

Corporate Compliance Program

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Introduction

Our mission at Versant Health is to help members enjoy the wonders of sight through healthy eyes and vision.

We aspire to become the most trusted managed eye health and vision plan for members, clients, brokers, and providers in the industry. We can only realize this aspiration if we earn and maintain the trust and support of these key stakeholders.

Our Code of Conduct reflects our commitments to meet the expectations of our stakeholders as a responsible corporate citizen and contains the fundamental principles and rules concerning ethical business conduct. We believe that how we achieve our business results is as important as the achievement itself.

The Versant Health Code of Conduct forms an integral part of the terms of employment and/or engagement with Versant Health. Versant Health insists on full compliance and will not tolerate misconduct.

Scope

Versant Health's success is driven by trust. We hold ourselves to the highest standards of ethical conduct and compliance with all applicable laws, regulations, and codes. The Company's Code of Conduct is designed to support our efforts and guide our performance to meet this standard within the workplace. Our collective ability to model our high-performance culture traits, including a commitment to behavior above reproach, is key to our customer experience, brand perception and financial performance.

Versant Health Compliance Program

Organizational integrity is at the core of values at Versant Health and begins with each individual employee. At Versant Health, each employee is required to adhere and abide by all applicable laws and regulations and demonstrate the highest standards of proper compliance and personal integrity. Employees are expected to conduct themselves in an ethical and lawful manner, by refraining from any non-compliant, illegal, dishonest, or unethical activities. Proper compliance is an individual responsibility. The Versant Health Code of Conduct expresses these commitments as key values of our Company.

Versant Health considers its Compliance Program to be an essential tool for promoting regulatory compliance and ethical conduct. The Compliance Program provides guidance to all employees, contractors, and delegated entities on the seven elements of an effective compliance program. The Versant Health Compliance Program includes, but is not limited to, the following elements:

- Written Policies and Procedures and Standards of Conduct
- Oversight
- Education and Training
- Monitoring and Auditing

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- Reporting
- Enforcement
- Response and Prevention

This Compliance Program applies to all Versant Health employees, subcontractors, and first tier, downstream, and related entities. The Versant Health Compliance Plan is part of the overall Compliance Program and sets forth the company's activities to successfully execute the Compliance Program.

The Compliance Program, Compliance Plan and compliance policies and procedures are reviewed at least annually and revised as necessary to address changes in regulatory requirements or as business needs require. The Compliance Plan includes an annual risk assessment to ensure the program evolves appropriately in response to business and operational areas of opportunity and vulnerabilities.

Compliance Governance

The Versant Health Compliance Department serves an integral role in the day-to-day activities of the Corporate Compliance Program. The Compliance Department consists of five segments including Regulatory Compliance and Affairs and Compliance Audit Management, Corporate Compliance & Privacy, Regulatory Licensing, and Special Investigations.

The leaders of each compliance segment report to the Chief Compliance Officer (CCO).

Regulatory Compliance and Affairs communicates federal and state legislative requirements and guidance to functional areas and tracks implementation of legislative requirements impacting Medicaid, Commercial and Medicare lines of business.

Compliance Audit Management is responsible for collaborating with functional areas to assess, implement and remediate Corrective Action Plans (CAPs), and for management of external client and regulatory audits.

The Corporate Compliance and Privacy team maintains primary 'ownership' of the Corporate Compliance Program. Corporate Compliance and Privacy remains actively engaged with functional areas and works in collaboration with the CCO and other compliance areas to ensure the maintenance of an effective compliance program. Corporate Compliance and Privacy also maintains responsibility for the Versant Health Privacy Office operations, which is overseen by the Privacy Officer. Corporate Compliance and Privacy is responsible for the Compliance Risk Assessment and subsequent internal operations auditing and monitoring, as well as First Tier, Downstream and Related Entities (FDR) oversight and audit.

The Regulatory Licensing team (Licensing) maintains licenses needed to transact insurance, provide administrative services and networks. Licensing also ensures the timely completion of company reporting required to maintain licensure.

