



CODE OF BUSINESS CONDUCT AND ETHICS



RESPONSIVE. RELIABLE. RESPECTED.



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LETTER FROM THE CHIEF EXECUTIVE OFFICER

Dear Colleagues:

Our core mission at AMR is to be patient focused, customer centered and caregiver inspired. We live out this commitment every day with every individual whether you are working on the front lines or in a supporting role. We deliver on our mission by building a culture that maintains the highest standards of ethics and integrity.

AMR's Code of Business Conduct and Ethics (the "Code") provides us with the guiding principles that drive the way we do business and serve our communities. Each policy describes what is expected and gives guidance to help us meet legal requirements and our internal ethical expectations. The Code applies to all of us. While the Code does not cover every situation, nor does it set forth every applicable rule, we are also guided by corporate and regional policies, practices and procedures, as well as common-sense standards and our personal commitment to ethical behavior.

As an organization, we are committed to having the highest standard of ethics and integrity, so it's critical that we all read, understand and follow the guidelines communicated in the Code. Any violation of these principles may subject you to corrective action and/or termination of employment. Use the Code as a reference resource whenever necessary. The Code cannot replace an individual's sense of good judgment, but it can help you evaluate and address most issues within an ethical and legal framework.

Your supervisor can assist you with any questions or concerns. If you do not feel comfortable approaching your supervisor, you may contact the Ethics & Compliance Department or if you prefer to report an issue anonymously, call the Ethics & Integrity Helpline number at (877) 631-5722.

We are committed to our colleagues and will work diligently to ensure that questions and issues brought to the attention of the Ethics & Compliance Department, directly or through the Helpline, will be kept confidential to the highest degree possible. There will be no retaliation for asking questions or raising good faith concerns regarding possible improper conduct.

Our continuing success is dependent upon maintaining our commitment to compliance with all applicable federal, state and local laws and regulations governing appropriate delivery of high quality healthcare services.

Thank you for your support and your commitment to AMR.

Sincerely,

A handwritten signature in black ink that reads "Ted".

Ted Van Horne
President & CEO, AMR

A MESSAGE FROM THE ETHICS & COMPLIANCE DEPARTMENT

This Code of Business Conduct & Ethics (the “Code”) is an important component of the Ethics and Compliance Program. The Code serves as a guideline to promote a legal and ethical environment in our daily business operations. Our commitment to this culture of compliance should encourage us to be mindful of our behaviors and actions in the workplace and the potential consequences.

The Code provides information about our business standards. Various laws, rules and regulations impact how our company must operate. Each of us has a responsibility to abide by these requirements and our company’s policies, when conducting business. The Code requires our mandatory participation in following these policies when seeking guidance and direction in resolving ethical issues.

The Code provides general guidance for expected ethical behavior. Completion of training and education and following documented policies and procedures is vital to maintaining an ethical environment. Unique situations can and will occur and may not be directly addressed within the Code; therefore, it is important to be mindful of situations and conduct that can be viewed as improper, unethical or illegal.

If you have any questions about the Code or if you have any questions about any compliance-related issue, you should:

- Consult the Code of Business Conduct & Ethics
- Speak to Your Supervisor
- Contact the Ethics and Compliance Department (303) 495-1265
- Call the Ethics and Integrity Helpline at (877) 631-5722, which is available 24 hours a day, seven days a week

Every colleague, no matter the position or title, is responsible for observing and maintaining exceptional standards in personal behavior and business ethics in work performance. A desire to observe and uphold high standards shows your commitment to maintaining an ethical culture that is vital to the Company’s reputation and success. Thank you for your cooperation in preserving these key values.

Sincerely,
The Ethics and Compliance Department

Q & A: CODE OF BUSINESS CONDUCT AND ETHICS

Q: I already reviewed a Code of Business Conduct and Ethics upon hire and completed the related training course. Why do I have to read this again and complete another training course?

A: Compliance with the Code of Business Conduct and Ethics is a condition of employment at the time of hire and throughout your employment with the Company. We believe it is important that each of us revisit and re-read the Code. In addition, the Code is reviewed and revised by the executive management team on a periodic basis. Therefore, these refresher training sessions are conducted to serve as a reminder that we all understand our responsibility to do the right thing...the right way.

