



**FIRST CONTINENTAL LIFE AND
ACCIDENT INSURANCE COMPANY
(FCL Dental)**

& Affiliated Subsidiaries

CODE OF CONDUCT

Direct Questions to:
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A handwritten signature in blue ink, appearing to be 'S. Griffin', written over a light blue circular stamp.

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I. Introduction

The Code of Conduct (the “Code”) applies to all officers, employees, and directors of First Continental Life and Accident Insurance Company-FCL Dental (referred to in this Code as the “Company”) and its direct and indirect affiliated subsidiaries, if any. All references in this Code to “you” and “we” are intended to include such persons.

The Code functions as guidance on how to maintain the Company’s commitment to being ethical in all of its business dealings. In all Company matters, you must abide by the ethics and compliance principles set forth in this Code as well as all other applicable corporate policies and procedures. The code describes that compliance is everyone’s responsibility and the company’s expectation that violations of the Code or other policies are reported, investigated and corrected.

The Code of Conduct is reviewed annually by the Compliance Officer and final approval of the Code is decided by the Board of Directors. All Covered Persons are obligated to read and follow the Code of Conduct at the time of hire, upon revision and annually thereafter, as a condition of working for or doing business with the organization.

The Company has developed a positive culture of compliance. Compliance is about saying and doing the right thing when interacting with enrollees, providers, co-workers, business partners and regulators. Compliance is adhering to the rules and regulations that affect what each of us do every day. It is reporting non-compliance or suspected non-compliance and being part of the solution.

II. High Level Oversight, Compliance Officer, and Compliance Committee:

The Compliance Program is designed and directed towards the accomplishment of meeting the primary goals of a successful program as defined in the Office of Inspector General (OIG) model Medicare Advantage Compliance Program, Medicare Part D requirements. The structure of the programs relies on real-time compliance within the Company operational departments and oversight by the compliance Department to implement all components of the program.

Compliance Officer

The Compliance Officer is responsible for the implementation of the Compliance and FWA Programs, defining the program structure, educational requirements, reporting and complaint mechanisms, response and correction procedures, and compliance expectations. On a daily basis, the Compliance Officer, through the use of dedicated compliance staff, ensures the components of the programs are operational. The structure of the programs relies on real-time compliance within the operational department and oversight by the Compliance Department to implement all components of the programs. The Compliance Officer is an employee of FCL Dental, is independent and free to raise FWA issues without fear of retaliation and reports directly to the Chief Operations Officer. This reporting relationship does not prohibit direct, unfiltered access to report information to the President and to the Company’s Board of Directors, Compliance Committee or to seek advice from legal counsel.

Compliance Committee

The Compliance and FWA Programs are overseen by designated committees designed to provide the requisite support and expertise to support the programs. There are two committees: Compliance Committee at the organizational level and at the Board (or governing body) level, there is also a committee to address compliance and FWA issues. These committees are responsible for the oversight of the Programs and serve to advise the Compliance Officer. Reports on the activities and status of the Programs are reported to each committee. Each of these committees meets regularly but no less than quarterly.

The committee composition may include but is not limited to representatives from compliance, operations, administration, risk management, quality assurance, finance, information technology, human resources, medical records, foundation and marketing.

III. Ethical Standards

It is essential for our mission to deliver health care services to our customers with accountability for our fiscal and ethical performance. Trust, truth and ethical standards are part of what we do, every time and every day.

You are expected to act with honesty, integrity and openness. This Code of Conduct is our guide for Covered Persons to follow while performing our jobs. If you have any questions about this Code of Conduct, ask your supervisor or manager.

As a Covered Person, you are expected to comply with all applicable laws, regulations, sub-regulatory guidance and written FCL Dental Policies and Procedures.

IV. Effective Lines of Communication

As an important part of team, FCL Dental has appropriate communication mechanisms in place to ensure two-way communication between all employees, contractors and the Compliance Department. This open line of communication has been implemented to have a system in place to receive record, respond to and track compliance questions or reports of suspected or detected noncompliance on potential FWA from employees, members of the governing body and enrollees.

