THIRD-PARTY

Code of Conduct

What you need to know about compliance, ethics, and privacy at work.
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Welcome

At Highmark Health, we are reinventing health care. However, our commitment to the highest standard of ethical conduct has not changed.

In today’s business and legal environments, acting ethically, and with a high degree of integrity, differentiates a company from its competition as an organization that can be trusted. Highmark Health’s Integrity and Compliance Program requires that compliance be everyone’s responsibility from the top to the bottom of the organization, as well as our third-party business partners. The Integrity and Compliance Program is guided by our Core Values and Principles of Integrity and is designed to promote a culture that encourages ethical behavior and commitment to comply with applicable federal and state laws, rules, regulations, and guidance.

The Third-Party Code of Business Conduct (Third-Party Code) applies to those who conduct business with and/or on behalf of any Highmark Health company, such as vendors, consultants, subcontractors, suppliers, and producers, herein referred to as “Third Parties.”

We recognize that Third Parties are independent entities and their cultural environments may be different from Highmark Health’s. However, Third Parties have a critical role in our success, and Highmark Health strives to conduct business with those who share similar values in compliance and ethics. Therefore, Third Parties and their employees and agents are expected to comply with standards of conduct as described in the Third-Party Code and share and subscribe to our commitment to ethical business practices. The Third-Party Code sets the ethical tone for conducting business with Highmark Health. Our Enterprise Risk and Governance Division is available to offer guidance and support.

The Third-Party Code provides guidance to all Highmark Health employees in carrying out their daily activities within appropriate ethical and legal standards. These obligations also apply to relationships with other employees, customers, and Third Parties.

For purposes of this Code, Highmark Health and its subsidiaries and affiliates will be referred to as Highmark Health.
**Mission**

To create a remarkable health experience, freeing people to be their best.

**Vision**

A world where everyone embraces health.

**Values**

**PEOPLE MATTER**
Every person contributes to our success.

**STEWARDSHIP**
Working to improve the health of the communities we serve.

**TRUST**
Earned by delivering on our commitments and leading by example.

**INTEGRITY**
Committing to the highest standards encompassing every aspect of our behavior.

**CUSTOMER-FOCUSED COLLABORATION**
We collaborate with each other to achieve the right outcomes for our customers.

**COURAGE**
Empowering each other to act in a principled manner and take appropriate risks to do what is right.

**INNOVATION**
Exploring new, better, and creative ways to achieve our vision.

**EXCELLENCE**
Consistently exceeding the expectations of those we serve.
Our four core behaviors are what we value and how we act each and every day to bring our mission and vision to life.

**CUSTOMER FIRST**

- We place the customer at the center of everything we do.
- We put ourselves in our customers’ shoes.
- We anticipate our customers’ needs.
- We simplify the customer experience.
- We deliver solutions that go a step beyond.
- We appreciate our customers’ loyalty to Highmark Health.

**TRANSFORMATIONAL LEADERSHIP**

- We are driven to create the future of health care.
- We inspire through vision and action.
- We are proactive in driving change.
- We are authentic in who we are and what we do.
- We embrace courageous conversations.
- We challenge ourselves to continuously improve.

**TRUST WORKING TOGETHER**

- We collaborate to achieve shared success.
- We involve the right partners at the right times.
- We treat each other with honesty and respect.
- We influence through relationship and not through position.
- We trust one another to make the right decisions and do the right things.
- We share risks and rewards.

**PURPOSEFUL EXECUTION**

- We value outcomes, not activity.
- We set clear priorities and expectations.
- We take ownership of our commitments.
- We take calculated risks.
- We are relentless in our pursuit of excellence.
- We recognize and celebrate results.
Highmark Health’s Standards

Ethical and Compliance Standards

• Highmark Health aspires to maintain a culture that embraces the principle of not only doing the right things, but also doing things the right way.
• All Highmark Health employees have the responsibility to epitomize Highmark Health’s values and to perform their job with integrity.
• Highmark Health commits to dealing fairly with customers, Third Parties, and competitors, and resolves to not take unfair advantage of anyone through manipulation, concealment, abuse of privileged information, misrepresentation of material factors, or any other unfair dealings and practices.

