



GE HealthCare

GE HEALTHCARE GROUP of COMPANIES
AUSTRALIA

Whistleblowing Policy

Issued JUNE 2023
Amended 2 APRIL 2025

***IMPORTANT: This Policy applies to the GE HealthCare Australia Group of Companies set out in Appendix 4 of this Policy and to Eligible Persons as defined herein.**

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Section 1: Our Purpose

1.1 Our Goals & Commitment

At the GE HealthCare Group of Companies, our vision is to create an environment built on trust and integrity. This applies equally to the GE HealthCare businesses and operations in Australia (“**GEHC Australia**”) as well as around the world.

To achieve this vision, it is crucial that all our employees and partners understand, follow, and adhere to our corporate values, found in The Spirit & The Letter (www.gehealthcare.com/about/compliance). Our guidelines and policies have been put in place to support employees to live by these values throughout their day-to-day work.

Integral to our values, we want our people to feel empowered to provide feedback and speak up when they see activity or behaviour that they feel is wrong, or which does not match our values. The goal of this policy is to provide clear guidelines on how GEHC Australia will approach and manage this feedback. With our whistleblowing policy issued in accordance with the requirements of section 1317AI of the *Corporations Act 2001* (Cth) we aim to ensure:

- Every employee should have the chance to speak up anonymously when they feel we are not adhering to The Spirit & The Letter. Our people should have a place to report misconduct confidentially, to feel their report will be heard and acted on and know that we will make improvements based on findings.
- We believe everyone should be able to make such reports anonymously. We commit to protecting an informant's identities where they choose to remain anonymous, and to ensuring fair and equitable treatment of persons named in whistleblower disclosures.
- We commit to investigating every report of misconduct. At the end of an investigation, we will provide feedback, when it is appropriate to do so.

1.2 Our Commitment

At GEHC Australia, we want our employees to know they can provide information on any concerns they have, understand where they can report their concerns, know what happens after they make a report, and ensure they feel safe in providing a report. We also want employees to know about their right to be anonymous as well as how we, as an organisation, will ensure they are not subject to any victimization, or detrimental action, as a result of making a report.

1.3 What Conduct Should Be Reported

The following sets out relevant behaviours, acts or conduct we want to be reported under this policy. We want to hear from you if you have reasonable grounds to suspect the existence of any relevant behaviour that is:

- Fraudulent;
- Corrupt;
- Dishonest;
- Unethical;
- Detrimental to GEHC Australia and could cause financial or non-financial loss for any one or more of the businesses under GEHC Australia;
- Misconduct or an improper state of affairs or circumstances, in relation to the tax affairs of GEHC Australia, or an associate¹ of GEHC Australia and you consider this information may assist the recipient to perform their functions or duties in relation to those tax affairs;
- An attempt to conceal or delay disclosure of any of the above conduct, or retaliate against any person as a result of that person raising concerns about relevant behaviour; or
- May adversely impact the reputation of GEHC Australia.

This policy should not be used for complaints relating to personal work-related grievances, such as an interpersonal conflict between the informant and another person, concerns regarding discrimination, sexual harassment, harassment, breaches of policy, the creation or existence of an unsafe work environment, a decision relating to engagement, transfer or promotion of the informant, a decision relating to the terms and conditions of engagement of the informant, or a decision relating to suspension, termination or discipline of the informant. Concerns of that nature should be raised either under the GEHC Employee Grievance Policy, or via the Open Reporting system.

1.4 Who Falls Under This Policy

An “eligible person” under this policy means current or former:

- Employees (including directors, managers, interns, and secondees);
- Contractors, consultants, service providers, suppliers, business partners (and their employees);
- Individual associates² of GEHC Australia; Distributors, commission agents or other representatives acting on behalf of GEHC Australia; and;
- Volunteers.

An “eligible person” also includes relatives or dependents of any of the persons referred to above. A relative includes a spouse (including de facto), parent, child or dependant.

¹ Associate in this context refers to an associate of a company as defined in the *Income Tax Assessment Act 1936*, and includes a partner, a trustee of a trust where the company or their associate benefits from the trust, a controlling entity, and a controlled company.