It is your responsibility to report potential or actual violations of the Code of Conduct. There are many ways to report suspected violations without fear of punishment or retaliation.

Each Covered Person is required to report:

- 1) Code of Conduct violations
- 2) Suspected non-compliance with regulatory requirements
- 3) PHI Accidental/Improper Disclosures
- 4) Potential or actual Fraud, Waste or Abuse

Ways to report:

- 1) Speak with your supervisor, manager, or Compliance Committee representative

- 2) Ask to meet with the Compliance Officer
- 3) Send a letter or email to the Compliance Department at:
compliance@fcl dental.com
- 4) Call the compliance department at the toll free number at (866) 262-8598 (you can remain anonymous)

Management Reporting

If the Compliance Officer, Compliance Committees, or other management official has reason to believe that the misconduct may violate criminal civil or administrative law, or meets the definition of a fraudulent insurance act as defined in LA Revised Statute 22:1923, The Company will self-report and/or refer the violation promptly to CMS, MEDIC, the DOI or other appropriate authorities within two weeks. The Company will provide all evidence relevant to the alleged violation to the appropriate regulatory agencies, including the impact of the alleged violation on the operation of the applicable healthcare programs or their beneficiaries.

Texas Medicaid Fraud Prevention Violations

The Company is also committed to protecting members and clients in the state of Texas and therefore, all future training will include “Texas Fraud Prevention”.

For the State of Texas passed a False Claims Act known as the Medicaid Fraud Prevention Act (“TMFPA”) in 1995 that only applies to the state’s medical assistance programs, in this case Medicaid. *See* TEX. HUM. RES. CODE §§ 36.001 to 36.132.

Aside from only covering Medicaid fraud, the TMFPA also differs from the federal FCA in a number of other respects. The civil penalty is greater under the TMFPA for unlawful acts that injure an elderly person, a disabled person, or someone younger than eighteen.

The Texas legislature added a qui tam provision to the TMFPA in 1997 to empower whistleblowers to bring fraud actions on behalf of Texas and share in a recovery. Currently, a whistleblower can receive up to 25% of the state’s recovery or up to 30% in declined cases. Also, the state Act contains protections for whistleblower employees similar to those found in the federal FCA.

In order to maintain original source status, any person with information about a potential fraud committed against Texas should consult counsel and file a disclosure with the Texas state government as authorized under TEX. HUM. RES.CODE § 36.113.

According to the Department of Health and Human Services (“HHS”), Texas does not currently qualify for a 10% bonus recovery from federal Medicaid FCA cases.

If you have knowledge or suspicion of a violation of this Code, you must immediately report it in accordance the reporting policies.

The State of Texas Fraud, Waste, and Abuse training will be included in all future FCL Dental Compliance Training modules.

V. No Retaliation Policy

If you report a suspected violation in good faith, you will not lose your job or be disciplined just because you made a report. The Compliance Officer will make the best effort to protect the confidentiality and anonymity of anyone making a report. However, if you report a violation that you are involved in, you may not be protected from disciplinary action.

VI. Well-Publicized Disciplinary Standards

The Company intends to use every reasonable effort to prevent the occurrence of conduct not in compliance with this Code and to halt any such conduct as soon as reasonably possible after its discovery. Company personnel who violate this Code or other Company policies and procedures may be subject to disciplinary action up to and including termination.

Disciplinary action for any violation could result in an oral warning, written warning, suspension, termination and restitution. These issues can also be addressed through training and education. The discipline imposed will depend on the nature and seriousness of the violation, but does not have to be progressive in its implementation.

Failure to comply with these standards is subject to disciplinary action, up to and including termination. Failure to report non-compliance, cooperate in a compliance investigation, or any attempt to obstruct an investigation is subject to disciplinary action. In appropriate circumstances, the Company may pursue civil remedies or seek criminal prosecution.

VII. Adherence to Policies and Procedures

Employees are required to maintain and adhere to the Company's policies and procedures. Company policies and procedures are made readily available in a shared directory as a company resource, and compliance policies and procedures may be shared with first-tier, downstream and related entities (FDRs). Contractors, vendors or first-tier entities are required to provide any policies and procedures as request by the Compliance Officer, CMS or a CMS-delegated auditor. Employees are required to update policies and procedures when new law, regulation or sub-regulatory guidance is released. Any applicable Standard Operating Procedures must be kept up-to-date to reflect the current processes used and the date updated.

