# HAMPTON ROADS GOOD HELP ACO, LLC

CORPORATE RESPONSIBILITY MANUAL

# **Table of Contents**

Section 1:	Corporate Responsibility Plan	Page 3
Section 2:	Code of Conduct	. Page 10
Section 4:	Policies and Procedures	. Page 16
Section 5:	Training Materials	. Page 17

# Hampton Roads Good Help ACO, LLC Corporate Responsibility Plan

#### Introduction

Hampton Roads Good Help ACO, LLC is committed to carrying out its healthcare ministry in a manner consistent with its mission and the mission, vision and values of Bon Secours Health System, Inc. (BSHSI). Hampton Roads Good Help ACO, LLC (hereinafter, "ACO") and its Board of Directors is dedicated to following a high ethical standard of individual conduct as well as acting responsibly as corporate citizens. The Corporate Responsibility (CR) Program reflects the ACO Board of Directors' and executive leadership's confidence that the ACO can succeed and prosper in a competitive healthcare environment by practices that are consistent with the high ethical standards that have guided BSHSI for over 6 decades.

The CR Program is based on federal corporate sentencing guidelines, compliance guidance provided by the U.S. Department of Health and Human Services Office of the Inspector General, and Medicare Shared Savings Program guidance (42 CFR 425 et seq.).

The ACO's CR Program, including this CR Plan, applies to all ACO employees (to include all ACO employees and all employees of BSHSI who provide services to the ACO); all ACO Participants, all ACO Providers/Suppliers and their staff, and vendors; all ACO officers and directors; and all ACO independent contractors (such as vendors) in their relationship with the ACO (collectively, "ACO Workforce").

While this CR Plan cannot address every possible issue that may arise in the conduct of the ACO's services it does provide the overall policies and standards to guide all to whom the CR Plan applies. By adhering to these principles, the ACO will achieve the legal compliance required under the law and to which the Board of Directors expects.

This CR Plan summarizes the structure, key elements and compliance policies of the ACO CR Program.

#### **Corporate Responsibility Program Elements**

#### 1. Oversight of the CR Program

- *Corporate Responsibility Officer (CRO)*. ACO has appointed a CRO who is responsible for developing, implementing and overseeing the operations of the ACO CR Program. The CRO is neither legal counsel to the ACO nor to BSHSI. The Hampton Roads Good Help ACO CRO reports directly to the ACO's Board of Directors regarding compliance issues.
- **ACO CR Council.** The ACO CR Council provides advice and support to the ACO CRO and to management. The CR Council shall ensure that leadership across the ACO and the ACO Participants understands its responsibilities and plays an active role in advancing individual conduct and organizational practices that are consistent with legal, regulatory and ethical requirements.

• *ACO Board of Directors*. As the governing body of the ACO, the Board of Directors has ultimate responsibility for the CR Program. As such, the Board will approve any substantive changes to the ACO Code of Conduct or this CR Plan. In addition, it will receive periodic reports from the CRO as to the operation of the CR Program, as well as to the investigation and resolution of any material compliance issues that may arise. The Board will meet at least annually to discuss and approve any changes, if necessary, to this CR Plan or any other CR Program documents.

#### 2. Written Policies and Procedures

- *Code of Conduct and CR Plan*. The Hampton Roads Good Help ACO Code of Conduct and this CR Plan are the foundational documents of the Hampton Roads Good Help CR Program. These documents will be made accessible on the ACO web site.
- **ACO Compliance Policies and Procedures.** In addition to the Code of Conduct and the CR Plan, the ACO may develop and implement written CR Policies and Procedures to describe in more detail existing ACO CR processes and procedures.
- **BSHSI Compliance and HIPAA Privacy Policies and Procedures**. The ACO has adopted and relies upon a number of the BSHSI CR Program and BSHSI Privacy Program Policies and Procedures, which are incorporated into the ACO's CR Program.

