

## MiCARE'S WHISTLEBLOWING POLICY

### Policy Statement

MiCare HealthTech Holdings (Pte. Ltd.) and its group of companies ("MiCare") practice an "open-door" policy and encourage openness and transparency in its commitment to the highest standard of integrity and accountability and aspires to conduct its affairs in an ethical, responsible and transparent manner.

Realising the above values, MiCare provides an avenue for our employees and members of the public to disclose any illegal, unethical, questionable practices or improper conduct committed or about to be committed within MiCare.

### Objective

This Policy is to provide an avenue for all MiCare employees and members of the public to disclose any improper conduct in accordance with the procedures as provided for under this policy and to provide protection for employees and members of the public who report such allegations.

### Scope of the Policy

The reporting mechanism provided in this Policy can be used to report any malpractice, misconduct or wrongdoing within MiCare, which includes without limitation the following:

- Fraud or dishonesty
- Bribery and corruption
- Abuse of power
- Conflict of Interest
- Theft or embezzlement
- Violation of any of MiCare's Code of Conduct and policies
- Breaches of any applicable laws and regulations

This Policy shall be read together with MiCare's Code of Conduct and MiCare's Anti-Bribery and Anti-Corruption Policy.

### Applicability

This Policy applies to every employee, director of MiCare and member of the public, where relevant. Whenever possible, employees should seek to resolve concerns by reporting issues directly to his/her manager until matters are satisfactorily resolved. However, if for any reason an Employee is not comfortable speaking to a manager or does not believe the issue will be properly addressed, the Employee may contact the Group Head of Legal and Compliance, Compliance Officer or General Manager of each country.

Directors may submit any of their concerns to the Group Head of Legal and Compliance or the Group Chief Executive Officer.

If all else fails, the employee or director may use MiCare's Speak Up communication channel.

### Procedure for using MiCare's Speak Up communication channel

Employees, directors of MiCare and members of the public are encouraged to report any illegal, unethical, questionable practices or improper conduct committed or about to be committed within MiCare via the procedures set out below:

- (a) Complete the 'Whistleblowing Form' in the format in Appendix A hereto;
- (b) Send the completed 'Whistleblowing Form' by email to [speakup@micarehealthtech.com](mailto:speakup@micarehealthtech.com); or
- (c) Complete and submit the 'Whistleblowing Form' available on the MHH website.

### Protection to Whistleblower

Reporting under this Policy must be raised in good faith and must not be based on gossip or for purposes of personal advantage or gain. Whistleblowers should have reasonable grounds to believe or suspect that there is malpractice, misconduct or wrongdoing within MiCare.

With that being said, all reporting shall be treated in strict confidence and without risk of reprisal so long as the reporting is made in good faith.

A whistleblower will be accorded the protection of identity confidentiality to the extent reasonably practicable. Such protection is accorded even if the investigation later reveals that the whistleblower is mistaken about the facts, rules, and procedures involved. No retaliation will be taken against anyone who reports an alleged violation of any laws or MiCare's policies in good faith. Anyone who retaliates may be subject to civil, criminal and administrative penalties as well as a disciplinary action, up to and including termination of employment or referral for criminal prosecution.

### Confidentiality

The information relating to any investigation (details of the whistleblower, status or progress of the investigation) shall be kept with utmost confidentiality where possible. However, consistent with the need to conduct an adequate investigation, MiCare cannot guarantee complete confidentiality in selected circumstances, such as when the obligation of confidentiality hinders the ability to progress with the investigation or conflicts with the requirements of the laws. As reasonably practicable, MiCare will first inform the whistleblower of the need to divulge any of the whistleblower's details to a third party before doing so.

Whilst whistleblowers may wish to remain anonymous, do note that anonymous reporting makes it more difficult for MiCare to look into the reported matter. Accordingly, the anonymous whistleblower should not assume that MiCare can provide assurances in the same way as MiCare offers to other whistleblowers who made reports in an identifiable manner.

### Exclusion

This Policy does not apply to complaints about employment or how employees have been treated. For such cases, please refer to the Employee Handbook instead.

