



Document Category	Manuals		
Manual Name	Compliance Program Manual		
Affected Program(s)	Vista Autism Services		
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Responsible Owner	Sabrina Delong (Director of Quality and Compliance)		
Oversight Approval	Trevor Motley (Chief Operating Officer)		

### **Purpose and Overview**

The Board of Directors of Vista is committed to quality care for the clients that it serves; high standards of ethical, professional and business conduct; and full compliance with all applicable federal and state laws affecting the delivery of high-quality clinical services and payment of those services, including those that prohibit fraud and abuse or waste of resources. To this end, The Board has directed and authorized the establishment of a formal organization-wide Compliance Program. The Compliance Program applies to all Vista personnel, including but not limited to its Governing Board, leadership, administration, direct care staff, volunteers, and other individuals contracted with or providing services on behalf of Vista.

The purpose of Vista's Compliance Program and its component policies and procedures is to establish and maintain a culture within Vista that promotes high standards of ethical clinical and business conduct; and the prevention, detection, and resolution of conduct that does not meet Vista's standards and policies, applicable law, and health care program or payer requirements.

The Compliance program includes the following elements:

1. Written standards, policies and procedures which promote Vista's commitment to compliance with applicable laws and regulations.
2. The designation of the Quality & Compliance Director and Compliance Committee charged with the responsibility of implementing the Compliance Program.
3. Regular, effective education and training programs for all Vista personnel as appropriate to their functions.

4. A process to receive complaints concerning possible Compliance Program violations, procedures to protect the anonymity of complainants to the extent possible, and policies that protect complainants from retaliation.
5. A process to respond to allegations of improper activities and the enforcement of appropriate disciplinary action against Vista personnel who have violated Vista policies, regulations, or health care program requirements.
6. Periodic audits or other methods to monitor compliance and assist in the reduction of problems in any identified areas.
7. A process for investigation and resolving any identified problems.

## **Compliance Program Oversight**

### Board of Directors

The Board of Directors has a duty to exercise reasonable oversight of the Vista Compliance Program. Such oversight includes, but is not limited to:

1. To the extent applicable, comply with the Compliance Program and the Vista [Code of Conduct](#).
2. Approval of the Compliance Program Description and any substantive revisions
3. Approval of the appointment of the Quality & Compliance Director.
4. Approval of the removal of the Quality & Compliance Director.
5. Approval of the Annual Compliance Work Plan.
6. Receive and review reports from the Quality & Compliance Director on an annual basis.
7. Provide direct access by the Quality & Compliance Director when warranted by nature and severity of circumstances or when a compliance matter cannot be resolved through management channels.
8. Take appropriate action on any compliance issues brought before it consistent with this Compliance Program and applicable bylaws, rules and regulations, including but not limited to, ensuring that compliance issues are appropriately investigated and resolved consistent with the requirements of applicable law; that remedial efforts are implemented to avoid or correct compliance concerns; and that Vista personnel are disciplined as appropriate.
9. Maintain confidentiality of all compliance issues brought before it consistent with applicable Vista policies and regulations.

### Chief Executive Officer

The Chief Executive Officer is responsible for supporting the Compliance Program, and in coordination with the Quality & Compliance Director and Compliance Committee, overseeing compliance activities at Vista that include, but are not limited to:

1. Comply with the Compliance Program, [Standards of Professional Behavior](#) policy, and the Vista [Code of Conduct](#).
2. Appoint a Quality & Compliance Director subject to Board approval.
3. Removal of a Quality & Compliance Director subject to Board approval.

4. Develop an appropriate job description for the Quality & Compliance Director subject to Board approval.
5. Attend meetings of the Compliance Committee periodically, but no less than one time per year.
6. Provides broad oversight of the Compliance Program and ensures that it is operating in conformity with the board approved Program Description and an annual work plan.
7. Empower and properly resource the Vista personnel who implement and maintain an effective Compliance Program as well as those responsible for identifying and mitigating risks.
8. Support departmental corrective actions as recommended by the Quality & Compliance Director and/or Compliance Committee.
9. In the event of a potential violation of any state or federal law or regulation, ensure the Quality & Compliance Director takes appropriate steps to respond to the alleged violation, including but not limited to, consulting with counsel on behalf of Vista where appropriate.
10. Participate in periodic training concerning issues relevant to the Compliance Program.