Legal and Regulatory Compliance

• All Highmark Health employees must observe the applicable laws, rules, and regulations governing the company’s products and services.
• Highmark Health respects and honors the intellectual property rights of others and will not use any copyrighted or patented materials without a license or approval.

Diversity

• We are committed to diversity and endeavor to make everyone feel welcome.
• Employees respect the unique attributes of others and recognize and embrace the many diverse perspectives and ideas that each brings to the workplace.

Safe, Healthy, and Harassment-Free Work Environment

To continue to keep a safe and healthy workplace, Highmark Health:
• Treats its employees and visitors with professional respect and courtesy.
• Will not tolerate any harassment, which may be of a sexual, physical, written or verbal nature, from our employees, customers, Third Parties, outside business invitees, or visitors.
• Maintains a safe and healthy work environment, free of illegal drugs, alcohol, and workplace violence.
• Will not tolerate actions or threats by anyone who disrupts business or places employees, customers, Third Parties, or visitors at risk of harm.
SECTION 1

Expectations for Third Parties
Highmark Health strives to provide an environment that promotes fairness and equal opportunity, where differences in backgrounds are respected, and discrimination is not tolerated. Highmark Health in turn expects its business partners, including Third Parties, to respect and share this commitment.

Third Parties have the responsibility to comply with and are expected to respect the Third-Party Code and to conduct business activities and interactions ethically and with integrity. As such, Third Parties must review the Third-Party Code on an annual basis and adhere to the following standards when conducting business on behalf of Highmark Health.

**Ethical and Compliance Standards**

Third Parties are expected to:

- Cooperate with Highmark Health’s commitment to a safe and harassment-free workplace.
- Treat those whom you encounter with professional respect and courtesy — regardless of their position, age, race, sex, religion, national origin, ancestry, creed, sexual orientation, mental or physical disability, veteran status, or any other differences of a personal nature — while conducting business with or on behalf of Highmark Health.

**Legal and Regulatory Compliance**

Third Parties must:

- Conduct business activities in full compliance with the applicable federal, state, and local laws and regulations, as well as contractual obligations while conducting business with or on behalf of Highmark Health.
- Comply with all anti-corruption laws, including the United States Foreign Corrupt Practices Act, and not make any direct or indirect payments (including promises to pay, or authorizations to pay) of money, gifts, or anything of value to officials of foreign or domestic governments.
- Comply with antitrust and fair competition laws and regulations when conducting business with or on behalf of Highmark Health.
- Retain, use, and dispose of Highmark Health’s business records and information in full compliance with all applicable legal, regulatory, and contractual requirements.
- Comply with all other applicable laws and regulations.

**Government Contract Compliance**

A substantial portion of Highmark Health and its subsidiaries’ and affiliates’ businesses relate to their roles as government contractors. As a result, Highmark Health must abide by certain laws and regulations. Therefore, Third Parties are required to abide by additional requirements and obligations while dealing with Highmark Health’s government business.

The following government business requirements apply to Third Parties whose contracts support Medicare Advantage and Medicare Prescription Drug Federal and State government regulated programs:

- Are prohibited from doing business with any person or entity that is currently debarred, suspended, excluded, or declared ineligible to perform work under any government contract or subcontract. Third Parties must make monthly inquiries to various government databases to ensure continued compliance. Highmark Health reserves the right to audit Third Parties’ screening processes to ensure compliance with all Centers for Medicare and Medicaid Services (CMS) and related requirements.
• Are prohibited from offering or accepting any kickbacks, gifts, entertainment, gratuities, or anything of value to or from suppliers, consultants, or government officials in exchange for an unfair competitive advantage.

• Must keep company records that are accurate and complete; appropriately reflect transactions and events; conform to applicable legal, regulatory, and accounting requirements; and meet applicable control procedures. These records are necessary to ensure that Highmark Health meets its contractual obligations with state and federal governments.

• Must cooperate with investigations by government agencies and are prohibited from knowingly making false or misleading statements to a government official.

