Introduction: The Oregon Health Authority (OHA) is responsible for monitoring compliance with the terms and conditions of the Coordinated Care Organization (CCO) contract and all applicable rules and laws by Exhibit B, Part 9 – Program Integrity. OHA will utilize this tool to evaluate the following CCO contract deliverables: Fraud, Waste and Abuse (FWA) Prevention Handbook, Annual FWA Prevention Plan, and Annual FWA Assessment Report. The results of OHA’s evaluation will be provided to your CCO’s Compliance Officer (CO) and Contract Administrator in writing, via Administrative Notice, and will include a deadline for revision and resubmission, as needed.

Review plan: OHA will use ‘compliant’ and ‘non-compliant’ criteria to review:

1. FWA Prevention Policies and Procedures (FWA Prevention Handbook)
2. Annual FWA Prevention Plan
3. Annual FWA Assessment Report

Review process: OHA will use the process in Exhibit D, Section 5 of the CCO contract to approve or disapprove your CCO’s deliverables.

Instructions: Complete page 2 and Sections I through III in this document and then include it with your submission of all documents required for the FWA contract deliverables due by January 31, 2023, to CCO.MCODeliverableReports@odhsoha.oregon.gov.

CCOs are strongly encouraged to confirm receipt of all materials submitted to OHA. OHA cannot determine the compliance of materials not received.

If you have questions about how to complete this document or about OHA’s review process, please contact Georgia Wilkison, Health Services Advisory Group, at gwilkison@hsag.com or by phone at 602-284-9182.

*Note:* Evaluation of Contractor’s compliance with Quarterly and Annual FWA Audit and Referrals and Investigations Report requirements will occur through a separate process involving OHA’s Office of Program Integrity (OPI).

Choose an item.

CCO documents submitted for OHA Review

CCO must complete the green sections below, adding rows to the table as needed to list all files submitted to OHA for review. Files submitted must be the CCO’s current version.

*Pre-populated list offers examples of the types of documents that may be applicable.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Document Title** | **Document Owner** | **Adoption/****Creation Date** | **Revision Date** | **Signature/****Approval Date** | **Date of Receipt***(for OHA Use only)* |
| ***FWA policy and procedure*** | ***CO Name*** | ***XX/XX/XXXX*** | ***XX/XX/XXXX*** | ***XX/XX/XXXX*** |  |
| ***Organization Chart*** | ***CO Name*** | ***XX/XX/XXXX*** | ***XX/XX/XXXX*** | ***XX/XX/XXXX*** |  |
| ***Compliance Committee Roster*** | ***CO Name*** | ***XX/XX/XXXX*** | ***XX/XX/XXXX*** | ***XX/XX/XXXX*** |  |
| ***Annual FWA Prevention Plan (Compliance Plan)*** | ***CO Name*** | ***XX/XX/XXXX*** | ***XX/XX/XXXX*** | ***XX/XX/XXXX*** |  |
| ***Standards of Conduct Policy*** | ***CO Name*** | ***XX/XX/XXXX*** | ***XX/XX/XXXX*** | ***XX/XX/XXXX*** |  |
| ***Grievance policy and procedure*** | ***CO Name*** | ***XX/XX/XXXX*** | ***XX/XX/XXXX*** | ***XX/XX/XXXX*** |  |
| ***Whistleblower Policy*** | ***CO Name*** | ***XX/XX/XXXX*** | ***XX/XX/XXXX*** | ***XX/XX/XXXX*** |  |
| ***Provider Manual*** | ***CO Name*** | ***XX/XX/XXXX*** | ***XX/XX/XXXX*** | ***XX/XX/XXXX*** |  |
| ***Member Handbook*** | ***CO Name*** | ***XX/XX/XXXX*** | ***XX/XX/XXXX*** | ***XX/XX/XXXX*** |  |
| ***CCO evidence of provider and Plan employee training*** | ***CO Name*** | ***XX/XX/XXXX*** | ***XX/XX/XXXX*** | ***XX/XX/XXXX*** |  |