NOTES:

(1) AMR’s Code of Business Conduct & Ethics is not, and may not be construed as, a contract of employment or any other type of contract or an assurance of continued employment.

(2) In order to make reading the Code a little easier, we have used the term colleague(s) to refer to temporary, part-time and full-time employees, independent contractors, clinicians, officers and directors and the term Company to refer to AMR HoldCo and any of its subsidiaries, or companies managed by them.

WE ACT RESPONSIBLY TOWARD EACH OTHER AND OUR PATIENTS/CUSTOMERS

Following and Using the Code

The Code of Business Conduct & Ethics is a reminder to continually monitor and check our own workplace behavior against the standards set by the Company.

Everyone – all members of our workforce including temporary, part-time and full-time employees, independent contractors, clinicians, officers and directors of the Company and its subsidiaries and managed entities, as well as consultants and contractors providing services for these entities – must support the Company’s efforts to comply with laws and maintain ethical standards.

The Code is made up of the key compliance policies that apply to all of us. We have tried to include as much compliance guidance as possible to assist you when faced with potential compliance questions. However, no one document can possibly cover every issue. Many of the policies set forth in this Code are further addressed in operational policies and procedures. In addition, please remember that the Ethics & Compliance Department and the full management staff are available to help you.

Compliance with the Code is mandatory. Any violation of the Code may result in corrective action, up to and including termination. Colleagues who are aware of Code violations and fail to report the violations to the Company may also be subject to corrective action.

A waiver of this Code for any executive officer or director may be made only by the Board of Directors or a committee of the Board of Directors.

Q & A: COMPLAINT RESOLUTION

Q: What if I am not satisfied with the resolution of a complaint I placed to the Helpline?

A: There may be times that an investigation and resolution to a situation does not result in an action you would have expected, because the Company may have determined the issue raised is not contrary to Company policy. Additionally, there are times when resolution to a concern is confidential in nature and the specific details of the investigation are not shared. If you continue to have concerns after a resolution has been provided, please report your continued or additional concerns back to the Helpline for additional review.

Reporting Suspected Violations

If you believe or suspect a violation has been committed, it is your duty to report your concern. The first person you may want to talk with is your supervisor. If, however, you are uncomfortable going to your supervisor, you should contact the Ethics & Compliance Department by calling (303) 495-1265.

We have also established the Ethics and Integrity Helpline at (877) 631-5722, which is available 24 hours a day, seven days a week where you may report potential issues anonymously. Confidentiality will be maintained to the greatest extent possible.

Fostering a Compliant Workforce

AMR’s supervisors and managers have a responsibility to ensure a commitment to compliance with our policies, the Code and federal and state laws and regulations. Supervisors and managers are expected to maintain an open line of communication with colleagues in which concerns can be reported and addressed without fear of retaliation.

WE ACT RESPONSIBLY TOWARD EACH OTHER AND OUR PATIENTS/CUSTOMERS (CONT.)

Investigating Suspected Violations and Prohibiting Retaliatory Behavior

We are committed to making sure that compliance issues receive sufficient and appropriate attention. Every call, question or concern is taken seriously. It is the Company's policy to review, investigate and address reported concerns so that we can ensure that our conduct is compliant with relevant laws and so that we can promptly correct any problem. The Company prohibits retaliation against anyone who raises a good faith legal or ethical issue or participates in a compliance investigation. "Getting even" behavior will never be tolerated.

Providing Quality Services

AMR and its subsidiaries are committed to providing quality healthcare services through exceptional leadership backed by comprehensive support programs that allow our caregivers to focus on patient care. Any caregiver who has a concern regarding the safety or quality of care provided to patients may report these concerns to a Supervisor, Medical Director or Risk Management.

