



DOCUMENT TITLE: Non-Intimidation and Non-Retaliation Policy	SYSTEM POLICY AND PROCEDURE MANUAL
POLICY #: 800.01	CATEGORY: Compliance and Ethics
System Approval Date: 07/22/2025❖	Origination Date: 07/2009
Site Implementation Date: 07/22/2025❖	Previously Reviewed/Approved: 01/2025
Prepared by: Office of Corporate Compliance	Notations:

GENERAL STATEMENT of PURPOSE

The purpose of this document is to establish a policy for Northwell Health prohibiting intimidation of and/or retaliation against anyone who participates in good faith in Northwell Health's Compliance Program.

POLICY

It is the policy of Northwell Health to prohibit intimidation of and/or retaliation against any individual who participates in good faith in Northwell Health's Compliance Program. Good faith participation in the Compliance Program includes, but is not limited to, reporting potential issues, investigating issues, self-evaluations, audits and remedial actions, reporting instances of intimidation and retaliation, and reporting to appropriate officials or other public bodies as provided in §§740 and 741 of the New York Labor Law, and Connecticut Statute §§ 31-51m; § 19a-498a and § 4-37j. Retaliation against or intimidation of any individual associated with Northwell Health also is prohibited by Northwell Health's Code of Ethical Conduct, Northwell Health Policy #800.08 – *Corporate Compliance HelpLine*, Northwell Health Policy #800.09 - *Detecting and Preventing Fraud, Waste, Abuse, and Misconduct* and Northwell Health Human Resources Policy 05-03 – *Workforce Conduct/Progressive Discipline*.

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. Any individual who believes that they have been subject to intimidation and/or retaliation for good faith participation in Northwell Health’s Compliance Program must immediately report such intimidation and/or retaliation to the Corporate Compliance Officer, either in person at the Corporate Compliance Office, 1111 Marcus Ave, Lake Success, NY, via telephone to the Corporate Compliance Office at (516) 465-8097 or by making a report to the confidential Compliance HelpLine either by telephone at (800) 894-3226 or by visiting www.northwell.ethicspoint.com and a mobile texting option using the below QR code where individuals can make reports about compliance issues online. Reports to the Compliance HelpLine may be made anonymously, and those who choose to give their name will have their identities protected to the extent allowed by law.



2. All reports of intimidation and/or retaliation relating to good faith participation in Northwell Health’s Compliance Program including, but not limited to: reporting potential compliance issues to appropriate personnel; participating in investigation of potential compliance issues; self-evaluations; audits; remedial actions; reporting instances of intimidation or retaliation; and reporting potential fraud, waste or abuse to the appropriate State or Federal entities will be investigated by the Chief Corporate Compliance Officer/designee. Upon conclusion of the investigation, the Chief Corporate Compliance Officer will make a report and recommendation for discipline, where appropriate, to the Chief People Officer/designee. The Chief Corporate Compliance Officer and the Chief People Officer and/or their designees shall confer and agree upon the discipline to be imposed.
3. Pursuant to the *Human Resources’ Policy 05-03 – Workforce Conduct/Progressive Discipline*, the possible sanctions that may be imposed on any individual who is found to have intimidated and/or retaliated against another individual include, but are not limited to, termination of employment.

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 confidential 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 to the Compliance HelpLine may be made anonymously, and those who choose to give their name will have their identities protected to the extent allowed by law. 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)
- The New York State Social Services Law § 363d
- New York Labor Law §§ 215, 740 and 741
- Conn. Gen. Stat. § 31-51m, § 31-51q, § 19a-498a, § 4-37j, 4-61dd
- Northwell Health Human Resources Policy 05-03 Workforce Conduct /Progressive Discipline
- Northwell Health Code of Ethical Conduct
- Northwell Health Policy #800.08 – Corporate Compliance HelpLine
- Northwell Health Policy #800.09 – Detecting and Preventing Fraud, Waste, Abuse and Misconduct
- 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❖

Standardized Versioning History:

Approvals: * =Northwell Health Policy Committee; ** = PICG/Clinical Operations Committee; ✖ = Provisional; ❖ = Expedited

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