VIII. Respect in the Workplace

Employees are required to maintain and adhere to the *Company's* policies and procedures. Company policies and procedures are made readily available in a shared directory as a company resource, and compliance policies and procedures may be shared with first-tier, downstream and related entities (FDRs). Contractors, vendors or first-tier entities are required to provide any policies and procedures as request by the Compliance Officer, CMS or a CMS-delegated auditor. Employees are required to update policies and procedures when new law, regulation or sub-regulatory guidance is released. Any applicable Standard Operating Procedures must be kept up-to-date to reflect the current processes used and the date updated.

IX. Record Retention

FCL Dental will retain and maintain records, books, documents and other evidence of accounting procedures, operations and compliance in accordance with applicable laws through 10 years from the final date of the contract period or from the date of completion of any audit, whichever is later. Records may only be destroyed in accordance with regulatory record retention requirements. Records are subject to audit and the time period accommodates periodic auditing related to utilization, costs and computation of the plan bid. It also enables CMS to inspect or otherwise evaluate the quality, appropriateness, and timeliness of services performed under the contract.

If you have any questions about retaining records, please contact the Compliance Officer.

X. Protection of Company Assets

Company Assets

Associates must protect the Company's assets and ensure their efficient and appropriate use. Theft, carelessness, and waste have a direct impact on the Company's profitability. All Company assets must be used in accordance with applicable Company policies and procedures.

Confidentiality and Privacy Policies

Covered Persons are required to protect confidential information at all times. Confidential information is considered non-public information related to business conducted. The release or sharing of confidential information is prohibited, unless you have specifically been authorized to disclose the confidential information and appropriate steps have been taken to protect the information (such as a confidentiality agreement between the Company and the party to whom the confidential information is to be disclosed).

Confidential information could include, but is not limited to, the following:

- Business plans
- System software
- Employee badge/building access
- Marketing plans
- Strategic plans
- Planned business transactions or contracts
- Contractor or vendor information
- Communications from regulators specific to FCL Dental
- Pricing and financial data

Contact the Compliance Officer if you have questions about confidential information.

Human Resource Assets

FCL is committed to protecting human resource assets by providing a work environment that is safe

and free from discrimination and harassment that may affect an employee's terms or conditions of employment

Employees will not engage in any harassment or discriminatory conduct based on sex, race, color, religion, age, disability, citizenship status, national origin, and sexual orientation, status as a veteran with a disability or veteran of the Vietnam Era.

Employees are prohibited from:

- Conducting Company business while under the influence of intoxicants or controlled substances that have not been prescribed to the employee by a licensed physician;
- Consuming or possessing unauthorized intoxicants or controlled substances that have not be prescribed to the employee by a licensed physician, while conducting Company business or while on the Company premises.

Employees will not bring firearms or weapons onto Company premises or carry them while on Company business. Threats or acts of violence or physical intimidation are prohibited.

Most workplace concerns can be resolved through open and honest discussion with your supervisor or another member of your department management. The Resolution Process may also be used to report workplace concerns.

XI. HIPAA Privacy

The HIPAA Privacy Rule includes rules indicating what type of information that is protected, and how protected information can be used and disclosed. FCL Dental is a covered entity and may obtain and share Protected Health Information (PHI) with business associates and other covered entities under certain circumstances and for purposes permitted under the HIPAA Privacy Rule.

Covered Persons are required to protect PHI and only disclose PHI in accordance with the HIPAA Privacy Rules. Disclosures are limited to the minimum necessary needed to respond to the request. The Compliance Department manages requests to disclose PHI to non-covered individuals or entities.

Be aware of your surroundings when discussing PHI with co-workers. Close office or conference room doors. Do not discuss PHI in elevators, break rooms, public hallways, restaurants or other public areas.

Covered Persons must immediately report accidental/improper disclosures of PHI or breaches to the Chief Compliance Officer. Obtain the recipient's name and telephone number, and contact the Chief Compliance Officer as soon as possible so the PHI may be confiscated.

