

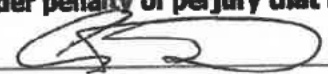


U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

CHARGE OF DISCRIMINATION

For Official Use Only - Charge Number:

EEOC Form 5A (October 2017)

Personal Information	First Name: <u>Charles</u> MI: _____ Last Name: <u>Graham</u> Address: <u>████████████████████</u> Apt: _____ City: <u>██████████</u> County: _____ State: <u>██</u> Zip Code: <u>██████</u> Phone: <u>██████████</u> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell <input checked="" type="checkbox"/> Email: <u>██████████████████</u>
Who do you think discriminated against you?	Employer <input checked="" type="checkbox"/> Union <input type="checkbox"/> Employment Agency <input type="checkbox"/> Other Organization <input type="checkbox"/> Organization Name: <u>HNI Medical Services of Idaho</u> Address: <u>7500 Rialto Blvd Bldg I Ste. 140</u> Suite: _____ City: <u>Austin</u> State: <u>TX</u> Zip Code: <u>78735</u> Phone: <u>208 799-5522</u>
Why you think you were discriminated against?	Race <input type="checkbox"/> Color <input type="checkbox"/> Religion <input type="checkbox"/> Sex <input type="checkbox"/> National Origin <input type="checkbox"/> Age <input type="checkbox"/> Disability <input checked="" type="checkbox"/> Genetic Information <input type="checkbox"/> Retaliation <input checked="" type="checkbox"/> Other <input type="checkbox"/> (<i>specify</i>)
What happened to you that you think was discriminatory?	Date of most recent job action you think was discriminatory: _____ Also describe briefly each job action you think was discriminatory and when it happened (estimate). See attached.
Signature and Verification	I understand this charge will be filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address, phone, or email. I will cooperate fully with them in the processing of my charge in accordance with their procedures. I understand by signing below that I am filing a charge of employment discrimination with the EEOC. I understand that the EEOC is required by law to give a copy of the charge, which includes my allegations and my name, to the organization named above. I also understand that the EEOC can only investigate charges of job discrimination based on race, color, religion, sex, national origin, age, disability, genetic information, or based on retaliation for filing a charge of job discrimination, participating in an investigation of a job discrimination complaint, or opposing job discrimination. I declare under penalty of perjury that the above is true and correct. Signature: <u></u> Date: <u>5/4/2021</u>

Charles Graham, D.O.
3665 Country Club Ct
Lewiston, ID 83501



May 5, 2021

Equal Employment Opportunity Commission
Federal Office Building
909 First Avenue
Suite 400
Seattle, WA 98104-1061

Re: *Charles Graham v. HNI Medical Services of Idaho, LLC* – EEOC– ADA Complaint

To Whom it May Concern:

Please accept this letter as my filing of a charge of disability discrimination and retaliation against my former employer, HNI Medical Services of Idaho, LLC. In accordance with the EEOC charge filing guidelines, please find the following information.

1. Name, address, and telephone number:
 - a. Charles D. Graham
 - b. 
 - c. 
2. Name, address, and telephone number of employer:
 - a. HNI Medical Services of Idaho, LLC
 - b. 7500 Rialto Blvd. Building I, Suite 140, Austin, Texas 78735
 - c. 208-799-5522
3. Number of employees: over 20.
4. Short description of events & when discrimination occurred.

I was hired through HNI to work as a contract Critical Care Hospitalist and Medical Director for St. Joseph Regional Medical Center in Lewiston, Idaho.

I began working full time under my current contract at St. Joseph's on January 10, 2020.

In the mid-2020 timeframe I told HNI's Chief Medical Officer (Reuben Tovar) and its Vice President of Operations (Dr. Craig Menard, who works in Louisiana) that I suffered from alcoholism and intended to undergo medically necessary residential treatment for a substance abuse disorder.