Respecting Patient Rights and Privacy

We respect the confidential nature of our patients' personal information. Therefore, we must comply with all confidentiality and privacy policies, procedures and federal and state privacy laws such as the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Generally, unless otherwise permitted or required by law, we must not use or disclose patient health information without the patient's authorization. The laws concerning the privacy and security of health information are very broad and cover many of our business activities. We have adopted a number of policies and procedures directly related to these issues and have also developed a separate training program to address the specific privacy and security requirements adopted as part of HIPAA.

Social media sites should be used responsibly. When posting comments to social media websites, colleagues should be respectful, honest and accurate. Colleagues should not post information that is related to confidential business transactions or in violation of HIPAA.

Q & A: PATIENT PRIVACY

Q: If a friend is treated by co-workers and I have access to the medical records, am I permitted to look at his/her medical records?

A: Access to ANY medical record should be done only as required by your job responsibilities. Accessing medical records out of curiosity is not permitted and could lead to disciplinary action.

Maintaining an Appropriate Workplace Environment

The Company strives to comply with all laws, regulations and policies related to employment-related activities and expects its colleagues to abide by these laws and regulations. The Company has a comprehensive set of policies related to employment practices and compliance with employment-related laws and regulations that address issues such as: diversity, harassment, workplace violence, substance abuse, and health and safety. Please consult the Employee Handbook for applicable Company policies.

Q & A: WORKPLACE CONCERNS

Q: If I have concerns related to my workplace environment, can I call the Ethics and Compliance Helpline?

A: While all colleagues are encouraged to work with his/her local management team and Human Resources Department, a colleague can call the Helpline at any time. The Ethics and Compliance Department works in conjunction with other Departments when issues are raised to the Helpline.

WE STRIVE TO COMPLY WITH LAWS AND REGULATIONS

The healthcare industry is highly regulated. All individuals must abide by the laws and regulations impacting the healthcare industry or be subject to disciplinary action up to and including employment and/or contract termination. While the Company does not expect any single individual to understand all details of these very technical and complex healthcare laws, rules and regulations, you are expected to be knowledgeable about and comply with the laws and regulations that apply to your job responsibilities and to seek guidance when questions arise. We have adopted a number of additional policies and procedures directly related to the laws and regulations listed below.

Submitting Accurate Claims for Services

We must submit appropriate and accurate claims to all patients and third party payors for medical services provided. The creation and submission of thorough and accurate information regarding the patient encounter is imperative to ensure we seek reimbursement only for those services that are medically necessary and actually performed, and we may not submit claims for services that are excessive or otherwise not legally reimbursable. We also must not submit false, fraudulent or misleading claims to any payor.

Maintaining Appropriate Financial Relationships with Referral Sources

There are various state and federal laws governing patient referrals. Anti-kickback laws regulate offers, payments, solicitations and receipt of any anything of value in exchange for referring, furnishing or recommending federally funded business. There are also state and federal laws governing patient referrals by physicians, such as the Stark Law. The Stark Law, when applicable, prohibits physicians from referring patients, reimbursable by federal funds, to an entity providing “designated health services” if the physician or a member of the physician’s immediate family has a financial relationship with the entity, unless an exception applies.

Q & A: CLAIMS SUBMISSION

Q: If a medical record is incomplete and I think a service was provided but the documentation is not clear, can I bill based on my assumption?

A: The documentation of each patient encounter must be thorough and accurate. If you believe services were provided but they are not clearly documented, you may seek clarification in accordance with company policies but cannot bill based on an assumption that services were provided.

We may not offer, solicit or receive any type of compensation (including kickbacks, bribes or rebates) in return for referring, furnishing or recommending services to patients that are reimbursable by the federal government. Similarly, physicians may not refer Medicare patients to an entity providing “designated health services” if the physician or a member of the physician’s immediate family has a financial relationship with the entity, unless the Legal Department or Ethics & Compliance Department has determined that the referral arrangement does not violate applicable law.

WE STRIVE TO COMPLY WITH LAWS AND REGULATIONS (CONT.)