## **Contractor’s Fraud, Waste, and Abuse Prevention Policies and Procedures**

Contractor must develop a Fraud, Waste, and Abuse Prevention Handbook wherein Contractor sets forth its written policies and procedures in accordance with the requirements set forth in 42 CFR §§438.600-438.610, 42 CFR §433.116, 42 CFR §438.214, 438.808, 42 CFR §§ 455.20, 455.104 through 455.106, 42 CFR §1002, OAR 410-141-3520, OAR 410-141-3625, and OAR 141-120-1510 that will enable Contractor to detect and prevent potential Fraud, Waste, and Abuse activities that have been engaged in by its employees, Subcontractors, Participating Providers, Members, and other third parties (Exhibit B, Part 9, Sections 10-11).

**The Contractor’s FWA Prevention Handbook must include, at A minimum, all of the following:**

1. **Chief Compliance Officer:**

Designation and identification of a Chief Compliance Officer who reports directly to the CEO and the Board of Directors and who is responsible for:

1. Developing and implementing the written policies and procedures set forth in Paragraph b, Section 11 of Exhibit B, Part 9; and
2. Creating the Annual FWA Prevention Plan (as such Plan is described in Section 12 of Exhibit B, Part 9).

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| *CCO must complete the green section below, adding Document Name and Page # to the table as needed, to list documents submitted as evidence of compliance with this section.* |
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| Please check the box if this document has already been submitted to OHA for review. |[ ]

1. **Regulatory Compliance Committee:**

The establishment and identification of the members of a Regulatory Compliance Committee, which must include the Contractor’s Chief Compliance Officer, senior level management employees, and members of the Board of Directors. The Regulatory Compliance Committee is responsible for overseeing the Contractor’s FWA prevention program and compliance with the terms and conditions of the Contract.

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1. **Fraud, Waste and Abuse Prevention Resources:**

The establishment of a division, department, or team of employees that is dedicated to, and is responsible for, implementing the Annual FWA Prevention Plan; and

1. Which includes at least one professional employee who reports directly to the Chief Compliance Officer. Examples of a professional employee are an investigator, attorney, paralegal, professional coder, or auditor.
2. Contractor must demonstrate continuous work towards increasing the qualifications of its employees.
3. Investigators must meet mandatory core and specialized training program requirements for such employees.
4. The team must employ, or have available to it, individuals who are knowledgeable about the provision of medical assistance under Title XIX of the Act and about the operations of health care providers.
5. The team may employ or have available through consultant agreements or other contractual arrangements, individuals who have forensic or other specialized skills that support the investigation of cases.

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1. **Compliance with the Contract:**

A statement or narrative in the FWA Prevention Handbook that articulates the Contractor’s commitment to complying with the terms and conditions in Sections 1-18 of Exhibit B, Part 9 and all other applicable State and Federal laws.

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1. **Written Standards of Conduct:**

Written standards of conduct for all of the Contractor’s employees that evidences compliance with Contractor’s commitment to FWA prevention and enforcement in accordance with the terms and conditions of the Contract and all other applicable State and Federal laws.

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1. **Disciplinary Guidelines to Enforce and Publicize Compliance Standards:**

A description of Contractor’s disciplinary guidelines used to enforce compliance standards and how those guidelines are publicized.

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| *CCO must complete the green section below, adding Document Name and Page # to the table as needed, to list documents submitted as evidence of compliance with this section.* |
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| Please check the box if this document has already been submitted to OHA for review. |[ ]

1. **Training and Education:**

A system to provide and require annual attendance at training and education regarding Contractor’s FWA policies and procedures.

1. Such training and education must include, without limitation, the right, pursuant to Section 1902(a)(68) of the Social Security Act, to be protected as a whistleblower for reporting any FWA.
2. Contractor’s system for training and education must provide all information necessary for its employees, Subcontractors and Participating Providers to fully comply with the FWA requirements of the Contract.
3. All such training and education must be specific and applicable to FWA in the Medicaid program. All training must include Medicaid-specific referral and reporting information and training regarding Contractor’s Medicaid FWA policies and procedures, including any time parameters required for compliance with Exhibit B, Part 9.
4. All such training and education must be provided to, and attended by, Contractor’s Compliance Officer, senior management, and all of Contractor’s other employees.