Versant Health's Special Investigation Unit (SIU) conducts fraud, waste and abuse prevention, detection, and remediation activities.

Written Policies, Procedures and Business Code of Conduct

Versant Health has written policies and procedures that establish the standards of behavior that our full and part time associates including the Chief Executive Officer (CEO), senior administrators or managers, governing body members (Board of Directors), consultants, contractors and temporary employees, and delegated entities and their respective employees are expected to follow and the manners in which those standards should be implemented. All policies are available on the corporate intranet site and hard copies are provided upon request. At a minimum, policies are reviewed on an annual basis, which includes a full regulatory review for compliance and formal approval via the corporate Policy Governance Committee (PGC) or appropriate alternate committee (i.e., Executive Compliance Committee). Policies can also be reviewed mid-cycle to address changes in the regulatory, statutory, or operational environment as needed. Notification is provided to all employees via email when a policy is newly published, revised or reviewed and approved through the annual review cycle.

Standards of Conduct, also known as the Code of Conduct, articulate the commitment to doing business in a lawful and ethical manner in compliance with federal and state requirements and is designed to guide our employees and business partners in upholding our high standards of fair and ethical practices. The Code of Conduct is approved by the Board of Directors annually and is distributed to all newly-hired and/or engaged full and part time associates (including the CEO, senior administrators or managers), Board of Directors, consultants, contractors, and temporary employees, as well as, delegated entities within 90 days of hire, when there are material updates, and annually thereafter. All full and part time associates (including the CEO, senior administrators, or managers), Board of Directors, consultants, contractors, temporary employees, and delegated entities are required to acknowledge that they have received and agree to abide by the Code of Conduct. Versant Health managers, directors, and officers are responsible for reinforcing the Code of Conduct.

The overall Versant Health expectation for employee compliance begins with commitment to comply with all federal and state regulations and government guidance standards. Compliance training occurs as part of the new hire process and is conducted annually thereafter, as established in the Compliance Training Policy.

Compliance Officer, Compliance Committee and Oversight

Versant Health directly employs a designated CCO, vested with the day-to-day operations of its compliance program. The CCO reports administratively to the CEO and functionally to the Board of Directors.

The CCO leads the company's enterprise-wide audit, ethics, and compliance function and is primarily responsible for execution of a Corporate Compliance Plan with the Executive Compliance Committee's guidance and support.

The Versant Health CCO chairs the Executive Compliance Committee, which is comprised of key management from each business operational area. The Executive Compliance Committee works closely to identify, minimize, and manage compliance risk. The Executive Compliance Committee is responsible to the CEO, executive leadership, and the Board of Directors and for

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reviewing the effectiveness of the Compliance Program through self-audits and monitoring of metrics and key indicators to ensure prompt and effective corrective actions are taken where deficiencies are noted. The CCO and Executive Compliance Committee are responsible for escalating compliance deficiencies and ongoing instances of non-compliance to the CEO, executive leadership, and the Board of Directors.

The Executive Compliance Committee meets no less frequently than quarterly, enabling management from across the enterprise to report compliance issues and corrective actions directly to the CCO and to review the status of enterprise-wide compliance initiatives and key compliance metrics.

Versant Health's Board of Directors has responsibility for the oversight of the Compliance Program to ensure that Versant Health is upholding our commitment to compliant, lawful, and ethical conduct. This oversight requires the Board of Directors to be knowledgeable about and approve the content and operation of the Compliance Program, the Compliance Program Plan, the Code of Conduct, and all applicable statutory and regulatory requirements.

The Board of Directors has responsibility to review quarterly reports by the CCO and Executive Compliance Committee on the activities and status of the Compliance Program, including issues of non-compliance identified, investigated, and resolved; Compliance Program outcomes and effectiveness; results of internal and external audits; exclusion list matches; hotline calls; root cause analyses and corrective actions; notices of non-compliance, warning letters, and formal sanctions; fraud, waste, and abuse goals and actions; and risk assessment and reduction activities. The Board gives authority to the CCO to implement needed compliance actions and activities without waiting for their approval, provided those actions and activities are reported to the board.

