Code of Conduct

2026

Piedmont

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You are part of the Piedmont Healthcare family, a group of talented and dedicated people who are committed to our patients, our organization, each other, and our community. Each one of you, regardless of your role, shares a common purpose to provide quality care to each patient in our hospitals, clinics, or physician practices. Together, we are dedicated to making a positive difference in every life we touch.

Piedmont's *Code of Conduct* defines the level of ethical behavior expected from each one of us, our staff, managers, volunteers, physicians, and members of our governing boards. These standards also apply to our business affiliates, associates and vendors, whose support is necessary in the work we do.

All of us must ensure that we consistently perform our duties in accordance with this Code and seek help or advice if we feel any compromise or threat to its fulfillment. We must never assume that someone else has already identified and addressed a question that concerns you; we ask that you act to ensure we can thoroughly review any concerns you have.

It is our commitment to you that we will take every step needed to identify and resolve threats to the integrity of our business and purpose.

Kevin Brown
President and Chief Executive Officer
Piedmont Healthcare, Inc.

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INTRODUCTION

Piedmont's Corporate Compliance Program and the Code of Conduct

Piedmont's Corporate Compliance Program is designed to identify, prevent, and correct the occurrence of illegal or unethical behavior. We understand that only as a collaborative team can we make the best decisions and provide a safe and supportive environment for patient care. This Code of Conduct demonstrates that we have strong ethical values, that we can be relied upon to do the right thing, and that we will act to correct any inappropriate behavior. Violations of the Code of Conduct and/or any Piedmont policies and procedures will be addressed in accordance with our policies and as required by law.

This code of conduct is based on four principles, with each principle supported by various standards. The four principles are as follows:

1. *DO WHAT IS RIGHT FOR OUR PATIENTS.*
2. *DO WHAT IS RIGHT FOR OUR ORGANIZATION.*
3. *DO WHAT IS RIGHT FOR EACH OTHER.*
4. *DO WHAT IS RIGHT FOR OUR COMMUNITY.*

Who is covered by the Code of Conduct?

The Code of Conduct applies to all Piedmont directors, officers, employees, volunteers, physicians, vendors and other agents who provide healthcare services on behalf of Piedmont. In this Code, these individuals are referred to as "Covered Persons." All are required to understand and abide by the laws which apply to their duties.

Piedmont's leaders are held to an even higher standard and are responsible for ensuring their business and clinical units operate in a manner consistent with this Code. Leaders are expected to be open to concerns about ethics and compliance, with a commitment to transparency without fear of retaliation. Leaders are also responsible for ensuring that they provide sufficient information and resources about relevant laws, guidelines, and Piedmont policies to comply with this Code.

The Code is designed to provide guidance, but it does not and cannot address every situation. More specific guidance may be found in Piedmont's policies and procedures, and also provided by Piedmont leaders and the Compliance Department.

What happens if a Covered Person violates the Code of Conduct?

The standards contained in this Code are important, and therefore any violation will be handled in accordance with Piedmont's Progressive Disciplinary Policy or other applicable policies and procedures of Piedmont and its medical staff. In addition, referral of certain matters may be made to regulatory agencies, as appropriate.

What can I do?

It is the obligation of every Covered Person to report any instance of a known or suspected violation of the Code. If anyone thinks the Code has been violated, they should contact their manager, the Chief Compliance Officer, or a Human Resources representative. Concerns may also be reported by using the Compliance Hotline at **1-800-466-0462**. All calls to the Hotline are confidential and anonymous. To ensure confidentiality, the Hotline is operated by an organization not affiliated with Piedmont, and calls are answered 24 hours a day, 7 days a week. Follow-up information is available by a return call to the Hotline. Concerns may also be submitted through the Compliance site.

STEP 1
When you call the hotline, it will be answered by an individual who does not work for Piedmont. You have the option to be anonymous.

STEP 2
This person will ask you questions about your concern/ question. At the end of the call, you will receive a report ID number that you can use to check on the status of your concern/question or to provide additional information.

STEP 3
This person will then notify the Compliance Department that a new concern/question has been raised.

STEP 4
The Compliance Department will investigate your concern or research your question. The Compliance Department may reach out to you through the hotline for additional information.

STEP 5
The Compliance Department will take appropriate action based upon the findings of its investigation or research. You will be notified of the outcome; however, many times the details of Compliance's findings cannot be shared.

1ST PRINCIPLE: DO WHAT IS RIGHT FOR OUR PATIENTS

Standard 1.1: Provide safe, high-quality, and cost-effective medical care to our patients in accordance with the highest of professional standards. Covered Persons should focus on the well-being of our patients, whether their roles involve direct patient care or other supportive functions. Services should be medically appropriate for the patient—we will not over-utilize or under-utilize the medical care we provide to our patients. Only persons with appropriate training or professional credentials and licenses may furnish or supervise the delivery of medical care. All professionally credentialed Covered Persons are expected to keep their credentials current and to notify Piedmont promptly if sanctions are threatened or imposed on a professional license.