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1. **Additional Training and Education for Employees Conducting Provider Credentialing:**

In addition to the training and education required under Subparagraph (7), Paragraph b, Section 11 of Exhibit B, Part 9, a system to provide annual education and training to Contractor’s employees who are responsible for credentialing Providers and Subcontracting with third parties. Such annual education and training must include material relating to, as set forth in 42 CFR §§438.608(b) and 438.214(d):

1. The credentialing and enrollment of Providers and Subcontractors; and
2. The prohibition of employing, Subcontracting or otherwise being Affiliated with (or any combination or all of the foregoing) sanctioned individuals.

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1. **Effective Communication:**

Systems designed to maintain effective lines of communication between the Contractor’s Compliance Office and the Contractor’s employees and Subcontractors.

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1. **Response to Allegations of Improper or Illegal Activities:**

Systems to respond promptly to allegations of improper or illegal activities and enforcement of appropriate disciplinary actions against employees, Participating Providers, or Subcontractors who have violated FWA policies and procedures and any other applicable State and Federal laws.

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| These requirements are found in the following locations: | Document Name & Page #:Document Name & Page #: |
| Please check the box if this document has already been submitted to OHA for review. |[ ]

1. **a. Reporting FWA:**

Procedures for reporting FWA to the appropriate agencies in accordance with Section 17 of Exhibit B, Part 9.

**17.a. Obligation to Report FWA: Policies and Procedures**

In addition to its reporting requirements with respect to Providers under Exhibit B, Part 9, Contractor must immediately report to the Federal Department of Health and Human Services Office of the Inspector General, any Providers, identified during the credentialing process, who are include on the List of Excluded Individuals or on the Excluded Parties List System also known as System for Award Management. Reporting requirements can be met by providing such information to OHA’s Provider Enrollment Unit via Administrative Notice.

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| Please check the box if this document has already been submitted to OHA for review. |[ ]

**11. b. Reporting FWA:**

Procedures for reporting FWA to the appropriate agencies in accordance with Section 17 of Exhibit B, Part 9.

**17.b. Obligation to Report FWA: Policies and Procedures**

Using the template provided by OHA (located on the CCO Contract Forms Website), and in accordance with Contractor’s FWA Prevention Handbook and Annual FWA Prevention Plan, Contractor must submit to OHA quarterly and annual reports of all PI Audits performed.

1. The Annual and Quarterly FWA Audit Reports must include all data points listed in the template, information on any Provider Overpayments that were recovered, the source of the Provider Overpayment recovery, and any Sanctions or Corrective Actions imposed by Contractor on its Subcontractors or Providers.
2. For both the Quarterly and Annual FWA Audit Reports, Contractor must report all PI Audits opened, in-process, and closed during the reporting period.
3. Contractor must also provide to OHA with each Quarterly FWA Audit Report a copy of the final PI Audit report for each PI Audit identified in the FWA Audit Report as closed during the reporting quarter.
4. The Annual FWA Audit Report is due January 31 of each Contract Year and must be provided to OHA via Administrative Notice.
5. The Quarterly FWA Audit Report is due thirty (30) days following the end of each calendar quarter and must be provided to OHA via Administrative Notice.

*NOTE: CCO policies and procedures must demonstrate CCO has developed and maintains an internal process for collecting this data and reporting it to OHA, timely.*

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1. **c. Reporting FWA:**

Procedures for reporting FWA to the appropriate agencies in accordance with Section 17 of Exhibit B, Part 9.

**17.c. Obligations to Report FWA: Policies and Procedures**

Using the template provided by OHA (located on the CCO Contract Forms Website), Contractor must submit to OHA, via Administrative Notice, an annual and quarterly summary report of FWA Referrals and cases investigated.

1. The report must include, regardless of Contractor’s own suspicions or lack thereof, any incident with any of the characteristics listed in Section 16 of Exhibit B, Part 9.
2. The report must include all of Contractor’s open and closed preliminary investigations of suspected and credible cases.
3. The annual FWA Referrals and Investigations Report is due January 31 of each Contract Year following the reporting year and must be provided to OHA via Administrative Notice.
4. The quarterly FWA Referrals and Investigations Report is due thirty (30) days following the end of each calendar quarter and must be provided to OHA via Administrative Notice.