### Communication

To encourage whistleblowers to report any form of malpractice, misconduct or wrongdoing via the whistleblowing channel provided, effective communication of this Policy is important. In ensuring that this Policy and its contents are communicated effectively to employees, directors and members of the Public, the following are carried out:

- (a) translating this Policy and all relevant memos relating thereto to the local language of its subsidiary;
- (b) pasting a memo on this Policy in visible places within the vicinity of MiCare and its subsidiaries' office;
- (c) providing a copy of this Policy to all new employees joining the company;
- (d) publishing this Policy on MiCare's website;
- (e) providing training to employees and directors on the importance of this Policy.

## **Whistleblowing Investigation Framework**

### **Investigation Process**

The investigation process ensures transparency, fairness, and protection of all parties involved. It comprises the following steps:

- (a) Full details and clarifications of the complaint must be obtained and documented clearly.
- (b) The Group Head of Legal and Compliance has the highest authority to constitute an Investigating Panel, depending on the nature and complexity of the complaint. The panel may include the Internal Audit Department, and/or Group Human Resources Officer, or other relevant personnel from the business division best placed to address the issue.
- (c) The subject(s) of the complaint will be informed of the allegations made against them as soon as practicable. They will also be informed of their right to be accompanied by a representative during any formal hearing or interview.
- (d) The Investigating Panel may consult with the relevant Chief Executive Officer / Managing Director / Chairman and consider the involvement of internal auditors and/or external authorities such as law enforcement, depending on the seriousness of the complaint.
- (e) The Investigating Panel will carry out a comprehensive and impartial investigation with appropriate assistance from other departments or external bodies where required.
- (f) A formal finding will be reached, and the results will be compiled in a written investigation report, detailing the investigation process, key findings, and conclusions. This report will be submitted to the relevant CEO / MD / Chairman and the Audit Committee.
- (g) Based on the findings, the appropriate executive authority will determine what actions to take, including invoking disciplinary measures or other remedial processes in accordance with internal company policy.
- (h) The whistleblower will be updated periodically on the status of the investigation and be informed of the final outcome, subject to confidentiality limitations.
- (i) If the whistleblower is unsatisfied with the handling of their complaint, they may escalate the matter directly to the Audit Committee or designated oversight authority.

### **Post-Investigation**

- (a) The investigation findings will be reported to the Audit Committee for any follow-up action.
- (b) The conclusion of all investigations will be formally communicated to the whistleblower for closure and assurance.

### **Record-Keeping**

- (a) All reports, supporting evidence, investigation outcomes, and monitoring of corrective actions will be maintained in secure files for a minimum of seven (7) years.
- (b) These records shall be maintained and monitored by the appointed compliance function or Group Legal and Compliance Department.

### **Oversight and Policy Governance**

- (a) The Group Legal and Compliance Department shall oversee implementation and report to the Audit Committee on all whistleblowing investigations.
- (b) The designated compliance or audit function shall be responsible for maintaining, reviewing, and updating this framework at least once every three (3) years, or more frequently as necessary.

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**APPENDIX A**  
**WHISTLEBLOWING FORM**

<b>PART I – DETAILS OF ALLEGATIONS</b>		
1	Name of Person Alleged	
2	Designation of Person Alleged	
3	Description of Allegation (please include supporting attachment, if any)	
4	Other Parties involved (please provide names, designation and other details you think relevant)	
5	Approximate date & time of Incident	
6	Location of Incident	
7	Identity of person attempting to conceal this violation	
8	Length of time allegation known	
9	How the violation became known	
10	Estimated Value Involved	

<b>PART II – COMPLAINANT DETAILS</b>		
1	Name* <i>Using a pseudonym is fine if you wish to remain anonymous</i>	
2	Designation	
3	Email Address* <i>Using an anonymous email is fine</i>	
4	Date	

**Note:**

Send the completed Whistleblowing Form to [speakup@micarehealthtech.com](mailto:speakup@micarehealthtech.com)