Health Partners Plans Medicare FDR Requirements
Frequently Asked Questions (FAQs)

1. Why do I need to be trained?
The Centers for Medicare & Medicaid Services (CMS) requires Medicare Advantage Organizations and Part D sponsors to ensure that General Compliance and Fraud, Waste and Abuse training and education are communicated to their First Tier, Downstream and Related entities (FDRs) that have involvement in the administration or delivery of Parts C and D benefits. Given your contractual relationship with Health Partners Plans (HPP), you are considered an FDR and therefore are required to complete this training.

2. How often do I have to take this training?
Compliance and fraud, waste and abuse training must be completed within 90 days of initial hiring or contracting and at least annually thereafter.

3. When must I be trained?
The training must occur within 90 days of initial hiring and annually thereafter. The annual training can be completed anytime between January 1 – December 31 of any given contract year. HPP will require that each First Tier Entity attest to having completed the training during the prior year; this attestation is due by February 28th.

4. Do we have to use CMS Fraud, Waste and Abuse and General Compliance training, or can we use a different version of training?
No, you may not use either HPP’s General Compliance or FWA Training or substitute an equivalent version to satisfy these training requirements. You MUST use CMS’ Fraud, Waste, and Abuse and General Compliance training and retain evidence of completion for a period of no less than ten (10) years.

FDRs will have three (3) options for ensuring FDRs have satisfied the general compliance training requirement:

(1) FDRs can complete the general compliance and/or FWA training modules located on the Medicare Learning Network (MLN) section of the CMS website. Once an individual completes the training, the system will generate a certificate of completion. The MLN certificate of completion must be accepted by Sponsors.

(2) FDRs can incorporate the content of the CMS standardized training modules from the CMS website into their organizations’ existing compliance training materials/systems.

(3) Sponsors and FDRs can incorporate the content of the CMS training modules into written documents for providers (e.g. Provider Guides, Participation Manuals, Business Associate Agreements, etc.).

*For providers, HPP will include the content of the CMS training modules in the HPP Provider Manual. To ensure Compliance with regulatory requirements, Providers will still be required to attest to having received the Provider Manual and reviewing the training content.*
Although the training content cannot be modified, CMS will allow modifications to the appearance of the content (i.e. font, color, background, format, etc.). Additionally, organizations may enhance or wrap around the CMS training content by adding topics specific to their organization or the employee’s job function.

The Medicare Parts C and D General Compliance Training and Combating Medicare Parts C and D Fraud, Waste and Abuse training courses provide separate content for compliance and FWA, and are available as web-based versions that are printable. The training content is generic since various entities (e.g., health plans, labs, hospitals, providers, etc.) use the training.

Please visit: [https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/ProviderCompliance.html](https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/ProviderCompliance.html)

5. Do all FDRs have to take the FWA and General Compliance trainings?  
FDRs deemed to have already met the FWA training requirements are exempt from taking the FWA training. ALL FDRs, including network providers, are required to review the General Compliance training content.

FDRs deemed to have met the FWA training and education certification requirements through enrollment into Parts A or B of the Medicare program or through accreditation as a supplier of DMEPOS are NOT exempt from the general compliance training requirement.

Each First Tier Entity must ensure that any Downstream Entities involved with administering administrative and/ or health care services on behalf of HPP are aware of the training requirements.

6. How do I know if I am deemed to have already met the FWA training requirements?  
FDRs who have met the FWA certification requirements through enrollment into Parts A or B of the Medicare program or through accreditation as a supplier of DMEPOS are deemed to have met the FWA training and education requirements. This deeming status is applicable only to the FWA training portion; the general compliance training and other education requirements still apply to deemed individuals.

7. If I am deemed, am I exempt from these requirements completely?  
No. Deemed providers and suppliers are only exempt from taking the FWA training. The Compliance training, Code of Conduct distribution and all other requirements still apply.

8. What Health Partners Plans products/plans does this training apply to?  
These requirements apply to all Part C (Medicare Advantage) and Part D (Prescription Drug) plans offered by HPP.

9. Are FDRs required to supply evidence of training completions?  
Upon request from HPP, FDRs must submit an attestation confirming that the organization has completed the appropriate general compliance and FWA training. Attestations must include language specifying that the entity complies with CMS compliance and FWA training requirements and that the training provided includes CMS content. HPP’s General Compliance Attestation can be accessed through the following web page: [https://medicare.healthpartnersplans.com/medicare-fdr-information](https://medicare.healthpartnersplans.com/medicare-fdr-information)

Further, FDRs must maintain certificates or documentation of training completion and will furnish upon request a certificate of training such as certificates of completion, training logs, system generated reports, spreadsheets, etc. FDRs providing training logs, reports, etc. must include at least employee names, dates of employment, dates of completion, passing scores (if captured) to clearly document training completion.
You should retain evidence of completion for a period of no less than ten (10) years. HPP or CMS may request this evidence to ensure completion of these requirements.

10. Who Must Complete The Training?

While FDRs are required to comply with CMS requirements, including the compliance program training requirements, CMS does not expect an FDR’s entire staff would necessarily be subject to the requirement.

There will be certain FDRs that do not need to train every employee, depending on their duties.