An effective compliance program cannot be achieved unless the CEO and other senior management, as appropriate, are engaged in the compliance program. The Versant Health CEO and senior management recognizes the importance of the compliance program in the sponsor's success and ensures that the compliance officer is integrated into the organization and is given the credibility, authority, and resources necessary to operate a robust and effective compliance program. The CEO receives periodic reports from the compliance officer of risk areas facing the organization, the strategies being implemented to address them and the results of those strategies. The CEO is advised of all governmental compliance enforcement activity, from Notices of Non-compliance to formal enforcement actions.

The CEO reserves the right to amend and update components of the Compliance Program, including the material in the Compliance Program Plan, at any time based on regulatory guidance, enhancements to the program, or to improve effectiveness of the program. Changes are communicated to the Board of Directors as required. The Compliance Program is available for viewing to all Versant Health Employees via the Versant Health intranet.

Compliance Training

Training and education are essential elements in the Versant Health compliance program. Compliance education and training are designed to be effective tools to inform all associates

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about the Compliance Program and of their compliance responsibilities. Compliance training and education include onboarding and annual training, roll based training, training to address compliance issues impacting certain populations, and training and education needed to address changes operationally or to the regulatory environment.

Upon hire or initiation of a contract or engagement, all full and part time associates, including the CEO, senior administrators and managers, Board of Directors, consultants, contractors, temporary employees, and FDRs that provide services to Medicaid, Medicare, Qualified Health Plan (QHP) and other commercial lines of business enrollees/beneficiaries must agree to comply with the Versant Health Code of Conduct and complete all mandatory training within 90 days of hire/contracting or engagement, as changes in regulatory, statutory and/or operational conditions warrant training updates and annually thereafter. Compliance training records are maintained for a minimum of 10 years. This standard applies to Versant Health, as well as any applicable FDRs.

Versant Health provides FDRs and Contracted providers with access to General Compliance and Fraud Waste and Abuse education and training materials. Contacted providers and FDRs have the option of using Versant Health compliance training materials or attesting to completing approved materials including but not limited to the CMS' online training.

General Compliance Training and Fraud Waste and Abuse (FWA) Training

Versant Health takes the appropriate measures to ensure that all full and part time associates, including the CEO, senior administrators, or managers, Board of Directors members, consultants, contractors, temporary employees, as well as FDRs that provide services to Medicaid, Medicare and Qualified Health Plan (QHP) enrollees/beneficiaries receive General Compliance and FWA training.

The General Compliance and FWA training topics include:

- Relevant laws and regulations related to Medicare Parts C and D FWA (False Claims Act, Anti-Kickback Statute, etc.) and sanctions and penalties related to violations.
- An overview of compliance expectations, how to ask compliance questions, request compliance clarification, hotline reporting.
- Types of non-compliance and FWA that can occur in the settings in which sponsor and FDR employees work.
- Processes for Sponsors and FDR employees to report suspected program noncompliance and FWA.
- Case examples.

Privacy and Security Training

Privacy and Security training is required for all full and part time associates, including the CEO, senior administrators, or managers, governing body members, consultants, contractors, temporary employees, and FDRs that provide services to Medicaid, Medicare and Qualified Health Plan (QHP) enrollees/beneficiaries and their respective employees who may have access to confidential information including Protected Health Information (PHI) prior to accessing confidential information. Regulatory, statutory, and/or operational conditions warrant training updates annually thereafter.

The Versant Health Privacy and Security Program sets the standards for safeguarding confidential and protected health information. Versant Health is committed to complying with applicable laws, regulations, and policies related to the privacy and security of health information. Under the direction of the Corporate Privacy Officer and Security Officer, the Privacy Program focuses on educating all full time, part time and temporary employees and Contractors on their ongoing responsibility to protect member privacy and secure member information. The Compliance Department manages and updates the privacy policies and procedures, and the Information Security Department manages and updates security policies and procedures, which are available to all employees on the Compliance intranet site.