• Must report compliance concerns and suspected or actual violations related to the Medicare Advantage and the Medicare Prescription Drug program, and other Federal or State-specific programs.

• Must comply with applicable federal, state and local laws, rules, and regulations as well as its contractual obligations.

• Must validate that general compliance and training specific to fraud, waste, and abuse (FWA) has been completed for all employees who have involvement in the administration or delivery of the Medicare Advantage and/or the Medicare Prescription Drug programs. This training must be completed within ten (10) days of initial hiring and annually thereafter. Proof of training must be kept for a period equal to the current contract year plus ten (10) years. Highmark Health reserves the right to audit Third Parties’ training programs to ensure compliance with CMS requirements.

• Must adhere to Highmark Third-Party Code of Conduct or provide evidence that the Third Party has comparable Standards of Conduct of their own. Evidence of adherence must be completed within ninety (90) days of initial hire.
SECTION 2
Conducting Business
Conflicts of Interest

Third Parties shall avoid actual, or the appearance of, conflicts of interest while doing business with Highmark Health. For example, Third Parties:

• Must not deal with any Highmark Health employee who has a financial interest in the Third Party, or whose spouse or immediate family member holds a financial interest in the Third Party, during negotiation or performance of its contract with Highmark Health.

• Must not deal with any Highmark Health employee who is the spouse or immediate family member of the Third Party’s representative.

• Must disclose any material transaction or relationship that reasonably could be expected to give rise to a potential conflict of interest.

• Must not influence a business decision, either directly or indirectly, through the Third Party’s relationship with Highmark Health, which allows for personal gain or may adversely affect Highmark Health.

Gifts, Gratuities, Kickbacks, and Expenses

Third Parties:

• Must comply with Highmark Health’s gifting policy and not offer gifts or anything of value to our employees where a business decision could be, or could be perceived to be, compromised. Also, Third Parties may not offer or accept gifts or anything of value while acting on behalf of Highmark Health.

• Must report to Highmark Health all entertainment, gifts, or other items that are received by Highmark Health’s employees. Exempt from reporting are food, beverages, and moderately priced meals or tickets to local events that are supplied by and attended in the interest of building positive business relationships.

• Must comply with anti-kickback laws and not request, solicit, receive, offer, give, or make payments of any kind, whether directly or indirectly, that would encourage a person to refer a person to another person for the furnishing of any item or service covered by the federal government.

• Must comply with Highmark Health’s expense reimbursement policy applicable to Third Parties.

Customers and Supplier Relations

• Third Parties shall maintain straightforward business relationships with Highmark Health and its customers and suppliers. Relationships should be based on the cost and the quality of the products and/or services, rather than on personal relationships. Third Parties shall not take unfair advantage of Highmark Health customers through manipulation, coercion, misrepresentation of information, or abuse of privileged or confidential information.
Proper Use of Company Assets

- Third Parties should ensure that Highmark Health’s corporate assets are used only for valid business purposes. Corporate assets include not only our equipment, including computers and phones, funds, and office supplies, but also concepts, business strategies and plans, financial data, and other information about Highmark Health’s business. These assets may not be used to derive personal gain.

Adherence to Fraud, Waste, and Abuse (FWA) Guidelines

- Generally, health care fraud is a misstatement of fact knowingly made for the purpose of obtaining health care benefits, services, or other things of value.

- Third Parties must not make false or misleading claims, records, or statements in order to secure payment of a fraudulent claim on behalf of Highmark Health.

- Highmark Health has policies and procedures in place to detect and prevent FWA, and expects Third Parties to support the efforts of federal and state authorities by identifying and reporting incidents of FWA to the Highmark Health Enterprise Risk and Governance Division.

- Third Parties who raise questions or report concerns regarding potential or actual FWA matters in connection with any of Highmark Health’s government programs are protected from retaliation and retribution for False Claims Act complaints, as well as any other applicable anti-retaliation protections.
SECTION 3

Information Privacy and Security
A core component of Highmark Health’s business involves the processing and management of information that is protected by numerous federal and state laws and regulations. Both Highmark Health and its Third Parties must abide by applicable laws and regulations to ensure that information remains confidential and secure and is handled appropriately.

