

STANDARDS of CONDUCT

LEGALITIES

Compliance

It is the responsibility of all members of the governing body, management and employees of the Agency to comply with federal, state and local laws, professional standards and the polices/ regulations of relevant federally funded health care programs, in order that care provided to its clients and business interactions reflect the highest integrity and ethical conduct

Fraud

Employees shall not undertake any of the following fraudulent activities:

1. bill for services, which were not provided;
2. submit fraudulent claims to government or third-party payors including:
 - a. claims for services that were not provided;
 - b. claims billing for a service that varies from the service actually delivered;
 - c. claims for services that do not adhere with program/contract requirements;
 - d. make false representations to obtain a program's benefits or to remain eligible for a program's benefit; and,
 - e. make false representation to obtain payment for any service;
3. insert inaccurate information on medical claims; and/or,
4. compensate another individual for referring clients.

Concerns regarding fraud should be directed to the Compliance Officer/Designee.

Abuse

Abuse, involves practices that are not consistent with sound service delivery and economic practices. Such practices could, directly or indirectly, result in unnecessary program costs or in payment for services, which do not meet the standards of care or which are not medically necessary. Employees shall avoid all actual or perceived misconduct and shall report any noted non-compliances or risk potential disciplinary action, in accordance with the Agency's Disciplinary Action Policy for failure to report. Concerns regarding abuse should be directed to the Compliance Officer/Designee.

Reporting Fraud and/or Abuse

- a. Fraud and Abuse laws apply to *Medicare* and *Medicaid* programs, Indian Health programs, maternal and child health care programs and Civilian Health and Medical Program of the Uniformed Services (*CHAMPUS*). Allegations of Medicare or Medicaid fraud or abuse shall be reported to: Toll Free: 1-866-666-7390 Ext. 1320 or 877-247-5566.
- b. It is the responsibility of Agency staff to report any cases of suspected or known fraud or fiscal abuse report information on fraud and fiscal abuse.

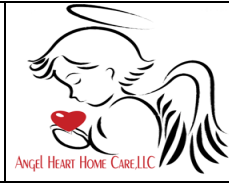
Kickbacks

The Agency is committed to following federal and state anti-kickback laws and regulations and thus prohibits members of its governing body, management and employees from accepting money or anything of value to:

1. refer Agency clients to other service providers; and/or,
2. to influence decisions pertinent to Agency operations.

The Agency shall consider unacceptable conduct to include, but not be limited to the following actions:

1. falsifying personal education and/or experience information during the Job Application Process;
2. falsifying job and character references during the Job Application Process;
3. having a previous conviction or receiving a conviction for crimes committed;
4. falsifying data on clients' charts and other Agency records;
5. falsifying information on billings for client services;
6. using codes which are in violation of federal rules and/or regulations;
7. destroying or altering Agency and client records without authorization;
8. exhibiting any behaviour that reflects poorly on the Agency;
9. using, possessing and/or being under the influence of alcohol and illegal substances while on the job;
10. being discourteous to clients, co-workers, health care professionals and members of the community-at-large;



11. possessing dangerous weapons or guns while on the job;
12. doing malicious damage to the Agency's or clients' property;
13. stealing from the Agency or clients;
14. conducting actions/activities, which are dishonest in any way;
15. disclosing clients' names, addresses, phone numbers and other personal information to non-Agency employees, without the clients' permission;
16. disclosing confidential information without authorization or legal direction to do so;
17. accepting inappropriate gifts or money from clients;
18. accepting appropriate gifts from clients without approval from the Compliance Officer/Designee;
19. engaging in financial transactions with the client other than those required for the performance of duties such as exchange of currency for purchasing items for clients;
20. bringing pets, children or any other unauthorized persons to clients' homes while performing job duties; and,
21. being absent without permission or without advising Supervisor, when able to do so.

CONFLICT OF INTEREST

This sections states that I am not allowed to steal clients of Angel Heart Home Care, LLC and have them transfer to another agency with me as their aide. I agree not to work with any of Angel Heart Home Care, LLC's clients outside of this agency; including up to 1 year after my employment is terminated with the company. This means both if I quit or get fired.

The Agency is committed to following and enforcing its Conflict of Interest Policy. All members of its governing body, management and employees should avoid potential or perceived conflicts of interest, which could develop when they:

1. have personal interests that compete with their employment with this Agency;
2. have positions of authority in this Agency, which conflict with their interests in another agency/organization; and/or,
3. have conflicting responsibilities.