*NOTE: CCO policies and procedures must demonstrate CCO has developed and maintains an internal process for collecting this data and reporting it to OHA, timely.*

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| *CCO must complete the green section below, adding Document Name and Page # to the table as needed, to list documents submitted as evidence of compliance with this section.* |
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| Please check the box if this document has already been submitted to OHA for review. |[ ]

1. **d. Reporting FWA:**

Procedures for reporting FWA to the appropriate agencies in accordance with Section 17 of Exhibit B, Part 9.

**17.d. Obligations to Report FWA: Policies and Procedures**

In addition to the annual and quarterly summary of FWA Referrals and Investigations, Contractor must report all suspected cases of FWA, including suspected Fraud committed by its employees, Participating Providers, Subcontractors, Members, or any other third parties to OPI and DOJ’s Medicaid Fraud Control Unit (MFCU).

1. Reporting must be made promptly but in no event more than seven (7) days after Contractor is initially made aware of the suspicious case.
2. All reporting must be made as set forth in Paragraphs h and i, Section 17 of Exhibit B, Part 9.

*NOTE: CCO policies and procedures must demonstrate CCO has developed and maintains an internal process for collecting this data and reporting it to OHA and MFCU, timely.*

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| *CCO must complete the green section below, adding Document Name and Page # to the table as needed, to list documents submitted as evidence of compliance with this section.* |
| These requirements are found in the following locations: | Document Name & Page #:Document Name & Page #: |
| Please check the box if this document has already been submitted to OHA for review. |[ ]

1. **e. Reporting FWA:**

Procedures for reporting FWA to the appropriate agencies in accordance with Section 17 of Exhibit B, Part 9.

**17.e. Obligations to Report FWA: Policies and Procedures**

In addition to the annual and quarterly summary of FWA Referrals and Investigations, Contractor must report, regardless of its own suspicions or lack thereof, to the MFCU an incident with any of the characteristics listed in Section 16 of Exhibit B, Part 9. All reporting must be made as set forth in Paragraphs h and i, Section 17 of Exhibit B, Part 9.

*NOTE: CCO policies and procedures must demonstrate CCO has developed and maintains an internal process for reporting to MFCU, timely.*

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| *CCO must complete the green section below, adding Document Name and Page # to the table as needed, to list documents submitted as evidence of compliance with this section.* |
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1. **f. Reporting FWA:**

Procedures for reporting FWA to the appropriate agencies in accordance with Section 17 of Exhibit B, Part 9.

**17.f. Obligations to Report FWA: Policies and Procedures**

Contractor must cooperate in good faith with MFCU and OPI, or their designees, in any investigation or PI Audit relating to FWA as follows:

1. Contractor must provide copies of reports or other documentation requested by MFCU, OPI, or their respective designees, or any or all of them. All reports and documents required to be provided under Subparagraph (1), Paragraph f, Section 17 of Exhibit B, Part 9 must be provided without cost to MFCU, OPI, or their designees;
2. Contractor must permit MFCU, OPI, or their respective designees, or any combination or all of them, to inspect, evaluate, or audit books, records, documents, files, accounts, and facilities maintained by or on behalf of Contractor as such parties may determine is necessary to investigate any incident of FWA;
3. Contractor must cooperate in good faith with the MFCU, OPI, as well as their respective designees, or any or all of them, during any investigation of FWA; and
4. In the event that Contractor reports suspected FWA by Contractor’s Subcontractors, Providers, Members, or other third parties, or learns of an MFCU, or OPI investigation, or any other FWA investigation undertaken by any other governmental entity, Contractor is strictly prohibited from notifying, or otherwise communicating with, such parties about such report(s) or investigation(s).

*NOTE: CCO policies and procedures must demonstrate CCO has developed and maintains an internal process for cooperating with an MFCU and PIAU investigation or audit, timely.*

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| *CCO must complete the green section below, adding Document Name and Page # to the table as needed, to list documents submitted as evidence of compliance with this section.* |
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| Please check the box if this document has already been submitted to OHA for review. |[ ]

1. **g. Reporting FWA:**

Procedures for reporting FWA to the appropriate agencies in accordance with Section 17 of Exhibit B, Part 9.