All delegated entities must abide by the Versant Health Privacy and Security Program policies or demonstrate that they have dedicated Privacy and Security Officers who are responsible for ensuring that all individuals within the respective organization receive training on HIPAA and other privacy and security regulations and the process for reporting privacy and security breaches. The Privacy Officer and Security Officer of each delegated entity is also responsible for managing any issues related to privacy and security breaches and reporting to Versant Health any reportable incident impacting any Versant Health client.

Targeted or supplemental Privacy and Security training programs will be required from individuals in certain designated positions or to address compliance issues.

Tracking Requirements for Compliance Training

The Versant Health, Compliance Department tracks and reports on compliance training completion. All 'core' compliance training programs, including Fraud, Waste & Abuse, General Compliance/Code of Conduct and Privacy & Security training include knowledge assessments, which must be passed before successful completion is recorded by the learning management system platform that is utilized. The Compliance training policies establish disciplinary actions for non-completion of mandatory compliance training, up to and including termination of employment.

Effective Lines of Communication

Versant Health works diligently to foster a culture of compliance throughout the organization by regularly communicating the importance of performing jobs in compliance with regulatory requirements and reinforcing the company expectations of ethical and lawful behavior.

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Versant Health has an effective way to communicate information from the CCO to others. Such information includes the CCO's name, office location, and contact information; laws, regulations, and guidance for FDRs, such as statutory, regulatory, and sub-regulatory changes (e.g., HPMS memos); and changes to policies and procedures and Standards of Conduct. Compliance maintains and closely monitors email boxes that may be used by all employees to seek guidance on compliance related matters or report compliance concerns. Compliance staff routinely attends operational meetings to provide compliance-related support in everyday operational matters.

Versant Health maintains an Executive Compliance Committee, which is comprised of senior leadership from the various operational areas. The Executive Compliance Committee meets regularly to review and address compliance risks to the organization and to escalate compliance risks as necessary to ensure appropriate visibility and accountability for compliance related matters.

Versant Health is committed to full compliance with laws and regulations that impact the business. Versant Health has established processes to identify and communicate changes in laws and regulations to business areas as appropriate to ensure full compliance.

The Versant Health Compliance department works with internal communications to distribute periodic compliance reminders to staff through email. In addition, Versant Health dedicates an entire week each year to celebrate compliance. The week-long schedule of activities includes creative education methods and other activities designed to increase awareness of compliance expectations and rewards employees for their ongoing compliance efforts.

[Ethics, Compliance and Fraud, Waste & Abuse Contact Information and Reporting](#)

Versant Health conspicuously posts Ethics, Compliance, and FWA contact information within the operational facilities and on the company intranet. Posted communications include information for individuals to report concerns anonymously.

Versant Health has systems in place to communicate important compliance related information to enrollees including (but not limited to):

- The Versant Health website, which includes information pertaining to Privacy and Security compliance, the patient bill of rights, and Office of the Inspector General fraud reporting mechanisms.
- Claim denials include member rights pertaining to appeals and grievances.

Versant Health has systems in place to receive, record, and respond to compliance issues or reports of potential or actual non-compliance from employees, members, providers, vendors, and delegated entities and others.

The Compliance, Ethics and Privacy Hotlines are a confidential, toll-free resources available to employees twenty-four (24) hours a day, seven (7) days a week to report violations or raise compliance questions or concerns. Calls to the Compliance Hotlines may be made anonymously. The Compliance Department documents inquiries made to the Compliance,

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Ethics, and Privacy Hotlines to ensure proper investigation and resolution of reported matters; and to identify patterns and opportunities for additional training or corrective action. Information shared with the CCO remains confidential and is only discussed for investigative purposes with the members of the Executive Compliance Committee, employees, managers, and the governing body, as well as other entities related to the report.

Versant Health maintains an FWA hotline for anonymous reporting. Versant Health's Special Investigations Unit (SIU) investigates all reports of potential or suspected fraud, waste and/or abuse. The SIU Department works with designated state and federal agencies and clients as appropriate to investigate known or suspected matters involving FWA.