Standard 1.2: Treat patients with dignity and respect. Patients will not be denied access to medical care based on age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, gender identity or expression, or any other protected classification.

Standard 1.3: Maintain accurate medical records. Consistent with our policies and procedures and applicable regulations, all medical records should be timely and should accurately document facts and pertinent information related to an event, course of treatment, patient condition, or response to care. Any individual who contributes to the medical record must provide accurate information and not alter or destroy any part of the official medical record.

Standard 1.4: Protect the privacy and security of our patients' health and financial data. Consistent with state and federal law, Covered Persons will not use, access, or disclose patients' personal, health, or financial data unless otherwise required or permitted by law.

Standard 1.5: Dispense drugs and controlled substances in accordance with state and federal laws. Various state and federal laws govern the use of pharmaceuticals and controlled substances, including how they are ordered, stored, administered, and inventoried. Covered Persons handling pharmaceuticals and controlled substances are responsible for knowing and complying with applicable laws and regulations and Piedmont's policies and procedures.

Standard 1.6: Follow all state and federal laws relating to clinical research and trials. Piedmont is committed to following high ethical and legal standards when conducting research and clinical trials involving human research subjects. Patient rights will be respected during all phases of clinical trials. Any research involving human subjects must be conducted in accordance with the law and in accordance with Piedmont's policies and procedures and any relevant institutional review board.

Standard 1.7: Provide appropriate care to patients who present to our emergency departments. Piedmont will provide a medical screening examination and, if appropriate, stabilizing treatment to all patients who come to a Piedmont dedicated emergency department for emergency treatment, regardless of their ability to pay. When indicated, Piedmont will transfer patients with emergency medical conditions to another facility (including another Piedmont facility) in compliance with state and federal requirements and Piedmont policies.

Standard 1.8: Avoid employing or contracting with excluded individuals. Piedmont does not employ or contract with individuals or entities that are excluded from, or ineligible to participate in, federal healthcare programs, have been suspended or debarred from federal government contracts, or have been convicted of a criminal offense related to the provision of healthcare items or services and have not yet been reinstated in a federal healthcare program.

2ND PRINCIPLE: DO WHAT IS RIGHT FOR OUR ORGANIZATION

Standard 2.1: Avoid conflicts of interest. Conflicts of interest, or perceived conflicts, between private interests and the interests of Piedmont are prohibited except for those that are disclosed and approved or managed. A conflict of interest exists when a Covered Person, or their immediate family member (i.e., spouse, domestic partner, parent, children and their spouses or domestic partner's children and their spouses), is involved in any activity that could affect, or appear to affect, a Covered Person's objectivity in making decisions.

Standard 2.2: Refrain from the solicitation and acceptance of gifts. Piedmont prohibits the solicitation of tips, gifts, or personal gratuities from patients, visitors, and vendors. Covered Persons also may not accept gifts, cash, or cash equivalents from patients or their family members. The acceptance of small tokens of appreciation, such as candy or flowers, is permitted. This standard does not apply to outreach by the Piedmont Foundation or company-sponsored events.

Standard 2.3: ***Protect Piedmont information systems.*** Covered Persons should protect private and proprietary data and information by not disclosing it to any unauthorized persons. Covered Persons who have use of, or access to, Piedmont's information technology shall sign appropriate agreements and abide by Piedmont's information security policies, including those related to the protection of confidential passwords and other access information.

Standard 2.4: Protect Piedmont intellectual property. All intellectual property conceived or created during the course of employment with Piedmont is the sole and exclusive property of Piedmont, unless otherwise agreed upon. As a condition of employment and/or continued employment, each employee assigns to Piedmont all rights in any such intellectual property. Covered Persons are required to protect such intellectual property from any unauthorized disclosure, use, transfer or sale.

Standard 2.5: Maintain the accuracy and the proper retention and disposal of Piedmont's business records. Each Covered Person is responsible for the integrity and accuracy of our organization's business records in accordance with the law and our record retention policies, not only in order to comply with regulatory and legal requirements, but also to ensure that our business records are available to support our business practices and actions. No one may alter or falsify information in any business record. Business records must never be destroyed for the purpose of denying regulatory authorities any relevant information.

Standard 2.6: Refrain from improper political activities. While Piedmont supports individual participation in the political process, Covered Persons are not permitted to use their positions within Piedmont to influence the decisions of other individuals or entities to contribute to, or otherwise support, political parties or candidates, except when lawfully permitted.