#### 3. Effective Training and Awareness

- *CR Program Awareness*. The CRO is responsible for ensuring that the Code of Conduct and the CR Plan are made accessible to the entire ACO Workforce. All newly hired, engaged, or contracted ACO Workforce members must also be provided with the Code of Conduct.
- *Values Line Awareness*. The CRO, or his/her designee, will assure that the ACO Values Line contact information is visible and prominent on ACO CR Communications and made available to all ACO Workforce members.
- *General CR Training*. All ACO Workforce members will receive training on an annual basis on the compliance requirements applicable to ACO.
- *Training and Awareness Plan and Tracking*. The CRO will develop an annual training and awareness plan. Training may include written communications, in-person educational sessions, and telephonic or web-based education. The CRO will maintain a record of all ACO Workforce members who receive training.

#### 4. Effective Lines of Communication

- **Seeking Guidance**. ACO Workforce members shall be encouraged to seek guidance if the employee or contractor is uncertain as to whether certain conduct or actions violate the ACO CR Program.
- *Obligation to Report*. ACO Workforce members must report known or suspected violations of the ACO CR Program. The failure to report known or suspected violations

of the CR Program is itself a violation of the Program.

- *Confidentiality*. All reports shall be kept confidential, within the limits of the law.
- *Reporting Mechanisms*. When reporting known or suspected violations, ACO Workforce members may choose one or more of the following reporting mechanisms:
  - 1. Report the violation to the Workforce member's manager or supervisor;
  - 2. Report the violation to the ACO CRO, or someone in authority in the organization; or
  - 3. Call the ACO Values Line (1-888-880-1286) or utilize the web-based Values Line (<a href="www.BonSecoursValuesLine.com">www.BonSecoursValuesLine.com</a>). Workforce members may choose to remain anonymous when using either method.
- **Leadership Obligations**. The supervisor or individual in authority to whom a Workforce member has made a report shall notify the ACO CRO of the report in a timely manner.
- **Documentation**. The CRO will maintain a record of reports of violations of the CR Program and its Code of Conduct or of relevant law or regulations. The CRO will periodically furnish a summary of such reports to the ACO CR Council and the ACO Board of Directors.

#### 5. Responding to Compliance Concerns

- *Obligation to Investigate*. When ACO becomes aware of a potential violation, it has an obligation to investigate the matter in question. The nature and scope of the investigation may vary depending upon the facts and circumstances of the situation.
- *Cooperation*. All ACO Workforce members shall cooperate with and assist the ACO CRO (or designee) in the investigative activities described below.
- *Initial Assessment*. The ACO CRO shall be responsible for conducting an initial assessment of potential compliance violations.
  - 1. The CRO shall first make a determination as to whether the matter involves any of the following "Legal Department oversight" areas:
    - (i) physician arrangements;
    - (ii) potential violations of law, including, but not limited to, health care fraud and abuse provisions (i.e., Stark Law, Anti-Kickback Law), rules and regulations related to tax-exempt status and tax-exempt bond financing, and employment-related claims (e.g., retaliation);
    - (iii) matters covered under a certification of compliance agreement or other type of settlement agreement with the government;
    - (iv) issues that have been identified as (or are expected to be) the subject of particular scrutiny by a regulatory agency (e.g., charity care issues); and/or

• (v) issues in which there is a significant risk of litigation or negative publicity to the ACO.

To the extent that the potential compliance violation involves any of the above-referenced issues, the entire investigation (including the initial assessment, drafting of any reports, and corrective action and follow-ups) should be coordinated with ACO Legal Counsel. Counsel may decide to place the investigation under attorney-client privilege, which would require that certain procedures be followed to preserve the confidentiality afforded to clients under this privilege.