To ensure that the Agency's business relationships are void of inappropriate influences, members of the governing body, management and employees shall be required to disclose all possible conflicts of interest by completing and signing a Conflict of Interest statement.

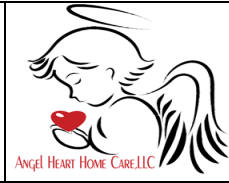
CONFIDENTIALITY

The Agency is committed to the appropriate protection of confidential information and enforces its Confidentiality and Privacy of Information Policy. A number of staff have access to various forms of sensitive, confidential, and medical information, which is maintained to serve clients, health care providers, the Agency and third-party payors, in accordance with legal, accrediting and regulatory requirements. Agency policy prohibits the unauthorized seeking, disclosing or giving of such information, including confidential information contained in clients' records, except on a need-to-know basis, to consulting physicians, health care professionals and employees who may be providing client service and to third party payors to facilitate reimbursement. The operations, activities, business affairs and finances of the Agency shall also be kept confidential and shall only be discussed or made available to authorized persons.

NON-DISCLOSURE AGREEMENT

All employees are required to keep certain Agency information confidential and ensure that it is only shared with those individuals who are in a "need-to-know" position. The Agency insists that all its employees practice high levels of confidentiality to protect information, which includes, but is not limited to:

- ◆ client lists;
- ◆ compensation/salary;
- ◆ benefits;
- ◆ performance appraisals;
- ◆ disciplinary actions;
- ◆ non-public business information; and/or,
- ◆ proprietary (trade) secrets.



The Agency requires all employees to sign a Non-Disclosure Agreement at the time of hire. Failure to comply with its provisions could result in disciplinary action up to and including termination of employment.

BUSINESS ETHICS

The Agency is committed to upholding the highest business ethics and integrity. Members of the governing body, management and employees are required to conduct themselves in a professional manner at all times. They shall not:

1. falsely represent the Agency;
2. defraud individuals of money, property or candid services;
3. make false or misleading comments about the Agency's clients, employees, services, business contacts, competitors or competitor's services;
4. participate in any activity intended to, inappropriately, obtain Agency services or provide services to the Agency through payment, intimidation, or enticement;
5. engage in any corrupt business practice either directly or indirectly; or,
6. provide compensation to another person for unlawful or improper purposes.
- 7.

REPORTING and INVESTIGATING

Staff shall be held responsible for reporting any violations of laws, regulations or Agency policies, procedures and Standards of Conduct. Any violation of the aforementioned, which an employee either knows about or thinks he/she knows about another person/organization, associated with the Agency, has committed, is committing or may commit must be relayed to the Compliance Officer/Designee immediately. That employee shall be assured his/her anonymity will be protected.

The Compliance Officer/Designee shall investigate and document all allegations of misconduct or wrongdoing immediately by conducting an interview(s), reviewing relative documentation and evaluating the facts and circumstances. Factors to be considered during an investigation include, but are not limited to:

1. the degree to which behavior varied from the Standards of Conduct;
2. the seriousness of the behavior,
3. the employee's work history; and,
4. other data and information deemed to be relevant.

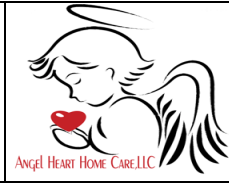
DISCRIMINATION and HARASSMENT

The Agency is committed to treating all persons equally without bias or prejudice, in part, through the enforcement of its policies on human rights, cultural diversity, equal opportunity and sexual harassment. It does not discriminate on the basis of race, color, religion, sex, national or ethnic origin, age, disability, sexual orientation or military service. . Members of the governing body, management and employees are required to promote and maintain a productive work environment that is free from harassment, discrimination and/or disruptive activity., No form of harassment or discrimination will be tolerated, Any or clients who experience harassment or discrimination on the basis of the aforementioned shall inform the Compliance Officer/Designee immediately.

The Agency prohibits retaliation against anyone who makes a complaint of harassing or discriminatory conduct.

RETALIATION

The Agency is committed to disclosure of noncompliance concerns and forbids any action being taken against a member of the governing body, management or employees for making a report. Because employees have a responsibility to report actual or potential wrongdoings, the Agency shall not permit any consequential retaliative, revengeful or harassing actions/activities to be taken against the reporter. Anyone who is involved in retaliation measures shall be subject to disciplinary action, in accordance with the Agency's Disciplinary Action Policy and/or as dictated by law. Should staff members report their own inappropriate or inadequate actions/activities, they shall still be subject to disciplinary action, in accordance with the Agency's Disciplinary Action Policy and/or in accordance with the law.