² Associate in this context means an individual who is an associate of the company within the meaning of the *Corporations Act 2001* (Cth). This includes directors and company secretaries of the company, and may also include a range of individuals with whom the company acts in concert or is otherwise associated in a formal or informal way.

This policy applies to GEHC Australia and its related bodies corporate in Australia set out in Appendix 4 of this policy.

Section 2: Process for Making a Report

2.1 What Options Do Eligible Persons Have for Making a Report

If an employee or eligible person would like to make a report, they have different channels available where they can do this. Detailed instructions for how to use and approach each of these channels is included in Appendix 1. In summary, a report can be made by way of:-

- Contact the Board of Directors;
- Anonymous email;
- In writing, via post;
- Speak with an Ombuds person;
- Speak with the owner of this whistleblowing program, being the GEHC Australia CEO;
- Speak with your manager or a senior manager³ at your local GEHC Australia office;
- Speak with your HR Leader; or
- Speak with a member of the legal, finance or controllership teams of GEHC Australia.

In Australia, a report could also be made to any of the following channels:

- an auditor or a member of an audit team conducting an audit of GEHC Australia;
- an actuary of GEHC Australia; or
- if the disclosure relates to improper conduct in relation GEHC Australia's tax affairs, internal disclosures may also be made to: an officer or senior manager of GEHC Australia; any employee with tax affairs duties; an auditor or member of an audit team of GEHC Australia; or a registered BAS agent providing tax agent or BAS services to GEHC Australia;

Please see Appendix 1 for additional information.

2.2 You Can Remain Anonymous

GEHC Australia respects and protects your identity if you choose to make an anonymous report. You can choose to remain anonymous while making a report, interacting with case managers during an investigation of your report, as well as after your case is closed. At any given time, you can identify yourself, but this is your choice and at no point do you need to do this, or will you be asked to provide your identity.

Your identity (or information likely to lead your identity being identified as an informant) will be kept confidential, except in the following circumstances:

- you consent in writing to this information being disclosed;
- the information is given to a legal practitioner for the purposes of obtaining legal advice or representation; or
- disclosure is permitted by law, or is necessary to prevent a serious and imminent threat to life, health or property.

³ "Senior Manager" means a person who is not a director or secretary of the company but who is involved in making decisions that affect the whole or a significant part of the business or who has the capacity to significantly affect the company's financial standing.

If you decide to disclose your identity, GEHC Australia will work to protect your identity and will outline and document who in the organisation will know you submitted your report. GEHC Australia will also take such steps as necessary to ensure you do not suffer any victimisation or detriment as a result of your report.

Please note that while GEHC Australia will make every endeavour possible to investigate your report, in some cases, there are limitations as to what can be achieved where the informant decides to remain anonymous.

2.3 Can I report my concern externally?

We encourage you to report internally using the channels referred to in 2.2 above.

However, disclosures can be reported directly to an external regulatory body including ASIC or APRA, or the Commissioner of Taxation (for a protected disclosure under the Taxation Administration Act) or the Australian Taxation Office (ATO).

Under the Corporations Act you can make a public interest disclosure or an emergency disclosure about a protected matter to a journalist or a member of parliament in certain limited circumstances.

Disclosures can also be made to prescribed entities of which you are a member, for the purpose of obtaining assistance in relation to the disclosure (this may include relevant professional associations, bodies that represent the professional interests of disclosers, and registered trade unions)

You can also make disclosures to a medical practitioner or psychologist, for the purposes of obtaining assistance in relation to the disclosure.

2.4 What Is the Investigative Process?

Below, we set out the different steps a case manager or member of our Ombudsperson / whistleblowing team is likely to go through from receipt of a report to case closure.

- Report (anonymous or otherwise) is received.
- A case manager / investigator is assigned to the report to assess it and confirm its receipt.
- The case manager / investigator will do an initial assessment to confirm it is a valid report and request permission to investigate.
- The case manager / investigator will begin their investigation. This can include corresponding with the informant if there is a channel to do this.
- The case manager / investigator will investigate and update management and the informant per policy guidelines.
- Once the case manager / investigator has finalised their investigation and report, management (to the extent practicable given the issues) and the informant may be updated.
- At this point, the investigation team will make an assessment on next steps, which may include engaging with other staff (including management) for a determination on any subsequent action to take place.

