



## GRANT AND CHARITABLE DONATIONS POLICY

### I. Purpose and Scope

Wright Medical Technology's ("the Company") commitment to foster charitable donations and giving, and to encourage research and education, is based on the principles of transparency and accountability by ensuring compliance with applicable laws and regulations, and preserving the integrity of the physician-patient relationship. This Grant and Charitable Donations Policy (the "Policy") applies to all Company Representatives. It is intended to be consistent with the principles set forth in the Company's Code of Business Conduct, the Advanced Medical Technology Association Code of Ethics on Interactions with Health Care Professionals ("AdvaMed Code"), Accreditation Council for Continuing Medical Education ("ACCME") Essentials and Standards for Commercial Support, state and local laws, and the requirements of Wright's Corporate Integrity Agreement.

"Company Representatives" include employees (both full-time, part-time and temporary), executive officers, members of the Board of Directors, independent contractors, consultants, sales agents, distributors, distributor employees, sub-distributors and all others performing services on behalf of the Company.

"Health Care Professionals" ("HCPs") include individuals and entities that are (1) involved in providing health care services and/or items to patients and (2) in a position to purchase, lease, recommend, use, arrange for the purchase or lease of, or prescribe Wright's products in the United States. The phrase Health Care Professional is to be interpreted broadly and includes both persons providing services (such as physicians, doctors of podiatric medicine ("DPMs"), physician assistants, nurses, operating room staff or consultants) and persons who do not provide services directly (such as administrative hospital or office staff), but who may be involved in the decision to purchase, lease, or recommend Wright products. HCPs also include purchasing agents, physician's practice managers and management within General Purchasing Organizations ("GPOs").

### II. Guidelines

#### A. The Company will only provide grants and donations to support and encourage:

- the advancement of medical science or education;
- indigent care or medical missions;
- patient and public health education; and
- events where the proceeds are intended for charitable purposes.

**B. Wright will not provide grants or donations:**

- for research unless there is a written agreement defining the required procedures and protocol;
- where the budget for a proposed program appears to be unreasonable under the circumstances;
- to directly fund any fellowships in the United States. Fellowship funding may be provided to and administered through legitimate medical education foundations or institutions;
- to non-profit organizations that are, if there appears to be significant, control by an HCP or an immediate family member of an HCP, or if there appears to be any inappropriate influence by the HCP on the organization;
- to fund scholarships unless the recipients are medical students, residents, fellows, or others who are HCPs in training;
- where the circumstances are likely to improperly influence, or appear to improperly influence, medical judgment;
- where one purpose is to influence an HCP to purchase, lease, recommend, use, arrange for the purchase or lease of, or prescribe the company's products.
- when the funds would be used to defray the requestor's ordinary operating expenses or overhead;
- when funds would pay for travel, housing expenses or time spent for doctors attending third party educational events;
- to fund educational events whereby social events or activities such as golf outings, leisure time, or other recreational activities, take precedence over the educational component are not considered high quality programs of significant educational value;
- when the funds would be used to directly fund payments for exhibit space, consulting or other services or goods provided to the Company, Company promotional activities or events, or any program where any of the speakers are Company employees; and
- when the funds would be in support of or to offset entertainment or recreational activities

### **III. Administration**

The Grant Review Committee: The Company's Grant Review Committee ("GRC") is the administrative body that reviews and approves all grants and donations including, but not limited to, research grants, scholarships, fellowships, education grants, and all other charitable donations to organizations that are affiliated with HCPs. The GRC is a cross-departmental group of Wright Medical employees that meets, as needed, to review submissions of grant requests. Departments represented in the GRC include Compliance, Legal, Medical Education, Finance, and Clinical Affairs.

The Human Resources Department reviews and approves charitable donations to organizations that are not affiliated with HCPs.

Recipients: Except in the case of medical missions, the Company will only award funds to (1) non-profit organizations or (2) entities that have been recognized as qualified providers of continuing medical education ("CME") by the ACCME, providers of podiatric medical education ("CPME") accredited by the Council on Podiatric Medical Education, or by state or territory medical societies approved by ACCME to accredit CME or CPME providers.

Except in the case of medical missions, grants and donations must not be provided (1) to any individual; (2) to any "for-profit" physician practice or group; (3) to any patient; (4) on behalf of any patient or HCP; or (5) to non-CME or non-CPME accredited "for-profit" providers.

Product Donations: The Company may donate product for charitable missions and/or the benefit of indigent patients. Requests for product donations will require certification by the requestor that the patient's physician(s) and/or the hospital or other facilities will not bill the patient, Medicare, Medicaid or any other person or third party payor for the cost of any of the health care services for which donated Company products will be used.