COMPETITION

The Agency is committed to complying with state and federal antitrust (monopolies) laws and regulations. The Agency shall not establish charges in collusion with competitors and shall not share confidential information with competitors. Additionally, staff shall not share confidential information with competing service providers, such as salaries or charges for services rendered.

The Agency shall not take anticompetitive measures to reduce its competition without first obtaining legal counsel. Communication with competitors about matters that could be interpreted as an attempt to reduce competition or an attempt to fix prices, shall take place only after consultation with legal counsel.

INDUCEMENTS

The Agency does not allow members of the governing body, management and employees to offer any financial inducement, payoff, gift, bribe or kickback or to induce, influence or reward favorable decisions of any government personnel/representative, client, contractor, or person who is in a position of being able to benefit the Agency/its staff. All activities must be carried out without such solicitation and other improper inducements. Staff are prohibited from accepting, offering or soliciting anything of value from anyone doing business with the Agency including clients, physicians, contractors or third party payors. Small gifts and gratuities might be acceptable but only if the Supervisor gives authorization and if the acceptance meets the conditions delineated in the Agency's Acceptance of Gifts Policy

Employees shall notify the Agency's Compliance Officer/Designee, immediately, if anyone:

1. offers an inducement to the employee;
2. offers anything of value because of the employee's employment with the Agency; or,
3. has insinuated, solicited or requested compensation for referrals of business.

WORKPLACE SCRUTINY

Employees should not assume that any item or any part of their work/work-related areas is private and off limits to management. Any personal possessions or materials, which are private and/or confidential, should not be brought to the job site.

Agency Supervisors have been authorized to conduct unannounced and/or impromptu searches of the Agency office, property and equipment to:

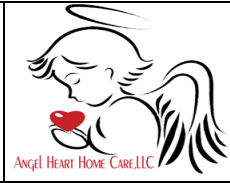
1. promote a safe working environment for staff;
2. help enforce the Agency's Drug and Alcohol Policy;
3. help create an efficient, dependable and constructive staff pool to service its clients; and,
4. assist in the effective operation of the Compliance Program.

In addition, Supervisors have been authorized to monitor and access computers, notebooks and other Agency-issued electronic devices to ensure that reasonable and responsible usage of such equipment, email and the Internet is being applied.

FINANCIAL TRANSACTIONS

The Agency is committed to charging, billing, documenting and submitting claims for reimbursement for services in the manner required by applicable laws, rules and regulations. All staff should know and carefully follow the applicable rules for submission of bills and claims for reimbursement on behalf of the Agency. Staff shall:

1. not possess, copy and/or distribute any Agency documentation, which they are not required to have "in-hand" for the performance of their duties;
2. issue financial reports only to individuals holding "need-to-know" positions and shall do so using protected distribution and retrieval methods;
3. create only those documents required by the Agency and/or the law necessary for the conduction of business;



4. ensure that claims to any payor, including *Medicare*, *Medicaid*, third-party payors, or clients correctly reflect the equipment, supplies or services actually received;
5. record all equipment, supplies and/or services provided to clients;
6. record all communications and billing information with third parties, including health care professionals;
7. accurately and definitively document accounting records, expense accounts, time sheets and other documents; and,
8. support all cost reports with substantiated documentation.

Any suspicions or knowledge of incorrect, misleading or false records or claims shall be reported to the Compliance Officer/Designee immediately.

CREDIT BALANCES

The Agency shall comply with federal and state laws and regulations governing credit balance reporting and shall refund all overpayments in a timely manner.

EXTERNAL AUDITS

The Agency is committed to cooperating with government investigators, as required by law. If an employee receives a subpoena, search warrant or other similar document, he/she shall immediately contact the Compliance Officer/Designee, Manager or Supervisor, before taking any action. The Compliance Officer/Designee, Manager and/or Supervisor are responsible for authorizing the release of, or the copying of, documents. If a government investigator, agent, or auditor comes to the Agency, the Compliance Officer/Designee, Manager or Supervisor should be contacted before an employee discusses any matters with such investigator, agent or auditor.