- 2. All aspects of the initial assessment shall honor requests for anonymity made by the individual(s) reporting the allegation(s), to the extent possible and within the limits of the law.
- 3. Regardless of whether or not anonymity is requested by the individual(s) reporting the allegation(s), confidentiality shall be respected in all aspects of the initial assessment.
- 4. All allegations of noncompliance with the Code of Conduct that are received through the ACO Values Line, other confidential disclosure process, auditing or monitoring process, or through any other means shall be preliminarily assessed by the CRO.
- 5. If the allegation concerns an executive leader, the CRO will involve the applicable ACO Participant's Compliance Officer in the investigation if appropriate given the circumstances.
- *Investigations*. The procedure for conducting an investigation that is not otherwise being coordinated through ACO Legal Counsel shall be as follows:
  - 1. All aspects of the investigation shall honor requests for anonymity made by the individual(s) reporting the allegation(s), to the extent possible and within the limits of the law.
  - 2. Regardless of whether or not anonymity is requested by the individual(s) reporting the allegation(s), confidentiality shall be respected in all aspects of the investigation.
  - 3. Steps shall be taken to secure, and prevent the destruction of, documents and other evidence relevant to the investigation.
  - 4. All reasonable and necessary steps shall be taken to discontinue any ongoing misconduct.
  - 5. In instances where the same or a similar concern was previously investigated, the details of the previous investigation and actions taken shall be reviewed to determine if there are new facts or information to suggest that a new investigation should take place.

- 6. The following steps shall be taken when any report or activity giving rise to an investigation occurs:
  - The investigation shall be commenced as soon as reasonably possible, but not more than 30 days following the receipt of the report, information, or complaint regarding the potential noncompliance.
  - A plan of investigation shall be developed. The investigation may include, but is not limited to:
    - preserving and reviewing documents,
    - reviewing applicable laws, regulations, and/or policies,
    - interviewing appropriate individuals,
    - reviewing policies and researching procedures,
    - collaborating with management personnel or other appropriate personnel, and
    - consulting with legal counsel or other external entities.
- 7. If the investigation substantiates a violation of the *Code of Conduct* a Summary Report shall be drafted that contains recommendations on corrective actions, including recommended disciplinary measures to be taken against the person or persons whose activities or conduct is the subject of the investigation.
- 8. The matter giving rise to noncompliance shall be corrected. The ACO CRO shall work with the senior leader who has management accountability for the functional area where the violation occurred. It shall be the responsibility of the senior leader to develop and implement the corrective action. It shall be the responsibility of the CRO to evaluate whether the corrective action that has been developed fully addresses all *Code of Conduct* requirements and considerations.
- 9. If corrective actions have been assigned to ACO employees or employees of an ACO Participant, the ACO CRO shall oversee them by periodically advising the Hampton Roads Good Help ACO Executive Director with respect to the effectiveness of the plan in addressing *Code of Conduct* requirements and considerations.
- **Documentation**. Investigation methods and findings shall be documented and copies of supporting documents shall be attached to the findings.
  - 1. If the investigation does not substantiate the concern, documentation regarding the investigation shall be filed and retained per the document retention policy.
  - 2. When an allegation of CR Program noncompliance is substantiated, all documentation related to the investigation shall be kept in a confidential "in process" file until a corrective action plan and any related monitoring have been completed.
  - 3. Appropriate feedback shall be provided to the individual reporting the allegation regarding the investigation, providing the issue was not reported

anonymously. Responses shall be general in nature and not reveal confidential information, such as the names of individuals or the specific corrective or disciplinary actions taken as a result of the investigation.

• *Violations of Law*. ACO will report any probable violations of law to an appropriate enforcement agency taking into account the nature of the violation and the enforcement agency's protocol for reporting violations of law.