Highmark Health’s information systems are the exclusive property of Highmark Health and are to be used for approved business purposes only. This includes but is not limited to computer equipment; hard drives; printers; peripherals; software and operating systems; telephones; and network and/or internet-related accounts providing electronic mail (email), browsing, newsgroup access, social networking access, and/or file-transfer capabilities.

Authorized users must exercise good judgment and professionalism when creating, editing, publishing, storing, or otherwise transmitting content on or through Highmark Health’s information systems. This applies to all communication channels and methods, including but not limited to email, video, audio, images or pictures.

Third Parties:
• Must protect the privacy of information and the security of information systems.
• Must protect, and not share, credentials used to access information systems.
• Must safeguard all of Highmark Health’s confidential information, including but not limited to protected health information (PHI), personally identifiable information (PII), proprietary/trade secret information, and competitively sensitive information (CSI).
• Must notify Highmark Health in accordance with all laws and regulations and agreements in the event of incidents or disruption events which may impact our data, our systems, the provision of goods, or continuity of services.

Third Parties may have access to information only if they need it to perform their job function, and information must be limited to the minimum amount necessary. Third Parties may use and disclose information only as permitted by their contract with Highmark Health or as required by law. Any breach of the obligation to maintain the confidentiality and security of Highmark Health information and to handle it appropriately will be considered material, and may result in termination of the contract or other corrective action as solely determined by Highmark Health.

Highmark Health has the right to audit Third Party information management practices and security controls to ensure they meet Highmark Health’s expectations and contractual requirements and to ensure compliance with the use, handling, and disclosure of confidential information.

Access to Inter-Plan and Blue Cross Blue Shield Association (BCBSA) Information

Third Parties may have access to confidential information of the BCBSA as well as that of Highmark Health. As Licensees of the BCBSA, Highmark and Highmark Health must ensure that such information is shared according to the following terms and conditions:
• Use of confidential information by the Third Party recipient is strictly for the purpose for which it was disclosed, which must be consistent with the data use and display requirements outlined in the Inter-Plan Programs Policies and Provisions.
• Reselling of the disclosed confidential information is strictly prohibited except as permitted under applicable Inter-Plan Programs Policies and Provisions.
• Disclosure or re-disclosure of the confidential information is strictly limited to the minimum necessary to fulfill the purpose for which it was initially disclosed.

• Highmark, Highmark Health and/or the BCBSA has the right to audit the Third Party recipient of confidential information to ensure compliance with these provisions relative to the use and disclosure of confidential information.

• Upon conclusion of the purposes for which it was disclosed, the Third Party must return or secure destruction of the confidential information by recipient. **Note that when the Third Party recipient is unable to return or destroy confidential information due to legal or licensure requirements, the recipient must maintain the confidentiality and security of confidential information until the expiration of the applicable legal or licensure requirements.**

• All Third Party recipients of confidential information must notify Highmark Health when the Third Party recipient’s ownership changes (e.g., merger, acquisition, divestiture).

Third Parties which are network providers of Highmark are bound by the above provisions under the terms of their network participation agreements. These provisions shall be deemed laws as defined in the network participation agreements by which the provider has agreed to comply. Furthermore, these provisions and this entire Third-Party Code of Conduct are binding on network providers as administrative requirements, policies, or procedures of the health plan as provided for in such network participation agreements. Failure to comply with the Third-Party Code of Conduct may result in termination from participation in the networks in accordance with the terms of the network participation agreements.
SECTION 4

Appointed Producers
Appointed Producers have the responsibility to comply with and are expected to respect the Third-Party Code and to conduct business activities and interactions ethically and with integrity.