The FWA Hotline is a confidential, toll-free resource available to employees, members, providers, and FDRs twenty-four (24) hours a day, seven (7) days a week to report violations of, or raise questions or concerns relating to, fraud, waste, and abuse. An email box and confidential online reporting form are also available for this same purpose. Anyone can make a report without fear of intimidation or retaliation. All inquiries and reports made to the Fraud, Waste, and Abuse Hotline or email are tracked, thoroughly investigated and resolved and patterns and opportunities for additional training or corrective action are identified.

The Privacy and Security Offices are committed to taking all necessary measures to safeguard confidential information to which we have access and/or maintain. A toll-free phone number and email account are maintained and communicated through training and education and through posters made available throughout the organization. The Privacy and Security Offices are committed to fully investigating any known or suspected privacy or security incident, mitigating potentially harmful effects, and notifying member, clients, and regulators as appropriate.

Key compliance-related contact information is as follows:

Privacy inquiries and incident reporting:

- Email: Privacy@versanthealth.com
- Telephone: 1-800-571-3366

Security incident reporting:

- Email: ITSecurity@versanthealth.com
- Telephone: 1-877-518-8686, Option 4

Compliance ethics and fraud, waste & abuse (FWA) reporting:

- Confidential compliance ethics and FWA Hotline: 1-888-211-4384
- Reporting Website: lighthouse-services.com/versanthealth

Fraud, waste, and abuse inquiries and incident reporting may also be directed to:

- Anti-Fraud Email: AntiFraud@versanthealth.com

Chief Compliance Officer: Hayley Ellington-Buckles

- Email: Hayley.Ellington-Buckles@versanthealth.com
- Telephone: 210-267-7583

Well-Publicized Disciplinary Standards

The Versant Health Compliance Department publishes and disseminates the Code of Conduct and Compliance Program. The Code of Conduct establishes standards of compliance to which all full and part time associates, including the CEO, senior administrators or managers, Governing body members, consultants, contractors, temporary employees, as well as, all FDRs that provide services to Medicaid, Medicare and Qualified Health Plan (QHP) enrollees/beneficiaries and their respective employees must comply, including the reporting of any situation in which someone believes illegal or unethical compliance may have occurred. Delegated entities and vendors/FDRs must comply with the standards Versant Health has established or demonstrate that they have implemented similar standards of compliance.

Versant Health takes its commitment to the Code of Conduct very seriously and takes appropriate and immediate investigative and disciplinary action if anyone violates Versant Health's the Code of Conduct, policies or procedures, or the law. Persons identified for non-compliant or unethical behavior or other compliance policies, or standards will receive appropriate and consistent performance corrections, up to and including termination.

Versant Health communicates disciplinary standards within the Code of Conduct, Associate Handbook and in the Compliance Disciplinary Policy. References to disciplinary standards are also included within the various compliance training modules.

The Versant Health Compliance department collaborates closely with Human Resources on enforcing disciplinary standards for matters related to Code of Conduct/Compliance Violations.

Compliance Risk and Monitoring and Audit Work Plans

The Versant Health Compliance Department is responsible for departmental oversight and responding to reports of non-compliance generated by employees, delegated entities, vendors, agent and first tier, downstream and related entities. Open lines of communication are available for Versant Health staff through channels such as, hotlines, emails, and online services.

On an annual basis Versant Health conducts a formal risk assessment. Each operational area is assessed for types and levels of risk. Factors may include:

- Size of department;
- Complexity of work;
- Amount of training that has taken place;
- Past compliance issues; and
- Budget

The results of the risk assessment serve as the basis for the development of the monitoring and audit work plan. Monitoring and auditing are critical elements of an effective compliance program. Monitoring and auditing enable Versant Health to identify areas that require corrective action to achieve compliance with Medicare, Medicaid and Qualified Health Plan regulations, sub-regulatory guidance, contractual agreements, and all applicable federal and state laws, as well as internal policies and procedures. These plans describe the departments, functions,

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and/or operations to be audited, methodology and establish the schedule of events for the completion of the audits. The Compliance Internal Audit department facilitates closing conferences with respective departments for discussing audit findings and recommendations following the completion of an audit. Corrective action plans are developed as necessary to address findings and recommendations and tracked through fulfillment.

