

The Centers for Medicare & Medicaid Services (“CMS”) requires all First-Tier¹, Downstream, and Related Entities (“FDRs”) that provide administrative and/or health care or prescription drug services for Medicare Parts C and D plans to meet specific CMS compliance program expectations.

«**Organization_Name**» has been determined by CareFirst Advantage, Inc. to meet the definition of a First Tier Entity as it provides administrative and/or health care or prescription drug services directly or indirectly to Medicare beneficiaries enrolled in a CareFirst Advantage, Inc. Medicare Advantage plan.

This attestation is intended to be evidence that the requirements listed below were met by «**Organization_Name**» for the period of «**YEAR**».

1. **General Compliance and Fraud, Waste, and Abuse (“FWA”) Training**

General Compliance and Fraud, Waste and Abuse (“FWA”) Training, provides compliance and FWA training to employees identified as being involved in the administration or delivery of CareFirst Medicare Advantage plans, which is generally in accordance with the compliance training recommendations set forth within CMS’s updated guidance on the compliance program requirements and related provisions for Sponsors (“Guidelines”), published in both Pub. 100-18, Medicare Prescription Drug Benefit Manual, Chapter 9 and in Pub. 100-16, Medicare Managed Care Manual, Chapter 21 and are identical in each.

«**Organization_Name**» certifies that for calendar year «**YEAR**», applicable employees of «**Organization_Name**» have completed necessary compliance training in «**YEAR**», pursuant to CMS guidance. Such training was provided within forty-five (45) days of initial hiring or contracting and annually thereafter, and «**Organization_Name**» has provided additional, specialized, or refresher training on compliance issues and issues posing FWA risks based on (i) the individual’s job function; (ii) changes in CMS requirements; (iii) when an employee is found to be noncompliant; and (iv) when an employee’s work area is implicated with past FWA issues, consistent with CMS guidance and requirements.

«**Organization_Name**’s training program designed for FDR vendors focuses on providing an overview of compliance and FWA, including relevant laws, regulations, and instructions on complying with CMS program requirements. Training and education are provided upon designation as an FDR, as well as annually.

«**Organization_Name**» certifies that training documentation including, but not limited to, attendance, test scores, and certificates of completion (if applicable), is retained for a period of at least ten (10) years or such longer period required by CMS.

¹First-Tier Entity is any party that enters into a written arrangement, acceptable to CMS, with a Medicare Advantage Organization or Part D plan sponsor or applicant to provide administrative services or healthcare services to a Medicare eligible individual under the Medicare Advantage program or Part D program. (See, 42 C.F.R. §§ 422.500 & 423.501)

²Health care providers enrolled in the Medicare program or accredited as a DMEPOS provider are deemed to have met the FWA training and education requirements.

- We are health care providers enrolled in the Medicare program or accredited as a Durable Medical Equipment Prosthetics, Orthotics and Supplies (“DMEPOS”)² provider and have been deemed to have met the FWA training and education requirements.

2. Maintenance of Code of Ethical Business Conduct & Compliance and Compliance Policies

During «YEAR», CareFirst’s *Third-Party Code of Ethical Business Conduct & Compliance* was in place and was provided to all employees and downstream entities who are assigned to work on CareFirst Medicare Advantage business. Copies of the Code and Policies were provided to employees within 90 days of hire, upon revision, and annually thereafter.

3. Reporting Mechanisms

During «YEAR», all employees were informed of their obligation and how to report any suspected or detected non-compliance or potential FWA for internal investigation. The reporting mechanisms ensure confidentiality and allow for anonymity, as desired. In addition, we don’t allow retaliation or intimidation against anyone who reports in good faith. In turn, our organization reports any applicable incidents to CareFirst Advantage, Inc. as they arise.

4. Exclusion/Debarment

During «YEAR», «**Organization_Name**» reviewed the Department of Health and Human Services Office of Inspector General (“OIG”) List of Excluded Individuals and Entities, the CMS Preclusion List, and the General Services Administration (“GSA”) System for Award Management prior to the hiring or contracting of any new employee and monthly thereafter to ensure its personnel or downstream entities involved in administering or delivering Medicare benefits have not been excluded, precluded, or suspended from participation in any Federal health care program. «**Organization_Name**» promptly removed any excluded, precluded, or suspended personnel or downstream entity from any involvement, directly or indirectly, related to the administration or delivery of CareFirst’s Medicare Advantage benefits and plans.

5. Downstream Entity Oversight (if applicable)

During «YEAR», «**Organization_Name**» ensured that compliance was maintained as well as compliance of any contracted downstream entities who provided work on CareFirst Advantage, Inc. Medicare business. «**Organization_Name**» has strong oversight in place to ensure that any subcontracted downstream arrangement used to service CareFirst Medicare Advantage plans was in compliance with all the above requirements, as well.

I certify, as an authorized representative of «**Organization_Name**» that the statements made above are true and correct to the best of my knowledge. Additionally, all employees, contractors, chief executives, senior administrators, managers, and governing body members have completed all applicable training and that all material in the trainings were understood.

«**Organization_Name**» agrees to maintain documentation supporting the statements made above, including but not limited to, certificates of completion, training logs, system generated reports, spreadsheets etc. All training logs, reports, etc. include at least employee names, dates of employment, dates of completion, and passing scores (if captured) to clearly document training completion. «**Organization_Name**» maintains this documentation for a period of no less than ten (10) years from the training completion dates. «**Organization_Name**» understands that the inability to produce this evidence may result in a request for a Corrective Action Plan (“CAP”) or other contractual remedies such as contract termination.

Signature of Organization's Authorized Representative

Date

Organization's Authorized Representative Printed Name

All completed Attestations must complete, signed, dated and returned to the following **no later than January 15, 2021.**

CareFirst Advantage, Inc.
Attention: Medicare Compliance Officer
7th Floor
1501 S. Clinton Street
Baltimore, Maryland 20224
Fax: 410-720-6660
Email: mary-paul.snapp-borleis@carefirst.com