XII. HIPAA & Data Security

All employees (including temporary and contract staff) are responsible for protecting the integrity of FCL Dental system data. The FCL Dental uses a wide variety of computer software that is protected

by licensing agreements and copyright laws. As employees, we cannot duplicate or use software outside the bounds set by the vendor. Keep your user id and passwords secure. Do not walk away from your computer without locking the keyboard (CTRL/ALT/Delete). Pick up faxes and print jobs from the printer as soon as possible.

The HIPAA Security Rule requires us to protect PHI through safeguards for sending electronic health information. The FCL Dental adheres to these requirements. Use precautions when sending PHI outside the FCL Dental server. Encrypt email. Use a coversheet that does not have PHI when sending faxes and double-check the fax number before hitting the send button.

XIII. Avoid Conflicts of Interest

Associates owe a duty of loyalty and a duty of care to the Company. A conflict of interest exists when private interests interfere in any way with the interests of the Company as a whole. A conflict of interest may arise when an associate takes actions or has personal interests that are incompatible with the interests of the Company or that may make it difficult for you to perform your work objectively and effectively. The basic principle to be observed is that your corporate position should not be used to make a personal profit. Associates are expected to exercise prudent judgment in the interpretation of this Code and be alert to any situation that might be subject to question. Conflicts of interest include but are not limited to:

1. The direct or indirect acceptance of a commission, fee, expense payment, gift, or other pecuniary benefit, from any source other than the Company on account of, in connection with, or in any way related to any person or firm with whom the Company has existing or potential business dealings or investment interests, other than
 - a. an article of nominal value ordinarily given for sales promotion or as a common business courtesy,
 - b. occasional and reasonable business meals or entertainment consistent with local social and industry custom, or
 - c. a gift of a personal nature from a personal friend or relative unrelated to your service to the Company;
2. The ownership or acquisition, either directly or indirectly, of a material interest in any outside concern which does business with the Company or in any real or personal property which the Company is purchasing, leasing, or selling, or on which the Company is making or has an outstanding loan;
3. The participation in or purchase of, either directly or indirectly, an offering of any tangible or intangible personal property to the Company, including stocks, notes, securities convertible into stock, warrants or similar properties, but not including purchases made at open market quotations not less than one business day after the Company has purchased or declined to purchase any part of the offering to the Company.

Each year Covered Persons are required to acknowledge a Conflict of Interest disclosure statement. This disclosure may be completed through an internal disclosure form or through an attestation by a FDR. Disclosure of a conflict does not mean you need to quit a job, end a business or stop professional or political involvement. Making the Human Resource and Compliance Officer

aware of your involvement in these activities protect you and the organization. Answer all questions fully and accurately. You must answer all of the questions even if you have previously shared the information. The Human Resources and Compliance Officer will review the conflict and take appropriate action based on that review.

XIV. Cooperating with Government Investigators

The Company may be asked to cooperate with a government investigation, or respond to a request for information from a government investigator (e.g. OIG, FBI, or CMS). You are free to cooperate individually with government investigators. However, all documents to be released in response to a government requests must be authorized by the Chief Operating Office or the Compliance Officer.

XV. Dealing with Contractors, Suppliers and Customers

Conducting routine business can pose ethical or even legal problems. The following guidelines can help us make decisions in potentially inappropriate situations.

Kickbacks and Rebates

Employees may not accept any kickbacks or rebates connected to a purchase or sale of goods and services. This restriction can also apply to people with whom you have a personal relationship (e.g. family members). Kickbacks or rebates can take many forms and are not limited to direct cash payments, credits or services. If you, or someone with whom you have a personal relationship, could gain personally through the transaction, it is prohibited.

Examples:

- Receive a free trip after renewing a vendor's contract.
- Free hotel stay for arranging a group event at the hotel.
- Your spouse gets a bonus for your decision to contract with his/her company

Reciprocity

The Company may purchase goods and services from a supplier who also buys dental care services from us. This practice is normal and acceptable, but any form of pressure for "Reciprocity" from either party is not. Suppliers must not be asked to buy our products or services in order to become, or continue to be a supplier. Likewise, the sales of our products are not dependent upon an agreement to buy goods and services from the supplier.