As such, Appointed Producers must adhere to the following standards when conducting business on behalf of Highmark Health:

• Seek to present a true picture of covered benefits truthfully, carefully, and accurately by learning about and keeping abreast of all relevant products, benefit plans, and applicable legislation and regulation, to the best of your ability.
• Make a conscientious effort to ascertain and understand all relevant circumstances pertaining to the client to recommend appropriate benefit plans.
• Inventory current benefit plans with the client to avoid selling duplicative insurance benefits.
• Honestly assess the likelihood that a client will meet underwriting and financial requirements and discover any adverse factor(s), to reduce false expectations of acceptance and adequacy of benefit plan.
• Possess a comprehensive understanding of products to honestly, openly, and effectively portray benefit plans and determine a client understanding of key benefits and limitations.
• Clarify and verify the client’s grasp of information and review pertinent issues.
• Protect proprietary and competitive information.
• Protect protected health information, confidential, and financial information in compliance with existing state and federal laws and regulations.
• Must remain diligent at monitoring phishing attempts and educate employees on the warning signs of phishing email and other cybersecurity attack vectors.
• Obey all laws, including antitrust, governing business, and professional activities, and represent products in an ethical manner without fraud, misrepresentation, exaggeration, coercion, scare tactics, or concealment of pertinent facts.
• At all times, fully disclose commission and compensation arrangements to the client.
• Ensure appropriate relationships by not offering or accepting any inducements that might compromise a reasonable business decision. Avoid any conflict of interest or the appearance of any conflict of interest.
• Use only authorized promotional materials unless prior written approval has been obtained, and fairly focus your presentation on positive benefit comparisons rather than disparaging remarks about the competition.
• Treat a client or a potential client with courtesy, respect, and priority in accordance with thoughtful, ethical, and legal business practices.
SECTION 5

Compliance and Reporting
Complying with the Highmark Health Third-Party Code of Conduct

As a condition of contracting with Highmark Health, Third Parties and their employees and agents are required to review the Code on an annual basis and be knowledgeable of and adhere to the Third Party Code and be responsible for monitoring compliance with the standards in this Third-Party Code. Third Parties are expected to seek guidance from Highmark Health when questions arise involving unethical business conduct pertaining to company business and inappropriate behaviors. Highmark Health may in its sole discretion amend this Third-Party Code and Third Parties must comply with any such amended Third-Party Code.

In addition to any other specific contractual requirement, whenever a Third-Party provides services on-site at any Highmark Health campus location, Third Parties must conduct themselves in accordance with and comply with all Highmark Health policies and procedures, including, but not limited to, on-site tour guidelines and other policies addressing the confidentiality of all visible and audible Highmark Health proprietary data.

Reporting Concerns

You are obligated to report any questionable behavior by Highmark Health employees, a Third-Party, and/or its employees and agents or potential noncompliance situation. If you suspect potential or actual FWA, you should contact the Highmark Health Enterprise Risk and Governance Division. In addition to being a resource for Highmark Health employees, the Enterprise Risk and Governance Division is available for questions by Highmark Health business partners like you.

When a report is made to the Enterprise Risk and Governance Division, appropriate action is taken to review and/or investigate the report to reduce the potential for recurrence and ensure ongoing compliance. Third Parties are expected to cooperate with the investigation of a suspected violation of this Third-Party Code or violation of any governmental law or regulation. In addition, as required and/or appropriate, the Enterprise Risk and Governance Division may disclose investigation matters to applicable law enforcement or regulatory entities. Failure to promptly report a known violation may result in action up to and including termination of the business relationship and is the sole discretion of Highmark Health.

Protection from Retaliation and Intimidation

Third Parties who raise questions or report concerns regarding potential or actual FWA matters in connection with any of Highmark Health’s government programs are protected from retaliation and retribution for False Claims Act complaints, as well as any other applicable anti-retaliation protections. All inquiries are confidential, subject to limitations imposed by law.

Pursuant to the Defend Trade Secrets Act of 2016, an individual may not be held criminally or civilly liable under any federal or state trade secret law for the disclosure of a trade secret that: (a) is made in confidence to a federal, state, or local government official, either directly or indirectly, or to an attorney; and solely for the purpose of reporting or investigating a suspected violation of law; or (b) is made in a complaint or other document that is filed under seal in a lawsuit or other proceeding.

Further, an individual who files a lawsuit for retaliation by an employer for reporting a suspected violation of law may disclose the employer’s trade secrets to the attorney and use the trade secret information in the court proceeding if the individual: (a) files any document containing the trade secret under seal; and (b) does not disclose the trade secret, except pursuant to court order.

