



<b>POLICY TITLE:</b> Corporate Compliance Investigative Resolution Process	<b>SYSTEM POLICY AND PROCEDURE MANUAL</b>
<b>POLICY #:</b> 800.06	<b>CATEGORY:</b> Compliance and Ethics
<b>System Approval Date:</b> 7/26/18	<b>Effective Date:</b> 05/2004
<b>Site Implementation Date:</b> 9/06/18	<b>Last Reviewed/Approved:</b> 07/2016
<b>Prepared by:</b> Office of Corporate Compliance	<b>Notations:</b>

**GENERAL STATEMENT of PURPOSE**

The purpose of this policy is to establish a culture within the organization that promotes prevention, detection, and resolution of fraud, waste and abuse and other unethical conduct. Pursuant to Northwell Health policy, employees are encouraged to report compliance-related problems and concerns. The Office of Corporate Compliance is responsible for investigating and otherwise responding to compliance-related issues that are raised by employees and/or other individuals and that become known to the Office of Corporate Compliance by other means. This policy establishes a framework for investigating compliance related issues, as appropriate, through the Corporate Compliance Investigations Committee.

**POLICY**

1. The Chief Corporate Compliance Officer is responsible for coordinating compliance related issues. Employees shall not be discouraged from using any available communication channel to report compliance related concerns. However, where appropriate, employees who report non-compliance related issues will be redirected to the appropriate department representative.
2. Retaliation against and/or intimidation of any employee or other individual who makes a good faith report of an actual or potential compliance issue or who assists, participates or otherwise is involved in the investigation and/or resolution of a compliance related issue are strictly prohibited. Any individual who engages in any such conduct will be subject to disciplinary action up to and including termination of employment.
3. The Chief Corporate Compliance Officer is responsible for the Corporate Compliance Program. Issues related to the operation of the Corporate Compliance Program should be referred directly to the Chief Corporate Compliance Officer or his/her designee.

4. To the extent practical, information provided to the Chief Corporate Compliance Officer, and/or his/her designee, shall be kept confidential.
5. Corporate Compliance Investigations Committee shall be used to assist in responding to compliance issues as deemed appropriate by the Chief Corporate Compliance Officer, or his/her designee.

## **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**

### **A. Compliance Related Inquiries and Issues:**

Compliance related inquiries and issues reported to the Office of Corporate Compliance shall be recorded in the tracking database, which is maintained by the Chief Corporate Compliance Officer or his/her designee.

1. Calls and online reports received by the Employee HelpLine will be handled in accordance with Northwell Health Policy 800.08 – Corporate Compliance HelpLine.
2. Issues received by the Office of Corporate Compliance that are determined to be exclusively non-compliance related will be referred to the appropriate department. That department shall be responsible for the resolution of the issue(s). Such referrals will be noted in the Compliance tracking database. Complaints alleging intimidating and disruptive behavior by a physician shall be handled in accordance with the Medical Staff Policy on Professionalism.
3. Issues received by the Office of Corporate Compliance that contain insufficient information to investigate will be closed. Such closures will be noted in the Compliance tracking database.
4. When the Chief Corporate Compliance Officer determines that a compliance related issue requires preliminary review, he/she, or his/her designee, will conduct an initial inquiry, which may include document review, interviews or other investigative techniques. The Chief Corporate Compliance Officer, or his/her designee, shall involve employees as

necessary and appropriate in order to investigate and resolve the issue. The Chief Corporate Compliance Officer, or his/her designee, also may use the Corporate Compliance Investigation Committee or similar committees at individual facilities as necessary.

5. When the Chief Corporate Compliance Officer or his/her designee determines that an issue requires legal consultation, he/she shall consult with the Office of Legal Affairs.
6. To the extent applicable, the Chief Corporate Compliance Officer or his/her designee shall ensure, to the extent possible, that the following objectives are accomplished:
  - Inform the complainant about the status of the complaint;
  - Notify appropriate internal parties;
  - Identify cause of problem, desired outcome, affected parties, applicable guidelines, possible regulatory or financial impact;
  - Provide a summary of findings and recommendations;
  - Determine and report the necessary corrective action measures (e.g., policy changes, operational changes, system changes, training/education) which include assigned implementation dates; and
  - Follow-up with confirmation of implementation of corrective action plan.
7. The Office of Corporate Compliance shall maintain all records of inquiries, issues and investigations in the Compliance tracking database. Paper records shall be housed in a secure location.

## **B. Corporate Compliance Investigation Committee**

1. The Corporate Compliance Investigation Committee is a component of the Corporate Compliance Program and meets on a periodic basis as needed to address investigatory matters.
  - a. The Corporate Compliance Investigation Committee is comprised of representatives of the following departments:
    - Internal Audit;
    - Corporate Security;
    - Corporate Human Resources;
    - Corporate Information Services;
    - Corporate Compliance; and
    - Legal Affairs
  - b. The Corporate Compliance Investigation Committee will investigate compliance related issues including, but not limited to, the following areas:
    - Theft of assets;
    - Suspected criminal activity;
    - Identity Theft;
    - Fraud and Abuse; and

- Privacy and Security
- c. The members of the Corporate Compliance Investigation Committee assigned to the issue will investigate it, as appropriate, and report back to the Chief Corporate Compliance Officer, or his/her designee, and to the other members of the Committee.
  - d. The members of the Corporate Compliance Investigation Committee shall involve employees, as necessary and appropriate, in order to resolve issues.
  - e. In addition, parties of the Investigation Committee meet periodically to discuss individual investigation matters.
  - f. If applicable, the Corporate Compliance Investigation Committee shall ensure, to the extent possible, that the following objectives are accomplished:
    - Inform the complainant about the status of the complaint;
    - Notify appropriate internal parties;
    - Identify cause of problem, desired outcome, affected parties, applicable guidelines, possible regulatory or financial impact;
    - Provide a summary of findings and recommendations; and
    - Determine and report the necessary corrective action measures (e.g., policy changes, operational charges, system changes, training/education).

**REFERENCES to REGULATIONS and/or OTHER RELATED POLICIES**

- NYCRR, Title 18, Part 521
- Northwell Health Policy #800.00 – Corporate Compliance Program
- Northwell Health Policy #800.08 – Corporate Compliance HelpLine
- Northwell Health Policy #100.76 – Professional Behavior

**CLINICAL REFERENCES/PROFESSIONAL SOCIETY GUIDELINES**

N/A

**ATTACHMENTS**

N/A

**FORMS**

N/A

<b>APPROVAL:</b>	
Northwell Health Policy Committee	7/26/18
System PICG/Clinical Operations Committee	9/06/18

Standardized Versioning History:

\*= Northwell Health Policy Committee Approval; \*\* =PICG/Clinical Operations Committee Approval  
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 6/30/16\*      7/21/16\*\*