XVI. Compliance and Accurate Reporting

Each person is responsible for the accuracy and truthfulness of our documents. You may not falsify information or cause a document to be misleading. It is your ultimate responsibility to provide truthful and accurate information, including your timecards, business expenses, performance data, financial records, contracts, and any data that is reported to regulators.

You may never alter, falsify or destroy documents that you know may be relevant to a government investigation, lawsuit, audit, or internal investigation. All data submissions made to the government must be accurate, timely, and meet the applicable reporting requirements. All employees responsible for preparing data in support of any attestations or certifications to the government are responsible for validating the accuracy of the data prior to submission.

It is a crime to make a false claim for payment from the government. It is also a crime to make a false statement to a government employee. If you falsify data submitted to the government, you may have committed a crime. You, as an individual and the Company could be subject to criminal prosecution for violations, face large penalties and fines, and may be excluded from working with the Medicare Program in the future.

XVII. Effective System for Routine Monitoring, Auditing and Identification of Compliance Risk

Monitoring and Auditing Systems

The Compliance Director performs a compliance risk assessment on an annual basis and develops a quality work plan for auditing and monitoring based on indicators identified. The Compliance Director supervises and coordinates systems for periodic monitoring and auditing compliance with regulatory requirements. Procedures are developed to be used at the departmental level to monitor on-going compliance efforts.

The Company has a system in place to ensure effective monitoring and auditing is conducted on a regular basis to test and confirm compliance with internal policies and procedures and federal, state and local laws and regulations governing its operations and to prevent, detect and correct actual or potential fraud, waste and abuse. This system includes policies and procedures, an annual compliance risk assessment and a quality work plan. The quality work plan includes a focus on the risks associated with Medicare Part C and Part D program requirements to prevent harm to Medicare members.

Monitoring and auditing results are used to help evaluate the effectiveness of the Compliance Program. The compliance officer will receive all final compliance audit reports, including audit results, deficiencies and related management action plans to remediate the risks of non-compliance. The Company will conduct follow-up reviews of areas found to be non-compliant to determine if corrective actions were taken timely and effectively.

The Company and the Company's contractors will allow authorized governmental agencies (or a designee) timely access, upon reasonable request, to appropriate records for auditing purposes.

XVIII. Procedures and Systems for Prompt Response to Compliance Issues

The Company's policies and processes are designed to ensure prompt and reasonable investigations are conducted of suspected offenses (internal and external) by appropriate individuals/departments and that appropriate corrective actions are taken to resolve detected offenses and prevent reoccurrence.

Corrective actions may include actions such as repayment of overpayments and making reports, including voluntary self-reports, to appropriate governmental agencies or their designee.

The Company has a policy that requires full cooperation with state and federal authorities regarding government investigations. The Company and The Company's contractors will allow authorized governmental agencies (or a designee) timely access, upon reasonable request, to appropriate records for government investigations.

XIX. Charitable Contributions

The Company follows applicable anti-kickback rules when making charitable contributions. Anti-kickback rules prohibit the exchange of money or gifts in exchange for consideration of becoming or remaining a customer. Employees are not permitted to make, or imply, charitable contributions in exchange for becoming or remaining a customer.

XX. Gifts

Nominal Gifts to Medicare Enrollees

Gifts of nominal value are used to attract or retain enrollees and should be offered regardless of enrollment. CMS requires plan sponsors to limit an individual item/service to \$15 or less (based on the retail value of the item). Gifts cannot be in the form of cash or other monetary rebates. If gift certificates and gift cards are given, they must not be convertible to cash.

Gifts from Medicare Enrollees

Homemade or perishable items of nominal value may be accepted from a Medicare enrollee. Gifts of value must be reported to the Compliance Officer and returned to the sender.

Gifts from Vendors, Contractors or Providers

Perishable food items may be accepted from vendors, contractors or providers, as long as they are shared with your co-workers. Employees are not permitted to accept cash, gift certificates or cards, expensive gifts, checks, computers, cell phones, lottery tickets, or similar gifts. Infrequent, inexpensive, or random gifts (e.g. t-shirts, mugs, hats) under \$50 and prizes won in a drawing or raffle from vendors at conferences are acceptable.