Interacting with Government Employees and Cooperating with Government Investigations

It is illegal to give anything to a government official or employee in order to influence that government official or employee to use his/her government position and power to help the Company. Not only must we refrain from this activity, we must also avoid the appearance of inappropriate influence. Colleagues may not buy lunches, give gifts or do anything that directly or indirectly benefits government officials or employees for the purpose of influencing the government official or employee to use his or her position to help the Company without prior approval from the Ethics & Compliance Department.

It is Company policy to cooperate with governmental investigations. Both the Company and its colleagues have the right to be represented by legal counsel during any government investigation or inquiry. This means that you have the right to have a company representative or an attorney present during questioning whether that questioning occurs during business hours or away from Company property. If you are contacted by a third party in connection with a governmental investigation, immediately contact the Legal Department or the Ethics & Compliance Department.

Sometimes the Company receives a subpoena or other type of legal request for certain information. The Company has developed specific procedures for releasing information in response to subpoenas and legal inquiries. For legal reasons, it is very important that these procedures be followed. Any requests for information under these circumstances should be immediately directed to the Legal Department.

Always Act with Integrity Before, During and After any Investigation

- Do not destroy documents or information in anticipation of a request for those documents from a government agency or court;
- Do not alter Company documents or records;
- Do not lie or make misleading statements to government investigators during any investigation; and
- Do not pressure anyone to hide information or provide false or misleading information to government investigators.
- Note: Documents and information include both paper and electronic forms of storage, such as computer file, e-mails, voicemails, etc.

Q & A: GOVERNMENT INVESTIGATIONS

Q: If I am approached by someone who is conducting a governmental investigation, does this mean I have done something wrong?

A: No. Governmental investigations can be routine and part of the government's auditing requirements or may be due to allegations of potential regulatory violations. It is important to be forthright and honest during any interview or other aspect of the investigation and remember that you have the right to have a company representative or an attorney present during any interview. Remember to immediately notify the Legal Team or the Ethics & Compliance Department of any governmental investigation or audit.

WE STRIVE TO COMPLY WITH LAWS AND REGULATIONS (CONT.)

Maintaining Eligibility to Participate in Government Healthcare Benefit Programs

The federal government and many state and local agencies pay for some of the services that our Company provides to patients. Individuals and/or entities may be debarred or suspended from participating in federal or state programs for various reasons including inappropriate use of federal or state funds. These individuals and/or entities are published on the “System for Award Management”, the Office of the Inspector General’s “List of Excluded Individuals/Entities” and/or individual State websites. The Company will not knowingly employ or contract with any individual or business, with or without pay, that is on the federal or state government’s excluded lists as debarred, suspended or otherwise ineligible to participate in the Company’s business endeavors.

We take proactive steps to check the government’s list of excluded and debarred providers to ensure that no colleagues have been placed on any exclusions list during employment. Colleagues have a duty to inform the Company of any change in their eligibility to participate in government programs. Consultants and contractors must be eligible to contract with the Company, and must operate in accordance with the Code that governs ethical corporate behavior and which precludes the hiring of excluded, debarred or ineligible persons or entities.

It is the responsibility of our caregivers to maintain all required credentials, licenses and certifications. We do not allow caregivers with lapsed or revoked credentials to provide care to patients.

Dealing Fairly with Others and Engaging in Appropriate Marketing Activities

The Company is committed to fair competition and to honest dealing with customers, suppliers, competitors and colleagues. Colleagues shall not engage in unethical business practices as a means to win business, such as stealing trade secrets or proprietary information from competitors, offering bribes or kickbacks or harassing a competitor’s employees. Colleagues must be cognizant of applicable United States laws, including the Foreign Corrupt Practices Act, and host country laws that have an impact upon how we conduct business. We prohibit the payment of bribes or kickbacks of any kind, whether in dealings with public officials or individuals in the private sector. We will market our services honestly and adhere to antitrust and trade regulations that encourage competition.

Q & A: PURCHASING GIFTS

Q: Can I expense gift cards bought for individuals who are not colleagues of the Company?

A: There are policies and procedures specifically addressing marketing and appropriate gifts. Gift cards are considered cash equivalents and are inappropriate to provide to potential referral sources. Any questions related to appropriate gifts should be communicated to the Ethics & Compliance Department or the Legal Department prior to the purchase of said gifts.

