

UHS Code of Conduct





Our **MISSION** is to
provide *superior quality*
healthcare services.

Patients recommend to family and friends;

Physicians prefer for their patients;

Purchasers select for their clients;

Employees are proud of;

Investors seek for long-term returns

Our **PRINCIPLES** define *who we are and what we do.*

We provide Superior Quality Patient Care.

We Value Each Member of Our Team and All Their Good Work.

We are Committed to Being a Highly Ethical Healthcare Provider.

We are Devoted to Serving Our Local Community.

Our **VALUES** are characteristics that help us *accomplish our mission.*

Integrity | Intensity | Intelligence

Our **CULTURE** is *Service Excellence.*

We will provide world-class service that is timely, professional,
effective and efficient to all of our customer groups at all times.



Message from Our President and CEO

Ethics and accountability are central to the core values and mission of UHS. We set high ethical standards for ourselves because caring for our patients is a sacred trust. Our patients and their families place their confidence in us. So do the employees, clinicians, vendors, business partners, investors and the communities we serve. We share the important responsibility of continuously working to uphold our commitment to compliance and ethical behavior.

Our employees are our strongest asset and our Code of Conduct provides expectations and guidance for everyone at UHS. It provides an overview of compliance and builds on the policies and procedures of our Compliance Program, as well as our legacy and reputation as a highly ethical healthcare provider.

At UHS, we lead by example. I encourage you to take time to read the Code of Conduct and make a point to understand how it can help you and your teams protect the health, safety and security of our patients and each other.

By working together, we create a culture that puts patient care first and fosters service excellence, compassion, and the ethical and fair treatment of all.

Thank you for doing your part to help us uphold our commitment to each other and to those whom we are privileged to serve.

A handwritten signature in black ink that reads "Marc D. Miller". The signature is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

Marc D. Miller

UHS President and Chief Executive Officer

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Our Commitment to Ethical Conduct and Integrity

UHS is committed to ensuring the highest ethical conduct and integrity.

UHS' Board of Directors and leadership are committed to compliance with all laws and regulations that govern our organization. This Code of Conduct sets forth the standards by which UHS conducts itself as a leader in the healthcare industry. Our Code of Conduct is designed to be a guide for employees individually and for the organization as a whole, but it is not intended to be a comprehensive rulebook and cannot address every situation. UHS and its facilities have numerous internal policies that support the overall Code of Conduct and provide guidance on a more detailed level. Although this Code of Conduct is directed to employees, the principles, practices and ethical standards apply to all who work with or for UHS including physicians, volunteers, researchers, contractors and suppliers. All individuals who work with or for UHS should uphold these ethical standards.



Our Commitment to our Patients

UHS is committed to delivering superior quality healthcare services. We are committed to being a highly ethical healthcare provider who protects the safety, privacy and dignity of our patients at all times.

QUALITY PATIENT CARE

We're committed to providing quality care that's convenient and accessible. We treat everyone we serve with compassion and believe it is a privilege to serve them. Our commitment to quality healthcare includes making sure that our services are medically necessary and that we use our best efforts to see that such services are provided as safely as possible. Keeping our patients safe is a priority. We are committed to upholding the highest standards of excellence and protecting the safety of our patients.

UHS is committed to business practices and corporate values of compliance with applicable laws and regulations related to the evaluation and determination of whether patients require inpatient treatment and their length of stay at our affiliated facilities. This includes a commitment to compliance with applicable federal and state laws, as well as with all final orders or agreements with federal or state agencies related to patient treatment at UHS' affiliated facilities.



Key Points To Know

- We are committed to providing superior quality healthcare services to patients.
- The safety of our patients is our top priority.

PROTECTING THE PRIVACY OF PATIENT INFORMATION

While providing healthcare services, UHS collects personal and health information from those we serve. Information such as current and past medical conditions, medications and family history are collected to assist healthcare professionals in providing care and treatment. We also collect personal identifying information like address, phone numbers, email addresses and financial and insurance information.