**17.g. Obligations to Report FWA: Policies and Procedures**

Subject to 42 C.F.R. §455.23, in the event OHA determines that a credible allegation of Fraud has been made against Contractor, OHA will have the right to suspend, in whole or in part, Payments made to Contractor.

1. In the event OHA determines that a credible allegation of Fraud has been made against Contractor’s Subcontractors, OHA will also have the right to direct Contractor to suspend, in whole or in part, the payment of fees to any and all such Subcontractors.
2. Subject to 42 C.F.R. §455.23(c) suspension of Payments or other sums may be temporary. OHA has the right to forgo suspension and continue making Payments, or refrain from directing Contractor to suspend payment of sums to its Subcontractors, if certain good cause exceptions are met as provided for under 42 C.F.R. §455.23(e).
3. In the event OHA determines a credible allegation of Fraud has been made against a Subcontractor, Contract must cooperate with OHA to determine, in accordance with the criteria set forth in 42 C.F.R. §455.23, whether sums otherwise payable by Contractor to such Subcontractor, must be suspended or whether good cause exists not to suspend such payments.

*NOTE: CCO policies and procedures must demonstrate CCO has developed and maintains an internal process for complying with the requirements of this section, timely.*

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| *CCO must complete the green section below, adding Document Name and Page # to the table as needed, to list documents submitted as evidence of compliance with this section.* |
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1. **h. Reporting FWA:**

Procedures for reporting FWA to the appropriate agencies in accordance with Section 17 of Exhibit B, Part 9.

**17.h&i. Obligations to Report FWA: Policies and Procedures**

**Where to Report a Case of Fraud or Abuse by a Provider**

1. Contractor, if made aware of any suspected FWA by a Participating Provider, Subcontractor, or its own employees, must report the incident to MFCU and OPI as required under Exhibit B, Part 9. Such reporting may be made by mail, phone, or facsimile transmission using the following contact information:

Medicaid Fraud Control Unit (MFCU)

Oregon Department of Justice

100 SW Market Street

Portland, OR 97201

Phone: 971-673-1880

Fax: 971-673-1890

OHA Office of Program Integrity (OPI)

3406 Cherry Ave. NE

Salem, OR 97303-4924

Fax: 503-378-2577

Hotline: 1-888-FRAUD01 (888-372-8301)

https://www.oregon.gov/oha/FOD/PIAU/Pages/Report-Fraud.aspx

1. Contractor must include the above contact information for MFCU and OPI in its FWA Prevention Handbook and its Member Handbook.

**Where to Report a Case of Fraud or Abuse by a Member**

1. Contractor, if made aware of suspected Fraud or Abuse by a Member (e.g. a Provider reporting Member FWA) must promptly report the incident to the DHS Fraud Investigation Unit (FIU). Such reporting may be made by mail, phone, or facsimile transmission using the following contact information:

DHS Fraud Investigation

PO Box 14150

Salem, OR 97309

Hotline: 1-888-FRAUD01 (888-372-8301)

Fax: 503-373-1525 Attn: Hotline

https://www.oregon.gov/oha/FOD/PIAU/Pages/Report-Fraud.aspx

1. Contractor must include the above contact information for DHS Fraud Investigation Unit in its FWA Prevention Handbook and its Member Handbook.

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1. **Whistleblower Protection:**

Provisions that provide detailed information about the State and federal False Claims Acts and other applicable State and federal laws, including, as provided for Section 1902(a)(68) of the Social Security Act and the protections afforded to those persons who report FWA under applicable whistleblower laws. The disclosures described in Subparagraph (12) are required of Contractor only if it receives or makes payments of at least five million dollars ($5,000,000) annually as a result of its performance under the Contract.