### Quality & Compliance Director

The Quality & Compliance Director is responsible for development, implementation, operations, and management of the Compliance Program, and is the focal point for all compliance-related activities. The Quality & Compliance Director, with support from the Board of Directors, Executive Management, and Compliance Committee, promotes a culture of compliance throughout the organization and develops policies and practices to encourage managers and staffs to report suspected fraud and other improprieties, without fear of retaliation. Essential functions of the Quality & Compliance Director include, but are not limited to:

1. Comply with the Compliance Program, [Standards of Professional Behavior](#) policy, and the Vista [Code of Conduct](#).
2. Plan, organize, and chair meetings of the Compliance Committee, and implement follow-up activity recommended by the Committee.
3. Creates, and then conducts annually, a risk assessment in order to identify, evaluate, and communicate legal and/or regulatory compliance risks to Executive Management and the Board of Directors.
4. Creates and presents annual compliance work plan for approval by the Board of Directors.
5. Develops and implements systematic internal and external monitoring and auditing with applicable standards, including areas identified in the annual compliance work plan.
6. Develops, coordinates, and participates in training and professional development activities to ensure staff have skills and knowledge to comply with applicable standards.
7. Conducts and oversees internal investigations and recommends appropriate resolution, in conjunction with Human Resources, when applicable.
8. Maintains a record of compliance concerns reported to the Hotline or through other channels and tracks the investigation and resolution of the concerns.
9. Drafts, reviews, and influences policies that set a culture of compliance, ethics and Vista virtues.
10. Forms positive and functional ongoing relationships with external auditors and regulators; liaisons with same during audits and credentialing exercises as agency point of contact.
11. Identify and bring compliance issues that require immediate Executive Management involvement to the Chief Executive Officer, Chief Operating Officer and/or Board of Directors.

12. Provide annual reports to the Board of Directors concerning the implementation, results and effectiveness of the Compliance Program.

### Compliance Committee

The Compliance Committee supports the Quality & Compliance Director and provides oversight for the implementation and operation of the Compliance Program. The Committee is chaired by the Quality & Compliance Director. Standing members of the Compliance Committee are appointed by the Quality & Compliance Director and include a cross section of staff and other additional members/consultants requested by committee.

The Compliance Committee meets at least eight (8) times a year. Functions of the Compliance Committee include, but are not limited to, the following:

1. Comply with the Compliance Program, [Standards of Professional Behavior](#) policy, and the Vista [Code of Conduct](#).
2. Analyze the organization's regulatory environment and identify areas of specific risk.
3. Assist in developing the annual Compliance Plan.
4. Review, update and approve Compliance Program and its supporting policies.
5. Develop and periodically review and update the [Code of Conduct](#).
6. Develop a system to solicit, evaluate, and respond to compliance issues.
7. Review internal and external auditing and monitoring activities to identify deficiencies and implement corrective or preventive action.
8. Serve as a resource to the Quality & Compliance Director in the resolution of complex, novel or high-level compliance concerns.
9. Maintain confidentiality of any compliance issues brought before the committee.

The Committee may perform other compliance related activities identified by the Company Officers, Quality & Compliance Director, Committee members, or the Board of Directors.

### **Vista Staff Responsibilities**

Each Vista member of staff is responsible for complying with and, as appropriate to the staff's position and responsibilities, assisting Vista in its compliance activities. No person will be subject to any retribution or disciplinary action for reporting a suspected violation of the Compliance Program or applicable law or regulation in good faith.

Each Vista staff shall:

1. Comply with the Compliance Program, [Standards of Professional Behavior](#) policy, and the Vista [Code of Conduct](#).
2. Cooperate with and, as appropriate to the staff's position and responsibilities, assist Vista in implementing, maintaining, and monitoring the Compliance Program.

3. Report all suspected violations of the Compliance Program, laws, regulations, or third-party payor program requirements as set forth in the Compliance Program.
4. Report all cases in which any Vista staff or any entity with whom Vista contracts has been excluded from participation in government health care programs.
5. Refrain from retaliating against any person for reporting suspected violations of the Compliance Program or laws, regulations, and third-party program requirements.
6. Participate in initial and periodic training concerning issues relevant to the compliance program.

### **Education and Training**

All Vista staff and governing board members, as part of the comprehensive training program, will receive training appropriate to the person's position and responsibilities concerning the Compliance Program. The training will include:

1. Vista's commitment to compliance and high standards of ethical, professional, and business conduct.
2. An overview of the Compliance Program.
3. A copy of the Compliance Program document and Vista [Code of Conduct](#).
4. Instructions on how to receive answers to questions concerning the Compliance Program or compliance issues.
5. Instructions on how to report suspected violations of laws, regulations, third-party payor program requirements and Vista policies, and an explanation that reporters will not be subject to retaliation for making such reports.
6. An opportunity to ask questions and receive answers.
7. The staff will sign a form verifying that they have received training concerning the Compliance Program.