The investigation process may lead to corrective and mitigation actions being implemented, which may include disciplinary actions, process improvements, training, coaching and other actions as may be determined appropriate.

2.5 How We Use Third Parties

At any time, we may deem it necessary to utilise third parties in our whistleblowing program and strategy. If we do so, we will maintain the confidentiality of the whistleblower's identity and only reveal it in the circumstances permitted by law.

Examples of how we might do this include:

- **Whistleblowing Platform:** we may use a third-party whistleblowing platform, to ensure we protect informant's identities and leverage technologies to ensure no one in our organisation can identify them. Such a platform may also allow for 2-way, anonymous communication as well as case management and data protection features.
- **Accounting Firms:** we may use third party accounting firms to do forensic investigating of specific reports that come through our whistleblowing program.
- **Investigative Firms:** we may use specialist investigative firms to investigate specific cases where we do not have the skills needed in-house. They may also be used for investigations that we would prefer a third party to execute, due to the nature or sensitivity of the report.
- **Human Resources Consultants:** on occasion, we may utilise human resources consultants across our business, and they might be involved in specific whistleblowing cases, ensuring we use human resource best practices as we assess, investigate, and take action.

2.6 Who Is Alerted to A Report

Once a report is submitted (anonymous or not), this report goes to an objective investigation team, made up of a person(s) with the right expertise to handle the nature of the report. This person will then assess the report and assign it to a case manager, who will manage the investigation.

Certain senior managers might be alerted to the report as part of the reporting process or if they are involved in the investigation in some manner.

Any information that could potentially identify an anonymous informant will be held in the strictest confidence and will not be shared, unless GEHC Australia is compelled to do so by law or is permitted to disclose it under the exceptions referred to in 2.2 above.

2.7 What Is the Process of Updating the Informant

Throughout the investigation – unless it is of short duration, and unless the informant is anonymous – either the investigator or the ombudsperson will keep the informant generally informed. He or she will not tell the informant what each witness says or predict the outcome of the case, but will let the informant know generally how things are progressing and when to expect the investigation to conclude. These updates can include the following:

- GEHC Australia confirming the receipt of a report from the informant.
- GEHC Australia has begun the investigative process.
- The investigation is currently ongoing.

- The investigation has been closed.

GEHC Australia's commitment is that the informant will be updated as regularly as practicable while the investigation is ongoing. They will then be updated once the investigation has been closed. The informant may also approach GEHC Australia at any point to request an update.

2.8 At The End of The Investigation

You will hear back at the end of the investigation from the investigator or ombudsperson, if you didn't elect to remain anonymous. (Even if you did report your concern anonymously, arrangements can be made so you can contact the ombudsperson to receive feedback). Just as the investigator and the ombudsperson will respect your confidentiality, they will also show respect to others, such as witnesses, or a person accused of wrong-doing. So, if a corrective action involves discipline, for example, you will likely not be told who is being disciplined or in what way, since that is a private matter between the employee and management. But you will hear as much at the end of the case as is appropriate to share with you.

Section 3: How Informants and Employees Mentioned in Disclosures Are Protected

3.1 Anonymity After Submitting a Report

Section 2.2 discussed how an eligible person can remain anonymous during the process of submitting a report. After submitting a report, the following policies around anonymity are in place to protect an informant's identity.

- The informant has the right to remain anonymous and does not need to identify themselves at any time during the investigation process.
- GEHC Australia uses tools and platforms that help protect an informant's identity during and after submitting a report.
- At no time will GEHC Australia force the informant to reveal their identity.
- The informant can refuse to answer questions they feel could identify themselves. If the informant reveals themselves at any time, we will document who will have access to their identity. This can include the case manager, whistleblowing program owner, etc.
- GEHC Australia will not be responsible for protecting the identity or anonymity of an informant who has chosen to reveal themselves without first discussing such action with GEHC Australia.