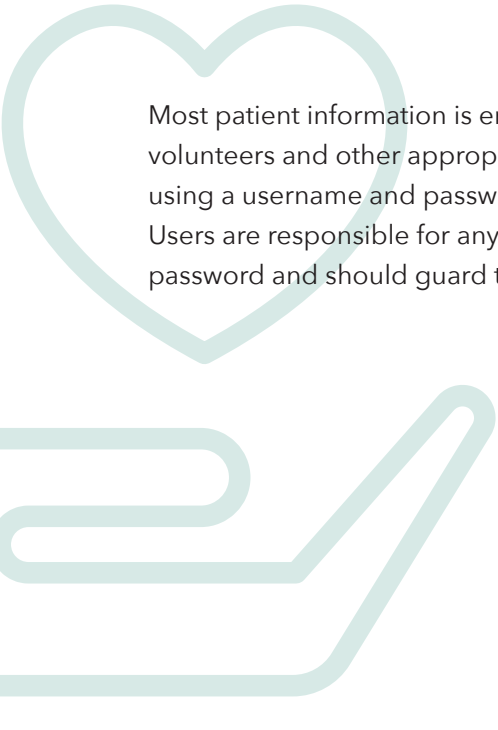
Patient information is protected under the Health Insurance Portability and Accountability Act (HIPAA), the Health Information Technology for Economic and Clinical Health Act (HITECH), as well as state laws and regulations. UHS is fully committed to maintaining the privacy and security of patient information. Patient information should only be accessed by those who have the right to obtain it and should only be used or disclosed to perform one's job duties. Any access, use or disclosure of patient information for any purpose other than to fulfill one's job duties is inappropriate and comes with strict disciplinary action.



I have access to patient information at my facility. I'm curious about a family member or friend's health. Can I look at their health record?



No. You should only access patient information when it is required to perform your specific job duties. Accessing patient information for any other reason will result in disciplinary action including termination.

A large, light green heart shape is positioned behind the text. Below the heart, there is a stylized graphic of a hand, also in light green, with fingers slightly curled as if holding something.

Most patient information is entered and stored in computer systems. Employees, physicians, volunteers and other appropriate individuals are given access to these computer systems using a username and password. The sharing of usernames and passwords is not allowed. Users are responsible for any access to patient information made using their username and password and should guard this information carefully.



My supervisor asked me to share my username and password with a new employee until that employee receives their own username. Is that OK?



No, you should not share your username and password with anyone. You are accountable for any information that is accessed with your username and password. If you feel you cannot approach your supervisor, contact your Facility Privacy Officer for guidance.

We should exercise care and caution whenever we share patient information in person or by mail, fax or email. We must ensure that patient information is protected and only given to the patient or those who have been granted permission to access that information. If you believe patient information may have been given or sent to the wrong person, contact your Facility Privacy Officer immediately to assist in addressing the concern. It is possible a breach of the patient's privacy has occurred and may need to be reported to the patient or appropriate government authorities.

When disposing of patient information, always be sure to place it in a confidential shredding bin and not in a recycling or trash bin. Patient information must be protected even when you're discarding it.



I accidentally provided a patient with someone else's discharge instructions. What should I do?



Contact your manager or Facility Privacy Officer or the Compliance Hotline right away to determine whether the disclosure of the information has resulted in a breach of patient privacy. Retain any information that was returned to you so it can be used to support an investigation.



I accidentally faxed a document that contained patient information to the wrong person. What should I do?



Contact your manager, Facility Privacy Officer or the Compliance Hotline right away to determine whether the disclosure has resulted in a breach of patient privacy.