Product Leases/Loans: If a product donation request for a bona fide medical mission or indigent care case is approved by the GRC, the Company may lease or loan instrumentation necessary for donated product to be implanted as part of the charitable case(s). The value of the approved donation will be calculated to include the value of the leased or loaned instrumentation. Once Compliance confirms that the loaned/leased instrumentation has been returned, the value of the grant will be adjusted accordingly.

Grand Rounds: The Company may provide funds to support programs for education of fellows/residents/interns. These programs are therapeutic area specific, but not specific to a company's product. Company Representatives may not attend Grand Rounds events that Wright has funded.

Exhibits, Booths and Meeting Sponsorships: Exhibits, booths and meeting sponsorships are not considered grants or donations and must be approved through the Company's Compliance Department and/or Arrangements Review Committee.

#### **IV. Required Documentation**

Each request must be received from an authorized representative of the requesting organization and include the following:

- The requestor's name, address, IRS tax identification number and a copy of the IRS tax-exempt determination letter (or other appropriate tax-exempt status documentation);
- A letter and a description of the organization's charitable, educational, or scientific purpose;
- A description of the specific educational or charitable event or other purpose for the grant;
- A detailed agenda of the event, outlining location, dates, time, speakers and topics;
- A detailed budget, outlining the event and speaker expenses;
- A completed W-9, signed by the organization;
- For medical missions, a list of the requested products to be provided by Wright, along with the purpose and ultimate destination for the use of the products; and/or a description of the requested equipment to be provided by Wright, along with the purpose and ultimate location of the equipment; and
- Completed Certificate of Compliance from the organization, including confirmation that requestors and their respective institutions are not persons or organizations are not persons or organizations excluded from participation in Medicare, Medicaid or other federal healthcare programs by the Department of Health and Human Service's Office of Inspector General and are not barred from federal contracting by the General Services Administration. In the case of fellowships, these requirements are also applicable to the attending physician and the proposed fellow. See Appendix A for a copy of the Certificate of Compliance.

Funds must be paid directly to the recipient only by Company check or electronic funds transfer.

#### **V. How to Apply**

The Requestor should submit the required documentation to the Wright grants mailbox at [grants@wright.com](mailto:grants@wright.com).

#### **VI. Grant and Donation Review, Processing and Notification Process**

Upon receipt of the grant request by Wright, the Grant Requestor will receive confirmation by email that the request was received.

If the GRC approves a grant or charitable donation, the Grants Administrator will provide a voucher and supporting documentation to the GRC Chair for review and approval, including completion of the Grant Documentation Summary Form (See Appendix B). The approved voucher will then be sent to Finance and processed in the form of a wire payment or a check, which is sent to the requestor by the Grants Administrator. The accompanying notification of approval is handled by the Grants Administrator as well.

If the GRC Chair, Compliance and Legal approve a product donation, the Grants Administrator will send the approved request and supporting documentation, including the completed Product Donation Request and Approval Form (see Appendix C), to Customer Service with direction to pull the product for donation. The GRC cost center will be billed for Wright's standard product costs. The requested product will be shipped to the requestor by Customer Service and the GRC Administrator will send a notification of approval to the requestor.

The Requestor will receive written notification of the Company's decision upon completion of this review. Wright reserves the right to deny a grant or charitable donation request for any or no reason, in its sole discretion. Wright is under no obligation to provide an explanation for its decision.

## **VII. Human Resources**

Wright Medical's Human Resources department identifies community organizations and/or causes to charitably support. Gifts of this nature cannot be affiliated with an HCP. Although these requests are not under the purview of the GRC, they are reviewed by the Grants Administrator to ensure the request is compliant with the Anti-Kickback Statute. Final approval must be obtained from the Chief Compliance Officer.

## **VIII. Receipt of non-Grant Requests**

Occasionally emails of a non-grants nature (solicitations, resumes, etc.) will be received at the [grants@wright.com](mailto:grants@wright.com) email address. The sender of the email will be notified by the Grants Administrator that their email was received, but that it will not be reviewed as a grant request. Solicitors will be politely asked to refrain from sending such emails in the future. The emails will be kept on-file electronically, but will not be included in the central repository of grant requests.

## **IX. Documentation**

All grant requests will be kept on-file, with a unique number assigned to each submission. Requests that are approved will be kept in both a hard and soft format; the Grants Administrator will retain hard copies. Soft copies of approvals and spreadsheet used to maintain request numbers will be saved on the "Grants" drive of the network. This can be accessed by the administrator, the GRC Chair and the CCO.