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1. **Procedures to Verify Services:**

Procedures to routinely verify whether services that have been represented to have been delivered by Participating Providers and Subcontractors were received by Members, to investigate incidents where services were not delivered or where Member paid out of pocket for services, and collect any associated Overpayments. Such verification of services must be made by:

1. Mailing service verification letters to members;
2. Sampling; or
3. Other methods.

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1. **Receive, Record and Respond:**

A system to receive, record, and respond to compliance questions, or reports of potential or actual non-compliance from employees, Participating Providers, Subcontractors, and Members, while maintaining the confidentiality of the Person(s) posing questions or making reports.

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1. **Provision for Contractor to Self-Report Overpayments to OHA:**

Provisions for Contractor to self-report to OHA, any Overpayment it received from OHA under the Contract or any other contract, agreement, or MOU entered into by Contractor and OHA. The foregoing reporting provision must include the obligation to report, as required under 42 CFR §401.305 such Overpayment to OHA within sixty (60) days of its identification.

*NOTE: CCO policies and procedures must demonstrate CCO has developed and maintains an internal process for identifying Overpayment and reporting it to OHA, timely.*

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1. **Provision for Contractor to Report Overpayment to OHA:**

Provisions for Contractor to conduct Program Integrity (PI) Audits and to report to OHA any Overpayments made to Providers, Subcontractors, or other third parties regardless of whether such Overpayment was made as a result of self-reporting by a Provider, Subcontractor, other third-party, or identified by Contractor and regardless of whether such Overpayment was the result of FWA or an accounting or system error.

1. If identification of Overpayment was the result of self-reporting to Contractor by a Provider, Subcontractor, other third-party, such foregoing reporting provision must include the obligation to report, as required under 42 CFR §401.305 such Overpayment to the Contractor within sixty (60) days of the Provider’s, Subcontractor’s, or other third-party’s identification of the Overpayment.
2. If Overpayment was identified by Contractor as a result of a PI Audit or investigation, it must be reported to OHA promptly, but in no event more than seven (7) days after identifying such Overpayment.
3. If Contractor suspects an Overpayment identified during a PI Audit or investigation is due to FWA, such Overpayment must be reported in accordance with Section 17 of Exhibit B, Part 9.
4. All reports made by the Provider, Subcontractor, or other third-party must include a written statement identifying the reason(s) for the return of the Excess Payment.

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1. **Accurate Quarterly and Annual Financial Reporting on Exhibit L:**

In addition to the procedures for reporting required under Exhibit B, Part 9, Contractor must develop and maintain a procedure for accurately reporting all Overpayments on its quarterly and annual Financial Reports as required under Section 3, Exhibit L. Contractor’s Exhibit L Report must include all Overpayments, identified or recovered regardless of whether the Overpayments were the result of:

1. self-reporting under Subparagraphs (15) and (16), Paragraph b, Section 11 of Exhibit B, Part 9; or
2. the result of a routine or planned PI Audit or other review.

*NOTE: CCO policies and procedures must demonstrate CCO has developed and maintains an internal process for complying with the reporting requirements of this section, quarterly and annually.*

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| Please check the box if this document has already been submitted to OHA for review. |[ ]

1. **Member Reporting Process:**

A process for Members to report FWA anonymously and to be protected from retaliation under applicable whistleblower laws.

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| *CCO must complete the green section below, adding Document Name and Page # to the table as needed, to list documents submitted as evidence of compliance with this section.* |
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| Please check the box if this document has already been submitted to OHA for review. |[ ]

1. **Notification of a Change in the Enrollee’s Circumstances:**

Procedures for prompt notification to OHA when Contractor receives information about changes in a Member’s circumstances that might impact eligibility, including:

1. Changes in a Member’s residence, and
2. Death of a Member.

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1. **Notification of a Change in a Provider’s Circumstances:**

A procedure pursuant to which Contractor shall provide OHA with Administrative Notice of any information it receives about a change in a Participating Provider’s or Subcontractor’s circumstances that may affect the Provider’s or Subcontractor’s eligibility to provide services on behalf of Contractor or any other CCO, including the termination of the Provider Agreement.

1. Such Administrative Notice must be made to OHA within thirty (30) days of receipt of such information.
2. When the termination of a Participating Provider is for-cause, Administrative Notice must be provided to OHA’s Provider Enrollment Unit within fifteen (15) days of termination, with a statement of the cause (Exhibit B, Part 4, Section 5, Paragraph k).

