

Important Reminder for Medicare Advantage Providers Review Policies for Preventing Medicare Fraud, Waste and Abuse

To serve our members with the highest level of integrity and ethical business conduct, we are required by the Centers for Medicare & Medicaid Services (CMS) to share our standards of conduct. This requirement applies to our first tier¹, downstream and related entities (FDRs).

In addition to sharing standards of conduct with FDRs, we are required to ensure our FDRs adhere to these standards, and/or adopt and follow a code of conduct particular to their own organization. This should reflect a commitment to detecting, preventing and correcting noncompliance with Medicare requirements when delivering Medicare services. FDRs are, in turn, required to complete general compliance and fraud, waste and abuse training. To help you get started, please see the information below.

Compass Code of Ethical Business Conduct

Please review our <u>Compass Code of Ethical Business Conduct</u> (floridablue.com > Providers > Ethics and Compliance) which contains the principles and values by which we operate.

You may adopt our values and principles as your own or adopt a similar program for your practice. If you create your own program, be sure it includes, at a minimum, those elements described at 42 CFR §§ 422.503(b)(4)(vi)(A) and 423.504(b)(4)(vi)(A) or our Compass Code of Ethical Business conduct.

Compliance Information

Please review the general compliance information under Ethics & Compliance (floridablue.com > Providers > Ethics and Compliance). Our Ethics & Compliance section includes:

- Frequently Asked Questions for FDRs
- Medicare Compliance and Fraud, Waste and Abuse (FWA) Training
- The Office of Inspector General (OIG) and General Services Administration (GSA) exclusion lists

The Florida Blue Business Ethics, Integrity & Compliance Division will contact select providers by email in the coming months to follow up on your progress with these CMS requirements.

Confidential Reporting

Our Compliance and Ethics <u>policy</u> includes a link to <u>EthicsPoint</u>, a third-party vendor. EthicsPoint is a confidential, easy-to-use tool for you to contact the Florida Blue Business Ethics, Integrity & Compliance Division to ask questions or report compliance and ethics issues or concerns. When filing a report through EthicsPoint, you can choose to remain anonymous. You can also report insurance fraud and abuse by filing a report with Florida Blue's Special Investigation Unit. The reporting form can be found at floridablue.com/general/fraud-form.

If You Have Questions

Please call our Business Ethics, Integrity & Compliance Division at 800-477-3736 ext. 56300 if you need more information. You may also contact our Special Investigation Unit by calling our Fraud Hotline at 800-678-8355, or emailing specinvestunit@bcbsfl.com.

Florida Blue and Florida Blue Medicare are Independent Licensees of the Blue Cross and Blue Shield Association.

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 health care services to a Medicare eligible individual under the MA program or Part D program. (See, 42 C.F.R. § 423.501).