Standard 2.7: Maintain confidentiality at all times, including on social media. Covered Persons are solely responsible for what they publish on social media and must use good judgment. If a Covered Person identifies themselves as someone associated with Piedmont, or the subject of Piedmont comes up while on social media, the Covered Person should make it clear that the views expressed are their own and not made on behalf of Piedmont. Covered Persons should never disclose confidential information about our organization, our suppliers, competitors, or business partners. Covered Persons should never share photographs or protected health information of our patients, even if they have the patient's permission.

Standard 2.8: Conserve Piedmont's resources. Piedmont's resources must be protected from waste, loss, theft, or unauthorized use. Covered Persons must not use supplies or equipment for personal purposes or remove them from the premises, even just to "borrow" them. Covered Persons must immediately return all Piedmont property (e.g., keys, documents, ID badges, smartphones, cellular telephones) at the termination of their employment or contract. Covered Persons should report the misuse or theft of any Piedmont property.

3rd PRINCIPLE: DO WHAT IS RIGHT FOR EACH OTHER

Standard 3.1: Promote a safe and healthy work environment. Covered Persons should take responsibility for their own safety and the safety of others around them. Covered Persons must immediately address or report any unsafe behavior or hazards. Covered Persons must perform their job duties free from impairment caused by alcohol, drugs, or other substances (even those lawfully prescribed or permitted under state law).

Standard 3.2: Foster a respectful and inclusive organization, free of discrimination, harassment, or violence. Covered persons should promote a diverse workforce and an inclusive culture, which contributes to creativity and business growth. Covered Persons will not discriminate on the basis of person's race, ethnicity, sex, sexual orientation, gender identity or expression, religion, national origin, color, creed, age, mental disability, physical disability or any other protected classification. Covered Persons should not tolerate physical violence or threats

of violence, including abusive or aggressive behavior intended to threaten or intimidate another person.

Standard 3.3: Do not retaliate. Retaliation against any person making a good faith report or complaint, seeking advice or guidance about a matter under the Code, or cooperating with an investigation under the Code, is contrary to our values and will not be tolerated under any circumstance. Retaliation can take many forms. Any Covered Person involved in retaliation violates the Code and is subject to discipline up to and including termination of their relationship with Piedmont.

4TH PRINCIPLE: DO WHAT IS RIGHT FOR OUR COMMUNITY

Standard 4.1: Combat fraud, waste, and abuse. State and federal laws prohibit a healthcare provider from paying or receiving kickbacks or other improper inducements to, or from, anyone for the referral of a patient or for the purchase or ordering of healthcare products or services that are paid for with federal healthcare funds. These laws also prohibit certain referrals of services that are paid by the government to entities in which the referring physician has a financial relationship. Listed below are some of the fraud, waste, and abuse laws with which Covered Persons must comply:

- *The Federal False Claims Act*—The Act prohibits knowingly making a false claim against the government. False claims can take the form of overcharging for a product or service, delivering less than the promised amount or type of goods or services, underpaying money owed to the government and charging for one thing while providing another.

- *The State of Georgia False Claims Act*—The Act allows for the same civil actions as the Federal False Claims Act, but it applies to claims made to the state of Georgia and Medicaid claims rather than to the federal government.

- *Federal and State Whistleblower Protections*—Any person may bring an action under these laws, called a qui tam relator or whistleblower suit. Such cases remain sealed for a period of days so the government can investigate the complaint and decide whether to pursue the matter or not. If not, the person bringing the action has the right to pursue the action on their own.

- *Non-Retaliation*—The law prohibits retaliatory action by an employer against an employee who in good faith brings evidence of unlawful practices to the attention of the proper authority.

Standard 4.2: Bill appropriately. Piedmont will bill for medically necessary care only, and will follow all applicable state and federal laws and regulations relating to proper coding, billing, and reimbursement.

Standard 4.3: Cooperate with the government honestly, ethically, and in accordance with the law. Piedmont will maintain the highest standards of legal and ethical conduct in transacting business with the state or federal government. Piedmont and Covered Persons will cooperate with the state or federal government with respect to any audit or investigation. Covered Persons are required to contact the Compliance Department or Legal Department when first informed of a pending or actual audit or investigation.

Standard 4.4: Participate in business opportunities openly and honestly. Covered Persons will compete fairly in the marketplace. Contracting and purchasing decisions will be based on objective criteria and not on personal relationships or self-interest.

Standard 4.5: Operate in a sustainable manner. Piedmont complies with laws that safeguard the environment and will address any situation that results in the unauthorized discharge or emission of pollutants into the air, ground, or water. Piedmont and Covered Persons will follow the laws for storing, handling and disposing of hazardous materials, gases, chemicals, and bio-wastes.