



Compliance Program

Optum Compliance Program

INTRODUCTION

Optum is a leading health services business and is a wholly owned subsidiary of UnitedHealth Group. Optum's businesses offer capabilities that deliver integrated, intelligent solutions that work to modernize the healthcare system and improve overall individual and population health.

The people of UnitedHealth Group and Optum, as individuals and as a company, share five values that best describe how we aspire to conduct ourselves and our business: integrity, compassion, relationships, innovation and performance. Together, these values describe the kind of behavior expected of us by the people we serve, that each of us must work toward every day. Integrity purposefully leads the list. Integrity means we are reliably honest, fair and morally responsible, always acting in the best interests of our customers, consumers and the communities where we live and work. How we conduct our work day-to-day is important to fulfilling our mission to help people live healthier lives and to help make the health system work better for everyone. Health care is among the most personal, intimate aspects of everyone's life, and each individual we touch must be able to trust in our commitment to integrity. It is the foundation for each of the four other values and everything we do at UnitedHealth Group. The UnitedHealth Group Code of Conduct (the "Code") provides guidelines for helping to sustain the highest possible standards of ethical behavior in our work.

Optum has aligned its Compliance Program with the UnitedHealth Group Compliance Program and its employees and contractors are subject to the Code, ensuring that the Optum Compliance Program meets corporate, industry and regulatory standards. Optum's Compliance Program is designed to prevent, detect and correct non-compliance with corporate, regulatory and legal requirements. Preventing, detecting and correcting misconduct safeguards UnitedHealth Group's reputation, assets and the reputation of its employees. If misconduct occurs, Optum Compliance will investigate the matter and, if necessary, take disciplinary action and implement corrective measures to prevent future violations.

As a participant in federal and state funded healthcare programs, Optum is subject to heightened standards of compliance and must ensure that it delivers program services to plan sponsors, clients, partners, and beneficiaries in compliance with applicable laws and in a manner that promotes honesty, integrity and accountability.

MISSION

The objective of the Compliance Program is to establish and maintain an organizational culture that encourages the highest level of ethical conduct and promotes prevention and detection of conduct that does not conform to the UnitedHealth Group-wide Code of Conduct, policies and procedures and applicable federal and state laws; ensure operational accountability; and provide standards of conduct for compliance with the obligations that govern our business.

Optum's Compliance Program supports and develops processes that facilitate identification, evaluation, mitigation and minimization of compliance risks. The Optum Compliance Program holds all employees, contractors and all first- tier, downstream and related entities, including vendors and subcontractors (collectively "Business Partners"), accountable for compliance with UnitedHealth Group's Code of Conduct, policies and associated directives.

COMPLIANCE PROGRAM STRUCTURE

Optum's Compliance Program applies to all employees and contractors and incorporates recommended compliance program guidance from the Department of Health and Human Services Office of the Inspector General ("OIG") and the Federal Sentencing Guidelines for Organizations (revised and amended, 2012).

Optum's Compliance Program establishes the following key elements, which facilitate prevention, detection and remediation of potential violations of law, regulations and UnitedHealth Group policies.

1. High Level Oversight - Governance
2. Written Standards, Policies, and Procedures
3. Training and Education
4. Effective Lines of Communication / Reporting Mechanisms
5. Enforcement and Disciplinary Guidelines
6. Auditing and Monitoring
7. Responding to Identified Issues

APPLICABILITY

All employees, independent contractors and agents supporting the Optum businesses will comply with state, federal and local laws, regulations and other requirements applicable to the products and services offered by Optum, and adhere to Optum standards, polices, training programs and other requirements.

Optum entrusts its employees with the responsibility of maintaining compliance with ethical and regulatory standards. Supervisors have a duty to foster a culture of ethics, to embrace compliant business practices, and to ensure that the individuals they supervise understand their obligations to comply with the legal, regulatory and contractual obligations that govern Optum's business.

