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|-----------------------------------------------------------------------------------|--------------------------------|-----------|---------|
|  | Ethics & Compliance Department |           |         |
|                                                                                   | Policy No.: 17                 | Created:  | 08/2019 |
|                                                                                   |                                | Reviewed: | 06/2026 |
|                                                                                   |                                | Revised:  |         |

## POLICY AND PROCEDURE DEVELOPMENT

### SCOPE

Applies to all Envision clinicians and teammates. For purposes of this policy, all references to “clinician” or “teammate” include temporary, part-time and full-time employees, independent contractors, officers and directors.

### PURPOSE

Envision Healthcare Operating, Inc. and its subsidiaries and affiliates (“Envision” or “the Company”) has adopted this Policy and Procedure Development Policy to establish protocols for the development, implementation, review and revision of Envision Code of Business Conduct and Ethics (the “Code”) as well as policies and procedures for areas that: (1) pose risk for non-compliance with laws and regulations, (2) promote compliance with applicable Federal health care program requirements and (3) promote compliance with the Code of Business Conduct and Ethics.

### POLICY

It is the Company’s policy to rely on the Ethics & Compliance Department to identify areas of compliance concern which should be documented as formal policies and procedures.

All compliance policies and procedures must adhere to the format in the template provided as Attachment A to this policy.

### PROCEDURE

#### Development of Policies and Procedures

For areas of potential compliance risk, the Ethics & Compliance Department will determine if it is necessary to have corporate written guidance regarding a potential compliance risk. If corporate written guidance is required to prevent non-compliance, the Ethics & Compliance Department will identify whether there is an existing policy which addresses the potential compliance risk in question. If a policy does not exist, the Ethics & Compliance Department will proceed with developing a new policy to provide corporate guidance for the potential compliance risk.

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|                                                                                   |                                           | <b>Reviewed:</b> | 06/2026 |
|                                                                                   |                                           | <b>Revised:</b>  |         |

## Approval

All policies and procedures must be reviewed and approved by the Chief Compliance Officer. Once approved by the Chief Compliance Officer, policies will be presented to, reviewed and approved by the Executive Compliance Committee and the Compliance and Quality Committee of the Board.

## Implementation

The Ethics & Compliance Department will communicate information regarding new and/or revised Code or policies to all affected individuals within thirty (30) days of the approval date for the new and/or revised policies by posting to the website within thirty (30) days of the approval date or otherwise emailing or communicating to affected individuals.

## Annual Review

The Ethics & Compliance Department will review and update the Code and all compliance policies, when necessary, in the normal course of its review of the Corporate Ethics & Compliance Program. At minimum, the Code and all compliance policies and procedures will be reviewed on an annual basis.

## Revisions

If it is determined the Code or a policy should be revised, the Ethics & Compliance Department will revise the Code or policy and present the revised Code or policy to the appropriate compliance committees as described under the Approval section of this policy.

## Retiring an Existing Policy

From time to time, the Ethics & Compliance Department may determine that a policy is no longer needed. Upon making the determination that a policy should be retired, the Chief Compliance Officer will make a written request to the appropriate compliance committees, as outlined under the Approval section of this policy, before retiring the policy.

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## POLICY REVIEW

The Ethics & Compliance Department will review and update this Policy, when necessary, in the normal course of its review of the Company's Ethics & Compliance Program.

## ATTACHMENT A

|                                                                                   |                                |           |  |
|-----------------------------------------------------------------------------------|--------------------------------|-----------|--|
|  | Ethics & Compliance Department |           |  |
|                                                                                   | Policy No.:                    | Created:  |  |
|                                                                                   |                                | Reviewed: |  |
|                                                                                   |                                | Revised:  |  |

### POLICY TITLE

### SCOPE

List a description of the affected facilities, departments and functions.

### PURPOSE

Provide a general statement describing the intent of the policy and procedure.

### POLICY

Provide a description of the policy.

### PROCEDURE

Provide a description of the principal tasks required for the functionality of the policy.

### POLICY REVIEW

Include language regarding the review process and cadence.