Key Points To Know

- Patient information should only be accessed, used or disclosed to fulfill your specific job duties.
- Never access patient information of family members, friends, co-workers or others for personal use.
- Do not discuss patient information in public areas like hallways, elevators or cafeterias. Lower your voice when discussing patient information in patient care areas that aren't enclosed or where others may hear.
- Never use your personal cell phone to text patient information or to take a picture of a patient or any part of a patient.
- If patient information is given or sent to the wrong person, notify your manager, your Facility Privacy Officer or the Compliance Hotline right away.
- Never share your username and password with anyone, including your supervisor, manager or the IT Department.
- Do not remove patient information from a facility unless you are required to do so to perform your job duties.
- Dispose of items containing patient information in a shredding bin, not in the recycling bin or trash. For items labeled with patient information (e.g., medication containers, IV bags, patient wristbands), make sure the patient information is illegible before discarding them.

EMERGENCY MEDICAL TREATMENT AND LABOR ACT (EMTALA)

UHS facilities comply with the Emergency Medical Treatment and Labor Act (EMTALA) by providing emergency treatment to all individuals coming to our facilities regardless of their ability to pay. Every patient seeking emergency medical care at a UHS facility has the right to receive a medical screening examination. This exam determines whether the patient has an emergency medical condition or is in active labor. If an emergency medical condition exists, the patient has the right to receive stabilizing treatment within the capability of the facility. UHS facilities will not delay the medical screening exam or necessary stabilizing treatment in order to seek financial and personal information.

BILLING AND CODING INTEGRITY

When a patient receives care at a UHS facility, clinical and billing codes are assigned to their care based on the services they received. UHS strives to maintain compliance with all coding and billing requirements. UHS staff members handle the billing of patient care with the highest integrity and in compliance with all federal, state and private health plan requirements.

The government is particularly concerned about the integrity of billing for healthcare services. Certain laws exist to ensure that fraud, waste and abuse do not occur when paying for healthcare services. A person commits **fraud** when they knowingly make incorrect statements in an effort to gain some kind of benefit. In the healthcare industry, fraud could occur when a healthcare provider sends a claim to a health plan to pay for something the patient didn't receive. This can result in increased costs to the government or the patient's health plan. The word **waste** refers to the inefficient use of resources. In healthcare, this might mean that a patient is receiving more services than are medically necessary to treat their condition. The word **abuse** refers to ways in which healthcare providers might abuse the system for their own gain by finding ways to inappropriately bill the government or other healthcare providers.

One of the tools the government uses to protect against fraud, waste and abuse is the False Claims Act. This Act states that any person who knowingly submits a "false" claim to the government may be required to pay back three times the amount originally paid in addition to paying significant fines and penalties. In addition to complying with coding and billing requirements, we should also avoid any activity that might give the appearance that we are inappropriately billing for patient services.

The False Claims Act offers a financial reward for individuals, known as whistleblowers, to make reports of fraud on behalf of the government. These individuals may be paid a percentage of the recovery for providing the information. In addition, the False Claims Act prohibits retaliation against individuals who exercise their rights or obligations under the law. UHS prohibits anyone working for or with the organization from knowingly presenting claims for payment which are false or fraudulent.



Key Points To Know

- A patient should never be charged or billed for a service or product they did not receive.
- A patient should only receive those services, products, and procedures that are medically necessary for their care as determined by their healthcare provider.
- All procedures performed should be documented using the correct medical codes.
- Patient condition should be properly diagnosed by their healthcare provider and the healthcare provider should be correctly paid based on that diagnosis.
- Care provided to the patient should be documented in the patient's medical record to justify the services provided and the payment received.
- Never submit a claim for payment to the government that you know is false, inaccurate, or cannot be supported by appropriate documentation and recognized standards of care.



I'm concerned about the way we're billing patients for the care they receive. What should I do?



Tell your manager of your concern or contact your Facility Compliance Officer or the Compliance Hotline right away. Billing rules and processes can be complex, but it is always good to have concerns reviewed to ensure we are billing our patients according to payer and regulatory requirements.

Our Commitment to our Employees²

We value and respect our employees by providing an engaging, productive, safe and drug- and alcohol-free work environment.

