



POLICY TITLE: Corporate Compliance Program	SYSTEM POLICY AND PROCEDURE MANUAL
POLICY #: 800.00	CATEGORY: Compliance and Ethics
System Approval Date: 08/13/2018❖	Effective Date: 05/2005
Site Implementation Date: 08/13/2018❖	Last Reviewed/Approved: 07/2016
Prepared by: Office of Corporate Compliance	Notations:

The purpose of this policy 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 eight 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 conducting research on behalf of the Zucker School of Medicine on or at any Northwell Health facility; and the faculty and students of the Hofstra Northwell School of Graduate Nursing and Physician Assistant Studies.

DEFINITIONS

N/A

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, medical necessity and quality of care, governance, mandatory reporting, credentialing, privacy and security of data and other risk areas that are or should with due diligence be identified by Northwell Health.

3. The Northwell Health Code of Ethical Conduct (“Code”) is the foundation of the Corporate Compliance Program. It provides principles and other guidance by which employees should conduct their work. The Code is reviewed periodically to ensure its accuracy and is republished, as necessary. The Code is presented as part of the Northwell Health employee on-boarding process through Taleo. Employees on-boarded using the Taleo program 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. Hard copies of the Code are available from the Office of Corporate Compliance.

4. 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 General Counsel on a regular basis. This helps ensure management and the Board of Trustees are fully informed on compliance issues and to ensure transparency in the Corporate Compliance Program exists at all time. The Chief Corporate Compliance Officer or designee also periodically reports to facilities that have their own Board of Trustees Audit and Compliance committees.

5. 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.

6. 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 also provides direction, oversight and guidance to the Corporate Compliance Program.

7. 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.

8. The Chief Corporate Compliance Officer is responsible for resolving compliance-related issues. 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 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 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 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’s risk assessment is used as the basis for the development of the Corporate Compliance Program’s Annual Work Plan. The Office of Research Compliance and Internal Audit issue their own respective annual Risk Assessments and Work Plans. See Northwell Health Policy 800.13 - Risk Assessment Policy.

10. 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.

11. The Office of Corporate Compliance is responsible for the creation, review and revision of written policies and procedures that describe compliance expectations as embodied in the Code of Ethical Conduct, 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.

12. The Office of Corporate Compliance provides the Annual Compliance Training Program and other compliance-related training and education programs, as needed, to all employees of Northwell Health, the members of Northwell Health’s Board of Trustees, and applicable agents. The training provides information about compliance issues, expectations and the operation of the Compliance Program. This training also is a part of the orientation provided by Northwell Health for the applicable individuals who are associated with Northwell Health. See Policy 800.69 – Compliance Training and Education.

13. The Corporate Compliance Program also maintains the Compliance HelpLine, which is one means by which all employees and other individuals associated with Northwell Health may make reports of potential compliance issues. Reports to the HelpLine may be made anonymously either by phone or email to protect the anonymity of complainants and to protect whistleblowers from retaliation. The HelpLine is available 24 hours a day, seven days a week at (800) 894-3226 or online at www.northwell.ethicspoint.com. Reports of compliance

issues also may be made directly to the Chief Corporate Compliance Officer or his/her designee in person, in writing or by telephone. All reports received by the Office of Corporate Compliance are investigated and resolved to the fullest extent possible. See Policy – 800.08 – Corporate Compliance HelpLine.

14. All 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 policy, entitled ”Conduct in the Workplace/Progressive Discipline,” outlines the possible sanctions for: failing to report suspected problems; participating in non-compliant behavior; and, encouraging, directing, facilitating or permitting either actively or passively non-compliant behavior. The Conduct in the Workplace/Progressive Discipline policy is fairly and firmly enforced across Northwell Health. See Northwell Health Human Resources Policy and Procedure Manual, Part 5-3.

15. Northwell Health has a process and policy to ensure all applicable 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.

16. Northwell Health utilizes several other committees to address potential compliance issues such as the Executive Privacy Committee, Physician Partners’, Practice Operations Committee, Physician Compensation Committee, Protected Health Information Committee, facility compliance committees and quality committees.

17. 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.

REFERENCES to REGULATIONS and/or OTHER RELATED POLICIES

- Title 18, Part 521 of NYCRR
- 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)
- Northwell Health Code of Ethical Conduct
- Northwell Health Human Resources Policy and Procedure Manual, Part 5-3

- Northwell Health Policy #800.01 - Non-Intimidation and Non-Retaliation
- Northwell Health Policy #800.06 - Corporate Compliance Investigative Resolution Process
- Northwell Health Policy #800.05 – Screening of Federal and State Exclusion Lists
- Northwell Health Policy #800.08 – Corporate Compliance Helpline
- Northwell Health Policy #800.13 - Risk Assessment Policy
- Northwell Health Policy #800.69 – Compliance Training and Education

CLINICAL REFERENCES/PROFESSIONAL SOCIETY GUIDELINES

N/A

ATTACHMENTS

N/A

FORMS

N/A

APPROVAL:	
Northwell Health Policy Committee	07/26/2018
System PICG/Clinical Operations Committee	08/13/2018❖

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❖ Expedited Approval Granted by:
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