Below are examples of the critical roles within an FDR that should clearly be required to fulfill the training requirements:

**Positions/Roles**

- Senior administrators or managers directly responsible for the FDR’s contract with the Sponsor (e.g. Senior Vice President, Departmental Managers, Chief Medical or Pharmacy Officer)

- Individuals directly involved with establishing and administering the Sponsor’s formulary and/or medical benefits coverage policies and procedures

- Individuals involved with decision-making authority on behalf of the Sponsor (e.g. clinical decisions, coverage determinations, appeals and grievances, enrollment/disenrollment functions, processing of pharmacy or medical claims)

- Reviewers of beneficiary claims and services submitted for payment; or,

- Individuals with job functions that place the FDR in a position to commit significant non-compliance with CMS program requirements or health care FWA

11. Do we have to report non-compliance and FWA to Health Partners Plans or is reporting within our organization sufficient?

You may report issues of FWA and/or non-compliance to your organization or HPP. There are multiple ways to report issues of FWA and/or non-compliant activities, which includes:

**Reporting non-compliance and FWA within your organization:**

- Your manager knows you and your job and can often apply his or her business experience to help you make the right decision.

- Your organization’s Compliance Department or General Counsel

- Other reporting methods made available to you by your organization

**Reporting non-compliance and FWA to HPP:**

- Calling the Compliance Hotline (1-866-477-4848)

- Email compliance concerns to compliance@hpplans.com

- Email suspected or actual fraud, waste and abuse concerns to SIUtips@hpplans.com

In addition to the above channels of communication, you can always report issues directly to HPP’s Compliance personnel, or the Office of General Counsel:
FDRs that partner with HPP must train their employees on the FDR’s reporting processes, including emphasis that reports must be made to HPP. All concerns must be reported to HPP, but may go through the FDR’s process initially. HPP has adopted and enforces a zero-tolerance policy for retaliation or retribution against anyone who reports suspected misconduct.

12. Where can I find Health Partners Plans’ Code of Conduct/Medicare Compliance Program?
The HPP Code of Conduct/Medicare Compliance Program has been made readily available to you through the Medicare FDR Information Webpage https://medicare.healthpartnersplans.com/medicare-fdr-information under Code of Conduct & Reporting.

13. What is the source of these requirements?
The Code of Federal Regulations (CFR) outlines these regulatory requirements from CMS. The training requirement and deemed status are noted at 42 CFR 422.503 (b)(4)(vi)(C) for Medicare Advantage and 42 CFR 423.504(b)(4)(vi)(C) for Part D and further described within the Medicare Managed Care Manual, Chapter 21 – Compliance Program Guidelines and Prescription Drug Benefit Manual, Chapter 9 – Compliance Program Guidelines as recently released by CMS, effective July 27, 2012.

14. Where should I go if I have more questions?
If you have any questions or concerns regarding these requirements, or if you have difficulty accessing this Medicare FDR Webpage, please contact Medicare Compliance at MedicareFDR@hpplans.com. You may also contact any of the following individuals directly:

Medicare Compliance Officer: Andrew Finkelstein 215-991-4305
Director, Medicare Compliance: Shawn Adams 267-385-3854
Sr. Compliance Specialist: Michelle Fogg 267-385-3862

15. Where can I find the training materials?
The training materials can be found at http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/ProviderCompliance.html

16. What should I do if I suspect fraud, waste or abuse or other compliance issues?
If you identify compliance issues and/or potential fraud, waste or abuse, please report it to your organization’s Compliance Department immediately. You may also report concerns directly to HPP so that we can investigate and respond appropriately.

Various mechanisms are in place for reporting concerns directly to HPP, such as:

- Calling the Compliance Hotline (1-866-477-4848): The hotline is answered by a third-party vendor on behalf of HPP, and is available 24/7. Although you may identify yourself within your report, you will also be afforded the right to remain anonymous. At the end of your report, you will be provided with an ID number that you may also use to call back and receive updates of any investigations.

- Email compliance concerns to compliance@hpplans.com

- Email suspected or actual fraud, waste and abuse concerns to SIUtips@hpplans.com
In addition to the above channels of communication, you can always report issues directly to HPP’s Compliance personnel, or the Office of General Counsel:

- Medicare Compliance Officer: Andrew Finkelstein 215-991-4305
- Security and Privacy Officer: Mark Eggleston 215-991-4388
- General Counsel: Johnna Baker 215-991-4051

A full list of reporting mechanisms is available within the Reporting Poster which can be accessed via a link under the Medicare FDR Information Webpage at https://medicare.healthpartnersplans.com/medicare-fdr-information

17. What are my requirements related to Federal health care program exclusion and debarment checks?
First tier, downstream, and related entities must review a number of federal exclusion lists such as, U.S. Department of Health and Human Services (HHS) – Office of Inspector General (OIG) and Systems Award Management (SAM), at the time of hire/contracting and monthly thereafter for their current employees/contractors, health care professionals, or vendors that work on Medicare Advantage, Part D or Medicaid programs to ensure that none are excluded from participating in Federal health care programs. For more information or access to the publicly accessible excluded party online databases, please see the following links: www.oig.hhs.gov/exclusions/index.asp and www.sam.gov.