FALSE CLAIMS ACT

As a deterrent against the submission of fraudulent claims to the federal government for programs such as *Medicare* and *Medicaid* and to provide incentive to report such fraudulent claims, the Agency shall advise its employees about the federal "*False Claims Act*", which states that:

"Any person who knowingly:

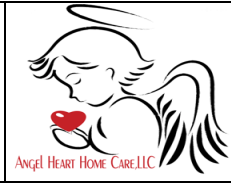
- 1. presents, or causes to be presented, to an officer or employee of the United States Government or a member of the Armed Forces of the United States a false or fraudulent claim for payment or approval;*
- 2. makes, uses, or causes to be made or used, a false record or statement to get a false or fraudulent claim paid or approved by the Government;*
- 3. conspires to defraud the Government by getting a false or fraudulent claim paid or approved by the Government;*
- 4. makes, uses, or causes to be made or used, a false record or statement to conceal, avoid, or decrease an obligation to pay or transmit money or property to the Government; or,*
- 5. submit, or cause another person or entity to submit, false claims for payment of government funds*

are liable for three times the government's damages plus civil penalties of \$5,500 to \$11,000 per false claim."

The terms "knowing" and "knowingly" mean that a person, with respect to information:

- 1. has actual knowledge of the information;*
- 2. acts in deliberate ignorance of the truth or falsity of the information; or,*
- 3. acts in reckless disregard of the truth or falsity of the information, and no proof of specific intent to defraud is required."*

"The False Claims Act contains "qui tam", or whistleblower, provisions. "Qui tam" is a unique mechanism in the law that allows citizens with evidence of fraud against government contracts and programs to sue, on behalf of the government, in order to recover the stolen funds. In compensation for the risk and effort of filing a "qui tam"



case, the citizen whistleblower or "relator" may be awarded a portion of the funds recovered, typically between 15 and 25 percent."

Requirement to be Knowledgeable about False Claims

Employees, managers, contractors and agents shall undergo training on the False Claim Act and the Federal Deficit Reduction Act of 2005 – Section 6032 when hired and at least annually thereafter. They shall also be educated about their role in the prevention of fraud, abuse and waste in the federal health care system.

Responsibility to Report False Claims

All Agency employees, management, contractors and agents have a responsibility to recognize and report known and suspected cases of fraud, abuse and waste. Individuals reporting false claims shall be protected from retaliation and retribution

ASSETS USAGE

The Agency shall provide its staff with the necessary assets and equipment to perform their duties including office equipment such as photocopier, fax machine, computer/notebook and other electronic hardware such as cell phones and iPods, software, hardcopy/electronic record keeping supplies, office supplies and items for personal care services such as blood pressure monitoring tools, transfer belts, incontinence supplies, disposable gloves, masks etc.

Employees shall be prudent and efficient in their usage of Agency equipment, products and supplies. Agency property shall not be used for personal purposes or be removed from the Agency or from clients' homes without prior approval from the Supervisor.

INDEPENDENT CONTRACTORS

All independent contractors, who provide services to the Agency, are expected to comply with all Agency policies and applicable laws and regulations. They shall be informed of the Agencies Policies and Procedures and shall be provided with a copy of these Standards of Conduct. Independent Contractors shall be required to sign the Agency's Independent Contractor Agreement.

COMPLIANCE TRAINING

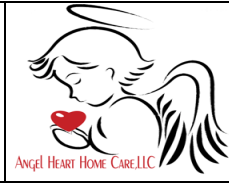
The Agency is committed to providing training about compliance policies and procedures, applicable laws, rules and regulations. In addition, Managers and Supervisors shall advise employees that:

1. compliance with these policies and procedures is a condition of employment; and,
2. violation of policies and procedures could result in accordance with the Agency's Disciplinary Action Policy, up to and including termination of employment

Employees shall be given information on the Agency's Compliance Program during the Orientation process and shall receive regular compliance reviews and/or education at least annually. Subsequent training shall also be provided as new policies and procedures are developed and implemented. Staff are encouraged to seek clarification and/or information from the Compliance Officer/Designee or Supervisor at any time. The Compliance Officer shall be proactive in presenting new or revised compliance information to staff as soon as such information is received.

Employee participation in compliance training shall be documented and shall include attendance and materials distributed at training. Attendance and participation in training programs shall be a condition of continued employment. Failure to comply with the training requirements may result in disciplinary action, in accordance with the Agency's Disciplinary Action Policy.