All gifts must be reported to the Compliance Officer. Employees may not accept valuable tickets, entertainment events, or lavish expenditures from contractors or potential contractors.

Gifts to Government Officials, Vendors, Contractors or Providers

Gifts of any kind to governmental employees are prohibited. With respect to non-governmental employees, we do not encourage employees to give gifts. Generally, gifts should be reasonable and appropriate and consistent with normal business courtesy. For example, the gift of a shared meal for the purpose of developing or furthering a business relationship is generally considered appropriate. A meal or any other forms of entertainment may not be lavish. Nominal value promotional items (retail value less than \$15) may be given to enrollees or potential enrollees.

XXI. Excluded Persons

FCL Dental has implemented a policy that Medicare payments may not be made for services, equipment or provided by a provider, supplier, employee or administrative, first tier, or delegated entity in which they are excluded by the OIG or GAA.

Prior to hiring or contracting of any new employee, temporary employee, volunteer, consultant, governing body member, and entities designated as administrative, first tier, delegated entities, and vendors, FCL Dental will review the LEIE and EPLS list to ensure that none of these persons or entities are excluded or become excluded from participation in federal programs.

FCL Dental will also screen employees, including flex pool employees, temporary employees, volunteers, consultants, governing body members, independent contractors, and administrative, first tier, or delegated entities, and vendors included in accounts payables monthly to prevent inappropriate payment to persons and entities that have been added to the exclusion lists since the last time checked.

XXII. Foreign Corrupt Practices Act

U.S. and international laws can be very complex when it comes to business dealings with foreign officials. That's why we need to be aware of the Foreign Corrupt Practices Act (FCPA) and anti-corruption laws of other countries

What's prohibited

The FCPA and other applicable anti-corruption laws prohibit giving any type of gift, payment, entertainment, gratuity or anything of value to a foreign official, political candidate, political party, party official, public international organization, their employees or their representatives for the purpose of obtaining, retaining or directing their business to any person for the purpose of influencing an official act or decision or securing an improper advantage.

To whom the laws apply

These laws apply to contacts with foreign officials who include political candidates, political parties, party officials, officers or employees of public international organizations or entities working with such persons, or entities at the national or local levels (e.g., vendors, consultants, agents, quasi-governmental bodies, etc.).

Penalties for Violations

The FCPA has specific criminal and civil penalties for violations involving what may be considered bribery of foreign officials, political candidates, political parties, party officials, officers or employees of public international organizations. These penalties include, but are not limited to, fines for the Company, suspension or debarment from participation in federal programs and fines and imprisonment for individuals convicted of such conduct. Accordingly, no gifts, gratuities or anything of value to obtain or retain business can be made

to such persons or entities without the express written approval from the Company's Compliance Officer.

XXIII. Insider Trading

Every employee has the responsibility to not disclose information that has not been made public. Unless the information is release to the public, the knowledge an employee has on the Company is considered "insider" information and must be kept confidential. Insider information is considered "material" if there's a substantial likelihood that you or another reasonable person would consider the information important.

Information about major new products, proposed Medicare payment rates, contract awards, expansion plans or significant litigation or regulatory proceedings also may fall in the category of "material" information. Federal securities laws prohibit trading in securities while aware of this information, and also prohibit releasing this information to anyone, including relatives, friends, colleagues or stockbrokers until it's been disclosed publicly and the public has had time to react to it.

If you obtain access to non-public, material information about the organization while performing your role, you may not discuss this type of information with anyone outside the Company, including your spouse or other members of your family.

Within the Company, you should discuss this information on a strictly "need to know" basis with other associates who require this information to perform their role. These discussions should take place in private, secured areas and shouldn't happen in common areas or within the hearing distance of others.

Even if you don't buy or sell securities based on what you know, discussing the information with others, such as family members, friends, business partners and other outside acquaintances is prohibited until the information is considered to be public.