MAINTAINING A RESPECTFUL WORK ENVIRONMENT

You have the right to work in an environment that is safe, productive and free from harassment. UHS does not tolerate any form of harassment or bullying in our workplace, particularly when such conduct is based on characteristics protected by law, including sex, race, age, religion and national origin. Sexual harassment is a particular form of prohibited conduct that may include harassment based on sex, gender, gender identity or expression and sexual orientation. Behavior that creates an intimidating, hostile or offensive work environment or that is harassing – including comments or actions of a sexual nature – are not acceptable. For more information related to maintaining a respectful work environment, please see your facility's policies and procedures.



An employee in my department frequently makes inappropriate jokes including references of a sexual nature. What should I do?



Contact your manager or Human Resources representative right away. Or use the Compliance Hotline. UHS strongly supports an environment free from inappropriate workplace conduct, including sexual harassment.

2. As stated above, all "employees" referenced herein are employees of subsidiaries of Universal Health Services, Inc. and NOT employees of Universal Health Services, Inc.

EQUAL EMPLOYMENT OPPORTUNITY

UHS strives to build an environment that is inclusive where all employees feel valued, heard and respected and where everyone can be their true, authentic selves. We value the diversity of our workforce and have longstanding policies to ensure equal opportunity in employment to all employees and applicants for employment. We do not allow discrimination on the basis of any legally protected characteristics such as race, color, religion, sex (including pregnancy, gender identity and sexual orientation), national origin, age (40 and over or as otherwise defined by applicable law), disability or genetic information (including family medical history) or protected veteran status. Our Equal Employment Opportunity policy applies to all terms and conditions of employment, including but not limited to hiring, placement, promotion, termination, layoff, recall and transfer, leaves of absence, compensation and training.

MAINTAINING A SAFE WORK ENVIRONMENT

UHS is committed to providing a safe and healthy work environment for all employees. This includes providing you with training, education and information to reduce the risk of injury or illness. You should immediately notify your supervisor and complete the appropriate reports about any workplace injury, or risk of injury, so that timely action may be taken to resolve the issue. If you identify an unsafe condition in the work area or with the equipment, notify your supervisor or Human Resources immediately. For more information related to maintaining a safe work environment, please refer to your facility's safety management policies and procedures.



USE AND MANAGEMENT OF CONTROLLED SUBSTANCES

UHS is a drug- and alcohol-free workplace. The use of illegal drugs and abuse of controlled substances in the workplace is not allowed. Involvement in the unlawful use, sale, manufacture, distribution or possession of controlled substances, illicit drugs or use of alcohol in the workplace, or working under the influence of such substances, is not allowed and may result in disciplinary action.

In addition, many employees have access to prescription drugs and controlled substances in the workplace. Prescriptions and controlled substances must be handled properly and only by authorized individuals. If you become aware of inadequate security or unlawful behavior, report this immediately. UHS strictly enforces the reporting of any misuse of medications by staff or privileged practitioners.

For more information related to the use of substances while in the workplace, please refer to your facility's Drug and Alcohol Policy. If you're aware of any concerns related to the improper use and handling of drugs while in the job setting, please contact your manager or supervisor immediately. You may also report the concern to your Facility Compliance Officer or through the Compliance Hotline.

EMPLOYEE ASSISTANCE PROGRAM

UHS provides a confidential Employee Assistance Program (EAP) to provide help with everyday issues that may affect you or your family including interpersonal relationship conflicts, financial concerns, stress management, or substance abuse. Contact the Human Resources Department for more information on the benefits this program can offer. Many of the services provided by the EAP program are free and referrals to other programs may be covered under your medical insurance plans.



Our Commitment to Physicians at UHS Facilities³

We value our physicians by ensuring our partnership with them is consistent with all rules and regulations.

THE STARK LAW AND ANTI-KICKBACK STATUTE

Physicians play an important role in patients' healthcare by diagnosing medical conditions and providing care plans and services. Because the physician acts as the gatekeeper for patient care, it is important that UHS maintain appropriate relations with physicians.