#### 6. Compliance Risk Areas and Corrective Action

- *Tracking New Developments*. The ACO CRO will ensure that all relevant publications issued by government or third-party payers regarding compliance rules and protocols are reviewed and appropriately implemented, focusing in particular on rules, regulations, and guidance as to the operation of the ACO and the Medicare Shared Savings Program.
- **Quality and Compliance Reviews**. In conjunction with the ACO CR Council, the ACO CRO will ensure that, to the extent possible, appropriate quality and compliance reviews are conducted of ACO Providers and Suppliers.
- Regulatory Compliance Reviews. In conjunction with the ACO CR Council and the BSHSI Internal Audit Department, the ACO CRO will also ensure that other compliance reviews are periodically conducted of ACO operations to ensure continued compliance with regulatory requirements.
- Annual CR Work Plan and Risk Assessment. On an annual basis, the ACO CRO, in conjunction with the ACO CR Council, will review regulatory requirements, governmental guidance or pronouncements, Values Line calls, issues raised by ACO Workforce, and ACO operations to identify compliance risks or areas of compliance focus for the upcoming year. The ACO CRO will work with the ACO CR Council to put together an Annual CR Work Plan that will set forth the annual reviews, initiatives and compliance goals for the upcoming year.

#### 7. <u>Disciplinary Action</u>

- **Discipline of Employees**. All ACO Workforce may be subject to disciplinary action. Such discipline will be applied in a uniform and consistent manner. The following are examples of conduct that will result in disciplinary action:
  - 1. Workforce members who authorize or participate in a violation of law, regulation, policy, ethical standard, or the ACO Code of Conduct.
  - 2. Workforce members who withhold information or fail to report such violations.
  - 3. Supervisors or managers who provide inadequate supervision, or display a lack of diligence in assuring conformance to law, regulation, policy, ethical standards or the ACO Code of Conduct.
  - 4. Workforce members who retaliate, attempt to retaliate or threaten to retaliate against individuals who report suspected violation in good faith.
  - 5. Workforce members who make frivolous or deliberately false reports of violations of the Code of Conduct.

- 6. Workforce members who discriminate or harass others.
- *Disciplinary Procedure*. Possible disciplinary action of ACO Workforce who are BSHSI employees will follow BSHSI's existing disciplinary policies and procedures.
- Remedial Action as to Others. ACO Providers, Suppliers and Vendors who are not BSHSI employees are expected to adhere to the ACO Code of Conduct and all applicable CR Program requirements. If the ACO CRO concludes, after an appropriate investigation and in consultation with ACO Legal Counsel, that the Code of Conduct or applicable laws or regulations have been violated, then the ACO CRO will inform, as indicated by the details of each investigation, ACO senior management, the ACO Board, and the ACO Participant's Compliance Officer. Appropriate discipline, remedial processes and penalties, up to and including termination of participation in the ACO, will be taken consistent with the ACO Participation Agreement.
- 8. **Non-Retaliation.** ACO has a policy of "zero tolerance" for any form of retaliation against those who report CR Program or Code of Conduct concerns in good faith. ACO values and encourages honest discussion about these concerns, and will protect from retaliation those who raise such concerns in good faith to the appropriate management personnel. This applies to:
  - 1. Direct as well as indirect retaliation
  - 2. Retaliatory actions as well as threats of actions
  - 3. Retaliation from supervisors and those in authority as well as from co-workers and peers.

# HAMPTON ROADS GOOD HELP ACO, LLC CODE OF CONDUCT

#### Introduction

Hampton Roads Good Help ACO, LLC (ACO) is a network of healthcare organizations (the Participants) dedicated to providing high quality, coordinated care at a reduced cost to the Medicare fee-for-service beneficiaries and other patients served by the ACO. ACO is committed to achieving the three-part aim of improving care delivery, improving health, and reducing growth in costs. It intends to achieve this three-part aim not only through better coordination of care, but also by leading in high quality population health management. Whenever there is a question of priorities, ACO always puts the good of the patient first.

A network of this kind is called an Accountable Care Organization or ACO. Because this is a new model of patient care, new rules apply to the ACO and its Participants. This Code of Conduct addresses these rules and guides us in acting in a manner that is ethical, legal and in the best interests of our patients.