WE AVOID CONFLICTS OF INTEREST

Limiting Acceptance of Inappropriate Gifts or Other Benefits and Maintaining Appropriate Outside Financial Interests

Business decisions must always be made in the best interests of the Company and not motivated by personal interest or gain. Colleagues should not participate in any activities or enter into relationships that conflict or appear to conflict with their Company responsibilities. It is a conflict of interest for a colleague to make any profit or personal gain as a result of his or her position with the Company, apart from the Company's compensation and benefits programs. Company colleagues shall not be used to help with personal business during business hours. Colleagues must avoid and promptly disclose potential conflicts of interest. Waivers or exceptions to any conflict of interest must be approved in writing by the General Counsel.

SOME EXAMPLES OF POSSIBLE CONFLICTS OF INTEREST INCLUDE:

- Awarding business to a consultant or entity owned or controlled by a family member;
- Owning (or possessing a significant ownership interest in) an entity which is a competitor or supplier of the Company;
- Providing company charitable contributions to entities where a colleague or family member has an interest;
- Receiving loans or guarantees of an obligation from a customer or vendor;
- Accepting a gift that influences a decision with respect to a specific vendor or customer; and
- Requesting a coworker to assist with personal business on company time.

Keeping Personal Political Activities Separate from Company Activities

It is important to keep your personal political activities separate from Company activities. The Company has specific procedures regarding all political contributions and those procedures must be strictly followed in order to comply with laws that restrict the use of Company

funds, property and services in connection with elections. Colleagues must receive prior approval by the Government and National Services Department for any political activity or contributions that could be characterized as sponsored or supported by the Company. Examples can include using work time or Company resources on political campaigns.

No type of political contribution should ever be included on any expense account. For example, in general, the cost of fund-raising and/or tickets for political functions is considered political contributions, and therefore may not be included on expense reports, even if business is discussed.

Under no circumstances are local petty cash funds, draft accounts or other Company funds to be used for contributions to federal, state or local political campaigns.

Q & A: CONFLICTS OF INTEREST

Q: I am in a position to decide which vendor receives a contract from the Company. My spouse owns one of the businesses bidding for the contract. Is it a conflict of interest to participate in the decision making process?

A: Generally it is a conflict of interest for you to use your position within the Company to influence decisions that would directly or indirectly allow you or a family member to profit from those decisions. For example, if you, a family member or close personal friend own a business that either currently provides services to the Company or is bidding to provide services to the Company, it would be viewed as a potential conflict of interest for you to be involved in the decision-making process to hire them due to the possibility that your decision may also provide you with personal monetary gain.

WE PROTECT COMPANY PROPERTY

Using Company Property

Company Property, as a general rule, should only be used to further the Company's business, unless you receive prior approval for another use by your manager. When we refer to Company Property, we mean all the resources we use to conduct our business such as the physical spaces and facilities, materials, supplies, equipment, the services that the Company pays for to support its activities and the Company information that we use to do our jobs.

Some examples of Company property are our offices, vehicles, telephones, paging equipment, copying machines, work supplies and computers.

Company Property should be used wisely and never needlessly wasted. We also need to take precautions to protect it from misuse or theft. In order to ensure that property is being used in compliance with our policies and the law, the Company retains the right to gain access to Company Property at any time, without notice. This means that we may take actions such as monitoring, opening, inspecting, or copying any Company property, including accessing electronic communications transmitted or received through the Company's systems.

Safeguarding Confidential and Proprietary Information and Trade Secrets

The Company continues to make modifications to enhance its electronic technology and in doing so modifies and/or establishes new policies and procedures to ensure compliance with laws and regulations. Much of the information that colleagues have access to and use in the course of business has been developed by or for the Company and is extremely valuable and necessary in helping the Company operate successfully. This information, including our trade secrets, is confidential and proprietary information and generally is not available to others.

Examples of confidential or proprietary information are pricing structures, contract terms, proposals, business plans, processes, personnel information, customer or patient information, passwords and other information that either the Company has not released publicly or which is copyrighted and not available for use by other companies.