KEY ELEMENTS OF COMPLIANCE PROGRAM

High Level Oversight - Governance

High level governance sets compliance expectations from the top of the organization. It ensures oversight of and support for an effective compliance program and reinforces that compliance is everyone's responsibility. UnitedHealth Group's Compliance and Ethics Office administers and provides organization-wide oversight of the UnitedHealth Group compliance program, including its Code and Compliance policies. UnitedHealth Group's Chief Compliance Officer provides routine compliance reporting that incorporates Optum compliance program results to the UnitedHealth Group Board of Directors.

In alignment with the UnitedHealth Group Compliance Program, Optum has appointed a Chief Compliance Officer responsible for the strategy, implementation and oversight of the Optum Program. The Optum Compliance Program is structured to include dedicated compliance resources accountable to the Optum Chief Compliance Officer, responsible for directing and managing both the compliance program and for supporting business operational compliance and focused on high priority compliance risks and key activities that support preventing and detecting unwanted conduct or performance.

The Optum Chief Compliance Officer provides strategic direction, coordination and oversight of compliance activities throughout the business. The Optum Legal, Compliance and Regulatory Affairs Department is empowered by Executive Leadership to establish compliance considerations and controls

into business planning, UnitedHealth Group initiatives and ongoing operations to promote compliance within the organization.

The Optum Executive Management Team (EMT) is responsible to ensure that the Optum Compliance Program is reasonably effective to achieve its goals.

The EMT allocates adequate resources, holds managers and employees accountable for compliance and ethics obligations along with commercial and other performance objectives, and periodically reviews reports provided by the Chief Compliance Officer, leaders of Business Units and Departments and such other personnel as they deem appropriate.

The EMT sets the tone at the top to foster a culture of ethical conduct and compliance with law.

The Chief Compliance Officer provides periodic reports to the EMT about the content and operation of the Optum Compliance Program, including information about compliance and ethics risks, program effectiveness, investigations and remediation of violations of the Code of Conduct or any laws or regulations.

Optum has designed an approach to assign and direct compliance resources toward high priority compliance risks and key activities that are impactful to preventing and detecting unwanted conduct. This includes risk framing and prioritization and a compliance annual work plan. Business specific compliance and oversight committees are established. These committees provide business and compliance oversight of key compliance risks to achieve operational compliance. These committees convene on a regular basis for specific business areas and include participation or management by Optum Compliance staff.

Written Standards, Policies and Procedures

UnitedHealth Group has established enterprise-wide ethics and compliance standards detailed in UnitedHealth Group's Code of Conduct. The Code emphasizes our strong commitment to compliance and ethical business practices and outlines the process for reporting potential non-compliance. It applies to all employees and contractors and serves as a blueprint for ethical and compliant business practices. Optum's Compliance program incorporates the UnitedHealth Group Code of Conduct and Optum expects all employees and contractors to read, understand and follow the Code

The Code of Conduct is located within the Compliance and Ethics HelpCenter on the organization's Intranet site. In addition to the Code of Conduct, UnitedHealth Group has developed and maintains enterprise-wide policies designed to promote compliance and ensure the business operates with integrity. The United Health Group and Optum Compliance Policies are easily accessible to all employees on the Enterprise Risk Governance and Compliance (eGRC) site. Where appropriate to meet the needs of specific business units, applicable Compliance Policies may be made accessible to employees and contractors via other systems and methods. The Code of Conduct and associated policies are provided to employees upon hire, when revisions are made, and annually thereafter through our training processes and intranet site. In addition, there are compliance policies that apply to specific business units, departments or products. Each business unit is responsible for communicating these policies to employees and other applicable individuals who conduct business for UnitedHealth Group.

Compliance Training and Education

The training and education of all Optum employees and contractors on ethical and compliance standards and expectations is instrumental in sustaining and enhancing an effective compliance program. A company-wide education curriculum is implemented by UnitedHealth Group. Code of Conduct; Fraud,

Waste and Abuse; and Safe and Secure with Me Privacy trainings are required for all new Optum employees and contractors. Employees and contractors must also take training on these courses on an annual basis. Training within UnitedHealth Group's curriculum satisfies federal and state requirements for trainings for first tier and downstream entities.