## Appendix A

### Wright Medical Technology Certificate of Compliance

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This certification is intended to comply with all applicable laws, rules and regulations regulating the subject matter of this request for funding and the relationship to the parties, including the federal anti-kickback statute 42 U.S.C. 320a-7(b), as well as the related safe harbor regulations. Wright reserves the right to modify this certification for such reasons as Wright deems appropriate to maintain compliance with federal, state, local laws, rules, and regulations. I, the undersigned, certify that to the best of my knowledge, all of the following statements are true with respect to this request:

1. The receiving organization, its personnel, and I have not, implicitly or explicitly, solicited the requested donation in exchange for an agreement to purchase, use, order, or recommend Wright products.
2. No Wright Medical representative implicitly or explicitly offered a donation to the receiving organization, its personnel, or me to purchase, use, order, or recommend Wright Medical products or to reward prior purchases, uses, orders, or recommendations of Wright Medical products.
3. The requested donation will not result in any private benefit to a health care provider who uses, orders, or recommends Wright Medical products.
4. The receiving organization, its personnel, and I are not a person (or persons) or organization excluded from participation in Medicare, Medicaid, or other federal healthcare programs by the Department of Health and Human Services Office of Inspector General and is not barred from federal contracting by the General Services Administration.
5. The receiving organization, its personnel, and I are not a person (or persons) or organization identified on the U.S. State Department's Terrorist Exclusion List on the U.S. Treasury Department's list of Specially Designated National or Blocked Persons.
6. The receiving organization will not bill the patient, Medicare, Medicaid or any other person or third party payor for the cost of any of the health care services for which donated Company products will be used.

Organization Name: \_\_\_\_\_

Requestor's Name: \_\_\_\_\_

Requestor's Title: \_\_\_\_\_

Area Code & Phone Number: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

If you have any questions about this Certificate, please notify Wright Medical's Compliance Office by calling (901) 290-5676 or by sending an email to [grants@wright.com](mailto:grants@wright.com).

## Appendix B

		<b>Grant Documentation Summary</b>		<b>Grant Request ID:</b> _____
				<b>Request Date:</b> _____
<input type="checkbox"/>	Grant requestor's name, address, email address, and phone number	Comments		
<input type="checkbox"/>	A letter or email describing the organization's charitable, educational, or scientific purpose	Comments		
<input type="checkbox"/>	A description of the specific educational or charitable event or other purpose of the grant	Comments		
<input type="checkbox"/>	A detailed agenda of the event, outlining location, dates, time, speakers, and topics	Comments		
<input type="checkbox"/>	A detailed budget which outlines the event and speaker expenses	Comments		
<input type="checkbox"/>	For medical missions or indigent care: A list of requested products or list/description of requested equipment to be provided by the Company, and the purpose and ultimate destination of the requested products/equipment	Comments		
<input type="checkbox"/>	A completed W9, signed by the organization (for grant monetary requests)	Comments		
<input type="checkbox"/>	IRS tax identification number and copy of the IRS tax-exempt determination letter (or other appropriate tax-exempt status documentation (for grant monetary requests)	Comments		
<input type="checkbox"/>	Exclusion Check(s) Performed	Comments		
<input type="checkbox"/>	Signed Certificate of Compliance Form	Comments		
<input type="checkbox"/>	Completed Grant Documentation Summary Form	Comments		
<input type="checkbox"/>	Other Supplemental Documentation	Comments		
<b>Committee Review Date:</b> _____				
<b>Final GRC Decision Date:</b> _____				
<b>Committee Decision:</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Postponed				
<b>Decision date back to requester:</b> _____				
<b>Communication Type:</b> <input type="checkbox"/> Approval letter/email product donation <input type="checkbox"/> Approval letter/email grant check <input type="checkbox"/> Denial letter				
<b>Date of check or product shipment :</b> _____ <b>Cost amount:</b> _____				
<b>Code of Business Conduct sent:</b> <input type="checkbox"/> Via email <input type="checkbox"/> Via mail <b>Date Sent:</b> _____				
<b>Verification by Grant Administrator Signature:</b> _____				
<b>Verification by Committee Representative Signature:</b> _____				

**Appendix C**  
**Product Donation Request and Approval Form**

<b>Date of Request</b>	
<b>Date Product Needed</b>	
<b>Organization</b>	
<b>Requester's Name</b>	
<b>Contact information</b>	
<b>Description of Need</b>	
<b>Products Needed (Part #s and Description)</b>	
<b>Estimated Costs</b>	
<b>Within Grant Budget (Yes/No)</b>	
<b>See Attached</b>	Certificate of Compliance Original Email Request/Submission

Review and Approval Table			
	Name	Signature	Comments
Compliance			
Legal			
Grant Committee Chair			