The results of the internal monitoring and audits are presented to Versant Health leadership on a quarterly basis. The CCO has authority to independently review Versant Health's operations to assess effectiveness and adequacy of internal controls and compliance with applicable policies, procedures, laws, and regulations. Formal audit reports are provided to responsible management at the conclusion of each audit. Audit results are provided to, and discussed with, the Executive Compliance Committee, CEO, senior leadership, and the governing body as appropriate.

Delegated Entities, Vendors, Agents and First Tier, Downstream & Related Entities (FDRs)

The Versant Health Compliance Audit and Monitoring team is responsible for the Delegation Oversight Program. The Delegation Oversight Program was established to assure that delegated functions for Versant Health (the Organization) products are performed by vendors appropriately and in accordance with the standards of the Organization to include applicable contractual and regulatory requirements, applicable accrediting bodies (NCQA, URAC), state and federal regulations and the Centers for Medicare and Medicaid Services (CMS). The Compliance Monitoring department manages corrective action plans related to FDRs and reports to the Executive Compliance Committee.

Versant Health ensures that policies, procedures and/or standards of conduct are distributed to downstream and related entities' employees who support the FDR's business within 90 days of hire, when there are updates to the policies, and annually thereafter. Additionally, Versant Health has approved policies, procedures and/or standards of conduct that require FDR, and its downstream and related entities, to maintain records for a period of 10 years.

The Corporate Compliance Department remains engaged in oversight activities pertaining to delegated entities, vendors, agents, and FDRs to maintain insight into compliance with contractual and regulatory requirements.

Tracking and Documenting Compliance and Compliance Program Effectiveness

The Versant Health Compliance Department is committed to taking necessary measures to ensure the effectiveness of the compliance program. The following list includes some components of the Compliance Program that are evaluated on a regular basis to ensure effectiveness:

- Education and training – compliance with education and training requirements and effectiveness
- Executive Compliance Committee representation/structure and level engagement
- Staffing levels within the Compliance Department
- Adequacy/effectiveness of Compliance risk assessments
- Compliance annual work plan

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- Organizational perception of the compliance officer and corporate compliance program
- Exclusion screening protocols
- Information systems access management
- Operational compliance monitoring

Exclusion Screening and Monitoring

Versant Health prohibits business transactions with individuals or entities listed on the Office of Foreign Assets Control (OFAC), the Office of the Medicare Inspector General (OIG) List of Excluded Individuals and Entities (LEIE), the General Service Administration Excluded Parties List Search (EPLS), CMS Preclusion List, System for Award Management (SAM), the Social Security Administration Death Master File (SSA-DMF) and applicable state and sanction/exclusion databases.

The Compliance department ensures Versant Health does not credential, employ, or pay excluded individuals prohibited by all applicable federal and state exclusion databases.

The Exclusion Program includes initial background checks for all potential employees and Board members, exclusions review of potentially credentialed provider entities and vendors contracted or paid. In addition, the exclusion program includes ongoing monthly monitoring ensures all employees, credentialed provider entities and vendors are reviewed against the applicable exclusion lists.

Fraud, Waste and Abuse Plan

The Versant Health Special Investigation Unit (SIU) utilizes analytics to identify, monitor and prevent fraud, waste, and abuse (FWA). The analytics program identifies potential violations of CMS billing and coding rules, provider submission errors, provider payment errors, provider, and member service utilization trends above statistically significant norms. Additional analytics are created as new risks, patterns or trends are identified. Analytics are operationalized through audits and investigations.