3.2 Potential Victimization

An informant might be concerned that staff, management, or the organisation might victimise them. If the investigator needs to interview anyone who may resent the investigation and may need to be told or may speculate about who raised the concern, the investigator will strongly caution that person against victimisation. The investigator will explain that any form of victimisation for raising a whistleblower concern, formal or informal, is a breach of this policy, and also of The Spirit & The Letter, regardless of the merits of the original concern. The investigator will describe the types of conduct that may constitute or be perceived as victimisation. And the investigator will caution the person that if he or she victimises a person in any way for having raised a whistleblower concern, at any time, he or she may be disciplined and possibly terminated.

If at any time you believe that someone is victimising you because you raised a whistleblower concern, you should let your ombudsperson, investigator or business counsel know right away.

In this case, GEHC Australia will protect the informant from victimisation by way of:

- Being terminated or having their employment ceased;
- Performance management, warnings or disciplinary actions
- Alteration of an employee's position or duties to his or her disadvantage;
- Harassment/intimidation on the job or workplace bullying;
- Harm or injury to a person, including psychological harm;
- Damage to an informant's property or reputation;
- Damage to an informant's business or financial position;
- Discrimination;
- Any other action that can be perceived as victimisation for making a report.

A person who is guilty of victimizing a whistleblower may also be subject to substantial civil and criminal liabilities under Australian law.

3.3 Considered Risk of Victimisation

In the case of "considered risk of victimisation", the informant believes victimisation is near or imminent, and they are targeted for victimisation. In cases of considered victimisation, the informant should contact the person(s) listed in Appendix 1, who will take the action they feel is appropriate as well as come up with recommendations for how the situation can be resolved. Potential steps to protect the informant from a considered risk of victimisation can include:

- The informant taking leave.
- The informant being reassigned to other duties.
- The informant being reassigned to another location.

3.4 Already Victimised Against

If the informant feels that they have already been victimised, they should make a report under this policy and escalate this immediately to the owner of your whistleblowing program, who will take the action they feel is appropriate as well as come up with recommendations for how the situation can be resolved. Potential steps to protect the informant after victimisation has occurred can include:

- The informant taking leave.
- The informant being reassigned to other duties.
- The informant being reassigned to another location.

3.5 Victimisation Not Adequately Resolved

If the informant feels their report of victimisation was not resolved adequately, the informant can escalate their case in writing. The report will need to go to the persons listed in Appendix 1 and they will investigate the matter and process for how the victimisation was dealt with.

3.6 How GEHC Australia Deals with Victimisation

GEHC Australia does not tolerate any attempts to victimise an informant who has made a report.

Any employee or associated person who is found to have victimised, or otherwise taken detrimental or action against, an informant will face disciplinary action, including potential termination of their employment.

3.7 Separation Of Issues

GEHC Australia will continue to have the right to raise any issues related to work or performance related issues of an informant. While GEHC Australia will protect the informant from any victimisation, it is also important that he or she continues to be effective in their job. GEHC Australia can raise any performance or contract issues with the informant as long as these are kept separate and not influenced by any reports the informant may have made.

3.8 Protection & Immunity for Others & Fair Treatment of Employees Mentioned in a Disclosure

Parties required to bear witness or have involvement in the investigation (including employees who are mentioned in whistleblower disclosures) will be treated fairly and protected from victimisation in the same manner as the informant. Employees who are mentioned in a disclosure will have an opportunity to respond (where appropriate and subject to our requirements to maintain confidentiality).

3.9 Legislative/Regulation Protection & Assistance

If in any jurisdictions or locales where GEHC Australia operates there are whistleblowing protection laws that provide a higher level of protection than what is included in this policy, the applicable local legislation will take precedence.

Section 4: Our Roles & Responsibilities

4.1 Roles

The roles within GEHC Australia's whistleblowing program include the following:

- Program owner;
- Ombuds person and Ombuds program;
- Day-to-day manager of GEHC Australia's whistleblowing program;
- Case managers/ investigators that investigate individual reports;
- Human resources who are involved in cases and made aware of specific investigations.

4.2 Responsibilities

The following are the responsibilities of each role in GEHC Australia's whistleblowing program.

Program owner/whistleblowing protection officer: This individual owns the entire program and is measured on its overall success. This includes employees knowing and understanding the program, an easy process of making a report, investigating reports, as well as being a point of escalation for any concerns or victimisation that has taken place.

