



DOCUMENT TITLE: Corporate Compliance Program	SYSTEM POLICY AND PROCEDURE MANUAL
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Prepared by: Office of Corporate Compliance	Notations:

GENERAL STATEMENT of PURPOSE

It is the obligation of Northwell Health and its affiliated entities (“Northwell Health”) to prevent and detect any actions within the organization that are illegal, violative of federal and state health care programs (Medicare, Medicaid and other governmental payer programs), fraudulent or in violation of any applicable Northwell Health policy. For purposes of this policy, “any applicable Northwell Health policy” shall include policies that are designed to prevent financial wrongdoing; policies prohibiting fraud, theft, embezzlement, bribery, kickbacks and abuse or misuse of corporate assets; conflict of interest policies; policies addressing unethical conduct; policies that inhibit intimidation and/or retaliation against those who in good faith report potential compliance issues; and harassment and discrimination policies.

To satisfy this obligation, Northwell Health’s Compliance Program: (1) is well-integrated into Northwell Health’s operations and supported by the highest levels of the organization, including the chief executive, senior management, and the governing body; (2) promotes adherence Northwell Health’s legal and ethical obligations; and (3) is reasonably designed and implemented to prevent, detect, and correct non-compliance with Medicaid program requirements, including fraud, waste, and abuse most likely to occur for Northwell’s risk areas and organizational experience.

Northwell Health also strives to educate our work force regarding Northwell Health policies, the requirements, rights and remedies of federal and state laws governing the submission of false claims, including the rights of employees to be protected as whistleblowers under such laws and the importance of submitting accurate claims and reports to federal and state governments.

The purpose of this document is to establish the elements of the Northwell Health Corporate Compliance Program and describe the procedures for its implementation and operation.

POLICY

It is the policy of Northwell Health to have an effective Corporate Compliance Program, including but not limited to, the seven elements described at Title 18, Part 521 of NYCRR.

SCOPE

This policy applies to all Northwell Health employees, as well as medical staff, volunteers, students, trainees, physician office staff, contractors, trustees and other persons performing work for or at Northwell Health; faculty and students of the Donald and Barbara Zucker School of Medicine at Hofstra/Northwell or the Hofstra Northwell School of Nursing and Physician Assistant Studies conducting research on behalf of the Zucker School of Medicine on or at any Northwell Health facility; patients; and any other Affected Individual.

DEFINITIONS

Affected Individuals: “Affected Individuals” is defined as all persons who are affected by Northwell Health’s risk areas including, but not limited to, Northwell Health’s employees, the chief executive and other senior administrators, managers, medical staff members, contractors, agents, subcontractors, independent contractors, and governing body and corporate officers.

PROCEDURE

1. The Corporate Compliance Program demonstrates Northwell Health’s commitment to honest and responsible corporate conduct; increases the likelihood of preventing, identifying, and correcting unlawful and unethical behavior at an early stage; encourages employees to report potential problems to allow for appropriate internal inquiry and corrective action and through early detection and reporting, minimizes any financial loss to the government and taxpayers, as well as any corresponding financial loss to Northwell Health.
2. The Corporate Compliance Program is applicable to all aspects of Northwell Health, including but not limited to, billing, payments, ordered services, medical necessity and quality of care, governance, mandatory reporting, credentialing, contractor, subcontractor, agent or independent contract oversight, privacy and security of data and other risk areas that are or should reasonably be identified by Northwell Health.
3. The Corporate Compliance Program is led by the Chief Corporate Compliance Officer, who reports to the President and Chief Executive Officer for Northwell Health, the Audit and Corporate Compliance Committee of the Board, the full Board of Trustees, and the Chief General Counsel no less frequently than quarterly. This helps ensure that the President and Chief Executive Officer for Northwell Health, the Audit and Corporate Compliance Committee of the Board, and the full Board of Trustees are apprised of the progress of adopting, implementing, and maintaining the compliance program and to ensure transparency in the Corporate Compliance Program exists at all times. If applicable, the Chief Corporate Compliance Officer or designee also reports no less frequently than quarterly to facilities that have their own Board of Trustees Audit and Compliance committees.

4. The Board of Trustees Audit and Corporate Compliance Committee provides direction, oversight and guidance to the Corporate Compliance Program and is responsible for monitoring the Corporate Compliance Program and for ensuring that corrective actions are taken whenever deficiencies in the program or in Northwell Health's compliance with the law are identified.

