.

### **19.0 Dealing with Independent Auditors**

Vendor will fully cooperate with any review/audit conducted by the Commonwealth of Pennsylvania Department of Health, the Comptroller General, or any other authorized federal, state or local agency.

### **20.0 Drug and Product Samples**

Drug samples are not permitted for inpatients. At no time shall Vendor leave drug samples anywhere within Hospital. Use of drug samples at a non-hospital location is subject to the location's individual policies and procedures and Hospital's policies.

Introduction of new products must be approved in advance by Supply Chain Management. Non-approved products/samples will be confiscated and result in Vendor's 30-day suspension from the facility.

### **21.0 Sustainability**

We encourage all Vendors to have an effective environmental policy and to endeavor to achieve this policy using the best available techniques; to implement this policy at all levels throughout the company; and to include a commitment to continual improvement in environmental performance, energy efficiency, and waste reduction.