

COMPLIANCE 9.0

CONDUCTING INTERNAL INVESTIGATIONS

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: Procedures for Conducting Internal Compliance Investigations.

Policy: UHS is committed to full compliance with applicable state, federal and local laws. The Chief Compliance Officer and/or their designee shall have the responsibility and authority to conduct and oversee independent compliance investigations to detect possible violations of the law, with legal guidance of the UHS Office of General Counsel and/or outside counsel as appropriate. The extent of the investigation will vary depending upon the matter investigated.

Procedure:

1. The Chief Compliance Officer shall commence and/or oversee investigations on all compliance-related matters within seven (7) days following receipt of the report indicating a matter warranting investigation.
2. The Chief Compliance Officer may delegate the investigation responsibilities but will retain ultimate supervision and responsibility for all compliance investigations.
3. The investigation may include, but is not limited to:
 - a. reviewing and preserving documents related to the matter;
 - b. interviewing appropriate individuals;
 - c. reviewing policies and procedures applicable to the matter;
 - d. collaborating with an internal UHS of Delaware or other UHS subsidiary authority, as needed; and
 - e. engaging an outside consultant or authority to assist in the investigation, as needed. **PLEASE NOTE:** The use of outside counsel for an investigation requires the authorization of the General Counsel's Office or the Chief Compliance Officer.
4. If a significant compliance violation is found, the Chief Compliance Officer and/or Division Compliance Officer shall develop and implement a corrective action plan, in consultation with the Facility Compliance Officer and, if needed, with other departments

within the facility or UHS of Delaware, such as Human Resources or the Office of General Counsel.

5. All investigation methods and findings pursuant to the investigation must be documented. Final reports shall be submitted to the UHS Compliance Office but the full investigation file and materials will be retained by the UHS subsidiary that conducted the investigation.
 - a. If the investigation findings do not substantiate the allegation or matter, the investigation will be closed by the Chief Compliance Officer or their designee. The final report regarding the investigation maintained by the Chief Compliance Officer and the complete investigation file will be retained by the applicable Facility Compliance Department 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**.
 - b. If a compliance violation is found, all documentation related to the investigation will be maintained as an "open" investigation until a corrective action plan has been completed and the matter has been resolved, at which time the investigation will be closed by the Chief Compliance Officer. Once closed, the final report of the investigation will be filed and maintained by the UHS Corporate Compliance Office and the full investigation file will be retained by the applicable Facility Compliance Department for a minimum of seven (7) years after the investigation has been closed and will be subject to the requirements of Compliance Policy **12.0 Compliance Document Retention**.
6. For investigations implicating a facility CEO, the Chief Compliance Officer or their designee shall notify the Divisional President, the CEO's Regional Vice-President, and UHS Human Resources to decide who shall conduct the investigation. For investigations implicating the Facility Compliance Officer, the Chief Compliance Officer shall notify the CEO of the facility and the Division Compliance Officer who will together assign the matter for investigation. For investigations implicating the Division Compliance Officer, the Chief Compliance Officer will conduct and coordinate the investigation. Investigations implicating the Chief Compliance Officer will be handled by the UHS Office of General Counsel.

Revision Dates:

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Implementation Date: 10-21-2010

Reviewed and Approved by:

UHS Compliance Committee