5. Northwell Health also has an Executive Audit and Compliance Committee consisting of members of senior management and led by the Chief Corporate Compliance Officer. This Committee shall report directly and be accountable to Northwell Health's President and Chief Executive Officer and the Audit and Corporate Compliance Committee of the Board. This Committee is responsible for coordinating with the Chief Corporate Compliance Officer to ensure that Northwell Health is conducting its business in an ethical and responsible manner, consistent with its compliance program. This Committee's responsibilities include: (i) coordinating with the Chief Corporate Compliance Officer to ensure that written policies and procedures, and its standards of conduct are current, accurate and complete, and that applicable training and education topics are timely completed; (ii) coordinating with the Chief Corporate Compliance Officer to ensure communication and cooperation by Affected Individuals on compliance related issues, internal or external audits, or any other applicable compliance function or activity; (iii) advocating for the allocation of sufficient funding, resources and staff for the Chief Corporate Compliance Officer to fully perform their responsibilities; (iv) ensuring that Northwell Health has effective systems and processes in place to identify compliance risks, overpayments and other issues, and effective policies and procedures for correcting and reporting such issues; and (v) advocating for adoption and implementation of required modifications to the compliance program.

6. The Executive Audit and Compliance Committee holds quarterly meetings per its charter. In addition, applicable facilities also may have a Compliance Committee consisting of members of the facility's senior management. These Committees report into its Executive Director or an individual whose title is commensurate with an Executive Director's responsibilities. The Office of Corporate Compliance carries out the day-to-day implementation of the Corporate Compliance Program. The staff of the Office is comprised of a team of ethics and compliance professionals who are experienced in the areas of coding, billing, auditing, investigations, ethics and quality.

7. The Chief Corporate Compliance Officer is responsible for resolving compliance-related issues and is responsible for the day-to-day operation of the compliance program. The Chief Corporate Compliance Officer's primary responsibilities include: (i) overseeing and monitoring the adoption, implementation and maintenance of the compliance program and evaluating its effectiveness; (ii) drafting, implementing, and updating no less frequently than annually or, as otherwise necessary, to conform to Federal and State laws, rules, regulations, policies and standards, a compliance work plan which shall outline Northwell Health's proposed strategy for meeting the applicable compliance requirements; (iii) reviewing and revising the compliance program, the written policies and procedures and standards of conduct, to incorporate changes based on Northwell Health's organizational experience and promptly incorporate changes to Federal and State laws, rules, regulations, policies, and standards; (iv) assisting Northwell Health in establishing methods to improve Northwell Health's efficiency, quality of services, and reducing Northwell Health's vulnerability to fraud, waste and abuse; and (v) investigating and independently acting on matters related to the compliance program, including the designing and coordinating of internal investigations and documenting, reporting, coordinating, and pursuing any

resulting corrective action with internal departments, contractors and New York State.

8. The Chief Corporate Compliance Officer chairs the Corporate Investigation Committee, which is a part of the Corporate Compliance Program and is comprised of representatives from Internal Audit, Corporate Security, Legal Affairs and Human Resources. Pursuant to *Northwell Health Policy #800.06 – Corporate Compliance Investigative Resolution Process and Principles of Investigation* and at the direction of the Chief Corporate Compliance Officer, the Committee reviews, assigns and resolves compliance-related investigative matters received via the Compliance HelpLine and other sources.

9. The Corporate Compliance Program shall have written policies, procedures, and standards of conduct which are available, accessible, and applicable to Affected Individuals. The Office of Corporate Compliance is responsible for the creation, annual review and revision of written policies and procedures and standards of conduct that articulate a commitment and obligation to comply with all federal and state laws, regulations and standards, including all the requirements of the Federal Deficit Reduction Act. The policies shall describe the structure of the compliance program including the responsibilities of all Affected Individuals in carrying out functions of the compliance program and identifying potential compliance issues. Policies will explain how to report such issues, questions, and concerns to the Chief Corporate Compliance Officer, establish the expectation that all Affected Individuals will act in accordance with the compliance expectations as embodied in the Code of Ethical Conduct and must refuse to participate in unethical or illegal conduct, and any unethical or illegal conduct must be reported to the Chief Corporate Compliance Officer.

10. Northwell Health shall review the written compliance policies and procedures, and standards of conduct at least annually to determine: (i) if such written compliance policies, procedures, and standards of conduct have been implemented; (ii) whether Affected Individuals are following the policies, procedures, and standards of conduct; (iii) whether such compliance policies, procedures, and standards of conduct are effective; and (iv) whether any updates are required.

11. The Northwell Health Code of Ethical Conduct (“Code”) is the foundation of the Corporate Compliance Program. The Code describes Northwell Health’s fundamental principles and values, and commitment to conduct its business in an ethical manner. The Code also implements the operation of the compliance program, provides guidance to employees and others on dealing with potential compliance issues, identifies how to communicate compliance issues to appropriate compliance personnel, and describes how potential compliance problems are investigated and resolved. It also provides principles and other guidance by which employees should conduct their work. The Code is reviewed annually to ensure its accuracy and is republished, as necessary. The Code is presented as part of the Northwell Health applicable Affected Individuals on-boarding process through an electronic information system. Applicable Affected Individuals on-boarded using the electronic information system certify that they have received, reviewed, and will comply with the Code and related policies. Employees also certify that they have received, reviewed, and will comply with the Code and related policies during annual mandatory compliance training. The Code is also available on the Intranet and Internet, on the Office of Corporate Compliance webpage.