GE HealthCare Ombudsperson's Office: As the Board receives a significant number of these communications, they are initially processed by the GE HealthCare Ombudsperson's Office, which

acknowledges receipt to the person submitting the communication. The GE HealthCare Ombudsperson's Office also regularly provides copies or summaries of other communications directly to directors depending on the nature of the issues or concerns raised. With respect to all other communications, the GE HealthCare Ombudsperson's Office provides regular reports to the Audit Committee and GE HealthCare's lead director at least four times a year. These reports summarize the communications by subject matter and frequency, and break out significant concerns. The reports also include a summary of the status of significant matters that are under review or investigation in response to a concern. This approach ensures that concerns are raised to the directors in an effective manner that accurately informs them of the nature and frequency of the concerns.

Day-to-day manager: The day-to-day manager views incoming anonymous reports, assigns these reports to case managers, and manages them as they conduct investigations. This person is the first line of escalation and works collaboratively with case managers to ensure anonymous reports are heard and acted upon.

Case managers: Case managers are assigned anonymous reports and their role is to investigate these reports. This includes interacting and asking questions of informants, as well as using the information provided to investigate the report submitted. Their investigation can be internal or external to the organisation depending on what was documented in the report. Their goal is to gather the facts and put forth a final report to management on what happened and what action they feel needs to take place.

Human resources: Colleagues from human resources may be called upon to provide advice and guidance during any investigation. The whistleblowing program leverages their expertise and acumen to ensure GE HealthCare is using HR best practices during investigations and we are treating all employees fairly.

Compliance: Colleagues from compliance may be called upon for advice on policy matters and violations.

Legal: Colleagues from legal may be called upon for advice on any potential litigation risks and contingencies.

Finance: Colleagues from finance may be called upon for advice on any financial damage which may occur.

Section 5: Governance

5.1 Changes to GEHC Australia's Whistleblowing Policy

From time to time, GE HealthCare Australia's whistleblowing policy will need to change to keep up with our values, best practices, improvements, as well as legislation and regulations. Any changes to our whistleblowing policy will be communicated with all employees and any relevant stakeholders. This policy, and any changes made, do not form any contract of employment.

Any changes to GEHC Australia's whistleblowing policy must be approved by the:

- Head of Compliance for GEHC Australia; and

- Owner of GEHC Australia's whistleblowing program.

Changes may occasionally be reviewed by the Board of Directors of GEHC Australia, and the Board can comment and provide feedback as necessary. All changes will be documented in GEHC Australia's Whistleblowing Policy and will be made available to all employees.

5.2 Where is this policy located?

This policy is located on GEHC Australia's intranet and on <https://compliance.gehealthcare.com/en/international/>.

5.3 Training

From time to time, GEHC Australia will carry out employee training regarding this policy. The training will be targeted at 'eligible recipients' including senior managers, officers, and anyone else authorized by the company to receive disclosures from whistleblowers, such as:

- Compliance officers;
- GE HealthCare Ombudsperson's Office;
- Day-to-day managers;
- Case managers;
- Human resources; and
- Others, as required.

This training will cover the process set out in GEHC Australia's whistleblower policy to respond to disclosures. Special attention will be paid to the importance of protecting the whistleblower's right to anonymity during the investigation, unless they consent to their identity being disclosed.

GEHC Australia's company's auditors, actuaries, tax agents and BAS agents are also 'eligible recipients' under the legislation. These parties will be informed of their new obligations under the law, as far as reasonably practicable.

Secondary training / informational packs will also be available for all staff setting out how the whistleblower regime works under the legislation, and how this policy provides a process for disclosing and investigating reported matters.

Where applicable, GEHC Australia will record training content and attendance through its compliance tracker system in order to give proper effect to this policy and ensure due diligence requirements are met.