This Code of Conduct is intended as a guide for those to whom it applies. It does not take the place of the common sense and good judgment, which are an expectation of those who are part of the ACO.

The Code of Conduct applies to board members, officers, employees and vendors of ACO and to the board members, officers, employees and vendors of ACO Participants. ACO includes all components of the Bon Secours Hampton Roads Health System, Inc. along with several other organizations.

While this Code of Conduct applies across the ACO, it does *not* take the place of the codes of conduct, policies, and procedures already in place in the Participants in the ACO. This Code of Conduct supplements and supports the ethical practices of ACO Participants.

# **COMPLIANCE**

# The Compliance Program:

To ensure that the ACO meets it ethical and legal obligations, the ACO has created the ACO Compliance Program. This Code of Conduct is one part of the ACO Compliance Program. Other parts of the Program include appointment of a ACO Corporate Responsibility Officer, education sessions on ethical and legal conduct, audits to ensure compliance with our standards, an anonymous reporting mechanism, and a commitment to transparency. Each element of the ACO Compliance Program is designed to supplement the policies, procedures and practices of ACO Participants.

Employees of the ACO, as well as the employees of Participants in the ACO, are expected to support and cooperate with the ACO Compliance Program including the audits and education conducted by the ACO.

# Reporting Concerns/Non-Retaliation:

Employees of the ACO and its Participants are required to report any instance of suspected wrongdoing by the ACO.

The ACO has established several channels through which suspected violations of ACO's Code of Conduct and policies and procedures can be reported. Concerns can be reported anonymously by calling the ACO's toll free Values Line at 1-888-880-1286. You can also report a concern directly to the ACO Corporate Responsibility Officer at 1-513-952-4744. A complete list of ACO reporting options is listed on the last page of this Code. The ACO will investigate reported concerns on a confidential basis.

The ACO does not tolerate retaliation against an employee for reporting a concern to ACO. Any employee who suspects that that they are being retaliated against for reporting a concern should immediately call the ACO Values Line or contact the ACO Corporate Responsibility Officer directly.

Employees of the ACO Participants should continue to report concerns about their own organizations through the reporting channels established by these organizations.

# **CONFLICT OF INTEREST**

The conflict of interest requirements stated here apply to employees, officers and board members of the ACO. Employees, officers and board members of Participants in the ACO should follow the conflict of interest policies of their own organizations.

ACO employees, officers and board members are expected to act in the interests of the ACO to the exclusion of any outside interest. A conflict of interest exists anytime an objective observer might question whether an individual's own personal, financial or private interests could compromise the individual's judgment on behalf of the ACO. All ACO decisions are made fairly and objectively, without favor or preference based on personal interests. Any employee, officer or board member of the ACO who believes that they are or may appear to be influenced by an outside interest is required to immediately disclose this to the ACO Corporate Responsibility Officer, who will determine how the conflict or apparent conflict is to be resolved. Many actual and apparent conflicts of interest can be resolved if the conflict is reported before it creates the appearance or reality of having influenced the judgment of the potentially conflicted individual.

All officers, managerial employees, and board members of the ACO are required to complete an annual conflict of interest disclosure form. However, this annual disclosure does not relieve these individuals of the responsibility to report actual and apparent conflicts of interest as soon as they become aware of the conflict.

# **PRIVACY AND SECURITY**

The privacy of protected health information is a complex matter. Both the ACO and its Participants have established policies and procedures to provide guidance on privacy issues. Employees, officers, board members and vendors of the ACO should address questions concerning the privacy of protected health information to the Hampton Roads Good Help Corporate Responsibility Officer

at 513-952-4744. Employees of the ACO's Participants should continue to follow the privacy and security policies and procedures of their own organizations.