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1. **FWA Information for Contractor’s employees and Members:**
2. Contractor must provide its FWA Prevention Handbook to all employees or otherwise include its complete contents in Contractor’s employee handbook.
3. Contract must include, at minimum, in its Member Handbook, the following information relating to FWA:
* A statement or narrative that articulates Contractor’s commitment to:
	+ Prevent FWA; and
	+ Complying with all Applicable Laws, including, without limitation, the State’s False Claims Act and the Federal False Claims Act;
* Examples of Fraud, Waste, and Abuse;
* Where and how to report FWA; and
* A Member’s right to report FWA anonymously and to be protected under the applicable whistleblower laws.

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## **Contractor’s Annual FWA Prevention Plan**

In addition to creating the written FWA Prevention Handbook, Contractor, through its Chief Compliance Officer, with the assistance of Contractor’s Compliance Office, must annually draft a written plan for implementing, analyzing and reporting on the effectiveness of the policies and procedures set forth in Contractor’s FWA Prevention Handbook. Contractor’s Annual FWA Prevention Plan, must include, at a minimum, written plans and procedures for all of the activities listed in Exhibit B, Part 9, Section 12. Contractor’s written plans must address what measures, criteria, or method(s) Contractor will use to evaluate effectiveness (Exhibit B, Part 9, Section 12).

**The Contractor’s Annual FWA Prevention PLAN must include, at minimum, all of the following:**

1. **Annual FWA Prevention Plan:**

Contractor’s written plan must address what measures, criteria, or method(s) Contractor will use to evaluate effectiveness.

1. Routine internal Monitoring, reporting, and PI Auditing of FWA risks. Contractor must provide a work plan which lists all PI Audits planned for the Contract Year, identifies individual(s) or department resources used to conduct the reviews, data or information sources, whether each review is conducted in person/on-site, and when each review is scheduled to begin*.*
2. Routine internal Monitoring, reporting, and auditing of other related compliance risks.
* Contractor must provide a copy of its criteria or checklist developed and implemented to perform routine internal monitoring and routine evaluation of Subcontractors and Participating Providers for other related compliance risks*.*
* Contractor must provide a work plan which lists all compliance reviews planned for the Contract Year, identifies individual(s) or department resources used to conduct the reviews, data or information sources, whether each review is conducted in person/on-site, and when each review is scheduled to begin*.*
1. Prompt response to FWA as they are reported or otherwise discovered. Contractor identifies its methods used to: receive allegations; track, triage, and refer (i) to MFCU/OPI for fraud or abuse or (ii) to internal quality or compliance department(s); and investigate, resolve, and refer final case internally for further compliance, Corrective Action, or open a PI Audit to recover Overpayments. Contractor is prohibited from referring allegations to a Subcontractor who is also a party to the allegation.
2. Prompt response to other related compliance issues as they are reported or otherwise discovered. Contractor identifies its methods used to: receive allegations; track, triage, and refer (i) to MFCU/OPI for fraud or abuse or (ii) to internal quality or compliance department(s); and investigate, resolve, and refer final case internally for further compliance, Corrective Action, or open a PI Audit to recover Overpayments.
3. Investigation of potential FWA as identified in the course of self-evaluation and PI Audits.
4. Investigation of other related compliance problems as identified in the course of self-evaluation and PI Audits.
5. Prompt and thorough correction (or coordination of suspected criminal acts with law enforcement agencies) of any and all incidents of FWA in a manner that is designed to reduce the potential for recurrence.
6. Prompt and thorough correction (or coordination of suspected criminal acts with law enforcement agencies) of any and all incidents of other related compliance problems in a manner that is designed to reduce the potential for recurrence.
7. Activities that support ongoing compliance with the FWA prevention under the Contract.
8. Activities that support ongoing compliance with other related compliance requirements under the Contract.
9. Risk evaluation procedures to enable compliance in identified problem areas such as claims, Prior Authorization, service verification, utilization management and quality review. Contractor’s annual risk evaluation/assessment must identify a methodology for assessing risk of Fraud and the likelihood and impact of potential Fraud. The Fraud risk assessment may be integrated into Contractor’s overall compliance risk assessment or be performed separately from Contractor’s overall compliance risk assessment.
10. The development and implementation of an annual plan to perform PI Audits of Providers and Subcontractors that will enable Contractor to validate the accuracy of Encounter Data against Provider charts.