Employees and contractors may also be required to attend specialized compliance training on issues posing particular compliance risks for an individual's job function or for the organization. This training may be provided directly by business operations/units or by the compliance team. Mandatory compliance training is managed through UnitedHealth Group-wide learning management system, which tracks required training completion rates. Where appropriate to meet the needs of specific business units, training may be managed via other systems and methods.

Effective Lines of Communication

Effective employee communications contribute to a compliance culture and are critical to the Optum Compliance program. Optum Communications provides support for the annual Compliance Communication plan. The annual plan defines the communication objectives and aligns with UnitedHealth Group-wide communication plans for both business and compliance.

The UnitedHealth Group Compliance and Ethics Office and business leadership are additionally responsible for ensuring routine communication with employees about compliance and business requirements and expectations. These communications – including employees' responsibilities to report potential non-compliance – are communicated through training programs and through a variety of mechanisms including email, intranet news articles, posters, management and department meetings, and other methods as appropriate.

Reporting Mechanisms

All employees are required to report known or suspected non-compliance. Failure to report suspected violations, misconduct or non-compliance is a violation of the Code and may be grounds for employee disciplinary action.

UnitedHealth Group has established a centralized mechanism for receipt and response to reports of potential non-compliance through an external hotline that is available 24 hours a day, 7 days a week, 365 days a year. Employees may choose to report anonymously through the hotline.

UnitedHealth Group expressly prohibits retaliation for good faith reports of potential non-compliance and for employee cooperation with investigations. To the extent possible, UnitedHealth Group will take reasonable precautions to maintain the confidentiality of those who report integrity or compliance concerns.

The Optum Compliance Program and policies cannot address every situation employees and contractors may encounter. Optum relies on the good judgment and values of its personnel to act with integrity.

Every employee or contractor has the right and responsibility to request guidance if unsure about what to do when faced with a difficult situation. UnitedHealth Group and Optum have established multiple resources for individuals to obtain guidance from:

1. **A manager or more senior manager** in the business unit.

2. The **Optum Chief Compliance Officer** or members of the Optum Compliance team.
3. The **Compliance and Ethics HelpCenter** –To report suspected violations of Code, UnitedHealth Group policies, or the law. Available 24 hours a day, 7 days a week, 365 days a year using a toll-free number or intranet/internet site.
4. **HRdirect** –To report threats of violence in the workplace – either to people or property -- health and safety issues, or misconduct that requires immediate attention, or for compensation and employment concerns, policy guidance and interpretation.
5. **Risk Management** – To report unsafe conditions, workplace hazards, and potential claims against insurance policies.
6. **Corporate Security** – To report concerns regarding employee security including theft and security breaches.

Where appropriate, the Optum Chief Compliance Officer may implement separate hotline reporting mechanisms to meet the needs of specific business units. Such hotlines will include an anonymous reporting option, be available 24/7/365, and provide affected employees information about how to file a report.

Enforcement and Disciplinary Guidelines

An effective compliance program provides guidance on disciplinary action for all employees and contractors who fail to comply with the standards of conduct, policies and procedures, legal and regulatory requirements, and business requirements as outlined in the program. Failure to comply with policies, procedures, and guidelines may result in disciplinary action – up to and including termination.

Optum requires that employees and contractors – regardless of their position within UnitedHealth Group – comply with the laws, regulations, UnitedHealth Group policies and other requirements applicable to our business. Unethical or illegal acts cannot be justified by saying they were for the good of UnitedHealth Group or were directed by a higher authority in UnitedHealth Group. No employee or contractor is ever authorized to commit, or to direct another employee/contractor to commit, an unethical or illegal act. In addition, employees cannot use a contractor, agent, consultant, broker, distributor or other third party to perform any act not allowed by law, the UnitedHealth Group Code of Conduct, the Optum Compliance Program, any UnitedHealth Group policy or contractual obligation.

Enforcement and disciplinary guidelines are publicized via the UnitedHealth Group Code of Conduct, the Optum Compliance Program, UnitedHealth Group’s policies, and through communication methods such as UnitedHealth Group intranet sites, memos and training. The Optum Compliance team also collaborates with Human Capital to support consistent discipline for identified compliance issues and to prevent retaliation against employees and contractors for reporting issues in good faith or cooperating with an investigation.