The Third-Party Code sets forth general principles with which Third Parties must comply. More restrictive requirements may be set forth in the contracts between Third Parties and Highmark Health.
Reporting Methods

All inquiries to the Enterprise Risk and Governance Division are confidential, subject to limitations imposed by law.

When using the Integrity Helpline, you may remain anonymous. Highmark Health maintains a reprisal-free environment and has a policy of non-retaliation and non-intimidation to encourage employees, Third Parties, and their employees to raise ethical or legal concerns in good faith.

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<th>Highmark Health Enterprise Risk and Governance Division P.O. Box 22492 Pittsburgh, PA 15222</th>
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<tr>
<td>CALL</td>
<td>Anonymous Reporting Helpline Toll-free, 24/7: 1-800-985-1056</td>
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<td>EMAIL</td>
<td><a href="mailto:integrity@highmarkhealth.org">integrity@highmarkhealth.org</a> <a href="mailto:integrity@highmark.com">integrity@highmark.com</a></td>
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SECTION 6

Code of Data Ethics
Privacy and Ethical Data Management

Data Ethics is an expression of values in business that drive how we explore, acquire, store, and use data to support programs and initiatives. It evaluates moral issues related to data collection and use to support principled solutions to these problems. Our Highmark Health Code of Data Ethics (“Code”) seeks to achieve ethical and compliant data practices, human-centric design and deployment, accountability, and trust from our patients, members, and employees. Highmark achieves these goals through thoughtful engagement with our patients and members, and transparency in our practices, and clarification of our models and algorithms where applicable.

The principal forum for the implementation of the Code at Highmark Health is the Enterprise Data Governance program. However, to ensure that the decisions we make everyday support Highmark’s mission to create a remarkable health experience, freeing people to be their best, we require enterprise-wide commitment to work ethically with data. We require this commitment as a basic, non-negotiable responsibility of everyone who works on our behalf.

We seek to avoid using data and technology in ways that are unethical or could lead to discrimination, exploitation, or cause harm or unintended adverse consequences. As our Core Behaviors state, “we place the customer at the center of everything we do.”

To live up to this customer pledge, we are committed to collecting and using data in a lawful, fair, legitimate, and ethical way. Using data in an ethical manner means focusing less on what we can do with the data we maintain and considering what we should do with data that is both responsible and meaningful.

Who This is For

The ethical use of data is an individual and organizational responsibility; as such, this Code and the associated principles apply to all members of the board of directors, officers, employees, workforce members, volunteers, as well as contractors and vendors of Highmark Health and its affiliates and subsidiaries.
10 Principles of the Code of Data Ethics

The Code of Data Ethics consists of ten (10) principles that form the foundation for ethical data processes and decision making. These principles have been developed according to specific values in healthcare and must be embedded at every stage of the data use life cycle at Highmark Health.

1. **Data Minimization**
2. **Autonomy**
3. **Trust**
4. **Accountability**
5. **Empathy**
6. **Transparency**
7. **Human-Centered**
8. **Inclusiveness**
9. **Compliance with Laws**
10. **Stewardship**

**Data Minimization:** Recognition that the amount of data we collect, analyze, use and store must be proportionate to its purpose.

- Any collection, use, or disclosure of patient/member data will be limited to the minimum amount necessary for the specified purpose.
- We adhere to strict data sharing practices as outlined by applicable Highmark Health policy and limit the collection and use of sensitive data to the minimum amount necessary, taking measures to prevent the reidentification of anonymized data.

**Autonomy:** Respect for our customers’ sense of empowerment and right to maintain control over their bodies, decisions, and data.

- We seek informed consent to use personal data for purposes beyond improving a program, service, or improving health outcomes.
- We provide patients and members with a means to opt out of data collection practices, and ensure they are removed from tracking when requested. We will not discriminate against patients or members that choose to exercise their right to opt out.