Appendix 1: Channels for Reporting

GE HealthCare provides multiple channels for employees to raise compliance concerns. Below is a description of the company's primary reporting channels:

- i. Via post – Att: GE HealthCare Australia Pty Ltd, Level 8, 241 O’Riordan St, Mascot, NSW 2020;
- ii. Speak with the owner of this whistleblowing program, namely the GEHC Australia CEO;
- iii. Speak with a senior manager at your local GEHC Australia office;
- iv. Speak with your HR Leader;
- v. GE HealthCare Ombudsperson’s Office e-mail, phone and regular mail. GE HealthCare Global Ombudsperson’s Office provides a phone number, e-mail (GEHealthCare.Ombuds@gehealthcare.com or ombudshelpline@gehealthcare.com), and physical address as a mechanism for raising concerns. All concerns raised via the GE HealthCare Ombudsperson Office are sent or scanned directly into the e-mail including voicemails left on the phone line. Any such concern is reviewed by the GE HealthCare, Global Ombuds Leader and/or the GE HealthCare, Deputy Ombuds Leader for an understanding of the concern as well as the business unit to which it applies. Once this information is obtained, the GE HealthCare, Global Ombuds Leader and/or the GE HealthCare, Deputy Ombuds Leader sends a standard acknowledgement to the concern raiser and forwards the concern to the appropriate GE HealthCare Business Ombuds Leader/Mailbox for handling.
- vi. *Business Ombuds E-mail.* Each GE HealthCare Tier 1 business is expected to maintain an additional mailbox for receiving concerns. The applicable Business Ombuds Leader, or their designee, is responsible for ensuring that the mailbox is reviewed, and the concern raisers receive a prompt response, generally within two business days.
- vii. *Anonymous Reporting Tool.* GE HealthCare understands your right to remain anonymous when you come forward with a concern, and as such, offers an anonymous reporting channel. The Anonymous Reporting channel is a link to the “Anonymous E-mail” tool available on the [GE HealthCare Integrity website available at www.gehealthcare.ethicspoint.com]. This tool allows the employee to raise their concern without providing their identification. Concerns raised via the Anonymous Reporting tool are routed to the appropriate business based on the concern raiser’s selection of the relevant business. Efforts must not be taken to identify an anonymous concern raised without the prior approval of the GE HealthCare General Counsel or the Tier 1 General Counsel.
- viii. *Open Reporting Referral.* Policy concerns raised to any of the following channels - GE HealthCare managers, HR, Legal, Compliance, and Audit - should also be logged into the GE HealthCare Open Reporting Tool. Ideally the channels complete a one-page form with the details of the concern via the Open Reporting Tool. The channels may also contact the GE HealthCare, Global Ombuds Leader, Deputy Ombuds Leader or Business Ombuds Leader, or their designee directly. The applicable Ombuds Leader, or their designee, is responsible for ensuring that the Open Reporting Tool is reviewed, cases are opened, and concern raisers receive prompt responses, generally within two business days.
- ix. *eExit Forms.* The eExit form refers to the Electronic Exit form utilised by many GE HealthCare businesses. Within the eExit form is a question asking if the employee has raised or would like to raise any integrity concerns. If the employee responds yes, a workflow is triggered to the HRM of the exiting employee, with copy to the Business Ombuds Leader, or their designee. Upon receipt of an eExit notification, the Business Ombuds Leader, or their designee, should

review the concern and follow-up with the designated HRM to better understand the concern. Due to the nature of the eExit channel, it is expected that the Business Ombuds Leader, or their designee, will follow-up promptly (ideally within 1-2 business days) after notification. Contact information should be collected to ensure a means for communicating with the concern raiser.