To facilitate coordination of patient care, the Centers for Medicare and Medicaid Services (CMS) shares information about Medicare beneficiaries with Accountable Care Organizations such as the ACO. This information is intended to assist the organization in coordinating patient care. Patients have the right to opt out of such information sharing and it is the obligation of the ACO and its Participants to respect patient wishes in this regard.

ACO employees, officers and board members should share protected health information only as needed for patient care and ACO business operations. Even when it is appropriate to share protected health information, the information shared should always be limited to the minimum information needed for patient care or business operations.

The ACO is also responsible for the security of its information systems so that protected health information under its control can be accessed only by individuals authorized to access this information.

### MARKETING MATERIALS

Materials used to market the ACO must be truthful and honest. Moreover, all materials used to market the ACO must be submitted to and approved by CMS before being used. All marketing materials, including audio, video, online material, advertisements, printed material such as brochures and posters, posts to social media sites and any other material promoting the ACO, must be submitted *prior to use* to the ACO Marketing Director [or other title] for approval. This requirement extends to materials previously authorized for use in one of ACO's Participants. The ACO will seek CMS approval for all such materials and notify those submitting the marketing materials if and when they can be used. Marketing materials should not be used in a discriminatory manner with respect to patient age, race, gender, sexual orientation, religious belief, physical health, mental health, medical history or genetic information.

# **PATIENT CONSIDERATIONS**

#### Patient Choice:

ACO aims to improve the quality of care for patients by coordinating their care across ACO Participants. Despite this, we must not forget that patients have the right to choose where and from whom they receive healthcare services. We must never tell patients that they will receive inferior care outside of the ACO. It is our obligation to provide patients with the information and options they need to make informed decisions, whether they choose care inside or outside of the ACO.

# Patient Care/Medical Necessity:

While the ACO, like all Accountable Care Organizations, is committed to lowering the cost of healthcare, the ACO may not reduce or limit the medically necessary services provided to patients. The ACO intends to reduce the cost and improve the quality of patient care through the better use of information and better coordination of care - and not by denying or limiting medically necessary services.

# Patient Care/Quality:

Individuals and entities providing care to ACO patients must be properly licensed and possess the necessary experience and expertise to provide high quality, effective care. It is the responsibility of ACO Participants to ensure that the individuals and entities involved in providing care to ACO patients are appropriately credentialed and licensed.

#### At Risk Patients:

Neither the ACO nor its Participants may take actions to avoid treating at risk patients. At risk patients are those who are sickest or hardest to treat as well as patients who are in generally poor health. It is the policy of the ACO and its Participants to provide high quality healthcare to all of their patients, specifically including the poor and needy.

### **Patient Opt Out:**

The ACO shall comply with all applicable requirements established by CMS with respect to the provision of notices to Medicare beneficiaries aligned with the Hampton Roads Good Help ACO.

#### **Non-Discrimination:**

The ACO prohibits any form of discrimination in the provision of services, marketing or enrollment. The ACO and its Participants will not deny, limit or condition services to patients on the basis of patient age, race, gender, religion, sexual orientation, physical health, mental health, medical history or genetic information.

# **GIFTS TO PATIENTS**

Employees of Participants in the ACO should follow their own organization's rules governing gifts, meals, travel and entertainment. This section of the Hampton Roads Good Help Code of Conduct concerns only gifts *to patients*.

The ACO does not allow the giving of gifts or any other items of value (gift cards, tickets, vouchers) to patients for the purpose of attracting or retaining a patient within the ACO. The only time it is permissible to give an item of value to a patient is to assist the patient in adhering to their treatment regime or pursuing preventative healthcare practices. We want patients to choose to receive care inside of the ACO solely because of the service and quality of care provided.

# **ACCURACY OF INFORMATION**

All Participants in the ACO will cooperate in the gathering, recording, and submitting of data that the ACO provides to CMS. Information provided to ACO by its Participants must be truthful, accurate and as complete as possible. Information that ACO provides to CMS, specifically including information used to determine shared savings and losses, must be truthful, accurate and as complete as possible.