12. The Office of Corporate Compliance, the Office of Research Compliance, and Internal Audit conduct risk assessments, on an at least annual basis, by reviewing the operations of Northwell Health, internal and external audits conducted by the State of New York, State of Connecticut or Federal government of Northwell Health, other self-evaluations, industry developments, the work plans of the Office of the Inspector General of the U.S. Department of Health and Human Services (“OIG”) and the NY State Office of the Medicaid Inspector General, guidance issued by government agencies, such as the OIG Hospital Guidance, the OIG Supplemental Hospital Guidance, and other relevant resources. The Office of Corporate Compliance and Office of Research Compliance’s risk assessments collectively are used as the basis for the development of the Corporate Compliance Program’s Annual Work Plan. The design, implementation, and results of any internal or external audits are documented and the results are shared with the Executive Audit and Compliance Committee and the Audit and Corporate Compliance Committee of the Board. Internal Audit issues its own respective annual Risk Assessments and Work Plans.

13. Northwell Health shall conduct a review of its compliance program on at least an annual basis. The purpose of the review shall be to determine the effectiveness of its compliance program, and whether any revision or corrective action is required. Northwell Health shall document the design, implementation and results of its effectiveness review, and any corrective action implemented. The results of this annual compliance program review shall be shared with the President and Chief Executive Officer, senior management, Executive Audit and Compliance Committee and the Audit and Corporate Compliance Committee of the Board.

14. Northwell Health has procedures and systems for promptly responding to compliance issues as they are raised. All compliance-related problems identified as a result of reports of such problems from any source or identified in the course of self-evaluations or audits shall be corrected promptly and thoroughly. Such corrective actions shall include, but not be limited to, implementation of policies and/or systems as necessary to reduce the potential for recurrence, training and education, additional audits or other monitoring, reporting the problem to the appropriate government agency, and refunding overpayments. The Office of Corporate Compliance reports to the applicable committees on the progress of corrective action plans that address identified deficiencies.

15. The Office of Corporate Compliance provides the Annual Compliance Training Program and other compliance-related training and education programs, as needed, to applicable Affected Individuals. The training provides information about written policies and procedures, the role of the Chief Corporate Compliance Officer and compliance committee(s), how Affected Individuals can ask questions and report potential compliance-related issues to the Chief Corporate Compliance Officer and senior management, including the obligation of Affected Individuals to report suspected illegal or improper conduct and the procedures for submitting such reports; and the protection from intimidation and retaliation for good faith participation in the compliance program, Northwell Health risk areas including the identification of any issues or risk areas in the course of its internal monitoring, auditing activities, and the operation of the Compliance Program, disciplinary standards, how Northwell Health responds to compliance issues and implements corrective action plans; coding and billing requirements including the claim development and submission process.

16. Training is also a part of the on-boarding process provided by Northwell Health for applicable Affected Individuals who are associated with Northwell Health. Northwell Health shall develop and maintain a training plan. The training plan shall, at a minimum, outline the subjects and topics for training and education, the timing and frequency of the training, which Affected Individuals are required to attend, how attendance will be tracked, and how the effectiveness of the training will be periodically evaluated. See Northwell Health Policy #800.69 – Compliance Training and Education.

17. The Corporate Compliance Program also maintains the Compliance HelpLine, which is one means by which all employees and other Affected Individuals associated with Northwell Health may make reports of potential compliance issues. Reports to the HelpLine may be made anonymously or non-anonymously either by phone or email to protect the anonymity of complainants and to protect whistleblowers from intimidation and retaliation as well as ensure confidentiality for Affected Individuals.

18. Northwell has established disciplinary standards and procedures for the enforcement of such standards to address potential violations. Affected Individuals associated with Northwell Health are encouraged to participate in good faith in the Compliance Program. All such individuals are expected to report compliance issues and assist in their resolution. Northwell Health's disciplinary policies, entitled "Conduct in the Workplace/Progressive Discipline," and "Compliance Program Disciplinary Standards for Non-Employees," outlines the possible sanctions for behavior including failing to report suspected problems; participating in non-compliant behavior; and, encouraging, directing, facilitating or permitting either actively or passively non-compliant behavior. These policies also establish standards for escalating disciplinary actions for such behavior and the procedures for taking disciplinary action and sanctioning individuals. These policies are disseminated to applicable Affected Individuals and are incorporated into Northwell Health's compliance training plan. The "Conduct in the Workforce Conduct/Progressive Discipline" and "Compliance Program Disciplinary Standards for Non-Employees" policies are fairly and firmly enforced across Northwell Health. See Northwell Health Human Resources Policy and Procedure Manual, Part 5-3; Northwell Health Policy #800.73 - Compliance Program Disciplinary Standards for Non-Employees.