Internal Monitoring and Auditing

Effective auditing and monitoring promotes compliant and ethical behavior through the identification and validation of performance, including the development of corrective actions plans when remediation is necessary.

UnitedHealth Group’s Internal Audit and Advisory Services (IAAS) team implements an annual audit plan that includes the review of Optum business processes and controls. Results of these audits are communicated to the business and Compliance, and corrective action is implemented when appropriate.

In addition, the Optum Compliance Program has an annual internal assessment plan, which is overseen by the Chief Compliance Officer and the Executive Compliance Committee. As part of the Optum Compliance Program, the Compliance team collaborates with business leaders, legal representatives and other stakeholders to develop an assessment plan designed to review designated controls, processes or business areas. The number and scope of assessments is dependent upon an evaluation of the risk associated with the areas under review. Additionally, the Compliance staff conducts less formal assessments and reviews based on risks or concerns identified by management, employees, and other sources.

Monitoring

The Optum Compliance Program includes a number of monitoring functions that are designed to support validation of operational compliance. A key monitoring function relates to ensuring compliance with new or modified regulatory requirements. The Optum Compliance Program includes dedicated staff for the identification and implementation of regulatory changes that impact business operations. This team monitors legislation and regulations, assesses and communicates new requirements to impacted businesses and ensures appropriate implementation activities. The team also conducts periodic assessments to validate post-implementation compliance.

External Exam Management

Optum's Compliance team coordinates designated market conduct exams and other regulatory audits impacting Optum, including delegated entity audits conducted by UnitedHealth Group and external health plans customers of Optum. For applicable exams or audits, Compliance staff is responsible for managing audit logistics, organizing and responding to audit requests, identifying and responding to issues, and working with the business to manage any corrective action plans. Based on audit findings or trends, the Optum Compliance team may coordinate with the business to initiate compliance assessments, training, or other activities.

Responding to Identified Issues

All compliance concerns reported or identified through employee or external reports, audits and monitoring activities are reviewed and/or investigated in a timely and appropriate manner. When appropriate, prompt corrective and disciplinary action will be taken in response to the associated findings to promptly reduce the potential for recurrence.

Audits, assessments, regulator reviews and compliance report investigations may result in corrective action plans. Optum Compliance oversees implementation of action plans to ensure that identified deficiencies are corrected and that appropriate mechanisms are in place to prevent future reoccurrence. Optum Compliance coordinates with the UnitedHealth Group Compliance and Ethics Office, UnitedHealth Group IAAS, Optum Legal, business functional areas and Compliance personnel to ensure appropriate corrective action and reporting for identified non-compliance issues.

Fraud, Waste and Abuse

Optum is committed to compliance with all applicable federal and state fraud, waste, and abuse (FWA) laws and regulatory requirements. Payment integrity functions are performed in compliance with laws, regulations and contractual requirements. Payment Integrity teams perform prospective and retrospective investigations of credible suspicions of healthcare fraud, waste or abuse. Optum Compliance coordinates with Optum's Payment Integrity teams, as appropriate, in the referral and oversight of investigations. Optum submits notification and reporting, as required or appropriate, to applicable federal and state

authorities and clients, and adheres to applicable federal and state laws and regulations regarding suspending payments to providers, and timely and appropriate handling of overpayment recoveries and refunds. In addition, Optum Compliance coordinates, as appropriate, with Optum Payment Integrity teams to interface with federal and state law enforcement authorities of FWA matters including referrals for criminal prosecution.

SUMMARY

An effective compliance program fosters a culture of compliance that begins at the highest levels and extends throughout the organization. The UnitedHealth Group Compliance Program and the Optum Program are aligned to work as a cohesive compliance program and to ensure the development and management of systems and structures to prevent, detect and promptly correct potential compliance concerns. Optum is committed to creating a culture that supports ethics, integrity and compliance in all of its day-to-day activities.

For this reason, the Optum Compliance Program and its supporting activities will be periodically reviewed, revised and updated to provide reasonable assurance that it is effective and meets the expectations of internal and external partners, stakeholders, and regulators.