



Downstream Entity Responsibilities

All Downstream Entities contracted with a Medicare Advantage (MA) or PDP carrier must comply with state and federal requirements, including Medicare laws, regulations and instructions, and must have implemented a Medicare Compliance Program. Compliance Program requirements are provided below:

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

The Center for Medicare and Medicaid Services (CMS) FWA and General Compliance Training, or your own equivalent training, should be provided to your employees and Downstream Entities who support the administration or delivery of MA or PDP functions.

- Training must be completed within 90 days of hire and annually thereafter.
- Records must be retained for 10 years.

Code of Conduct

You are required to provide your own Code of Conduct document, or a carrier-approved Code of Conduct document, to your employees and Downstream Entities who support the administration or delivery of MA or PDP functions.

- It must be distributed within 90 days of hire and annually thereafter.
- Documentation (materials used, employee sign-in sheets or attestation certifications) must be retained for 10 years.

Exclusion List Screening

Your organization is required to ensure that none of your employees or downstream entities that work on our Medicare business are on the OIG or GSA exclusions lists. Additional information is attached, and links to each website are provided below:

Office of Inspector General (OIG) List of Excluded Individuals and Entities

<http://oig.hhs.gov/exclusions/index.asp>

General Services Administration (GSA) System for Award Management (SAM)

<https://www.sam.gov/portal/SAM>

- Reviews must be completed prior to hiring and must continue on a monthly basis.
- Records must be retained for 10 years.

Offshore Operations

You must receive carrier approval to engage in offshore operations and must report such activities to CMS.

Downstream Oversight

Your Downstream Entities are subject to all Compliance Program requirements. You are responsible for communicating requirements and expectations to them.



Exclusion List Checks

Federal law prohibits Medicare, Medicaid and other federal healthcare programs from paying for items or services provided by a person or entity excluded from participation in these federal programs. Therefore, prior to hire and/or contract and monthly thereafter, each First Tier, Downstream or Related (FDR) entity must check the Office of Inspector General (OIG) and General Services Administration (GSA) “exclusion lists” to confirm that employees and Downstream Entities performing administrative and/or healthcare services for Medicare Plans aren’t excluded from participating in Federally-funded healthcare programs. You can use the websites shown below to perform exclusion list screening:

- Office of Inspector General (OIG) List of Excluded Individuals and Entities
<http://oig.hhs.gov/exclusions/index.asp>
- General Services Administration (GSA) System for Award Management (SAM)
<https://www.sam.gov/portal/SAM>

You must maintain (10 years) evidence using logs or other records to document that you’ve screened each employee and Downstream Entity in accordance with current laws, regulations and CMS requirements. You must take action if an employee or Downstream Entity is on the list. If any are on one of these exclusion lists, you must immediately remove them from work directly or indirectly related to Medicare Plans and notify the appropriate carriers immediately.