Special Investigations Unit

The SIU works with designated state and federal agencies, the National Benefit Integrity Medicaid Drug Integrity Contractor (MEDIC), and law enforcement to pursue individuals or organizations who may be involved in activities that fall under the FWA umbrella and will pursue prosecution of health care fraud and abuse.

The Versant Health CCO is responsible for Versant Health's Fraud, Waste and Abuse Plan. The Versant Health SIU is responsible for the day-to-day execution of the plan including the detection, investigation, prevention, response, and reporting of FWA required by both federal and state regulations.

The SIU maintains an anonymous phone line, electronic mailbox, and a physical mailbox to receive allegations of potential FWA. All allegations of FWA received are investigated by the SIU in accordance with federal and state laws, rules, and regulations.

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The SIU performs analytics to guide proactive audits and investigations to ensure potential incidents of FWA are ameliorated. The SIU reports suspected FWA, recovers overpayments identified, and develops recommendations prevent future occurrences.

Further, the SIU develops specialized department level training when FWA has been identified in a specific business area.

Regulatory Audits

Versant Health views regulatory audits and reviews as an opportunity to confirm that our ongoing compliance efforts, supported by the Board, are effective and successful. Versant Health routinely supports clients who are engaged in regulatory audits. In cases where an audit outcome indicates we have not met a regulatory requirement, the Compliance Department will use the audit findings to perform root cause analysis and develop corrective action plans to address identified areas of non-compliance. Versant Health may also contract with external companies to perform compliance related reviews and assist with programmatic changes to help drive compliance.

Procedures and System for Prompt Response to Compliance Issues

Versant Health has established and implemented a process to promptly respond to compliance issues as they are raised, investigating potential compliance problems as identified during self-evaluations and audits, correcting such problems promptly and thoroughly to reduce the potential for recurrence, and ensuring ongoing compliance with CMS and other federal and state requirements. If Versant discovers evidence of misconduct related to payment or delivery of services, the organization conducts timely, reasonable inquiry into the conduct. Versant conducts appropriate corrective actions in response to the potential violation.

Conducting a Timely and Reasonable Inquiry of Detected Offenses

Compliance initiates corrective actions whenever there is a confirmed incident of non-compliance. Versant Health may identify the incident of non-compliance through a variety of sources, including self-reporting channels, internal audits, hotline calls, external audits, or member complaints. The CCO or designee is responsible for reviewing cases of non-compliance related to the compliance program and, when applicable, for disclosing such incidents to executive leadership and the board of directors.

Corrective Action Plans

Corrective actions are designed to correct underlying problems that results in program violations and to prevent future non-compliance. Documentation includes:

- Root cause analysis;
- Steps taken to address deficiency identified;
- Timeframes for milestone achievements; and
- Ramifications for failure to implement corrective action

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The operational area or FDR that owns the identified non-compliant processes or system is expected to promptly develop and implement a corrective action plan that will place the process in a sustainable compliant status, and to report on plan progress. CAP status and updates are reported to the Compliance Committee for appropriate oversight.

Self-Reporting Potential FWA and Significant Non-Compliance

Self-reporting of FWA and Medicare program noncompliance is voluntary. CMS nonetheless strongly encourages self-reporting as an important practice in maintaining an effective compliance program. Versant Health self-reports potential FWA discovered at the plan level, and potential fraud and abuse by FDRs, as well as significant waste and significant incidents of Medicare program noncompliance.

Provider Monitoring

Versant Health maintains files on both in-network and out-of-network providers who have been involved in any adverse complaints, investigations, violations, and prosecutions. At a minimum, the organization compiles information involving:

- Enrollee complaints
- National Benefit Integrity Medicare Drug Integrity Contractor investigation outcomes or complaints
- Office of Inspector General or Department of Justice investigations
- US attorney prosecutions
- Civil, criminal, or administrative action regarding violations of any federal health care program requirements

Each provider file also includes all documented warnings, educational contacts, and results of investigations.

Furthermore, Versant Health will comply with requests by law enforcement, CMS, or any CMS designee or other federal or state oversight body as it pertains to network provider monitoring around identified abusive or fraudulent activity.