I also disclosed my disability (alcoholism) to Tim Trottier, St. Joseph's CEO. Mr. Trottier thanked me for my candor.

From August 24, 2020 to October 9, 2020 I left the workplace to receive medical treatment for a substance abuse disorder.

During the November 2 – 5, 2020 timeframe, I participated in a HNI leadership retreat in Austin, Texas. My leadership previously selected me to attend the leadership retreat because management desired to "solidify" me as a leader of HNI.

Although I completed some administrative duties remotely while on medical leave for alcoholism treatment, my absence resulted in additional work for HNI co-workers, especially Meshell Ward (Program Director) and Heather Cleveland (Program Coordinator).

My disability-related absence coupled with my post-treatment disability related accommodation requirement that I work no more than three 12-hours shifts/week,¹ increased workload and potentiated additional cost since I could no longer stay after shift for additional unpaid hours.

I contracted COVID-19 during the above-mentioned November 2020 leadership conference and was on a quarantined leave from November 9 to November 22. Following my recovery, I returned to work on or about November 23.

From late November through January, I continued to work anywhere from 70 - 90 hours per week, as I continued to battle the surge of COVID-19 cases while working as a physician and directing the critical care unit. This work schedule greatly exceeded my 3x12s work week disability accommodation requirement. I continued to request additional staffing to help keep me in compliance with this accommodation but was persistently refused due to alleged budgetary concerns.

Shortly after my return to work on November 23, Ms. Ward and Ms. Cleveland began ostracizing me from department matters, effectively precluding me from performing my job duties as Medical Director. To illustrate, Ms. Ward and Ms. Cleveland would shut their shared office door to exclude me from day-to-day communications; made business decisions without my knowledge or input; scheduled meetings with hospital

¹ The amount would increase to 4x12s after my first month back at work.

administration without extending an invitation to me or apprising me of what had transpired during meetings; and scheduled meetings about equipment only Dr. I used but without consulting me.

On January 21, 2021, I emailed Dr. Menard to describe Ms. Cleveland and Ms. Ward's continued unprofessionalism:

I am continuing to have boundary concerns with our program coordinator similar to what we have discussed on prior occasions. Specifically, she has raised her voice and pointed her finger at me in my office because I disagreed with her assessment of a patient's discharge. She has loudly disagreed with me about my decisions regarding hospital policy, berated me in front of my significant other (can we really trust him to drive) even going so far as to directly contradict me in meetings with other directors by first name ("no Charles, you can't ask them to do that).

On January 26, 2021, HNI fired me. Dr. Menard said, "I'll be brief. You do not meet expectations for an HNI medical director and we need to part ways today. You are just not a good fit for us. You can resign effective immediately, or we will terminate you. Protect yourself Charles, this will follow you."

5. Basis of discrimination and retaliation.

Regarding my ADA discrimination claim, I am an alcoholic and I understand that is a disability.

HNI cannot dispute that I was qualified to serve both as a physician and Director. Indeed, text messages exchanged with me following my without cause termination make clear that many of my co-workers were shocked. Weeks before my termination St. Joseph's CEO, Tim Trottier, told me "you're doing great work, keep it up." Indeed, Mr. Trottier agreed to write a letter of recommendation for my application to an MBA program. I received the second highest "chart to audit" score out of ten co-workers as part of my early-January performance evaluation. My team received the highest patient satisfaction score. In fact, it appears that HNI tried to have my fellow workers write statements against me but at least one refused.

Absolutely man. I want u to know that I had nothing to do with what went down. They asked if I would write a statement about u and I told them I had no issues with u and refused

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I suffered an adverse action. I was fired. My disability/accommodation requests were a but for cause of the termination as my repeated attempts to enforce my accommodation, which included limiting my shifts to 12 hours, occurred within weeks of my without cause termination.

Charles Graham, D.O.

A handwritten signature in black ink, appearing to be 'C. Graham', enclosed within a large, hand-drawn oval.

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