Healthcare providers must never offer or give a physician any good or service, including payment, in exchange for the referral of patients to their service. Two important laws, the Stark Law and the Anti-Kickback Statute, provide the legal guidelines around appropriate relations between physicians and the healthcare providers to whom they refer patients.

The Stark Law is the common industry name used to refer to the Federal laws that do not allow physician self-referrals of Medicare patients. The Stark Law addresses the inherent conflicts of interest that can exist when a physician gains financially from making patient care referrals. The federal Anti-Kickback Statute is a criminal statute that does not allow the exchange (or offer to exchange) of anything of value in return for referral of patients to UHS.

PHYSICIAN GIFTS OR AWARDS

The Stark Law and federal Anti-Kickback Statute also guide how we provide any item of value to a physician such as a gift or award. There's a limit on the value of gifts or other non-monetary items that can be given to a physician by UHS or its employees under these laws.

Before giving a gift to a physician, check with your Facility Compliance Officer to make sure it's appropriate to give the gift and that the physician has not already reached their annual limit for receiving such items. There are numerous criminal and financial penalties for violating the Stark Law and the Anti-Kickback Statute. For more information, contact the Corporate Legal Department or the Corporate Compliance Department.

3. Most physicians practicing at UHS facilities are not employees of those facilities but are independent practitioners with medical staff privileges. Any reference to "our physicians" in this document does not represent employment or agency with UHS or any of its subsidiaries for such physicians.



Key Points To Know

- Never provide payment to a physician that gives the appearance that we are paying them for patient referrals.
- Do not give a gift to a physician without first checking with the appropriate personnel to ensure that the gift is appropriate and is allowable within legal limits.



I work closely with a physician in our department. His wife recently had a baby and we would like to give him a gift. Can we do that?



Maybe. There are limits to the value of gifts UHS or its employees can give to physicians or their family members without creating legal risk. Check with your Facility Compliance Officer first who can confirm with the appropriate persons whether the physician has already reached their annual limit.

Our Commitment to our Business Partners

We work with our business partners in a way that honors our obligations. During our partnership, we make every effort to ensure all applicable laws governing the relationship are followed.



CONFLICTS OF INTEREST

A conflict of interest can arise any time an employee's personal interests conflict, or may appear to conflict, with the best interests of UHS. As UHS employees, each of us has a duty and obligation to be loyal to our employer. Because our primary focus is our patients' care and well-being, UHS employees must be able to make decisions that are free from bias, personal interests, and actual or perceived conflicts of interest. If you have any questions as to whether an outside activity or private interest might create a conflict of interest, contact your Facility Compliance Officer for guidance. Following are some examples of potential conflicts of interest.

Relations with vendors, suppliers, contractors and consultants

UHS works with many vendors, suppliers, contractors and consultants. Sometimes these outside organizations will offer gifts to employees as a means of promoting their business with UHS. Certain substantial gifts may pose ethical issues. You should not accept substantial gifts, business courtesies or favors from vendors, suppliers or contractors. Receiving or offering gifts could violate state or federal law, including the Anti-Kickback Statute, and present a conflict of interest.

For more information on accepting gifts from outside organizations, refer to your facility's policies and procedures.



I work closely with the vendor of some equipment used in my department. The vendor invited me to attend a professional sporting event with them. Can I attend?



There are limits on the types and value of gifts employees can receive from vendors, suppliers or contractors because it may create a conflict of interest. Refer to your facility policies and procedures for more guidance on the value and types of items you can accept from vendors, suppliers and contractors.



Relations with post-acute care providers

When patients leave the care of a UHS facility, they are sometimes referred to other post-acute care providers such as home health, hospice, skilled nursing, or ambulance transport. UHS employees must not accept gifts or entertainment to avoid the appearance of inappropriately being rewarded for the referral of patients to these providers. Patients have the right to choose their healthcare provider without undue influence from UHS or other caregivers. If you ever encounter a situation where a vendor or post-acute care provider is pressuring you or another UHS employee to accept a gift, contact your Facility Compliance Officer for assistance.