### **LEGAL CONSIDERATIONS**

### Commitment to Legal Conduct:

The ACO and its Participants are committed to high standards of ethical and legal conduct. This specifically includes observing all applicable state and Federal laws including Federal criminal law, the False Claims Act, the Anti-Kickback Statute, the Civil Monetary Penalties law, and the physician self-referral law (Stark law).

Of particular importance is the fact that the ACO, Participants in the ACO, and vendors to ACO and its Participants will not solicit, offer, pay, or receive payment from physicians, providers or anyone else, whether directly or indirectly, for referrals. All referral decisions are based on what is in the best interests of our patients. Additionally, the distribution and use of any shared savings available to the ACO will not be based, directly or indirectly, on referrals among Participants.

The ACO's commitment to high standards of ethical and legal conduct requires that the vendors to the ACO and its Participants also uphold these standards. The ACO will regularly monitor the performance of those with whom it does business to ensure that the ACO's ethical and legal standards are upheld.

Should the ACO learn that it has violated a law or regulation, it is the policy of the ACO to report this violation to the appropriate legal or regulatory authority in accordance with the reporting protocol of that authority.

### **Preventing Fraud, Waste and Abuse:**

ACO and its Participants are committed to upholding all laws intended to prevent fraud, waste and abuse involving Federal healthcare programs. **Fraud** is intentionally providing false or misleading information in order to obtain money from a healthcare payor such as Medicare. **Waste** is the overutilization of services, or other practices that, directly or indirectly, result in unnecessary costs to Medicare. **Abuse** involves receiving payment for items or services when there is no legal entitlement to that payment. The ACO is not only committed to preventing fraud, waste and abuse through its own actions; it will only do business with organizations that share this commitment.

When the ACO and its Participants investigate fraud, waste and abuse, employees are required to cooperate with these investigations.

#### **Excluded Parties:**

The Federal government excludes certain individuals and entities from participation in Federal healthcare programs such as Medicare and Medicaid. It is the responsibility of each participant in the ACO to ensure that none of its employees, providers or vendors is so excluded by periodically checking the exclusion lists maintained by the Department of Health Human Services Office of Inspector General and the General Services Administration. The ACO is responsible for ensuring that none of its own employees or providers is excluded from participation in Federal health programs.

#### Transparency:

The ACO will conduct its business in a manner that is transparent according to the standards established by the CMS. This includes disclosing its governing body and key personnel, shared savings or losses, and how shared savings are used. For additional questions concerning public information about ACO, contact the ACO Public Relations Officer.

# **SUMMARY**

The standards in this Code of Conduct do not take the place of the standards that prevail in the ACO's Participants. The standards stated here supplement those of the ACO Participants. Employees of Participants should continue to use the resources of their own organizations to ensure ethical and legal conduct. Employees of the ACO or its Participants are encouraged to call the Hampton Roads Good Help ACO Values Line at 1-888-880-1286 if they believe that the standards in this Code of Conduct have been violated. Employees may also call the ACO Corporate Responsibility Officer directly at 1-513-952-4744 with concerns or questions related to this Code of Conduct.

We can only be successful working together within the ACO if we consistently observe the ethical standards of the ACO and its Participants.

## HAMPTON ROADS GOOD HELP ACO REPORTING OPTIONS

Hampton Roads Good Help ACO Values Line: 1-888-880-1286

Corporate Responsibility Officer, Matthew Potter: 1-513-952-4744 or mpotter@mercy.com

Address of CRO: 1701 Mercy Health Place, Cincinnati, OH 45237

# Hampton Roads Good Help ACO, LLC Training Materials

- (1) MSSP Training for provider and staff can be found <a href="here">here</a>.
- (2) Board training is available by contacting Matthew Potter, Corporate Responsibility Officer, at <a href="mailto:mpotter@mercy.com">mpotter@mercy.com</a>