Good judgment should always be used whenever disclosing this type of information to other Company colleagues or to external parties for business purposes. If you have any questions regarding whether information is confidential or proprietary, you should contact your manager or the Legal Department prior to disclosing it.

By its very nature, confidential information is compromised if it is made public. Therefore the requirement to safeguard this type of information remains an ongoing obligation, even if your employment with the Company ends.

Q & A: PROPRIETARY INFORMATION

Q: I recently developed educational materials as part of my job responsibilities. Can I post them on a personal website for anyone to view?

A: All work products created by you in the course of conducting Company business are the property of the Company. The Company hired and paid you for your knowledge, experience and creativity. Anything that you have created for the Company cannot be used elsewhere without prior permission. The information is proprietary and any questions related to such information should be directed to the Ethics & Compliance Department or Legal Department.

WE PROTECT COMPANY PROPERTY (CONT.)

Keeping Accurate Books, Records and Reports about the Company

The Company's books, records, and reports must be truthful and accurate and must be maintained in compliance with Company policy and federal, state and local laws. The failure to maintain accurate books, records and reports may expose the Company and its colleagues to significant civil damages, substantial criminal fines and other penalties. We expect every colleague to take responsibility for the integrity of information that is included in business documents, whether that information is financial, operational, statistical, or other business data. You must not intentionally enter, record or report false, misleading or inaccurate information. It is the responsibility of the caregiver to ensure that our medical records are clear and complete and that they accurately reflect the care that was provided to a patient. Colleagues must not exaggerate or lead others to document events in an inappropriate way.

Colleagues are expected to cooperate fully with any compliance investigation and with both internal and outside auditors. Cooperation is defined as providing unrestricted access to the colleagues' books and records, as well as source documents related to any review conducted at the direction of the Chief Compliance Officer or the VP, Internal Auditor. Under no circumstance should any colleague, on his or her own, or under the direction of a director, officer or other colleague, take any action to coerce, manipulate, mislead or fraudulently influence any internal auditors or outside auditors.

All complaints regarding accounting, internal accounting controls, auditing and other financial matters from any source are received, retained, and investigated by the Chief Compliance Officer and Internal Audit and reported to the Board of Directors or a committee thereof.

Q & A: CONFIDENTIAL INFORMATION

Q: I generate a report on a routine basis. This report contains personal information such as name and social security number. I do not need to retain it. How should I discard it?

A: Unless management has instructed you to retain all documents (paper and electronic) as a result of a government/internal investigation or legal hold the report should be retained or discarded in accordance with the Company's document retention policy. Confidential documents that are discarded should be shredded or destroyed so that the information contained in the report cannot be reconstructed.

ACKNOWLEDGEMENT AND CONFLICTS OF INTEREST DISCLOSURE FORM

I certify that I have received a copy of AMR's Code of Business Conduct and Ethics. I have read AMR's Code of Business Conduct & Ethics and I understand that it outlines my responsibilities as a temporary, part-time and/or full-time employee, independent contractor, clinician, officer or director (as applicable) of the Company.

I agree to fully comply with the Company's standards, policies, and procedures.

I understand that I have an obligation to report any suspected violation of the Company's standards, policies, and procedures.

I understand that the Company has provided me with access to a toll free Ethics & Integrity Helpline number to answer any questions I may have and/or allow me to report any suspected violations of the Code of Business Conduct and Ethics.

I will report any known or perceived violations of the Code to my supervisor or the Ethics & Compliance Department as soon as possible but without unreasonable delay.

I further certify that I have read and understand the Code of Business Conduct and Ethics section entitled CONFLICTS OF INTEREST and that:

_____ I have no conflicts of interest.

_____ I request assistance in determining whether I have a Conflict of Interest.

If you checked this box please describe below.

Please sign and return this form to your supervisor or manager. It will be sent to the Ethics & Compliance Department and a copy will be placed in your personnel file.

Name (Print): _____

Company: _____

Position Title: _____ Last four digits of SS#: _____

Employee ID#: _____ Location: _____

Signature: _____ Today's Date: _____