A representative from a home health company dropped off a number of gift cards for a local spa for our department as an expression of gratitude for referring patients to their service. Can we accept these?



No, employees should not accept gifts from healthcare providers to whom UHS refers patients as it could create a conflict of interest and risk violating the Anti-Kickback Statute. Politely thank the home health representative but ask them not to give the gift cards to the department.

Outside business ventures

Some employees may be involved in personal outside business ventures such as acting as a sales representative for a consumable product, selling items as part of a hobby, or involvement in civic or political groups. You should make sure that your non-work activities do not conflict with your role at UHS. You should never spend time in your role at UHS or use UHS resources engaging in activities that support your personal outside business ventures or interests. Consult your Facility Compliance Officer for guidance on addressing these situations.



I work as a nurse in a UHS hospital. I also work as a sales representative for a cosmetic company on the side. Can I share information about the products I sell at UHS?



No, you may not conduct personal business on UHS time or in UHS locations.

Relations with patients and their families

UHS works hard to treat patients fairly, equitably and with the highest quality of care. Employees must ensure their relationship with a patient or their family member is maintained at an appropriate distance. On occasion, patients or their family members may want to express their appreciation by giving employees gifts. You must not accept gifts that may create a conflict in the manner in which you fairly and equitably provide care to all patients. You must never accept monetary gifts (including gift cards) from patients or their family members. Gifts that are of low dollar value, perishable and are shared with the entire department, such as food items or flowers, are acceptable.



Key Points To Know

- Politely decline offerings of gifts from vendors or suppliers or outside healthcare providers.
- Do not spend time while at work promoting a personal business venture, hobby or involvement in civic or political activities.

Our Commitment to our Communities

We honor our commitments to our communities by being truthful about the services we offer.

PUBLIC RELATIONS, MARKETING AND ADVERTISING

We have a responsibility to our patients to represent UHS' products and services to the public in a manner that is true, fair and understandable. UHS will market and advertise its services and promote the organization in compliance with applicable law. UHS will not use or disclose protected health information (PHI) for the purposes of marketing without written authorization from the patient.

Media requests for information regarding a patient's condition, interviews with staff members, visitors, or patients should be referred to the Public Relations (PR) team for guidance.



A reporter and cameraman from a local television station approached me while leaving work to ask about the organization. Is it OK to respond?



No, UHS handles media inquiries in a centralized, coordinated manner. Only authorized representatives of UHS may respond to media questions and requests. If you are ever approached by a reporter, politely decline the request and direct them to the PR team for appropriate response by an authorized UHS spokesperson. For more information on guidelines around media relations, please see UHS' Media Relations policy.



USE OF SOCIAL MEDIA

When using social media sites such as Facebook, Twitter, Instagram, LinkedIn and TikTok for personal use during non-work hours, UHS expects employees to act responsibly. Employees may not post proprietary, patient or confidential information on social media sites. It is inappropriate to associate UHS in social media posts to solicit or endorse a personal business venture, political candidate or religious cause. If you see an inappropriate post or if you have questions prior to posting something yourself, contact the PR team or Human Resources. For more information on guidelines around social media use, please see UHS' Social Media policy.

PROMOTING PRICE TRANSPARENCY

UHS is committed to helping patients understand the cost of their healthcare services. Federal price transparency laws require that hospitals provide information on their public website so that patients can understand the costs associated with those services.



Key Points To Know

- Refer communications from media outlets to the Public Relations team.
- Never post information, pictures or images about a patient in a social media post. Even if the name of the patient is not mentioned, it could still result in a breach of patient privacy.
- Be responsible in your use of social media. As an employee of UHS, you represent the values of the organization.