XXIV. Inquiries from the Media

It is possible that persons outside the Company, members of the media, financial analysts and other may contact you for comment on a particular story or event, whether it involves the Company directly or our industry in general. Here is what to do if that happens

If you receive a call or request from the new media while working at FCL Dental, do not engage in conversation. Instead, immediately direct the call to:

- The Chief Operation Officer (COO) and/or
- Compliance Officer

All public statements or acts must be carefully thought out and personal views kept separate from corporate views.

Using information that has not been made public to execute trading/investments decisions; betraying a position of trust/confidence; undue influence

XXV. Laws that Affect Our Business

Employees are responsible for understanding the federal laws and regulations that affect our business and their job function. Below is a listing of some of those applicable laws:

1. **Title XVIII of the Social Security Act – Medicare program for the aged and disabled.**
2. **Code of Federal Regulations, Part 42, Sections §§422 and 423 – the regulations that govern the Medicare Advantage and Part D Prescription Drug plans.**
3. **Patient Protection and Affordable Care Act (PPACA) – health care reform enacted in 2010 making sweeping changes to the health care system, focused on reducing the uninsured population and decreasing health care costs.**
4. **Health Insurance Portability and Accountability Act (HIPAA) – protection of health insurance coverage when they change or lose their jobs (Portability); protection of health information shared to unauthorized parties (Privacy); and national standards for electronic health care transactions (Security).**
5. **False Claims Act – law imposing liability on persons or companies who are found to have defrauded governmental programs, a primary tool used by the federal government to combat fraud. Law includes the “qui tam” provision that allows people to file actions on behalf of the government (whistle blowing) and receive a portion of any recovered damages.**
6. **Federal Criminal False Claims Statutes – making it a crime to present a false claim (e.g. billing for services not provided) to an insurance carrier to receive payment ultimately paid by Medicaid and Medicare dollars.**
7. **Beneficiary Inducement Statute – prohibits the offering of remuneration or other inducements to Medicare beneficiaries to influence their decision to select a certain health care provider, practitioner or supplier.**
8. **Civil Monetary Penalties (Social Security Act) – authorizes civil monetary penalties (CMPs), assessments and exclusion for many types of unlawful conduct. The OIG may seek CMPs for conduct such as: presenting false claims to a federal health care program, offering or paying remuneration in return for federal health care business or presenting a claim the person knows or should know is for a service for which payment is prohibited.**
9. **Physician Self-Referral (Stark) Statute – prohibits a physician from making referrals, or being paid for, certain health services payable by Medicare to an entity which he or she has a financial relationship, unless an exception applies.**
10. **Health Information Technology for Economic and Clinical Health Act (HITECH) – adoption of meaningful use of Electronic Health Records. Also requires HIPAA covered entities to report data breaches affecting 500 or more individuals to the Health and Human Services, and the media, and the affected individuals.**
11. **Excluded Individuals/Entities – excludes certain individuals or entities from participating in federal programs for reasons such as conviction of fraud or abuse, default on federal student loans, controlled-substance violations, and licensing board actions.**

XXVI. Fraud, Waste and Abuse – Prevention, Detection and Correction

The Company has a strong commitment to prevent, detect and correct fraud, waste and abuse. Fraud, waste and abuse directly impact Medicare beneficiaries, providers, our Company's financial stability and the Medicare Program.

Fraud is the intentional effort to misrepresent in order to obtain personal financial gain. Fraud is criminal. In addition, fraud may be committed by providers, pharmacies, Medicare beneficiaries, vendors, sales agents/brokers, or anyone in a position to obtain financial gain through misrepresentation. It is fraudulent to make false, misleading or incomplete statements in order to gain financially. Employees may commit fraud by falsifying time cards or requesting reimbursement for expenses not incurred.

Waste is the failure to use something wisely, properly or fully. It is the overutilization of services, or other practices that result in unnecessary costs to health care. Waste is not considered to be caused by criminally negligent actions, but rather the misuse of resources. Covered Persons may commit waste by misusing company assets and resources.

Abuse, as referenced here, is not physical or emotional abuse. It includes actions that may, directly, or indirectly, result in improper payment, unnecessary costs or payment for services that are not medically necessary. An example of abuse would be a provider billing for a non-covered service.