COMPETENCY



1. The Agency shall adhere to the standards and certifications for Home Care Services, which are: levied by:
 - a. the Department of Human and Health Services (DHHS); and,
 - b. the state.
2. The Agency shall strive to hire Care Aides who can verify they meet DHHS and/or State certification during the job application process.
3. The Agency shall maintain its training, competency, qualification, evaluation and related policies to ensure that competency standards are met and revised, as indicated.
4. Care Aide training shall include both theoretical and practical training and assessment to ensure these standards are being met. At a minimum, Care Aides shall receive 75 hours of training with at least 16 hours dedicated to classroom training prior to practical training and 16 hours of supervised practical training.
5. The practical portion of the training shall be under the general supervision of a Registered Nurse who possesses a minimum of 2 years nursing experience or at least 1 year of experience in the provision of home care. Other individuals may be used to provide instruction under the supervision of a qualified Registered Nurse.
6. The Agency shall ensure that a Registered Nurse conducts performance reviews on each Care Aide at least every 12 months. These appraisals may be conducted while the Care Aide is providing care to a client
7. The competency evaluations shall be documented and the records shall be retained in the individual Care Aide's personnel file.

PERFORMANCE APPRAISALS

Compliance with the Standards of Conduct shall be an element in job performance assessments of all employees. Promoting adherence to the Standards of Conduct shall also be an element in evaluating the performances of managerial and supervisory staff. Their failure to adequately instruct subordinates or to detect violations of the compliance policies and applicable legal requirements may result in disciplinary action, in accordance with the Agency's Disciplinary Action Policy, if their reasonable attentiveness could have alerted them to such violations.

NON COMPLIANCE CONSEQUENCES

All Agency staff shall:

1. perform their duties in a manner consistent with the Agency's policies; and,
2. report violations of local, state or federal laws, rules or regulations to the Compliance Officer or Supervisor, as required by law.

If an employee fails to report violations, and is aware that not reporting violates a legal obligation, then that person could be subject to disciplinary action, in accordance with the Agency's Disciplinary Action Policy and/or could be terminated from employment. The Agency may also take disciplinary action if its investigation determines that a misconduct or wrongdoing has taken place, depending on the severity of the misdemeanor.

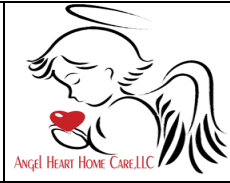
Disciplinary actions shall be in accordance with the Agency's Disciplinary Action Policy, which could consist of 4 stages:

1. verbal warning;
2. written warning;
3. work suspension; and,
4. termination of employment.

All violations of the Standards of Conduct, compliance policies and federal, state and applicable local laws and regulations may be disciplined in a manner deemed appropriate by Manager and/or Supervisor in an attempt to prevent similar misdemeanors from taking place in the future. Disciplinary actions shall be applied consistently and fairly and shall not be influenced by the individual's position in the Agency. i.e. Employees and management personnel shall all be held accountable to the same extent and to the same degree.

The Compliance Officer/Designee shall not have any authority or responsibility for disciplinary measures. He/she will be responsible for investigating, evaluating and making recommendations consistent with the Agency's policies and

Angel Heart Home Care, LLC
825 N. Circle Suite 203, Colorado Springs, CO 80909



procedures to the Supervisor and/or Manager. Any disciplinary action shall be determined and enforced by the Supervisor, Manager and/or governing body, in accordance with the Agency's Disciplinary Action Policy.

CONCLUSION

The Agency shall constantly take measures to ensure that all its activities and actions, and those of its employees, comply with applicable laws and ethical standards. The purpose of these Standards of Conduct is to provide direction to employees to enable them to meet their responsibilities. Employees are expected to comply with all applicable laws, even if they are not dealt with in these Standards of Conduct.

Employees are encouraged to contact the Compliance Officer or Superior if they have any questions or concerns about their obligations.

RECEIPT AND ACKNOWLEDGMENT

All Agency staff shall be given a copy of the Agency's Standards of Conduct to read and sign attesting to the fact that they are responsible for knowing and adhering to these Standards of Conduct. The signed document shall be placed in their personnel file and a copy shall be issued to the staff member. In addition, each time new or revised Standards of Conduct are issued, employees shall be asked to sign a statement certifying that they have received, read, and understood the Standards of Conduct.

I have read these Standards of Conduct and have received a copy of them. I agree to comply with them and should I learn that there has been a violation of these standards, I shall contact the Compliance Officer/Designee, Manager and/or Supervisor immediately.

Employee Signature

Date

Agency Representative Signature

Date