Your Resources

THE COMPLIANCE PROGRAM

UHS' Compliance Program is designed to establish a culture that promotes prevention, detection and resolution of conduct that is not consistent with this Code of Conduct or which does not conform to federal and state laws and private payer health plan requirements.

UHS' Compliance Program is built upon the United States Federal Sentencing Guidelines' seven elements of an effective compliance program. They include:

- ① Written standards of conduct.
- ② Oversight responsibilities including the designation of a compliance officer and a Compliance Committee.
- ③ Conducting effective education and training.
- ④ Developing effective lines of communication.
- ⑤ Enforcing standards.
- ⑥ Auditing and monitoring.
- ⑦ Responding to identified concerns and developing corrective action plans.

ASKING QUESTIONS OR REPORTING CONCERNS

UHS has an open-door policy that encourages employees to ask questions or express concerns about suspected violations of federal, state and local laws as well as our Code of Conduct.

You're encouraged to contact your immediate supervisor, your Facility Compliance Officer or the Corporate Compliance Department regarding any question or suspected violation of legal or regulatory requirements. For more information on reporting concerns, please refer to UHS' Reporting Unethical or Illegal Conduct policy and procedure found on the UHS Connect site under "Compliance Connection."

NON-RETALIATION POLICY

Each employee has the responsibility of reporting concerns that are not consistent with this Code of Conduct or all other rules and regulations. On occasion, an employee may hesitate to report suspicious activity for fear of being retaliated against. UHS prohibits any form of retaliation against an employee who reports, in good faith, acts of misconduct or wrongdoing. Retaliating against someone for expressing a concern is subject to disciplinary action. For more information, please refer to UHS' Non-Retaliation policy found on the UHS Connect intranet site under "Compliance Connection."





THE COMPLIANCE HOTLINE

UHS maintains a Compliance Hotline as an alternative reporting mechanism if you observe situations that are not consistent with our Code of Conduct or applicable rules and regulations. The Compliance Hotline is available 24 hours a day, 365 days a year, and is managed by an external company. This helps ensure that information received through the Compliance Hotline will be confidential.

The Compliance Hotline service is available by calling **800.852.3449** or online by visiting **uhs.alertline.com** and clicking on the “Report a Concern” button.

You may also submit an anonymous call or report without disclosing your identity. All reports made to the Compliance Hotline are forwarded to UHS’ Corporate Compliance Department for review, and investigation, where appropriate. For more information about use of the Compliance Hotline, please refer to UHS’ Compliance Hotline policy and procedure found on the UHS Connect intranet site under “Compliance Connection.”

Consider calling the Compliance Hotline if:

- You do not feel comfortable talking with your supervisor about a suspected wrongdoing.
- You expressed a concern to your supervisor, but you don’t feel it was addressed.
- You notice wrongdoing outside of your department or supervisor’s scope of authority.
- You’re more comfortable remaining anonymous.
- You feel you are putting your job at risk by making a report.



I'm concerned about a regulatory or legal requirement that we're not following in my department, but I do not feel comfortable discussing it with my manager. What should I do?



If you don't feel comfortable bringing an issue to your manager's attention for any reason, you may contact your Facility Compliance Officer or the Corporate Compliance Department. You may also use the Compliance Hotline available by phone and on the internet.



I want to report a policy violation but don't want to reveal my identity. How can I do this?



The Compliance Hotline allows you to ask questions or report concerns anonymously – you don't have to reveal your identity. Just remember, it may be difficult for UHS to follow up on your concern if you don't give enough information to begin a proper investigation. You may receive follow-up requests asking for more information through the Compliance Hotline, which will still allow you to remain anonymous. Keep in mind, your identity might be revealed based on the nature of your call or the kind of information you provide. Every effort will be made to protect the anonymity of reports through the Compliance Hotline.



If you have any questions related to UHS' Code of Conduct, please contact the Vice President, Chief Compliance Officer in the Corporate Compliance Department.

UHS reserves the right to update this Code of Conduct at any time as policies and procedures or legal and regulatory requirements change.



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