19. Northwell Health has a process and policy to ensure Affected Individuals and entities are screened periodically against the applicable exclusion lists to ensure the highest quality of care. See Northwell Health Policy #800.05 – Screening of Federal and State Exclusion Lists.

20. Pursuant to *Northwell Health Policy #800.01 – Non-Intimidation and Non-Retaliation Policy*, no one may be intimidated and/or retaliated against for good faith participation in the Compliance Program. "Good faith participation" includes, but is not limited to, reporting potential issues, investigating issues, self-evaluations, audits and remedial actions, and reporting to appropriate officials as provided in section seven hundred forty and seven hundred forty-one of the New York Labor Law, and section 31-51m, section 19a-498a and section 4-37j of the Connecticut General Statutes.

REPORTING AND ENFORCEMENT

All violations of this policy shall be reported to the appropriate manager/supervisor/director or to the Office of Corporate Compliance (516-465-8097) for appropriate resolution of the matter. The HelpLine is available 24 hours a day, seven days a week at (800) 894-3226 or online at www.northwell.ethicspoint.com, is accessible to all Affected Individuals and allows for questions regarding compliance issues to be asked and for compliance issues to be reported. Reports of potential fraud, waste and abuse and compliance issues also may be made directly to the Chief Corporate Compliance Officer or designee in person, in writing, via email, mobile device via a QR code, or by telephone. All reports received by the Office of Corporate Compliance are investigated and resolved to the fullest extent possible. The confidentiality of persons reporting compliance issues shall be maintained unless the matter is subject to a disciplinary proceeding, referred to, or under investigation by Medicaid Fraud Control Unit, U.S. Department of Health and Human Services (HHS), Office for Civil Rights, HHS, Office of Inspector General, Office of Medicaid Inspector General or law enforcement, or disclosure is required during a legal proceeding, and such persons shall be protected under Northwell Health's policy for non-intimidation and non-retaliation. Violations of this policy will be subject to disciplinary action as outlined in the Human Resources Policy and Procedure Manual and *Northwell Health Policy #800.73 – Compliance Program Disciplinary Standards for Non-Employees*.



REFERENCES to REGULATIONS and/or OTHER RELATED POLICIES

- OMIG Compliance Program Guidance, Title 18 NYCRR, Part 521 Fraud, Waste and Abuse Prevention (March 28, 2023)
- OIG Supplemental Compliance Program Guidance for Hospitals (70 FR 4858; Jan. 31, 2005)
- OIG Compliance Program Guidance for Hospitals (63 FR 8987; February 23, 1998)
- OIG Compliance Program Guidance for Home Health Agencies (63 FR 42410; August 7, 1998)
- OIG Compliance Program Guidance for Hospices (64 FR 54031; October 5, 1999)
- OIG Supplemental Compliance Program Guidance for Nursing Facilities (736 FR 56832; September 30, 2008)
- OIG Compliance Guidance for Nursing Facilities (65 FR 14289; March 16, 2000)
- OIG Compliance Program Guidance for Clinical Laboratories (63 FR 45076; August 24, 1998)
- New York Labor Law § 741
- New York State Social Services Law §363d

- Northwell Health Code of Ethical Conduct
- Northwell Health Human Resources Policy and Procedure Manual, Part 5-3 – Workforce Conduct – Progressive Discipline
- Conn. Gen. Stat. § 4-37j.
- Conn. Gen. Stat. §§ 31-51m [a][4]
- Conn. Gen. Stat. §19a-498a
- Northwell Health Policy #800.01 – Non-Intimidation and Non-Retaliation
- Northwell Health Policy #800.05 – Screening of Federal and State Exclusion Lists
- Northwell Health Policy #800.06 – Corporate Compliance Investigative Resolution Process and Principles of Investigation
- Northwell Health Policy #800.08 – Corporate Compliance HelpLine
- Northwell Health Policy #800.69 – Compliance Training and Education
- Northwell Health Policy#800.73 – Compliance Program Disciplinary Standards for Non-Employees

CLINICAL REFERENCES/PROFESSIONAL SOCIETY GUIDELINES

N/A

ATTACHMENTS

N/A

FORMS

N/A

<u>CURRENT REVIEW/APPROVALS:</u>	
Service Line/Department Review	07/03/2025
Northwell Health Policy Committee	07/22/2025❖
System PICG/Clinical Operations Committee	07/22/2025❖

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Review/Approvals: / = Service Line/Department; * =Northwell Health Policy Committee; ** = PICG/Clinical Operations Committee; ☒ = Provisional; ❖ = Expedited

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