- x.
- xi. *Reporting to GE HealthCare Board.* The audit committee and the independent directors have established the following procedures to enable anyone who has a concern about GE HealthCare's conduct, or any employee who has a concern about the Company's accounting, internal accounting controls, auditing matters or national securities laws matters, to communicate that concern directly to the lead director or to the audit committee. Such communications may be confidential or anonymous, and may be sent via email to directors@gehealthcare.com, or to the Board of Directors physical mailing address at Attention: Ombuds, 500 W Monroe Street, Chicago, IL 60661-3671, United States of America.
- xii. Comments, complaints and concerns are initially processed by the GE HealthCare Ombudsperson's Office, which acknowledges receipt to the person submitting the communication.
- xiii. The audit committee has established the following procedures for: (1) the receipt, retention, and treatment of complaints received by the company regarding accounting, internal accounting controls, auditing matters or federal securities laws matters; and (2) the confidential, anonymous submission by GE HealthCare employees of concerns regarding questionable accounting or auditing matters:
- i. GE HealthCare has established and published on its website special mail and e-mail addresses and a toll-free telephone number for receiving complaints regarding accounting, internal accounting controls, or auditing matters.
 - ii. All such complaints that could materially affect financial reporting or controls or that relate to national securities law matters will be sent directly to the chair of the audit committee.
 - iii. All such complaints will be tracked on a separate board of directors' ombuds docket, but handled by the Company's ombuds, finance and legal staff in the normal manner, except as the audit committee may request.
 - iv. The status of such complaints will be reported to the chair of the audit committee and if he or she so directs, to the committee or the full board.
 - v. The audit committee chair may request special treatment, including the retention of outside counsel or other advisors, for any complaint addressed to him or her.
- xiv. Depending on the nature of the issues or concerns raised, the GE HealthCare Ombudsperson's Office also regularly provides copies or summaries of other comments, complaints and concerns directly to directors.
- xv. With respect to all other communications, the GE HealthCare Ombudsperson's Office provides regular reports to the audit committee and GE HealthCare's lead director. These reports summarise the communications by subject matter and frequency and break out significant concerns. The reports also include a summary of the status of significant matters that are under review or investigation in response to a concern. This approach ensures that concerns are raised to the directors in an effective manner that accurately informs them of the nature and frequency of the concerns.

Commented [AH1]: Geri - could you pls check this email address?

Commented [QC2R1]: Checked, this is still being used on our investor site.

- xvi. The lead director or the audit committee chair may direct that certain matters be presented to the audit committee or the full board and may direct special treatment, including the retention of outside advisors or counsel, for any concern addressed to them. The Spirit & the Letter prohibits any employee from retaliating or taking any adverse action against anyone for raising or helping to resolve an integrity concern.
- xvii. Regardless of the Open Reporting channel mentioned in above, all whistleblower allegations of potential violations of law, regulation, or GE HealthCare policy are generally reported through the Open Reporting Tool.
- xviii. Concerns submitted to an Ombudsperson that do not raise potential violations of law, regulation, or GE HealthCare policy are also recorded and managed via the Open Reporting Tool. This responsibility does not apply to non-policy concerns raised to other Open Reporting channels.
- xix. All concerns must be logged even if the channel believes the concern is unfounded or can be easily addressed.

Appendix 2: Change Log

{Document all changes that have occurred in your whistleblowing policy}.

Section	Update
2.1	Removal of an extra “BAS Agent” at bullet point 3
2.3	<p>Change to reflect the extended list of eligible recipients pursuant to changes introduced under Australian Whistleblower Law reforms effective from 1 July 2024:</p> <p>the Australian Taxation Office (ATO); Disclosures can also be made to prescribed entities of which you are a member, for the purpose of obtaining assistance in relation to the disclosure (this may include relevant professional associations, bodies that represent the professional interests of disclosers, and registered trade unions); You can also make disclosures to a medical practitioner or psychologist, for the purposes of obtaining assistance in relation to the disclosure.</p>
5.2	Updated link that flows through to BOX: https://compliance.gehealthcare.com/en/international/
Appendix 1 paragraph (i)	Updated address to GE HealthCare Australia Pty Ltd, Level 8, 241 O’Riordan St, Mascot, NSW 2020
Appendix 1 paragraph (v)	Updated email contacts to GEHealthCare.Ombuds@gehealthcare.com or ombudshelpline@gehealthcare.com
Appendix 1 paragraph xvi	Replaced reference to “Company’s integrity Manual” with “Spirit & the Letter”
Appendix 1 paragraph xvii	Removal of an extra “the”

Appendix 3: All Relevant Local Legislation/Regulation

Treasury Laws Amendment (Enhancing Whistleblower Protections) Act 2019 (Cth)

Corporations Act 2001 (Cth) (as amended)

Taxation Administration Act 1953 (Cth) (as amended).

Appendix 4: GE HealthCare Australia Group of Companies

ENTITY	ACN
GE Healthcare Australia Pty Limited	001 408 402
GE Healthcare Australia Holdings Pty Limited	079 127 307

Commented [HA(H3)]: Do we need to include BK Medical Australia here?