

COMPLIANCE 8.0

PROCESS FOR HANDLING THE UHS COMPLIANCE HOTLINE AND WEB REPORTING PROGRAM

Scope: All subsidiaries of Universal Health Services, Inc., including facilities, Independence Physician Management, Prominence Health Plan and UHS of Delaware Inc. and their personnel.

Purpose: To establish protocols for how UHS Compliance Hotline and Web Reporting cases are received, documented, investigated and ultimately resolved in the UHS Disclosure Program.

Policy: UHS provides a Compliance Hotline and Web Reporting process referred to as the Disclosure Program, as a confidential mechanism for employees to use to ask questions or voice concerns they may have about suspected violations of company policies or violations of the law (see Compliance Policy **7.0 Reporting Unethical or Illegal Conduct**). All complaints regarding improper or unethical business practices, violations of the law or company policies, including harassment, fraud, retaliation, and discrimination, will be taken seriously, addressed promptly, and handled in a manner that protects the privacy of the caller. No retaliation against employees who report concerns in good faith will be permitted. Disciplinary or corrective action in response to substantiated allegations will be an integral part of the Compliance Hotline and Web Reporting program.

Procedure:

The intake call and/or complaint will be received by the Chief Compliance Officer or their designee, which may be a third party vendor. The Chief Compliance Officer or their designee will be responsible for maintaining confidential records of all calls and/or complaints and responses. Compliance Hotline and Web Reporting cases will be handled in a manner which protects the privacy of the caller. Employees reporting to the Compliance Hotline or through Web Reporting may choose to remain anonymous or give their name. If an employee chooses to remain anonymous, the call and/or complaint will be investigated and resolved in the same manner and with the same diligence as all others. Appropriate action will be taken in response to each call and/or complaint. In most cases, appropriate action will include an investigation into the allegations of the complaint or concerns, an action plan to resolve the issues, and communication back to the caller, if applicable. Complaints that do not raise a potential compliance issue will be referred to the appropriate department (e.g., risk management, Human Resources, facility management, or other departments as appropriate).

The Chief Compliance Officer is responsible for overseeing any necessary investigation and response to the call and/or complaint. The Chief Compliance Officer or their designee will work with the applicable Division Compliance Officer or Facility CEO as may be appropriate, to assign a case investigator to the call and/or complaint. The case investigator may be the Division Compliance Officer, the Facility Compliance Officer or their designee(s). Depending on the circumstances of the investigation, another individual or a multi-disciplinary team may be appropriate. Investigations shall be handled by persons having a sufficient level of expertise/knowledge with regard to the issue presented by the call and/or complaint. Any employee who intentionally makes a false accusation with the purpose of harming or retaliating against another colleague is subject to corrective action.

The Chief Compliance Officer or their designee shall identify who, if anyone, should be notified of the existence of the call and/or complaint. Together with the UHS Office of General Counsel or outside counsel, these individuals should determine whether the conduct alleged is of such a nature that it should be reported to any applicable outside agency or regulatory board, as well as the timing of such reporting (pre- or post-investigation). Any reporting shall be conducted consistent with UHS's policies on self-reporting.

Consistent with **Compliance 1.0 – Compliance Program**, when necessary the Chief Compliance Officer will report hotline calls and/or investigations to the Audit Committee of the UHS Board of Directors. The Chief Compliance Officer will also coordinate with the UHS General Counsel on selecting an independent investigator.

All Compliance Hotline investigations will be investigated and a final report will be submitted at the conclusion of the investigation. The UHS Investigation Form will be completed as part of the investigation and, when necessary, all attachments related to the investigation will be submitted to the Compliance Office for final review and approval. The UHS Compliance Hotline Investigation Template is attached as **Exhibit 1**.

Documentation regarding the Disclosure Program will be filed and maintained by the Chief Compliance Officer or their designee for a minimum of seven (7) years after the investigation has closed, and will be subject to the requirements of Compliance Policy **12.0 Compliance Document Retention**.

Attachments:

Exhibit 1 – UHS Compliance Hotline Investigation Template

<p>Revision Dates:</p> <p>11-18-2021; 7-27-2020; 10-12-2017; 10-01-2015; 10-26-2012</p> <p>Implementation Date: 10-21-2010</p> <p>Reviewed and Approved by:</p> <p>UHS Compliance Committee</p>
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