

	Ethics & Compliance Department		
	Policy No.: 3	Created:	01/2007
		Reviewed:	06/2026
		Revised:	08/2019

REPORTING POTENTIAL ISSUES OR AREAS OF NON-COMPLIANCE

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 Reporting Potential Issues or Areas of Non-Compliance Policy to provide an overview of the responsibilities that clinicians, teammates and the Ethics & Compliance Department have to ensure the Company operates within the parameters of all applicable healthcare laws and regulations.

POLICY AND PROCEDURE

Introduction

Adherence to the Envision’s Ethics & Compliance Program is vital. Accordingly, violations of law or the Ethics & Compliance Program will not be tolerated. Violators will be subject to corrective action in accordance with any applicable collective bargaining agreements and other applicable policies and procedures of the Company. Leadership is responsible for ensuring that clinicians and teammates are aware of and adhere to the provisions of the Code of Business Conduct & Ethics manual (the “Code”) and the Ethics & Compliance Program. For clarification or guidance on any point in the Code or related to the Ethics & Compliance Program generally, please contact a member of the Ethics & Compliance Department.

Duty to Report and Compliance Officer Investigations

Clinicians and teammates are expected to report any suspected violations of the Code, Ethics & Compliance Program or other irregularities to their supervisor, manager or a member of the Ethics & Compliance Department. The Company has established a confidential Disclosure Program enabling clinicians and teammates to

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disclose any practices or procedures that the clinician or teammate believes may be inappropriate. These issues may relate to possible Medicare and Medicaid Fraud or Abuse, federal, state, or local laws or regulations or Company policies and procedures. The Company requires an internal review of any such disclosure and will conduct the proper follow-up.

The Company takes all reports of non-compliance seriously. Reports may be made in one of several ways:

- Through the Ethics and Integrity Helpline at 877-835-5267;
- Online Compliance Form located at www.envisionhealth.com/compliance
- In person, through contact with a supervisor, Human Resources, Legal Department, the Chief Compliance Officer or other member of the Ethics & Compliance Department;
- By e-mail, to complianceconcerns@envisionhealth.com; or
- In writing, to the Chief Compliance Officer at:
Chief Compliance Officer
20 Burton Hills Blvd.
Suite 300
Nashville, TN 37215

Both the Ethics & Integrity Helpline and the online Compliance Form can be accessed 24/7 and clinicians and teammates have the option to report anonymously, as well as follow up on submitted reports.

No adverse action or retribution of any kind will be taken by the Company against a clinician or teammate solely because he or she reports in good faith a suspected violation of the Code, Ethics & Compliance Program or other irregularity by any person other than the reporting clinician or teammate. The Company will attempt to treat such reports confidentially and to protect the identity of the clinician or teammate who has made a report to the maximum extent consistent with fair and rigorous enforcement of the Code and the Ethics & Compliance Program.

Any manager, supervisor or other high-ranking clinician or teammate who receives a report of a suspected violation or irregularity shall contact a member of the Ethics & Compliance Department.

Upon receipt of the suspected Code or compliance violation, the Ethics & Compliance Department shall immediately begin an investigation. The investigation by Ethics & Compliance personnel shall include interviews and the review of relevant documents. If the Chief Compliance Officer believes that the integrity of an investigation may be compromised because of the presence of clinicians or teammates under investigation, the clinician(s) or teammate(s) allegedly involved in

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the misconduct may be removed from their present work activity, with or without pay, pending the outcome of the investigation, and after consultation with the Chief Compliance Officer and relevant management personnel.

Confidentiality and Anonymity in Reporting

Confidentiality

The Ethics & Compliance Department will maintain confidentiality of the subject matter reported to the extent that it will not impair the investigation.

Anonymity

In reporting potential concerns or possible misconduct, individuals may elect anonymity or may provide their identity along with the substance of their report. Concerned individuals may reach out to the Ethics & Compliance Department via the Compliance helpline number, online Compliance Form or email, all listed above in Section II. The Ethics & Compliance Department will, within the limits of the law, honor requests for anonymity for individuals who report concerns or possible misconduct.

Disclosure Log

The Chief Compliance Officer (or designee(s)) shall maintain a disclosure log. Each disclosure shall be recorded in the log within a reasonable period after receipt. The disclosure log shall include a summary of each disclosure received (whether anonymous or not), the status of the respective internal reviews, and any corrective action taken in response to the internal reviews.

Corrective Action

The Ethics & Compliance Department will work with managers and supervisors to inform any clinician or teammate of allegations that may have been filed against him or her arising from a violation of the Ethics & Compliance Program. Such notification may be delayed pending the outcome of any internal investigation the Chief Compliance Officer deems appropriate. The clinician or teammate will be given the opportunity, as appropriate, to state his or her position before any corrective action is imposed.

If the Ethics & Compliance Department determines that a clinician or teammate has clearly violated the law, Code or Ethics & Compliance Program, that clinician or

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teammate shall be subject to appropriate corrective action as determined by the applicable supervisors and Human Resources Department.

The extent of the corrective action will depend on the seriousness of the offense. A record of the event and the corrective action imposed shall be maintained in the clinician's or teammate's personnel file.

Corrective action will be taken against a violator's manager(s) or supervisor(s) to the extent that circumstances reflect inadequate supervision or a lack of due diligence. In addition, managers and supervisors may be sanctioned for failing to detect non-compliance with applicable policies and legal requirements, where reasonable diligence on the part of the manager or supervisor would have led to the discovery of any problems or violations and given the Company the opportunity to correct them earlier. A record of the event and the discipline imposed against the manager or supervisor shall be maintained in his or her personnel file.

Retaliation

Retaliation will not be tolerated against any clinician or teammate. Corrective action will be taken against any clinician or teammate who retaliates, directly or indirectly, against a clinician or teammate who makes a good faith report of a violation of law, Code or the Ethics & Compliance program.

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.