Identity theft may lead to fraud, waste and abuse. When a person's name or other identifying information is used to obtain medical services or goods, or to submit false insurance claims for payment, it may also result in erroneous information being added to the victim's medical records. Victims of medical identity theft may receive the wrong medical treatment, exhaust covered benefits, or be tagged as an illegal drug user.

All Covered Persons are responsible for reporting suspected fraud, waste or abuse to the Compliance phone line at (866) 262-8598 or send an email to the Compliance Officer at compliance@fclidental.com.

XXVII. Effective Training and Education

The Company maintains training associated with General Compliance, FWA and HIPAA related to the Centers for Medicare and Medicaid Services (CMS) program for employees and governing board members. Additionally, The Company uses various methods to train staff, including online training, classroom-style training and one-on-one training. General training is completed upon hire (within 90 days), upon revision and annually thereafter.

Courses must be completed by their assigned due date or this is considered a compliance violation and is subject to the disciplinary process.

Ad-hoc training conducted by the Compliance Department as a result of an identified compliance issue is mandatory (if necessary) and is documented and retained. The Compliance department measures the effectiveness of job specific training as defined by the risk assessments as well as when non-compliant trends are identified.

Training and education is also provided on an ad hoc basis when opportunities are identified by

Compliance department based on the following:

- Future Initiatives;
- Changes in regulatory requirements;
- New Implementations;
- Results of compliance monitoring and auditing activities
- Request for training by Plans

XXVIII. Personal Use of Company Resources

We are all responsible for using company resources and assets wisely, including our time, materials, equipment, office supplies and information. These resources are to be used for business purposes only. The occasional use of items of negligible cost, such as a telephone call or insignificant copying/printing are permitted. Use of company assets for personal financial gain unrelated to the organization is not allowed. Excessive use of company time for personal use is not acceptable.

Do not use company electronic systems for personal use, except as permitted in the computer responsibility agreement and Company policy, as applicable. Communicate professionally and respectfully in any electronic communication.

XXIX. Modification to the Code

This Code is subject to change and modification at any time by the Board of FCL Dental, directors, officers, and employees will be notified and ad-hoc training of any material changes will be made available to employees as soon as practicable.

Certification of Compliance

Associates will be required to complete a certification upon first accepting a position with the Company and periodically thereafter acknowledging your understanding of, and compliance with, this Code (See Acknowledgement).

XXX. Conduct

This Code is a statement of fundamental principles and key policies and procedures that govern the Conduct of FCL Dental's business. It is not intended to and does not in any way constitute an employment contract or an assurance of continued employment or otherwise creates any rights in you.

The Code of Conduct is not a complete list of potential legal or ethical situations that you may encounter. It is the Company's expectation that you demonstrate a commitment of the highest standards of behavior. If at any time you have questions about ethical, legal or compliance situations, or the information in the Code of Conduct, please ask your supervisor, the Chief Operating Officer or the Compliance Officer.

FCL Dental-Code of Conduct Acknowledgment

I have read and confirm my commitment to understand and comply with First Continental Life and Accident Insurance Company-FCL Dental, (referred to in the Code as the “Company”) Code of Conduct and any other applicable departmental policies and procedures.

I understand that my failure to comply with the standards set forth in the Code of Conduct (and any related policies and procedures) may result in disciplinary action, up to and including termination.

I understand that it is my responsibility to report any alleged or suspected violation of any laws, regulations or Company policies, and that I should raise any compliance questions or concerns to my supervisor, or the Chief Operating Officer, or the Compliance Officer, or by sending an email to the Compliance department confidential email address. I understand that, to the extent allowed by law, my identity will remain confidential and reporting any of the above personal or departments can remain anonymous.

Finally, I am not presently, nor am I aware of any reason that I would be excluded, debarred, suspended, sanctioned, or otherwise ineligible to participate in any federal, state, local, or private health-care program. I acknowledge that the Code is only a statement of principles for individual and business conduct and does not, in any way, constitute or create an express or implied employment contract or an assurance of continued employment.

Print Name

Employee Signature

Supervisor Name

Date