**Trust:** The expectation that our decisions and conduct are justifiable, honest, and trustworthy.

- Any activity we complete will result in a product that someone will place their trust in, either internally or externally. For this reason, Highmark Health requires its data users (including third parties), regardless of role or responsibility, to exhibit honesty and integrity when working with data.
- We strive to present data as accurately and objectively as possible. Highmark Health will never intentionally misrepresent, bias, or manipulate the meaning of the data.
**Accountability:** Recognize that we are answerable, at all levels, to those we serve, and must be prepared to explain and justify our decisions.

- Highmark Health demonstrates its commitment to protecting information about patients and members by providing appropriate employee training and by implementing privacy and information security controls as required by law.
- Highmark Health expects all individuals to be aware of, and accountable for, complying with the Code and actively supporting our commitment to respect the privacy of patients and members.
- Highmark Health demonstrates accountability by investigating reported violations of information privacy and security policies and, as appropriate, taking corrective action.

**Empathy:** Understand how our actions and outcomes affect the experiences of others.

- The health-related information collected by Highmark Health is among the most sensitive data categories of individuals. All this type of data involves and affects human beings.
- Highmark Health is committed to considering how this information impacts people by focusing on the human being at the center of every data transaction. We seek to ensure that the potential benefits to our customers outweigh the risks associated with data transactions.
- Data should be collected with the intent of understanding the patient and member’s experiences, concerns, and perspectives. This ensures that patients and members are treated with respect and consideration, and makes patients feel that they can speak honestly which is especially important when patients are asked questions that open them up to vulnerability.

**Transparency:** Ensure that data practices, uses and actions are explainable, easy to understand, and accessible.

- Highmark Health demonstrates its commitment to transparency by providing patients and members advance notice of its information policies and practices for collecting, using, disclosing, sharing, retaining, and disposing of information.
- All notices provided to patients and members describing the collection and use of data will be written in clear, plain language.
- As an organization we will strive to ensure transparency and clarification of algorithmic models where applicable.

**Human-Centered:** Recognition that the information and data we use are inextricably connected to the human lives we seek to improve.

- We recognize that the data collected and maintained at Highmark Health may include sensitive information. Sensitive data is increasingly critical to effectively understanding patients, members and their communities, and the specific outcomes that may be impacted by these factors.
- We have an uncompromising duty to protect our customers, particularly the most vulnerable, from harm. We commit to using diligence in collecting, using, and sharing data and removing any bias in our data or assumptions that could harm or disproportionately affect others, either directly or indirectly.
**Inclusivity:** Consider how the consequences of our technology and data use might exclude, marginalize, or disenfranchise the community we serve.

- We strive to cultivate the power of connection and relationships so that we may make informed decisions leading to responsible data use and greater benefit to our customers and society.
- We take action to mitigate the risk of creating technology, systems, or processes that have an exclusionary impact. Highmark Health strives to consider whether the results of our data outcomes will respect diversity and provide members, patients, and the community with culturally responsive services.
- We take steps to collect and analyze data with inclusivity in mind. Highmark Health has various initiatives using patient data to identify obstacles to health stemming from socio-demographic factors like poverty. These initiatives help to deliver care to patients who do not have the same access to healthcare due to factors outside of their control.

**Compliance with Laws:** Our duty to follow written, established rules that reinforce the essential need to evaluate compliance in a proactive manner.

- Highmark Health requires all employees, vendors, and contractors to comply with applicable laws, rules, regulations, and contractual obligations. Without exception, such individuals are accountable for awareness and application of policies, procedures, and ethical standards regarding data use.
- At Highmark Health we understand that following the letter of the law is considered the bare minimum. We rely on our ethical standards and thoughtful decision making to determine if the true spirit of an action or rule is being upheld.

**Stewardship:** Our custodial and fiduciary duty to care for the data we use.

- Every individual is expected to commit to being a steward of Highmark Health data and ensuring that our work and the work of our collaborators complies with the policies and practices of Highmark Health.
- Acting as stewards, we commit to establishing consistent data definitions, maintaining business and technical rules, and monitoring and auditing the reliability of Highmark Health data. These actions will ensure that the data we work with is trusted, dependable and high quality, resulting in the best possible outcomes for our customers.