



CORPORATE COMPLIANCE GENERAL COMPLIANCE

NON-RETALIATION (WHISTLEBLOWER PROTECTIONS) POLICY

Policy #: 102.11	Original date: 4/13/03 Revision date(s): 01/16/2006, 12/05/2011, 4/24/2012, 2/19/2013, 2/21/18, 4/2/19, 4/7/20, 4/6/21, 4/5/22 Review date(s): 3/15/16, 2/7/17
Approvals	
DocuSigned by: Signature Policy Owner: <u>James Gentile</u> Date: <u>4/14/2022</u> <small>B104712CD4C0477</small> Policy Owner Printed Name: James Gentile, Sr. Vice President, Chief Compliance Officer	
DocuSigned by: Signature Senior Leader: <u>Richard Burke</u> Date: <u>4/15/2022</u> <small>B7B01FCE80CA40B</small> Senior Leader Printed Name: Richard Burke, President & CEO	

I. PURPOSE

To prevent any adverse action or retribution against a Fallon Health employee, member, or any other person solely because they reported in good faith a suspected violation of federal/state laws or regulations, the organization's Code of Conduct, the Corporate Compliance Program or other irregularity by any person other than the reporting individual.

II. SCOPE

This policy applies to all employees of Fallon Community Health Plan, Inc. (d/b/a "Fallon Health") and any other persons whose conduct, in the performance of work for Fallon Health, is under the direct control of Fallon Health.

Throughout this Policy, unless otherwise indicated, Fallon Health includes all Fallon Community Health Plan, Inc. subsidiary and affiliated organizations and any operating divisions, product or service lines of Fallon Health, such as Summit ElderCare. Examples of Fallon Health subsidiary or affiliated organizations include Fallon Health and Life Assurance Company, Inc. ("FHLAC"), UltraBenefits, Inc. ("UB"), and Fallon Health Weinberg, Inc. ("FHW").

III. RESPONSIBILITY

The Sr. Vice President & Chief Compliance Officer (CCO) is the owner of this policy. As such, it is the CCO's, or their designee's, responsibility to provide guidance and oversight on the implementation of this policy, and to monitor compliance with this policy.

This policy shall be reviewed by the Compliance Committee annually or as needed.

IV. DEFINITIONS

N/A

V. DESCRIPTION

I. Refraining from Intimidating or Retaliatory Acts against a Reporting Individual

A. Employee

Fallon Health will not threaten, coerce, intimidate, discriminate against or take any adverse action or retribution of any kind against a Fallon Health employee or member, or any other person solely because they reported in good faith a suspected violation of federal/state laws or regulations, the organization's Code of Conduct, the Corporate Compliance Program or other irregularity by any person other than the reporting individual. (See Reporting of Potential Issues or Areas of Non-Compliance)

B. Member or Other Person

Fallon Health will not intimidate, threaten, coerce, discriminate against, or take other retaliatory action against:

- Any member or any other person for the exercise by the member or other person of any right under, or for participation by the individual in any process required by state or federal regulations, include the filing of a complaint under this section.
- Any member, or other person for:
 - filing of a complaint with the Secretary of Health and Human Services (HHS);
 - testifying, assisting, or participating in an investigation, compliance review, proceeding, or hearing under Part C of Title XI (Social Security Act Administrative Simplification); or
 - opposing any act or practice made unlawful by federal regulations, provided the member or person has a good faith belief that the practice opposed is unlawful, and the manner of the opposition is reasonable.

C. Responsibilities

Fallon Health's CCO and their designee are responsible for:

- ensuring that actions taken against a Fallon Health employee, member or any other person are appropriate.
- investigation of and, if appropriate, sanctions against a Fallon Health employee, contractor, volunteer, or vendor who takes action against a reporting individual.

VI. REFERENCES

OIG Compliance Program Guidance for Medicare + Choice Organizations of November 1999; Federal Sentencing Guidelines; Medicare Managed Care Manuals; Prescription Drug Benefit Manuals; MassHealth Program Requirements, SCO program guidance, Federal Medicaid Statute False Claims guidance found at 42 USC 1396a(a)(68); Federal False Claims Act; Massachusetts False Claims Act; Health Insurance Portability & Accountability Act of 1996, (Pub. L. 104-191) 45 CFR § 164.530 (g) (h); Part C of Title XI (Social Security Act Administrative Simplification); NY Labor §§ 740, 741

VII. DOCUMENTATION REFERENCED

102.01 Reporting of Potential Issues or Areas of Non-Compliance

102.12PR Code of Conduct