Staff will also receive periodic or updated training concerning the Compliance Program appropriate to the person's position and responsibilities. Such training shall occur as often as appropriate, but at least a training review annually. This training will include:

1. Review of subjects covered in the initial orientation.
2. Changes in relevant laws, regulations, or third-party payor program requirements.
3. Changes in relevant portions of the Compliance Program or relevant policies or procedures.
4. As appropriate and to the extent that disclosure would not jeopardize an applicable privilege, a discussion of compliance issues or problems discovered by Vista since the last training relevant to the staffs' position and responsibilities.
5. An opportunity to ask questions and receive answers.

### **Communication about Compliance Issues**

Vista shall maintain an open line of communication between staff and the Quality & Compliance Director or other appropriate representative to ensure successful implementation of the Compliance Program and reduce

any potential for fraud, waste and abuse. No staff shall be subject to any retribution or disciplinary action for good faith reporting under this program, even if allegations are found to be groundless.

Staffs may seek clarification from the Quality & Compliance Director, members of the Compliance Committee, or supervisor if they have questions regarding an applicable law, regulation, third-party payor program requirement, or Vista policy or procedure. Significant questions and responses are documented and dated and, if appropriate, shared with other Vista staff so that standards, policies, and procedures can be updated and improved to reflect necessary changes or clarifications.

Staff are required to report suspected violations of the Compliance Program or any law, regulation, or third-party payor program requirement relevant to the Compliance Program. The reports must be made as soon as reasonably possible to ensure that Vista complies with appropriate deadlines for responding to suspected compliance concerns.

### **Auditing and Monitoring**

Auditing and monitoring are methods of self-assessment used to prevent, detect, and deter potential compliance issues and risks. The Quality & Compliance Director and Compliance Committee will ensure each key area has auditing and monitoring plans at appropriate schedules that are designed to address Vista's key compliance risks. Results of auditing and monitoring activity are periodically reported to the Compliance Committee.

The frequency and extent of the auditing and monitoring shall depend on the needs and potential for compliance violations in the program.

### **Investigation and Response**

Vista is committed to responding consistently to compliance issues and violations detected through auditing and monitoring, reporting mechanisms, and other Compliance Program initiatives. The Quality & Compliance Director will direct investigations concerning alleged compliance problems and report relevant findings. The fact that a complaint was filed does not necessarily establish wrongdoing but does serve as an opportunity to evaluate the compliance program and make any appropriate changes.

Upon notification of a potential compliance concern, the Quality & Compliance Director shall promptly create a record of the concern and commence an investigation. The Quality & Compliance Director is primarily responsible for conducting an investigation. Because of the wide variety of circumstances that may occasion an investigation, the method of the investigation is left to the judgment and discretion of the Quality & Compliance Director. At times, the concern may warrant the assistance of outside legal counsel to participate in the investigation and provide legal advice. In any investigation involving legal counsel, the fact gathering is to be conducted under counsel's direction and coordinated by the Quality & Compliance Director.

Upon completion of the investigation, The Quality & Compliance Director will prepare a final report summarizing the investigation and recommended actions to be taken, if any. Additional actions and

recommendations may include, but are not limited to, providing additional training, modifying or correcting procedures, disciplining staff, repaying overpayments or requesting payment for underpayments, etc.

### **Enforcement and Discipline**

Any staff who violates the Compliance Program, law, regulations, or program requirements is subject to disciplinary measures, up to and including termination in accordance with Vista's [Progressive Supervision](#) policy. The Quality & Compliance Director works collaboratively with Human Resources to ensure disciplinary action is consistently and appropriately applied.

### **Compliance Risk Assessment**

Compliance Risk Assessment activities are crucial for the ongoing health of Vista. The Quality & Compliance Director and Compliance Committee annually assesses the organization's compliance risks and identifies priorities. The Compliance risk assessment also informs the annual Compliance Plan initiatives.

### **Excluded Individuals and Entities**

Vista does not hire or contract with individuals or entities that are excluded or ineligible to participate in federal healthcare programs. Vista's Human Resource Department is responsible for screening staff, contractors, and Board Members and for maintaining a record of this information. Screening is conducted at the time of hire and monthly.