envision	Ethics & Compliance Department		
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		Reviewed:	06/2026
		Revised:	09/2020

EXCLUDED OR DEBARRED PERSONS OR ENTITIES

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 Excluded or Debarred Persons or Entities Policy in order to ensure compliance with all applicable federal or state laws and regulations related to the employment of individuals or entities who are ineligible to participate in any federal or state healthcare reimbursement program including, but not limited to, Medicare and Medicaid.

POLICY AND PROCEDURE

Introduction

The Company is committed to hiring and retaining all clinicians and teammates who will meet the Company's high ethical standards. The Company has an affirmative duty to knowingly avoid hiring or retaining clinicians or teammates who have engaged in unlawful conduct including fraud or financial irregularities or other conduct which may harm other clinicians, teammates, patients or the general public.

The Company will not knowingly employ or engage any individual or entity that is listed by a federal agency as excluded, debarred or otherwise ineligible for federal programs. The Company shall not allow any person convicted in any local, state or federal court of any felony regarding healthcare fraud or abuse to hold the position of officer or director of the Company.

Disclosure

All prospective clinicians and teammates are required to disclose whether they are, or have ever been, an ineligible person or ineligible entity at the time of initial hiring or contracting. Current clinicians and teammates must immediately disclose any

exclusion, suspension, debarment, conviction or other event that has made or would have the potential to make that person or entity an ineligible person or ineligible entity.

Screening

Initial Screening

Prior to hiring any new clinician or teammate, or contracting with entities, the Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) and GSA (General Services Administration) System for Award Management (SAM) are reviewed to ensure none are excluded from participating in federal programs. For new clinicians and teammates, the OIG and GSA exclusion checks are conducted by Human Resources or its designee as part of the new hire and/or credentialing process. For new contractors, the exclusion checks shall be conducted by a designee as part of the initial due diligence process.

Monthly Screening

After the initial screening checks are conducted, the Ethics & Compliance Department, or its designee, conducts monthly checks of the OIG and GSA exclusion lists thereafter to ensure no clinicians, teammates or contractors are listed as excluded or debarred. Monthly screenings of State exclusions databases are also conducted for all states in which the Company conducts business and data is available.

Removal of Ineligible Person

Prospective Clinicians/Teammates/Contractors

If a prospective clinician, teammate or contractor is identified as an ineligible person or ineligible entity during the initial hiring or contracting process, the Company will not employ or contract with the ineligible person or ineligible entity.

Current Clinicians/Teammates/Contractors

If a current clinician or teammate becomes an ineligible person or ineligible entity after the initial screening, the clinician, teammate or contractor will be placed on unpaid leave or terminated and not eligible for reinstatement, rehire or contract renewal until they have been reinstated into participation with the federal health care program. In the event the Company has submitted for reimbursement for services provided, ordered or referred by an ineligible person or ineligible entity, the Company will refund such funds to the appropriate governmental payor.

Documentation of Completed Screenings

The Ethics & Compliance Department, or its designee, will maintain confirmation that the screenings have been completed. As requested, or as contractually required, the Chief Compliance Officer or designee will provide attestations that the monthly screenings have occurred and will acknowledge on the attestations the results of the screenings.

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.