*NOTE: For Annual FWA Prevention Plan requirement a. CCO must complete and provide to OHA an audit workplan (CCO workplan for Medicaid PI Audits).*

*NOTE: For Annual FWA Prevention Plan requirement b. CCO must complete and provide to OHA a compliance review workplan and copy of its compliance review checklist(s) (CCO workplan for Medicaid compliance reviews).*

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## **III. Contractor’s Assessment of Compliance Activities: Annual FWA Assessment Report**

Contractor must submit an annual assessment report of the quality and effectiveness of its Annual FWA Prevention Plan and the related policies and procedures included in its FWA Prevention Handbook. The Annual FWA Assessment Report must include an introductory narrative of the foregoing efforts over the prior Contract Year and their effectiveness (Exhibit B, Part 9, Section 18).

* Contractor’s Annual FWA Assessment Report must be provided to OHA via Administrative Notice by no later than January 31 of CY four.
* OHA will advise Contractor of its reporting requirements for CY five at least one-hundred and twenty (120) days prior to the Contract Termination Date.

CCO must provide with the Annual FWA Assessment Report copies of any final reports and any corrective action plans (CAP) resulting from a compliance review conducted by the CCO of its subcontractors and participating providers in the previous Contract Year. If a copy of a final report or corrective action plan is already on file with OHA (documentation was previously submitted to OHA by the CCO), CCO must complete an Attestation designated for this purpose, available here: <https://www.oregon.gov/oha/HSD/OHP/Pages/CCO-Contract-Forms.aspx> for OHA to review any materials previously submitted by the CCO as a part of its Annual FWA Assessment Report.

*Note:* The CCO Quarterly and Annual FWA Audit and FWA Referrals and Investigations Reports are reviewed through a separate process involving OHA’s Office of Program Integrity (OPI). CCOs *may choose* to *also* provide these reports to supplement its responses to section 1 below.

CCO Quarterly and Annual FWA Audit and FWA Referrals and Investigation Reports must be submitted to OHA, as required by Section 17 Ex B, Part 9. Template developed by OHA for these CCO FWA reports are available here: <https://www.oregon.gov/oha/HSD/OHP/Pages/CCO-Contract-Forms.aspx>.

**THE ANNUAL FWA ASSESSMENT REPORT MUST INCLUDE, WITH RESPECT TO THE PREVIOUS CONTRACT YEAR, ALL OF THE FOLLOWING:**

1. **Assessment of Annual FWA Activities:**
2. Identify the number of preliminary investigations by Contractor and the final number of referrals to OPI or MFCU or both.
3. Identify the number of Subcontractor and Participating Provider PI Audits conducted by Contractor and whether they were performed on-site or based on a review of documentation.
4. Identify the number of Subcontractor and Participating Provider reviews conducted by Contractor and whether they were performed on-site or based on a review of documentation.
5. Identify the training and education provided to and attended by Contractor’s Chief Compliance Officer, its employees, and, if applicable, its Providers and Subcontractors.
6. Compliance and FWA prevention activities that were performed during the reporting year. The work and activities reported in the Annual FWA Assessment Report must align with the Annual FWA Prevention Plan. The work and activities must be clearly described and be specific to the reporting year. Contractor shall provide such information for each program integrity activity or work conducted in the prior Contract Year. Contractor must include it its report:
7. A review of the Provider PI Audit activity Contractor performed and whether such PI Audit activity was in accordance with Contractor’s Annual FWA Prevention Plan.
8. A description of the methodology used to identify high-risk Providers and services.
9. Compliance reviews of Subcontractors, Participating Providers, and any other third parties, including a description of the data analytics relied upon*.*
10. Any applicable request for technical assistance from OHA, DOJ’s MFCU, or CMS on improving the compliance activities performed by Contractor.
11. A sample of the service verification letters mailed to Members.
12. A summary report on:
* The number of service verification letters sent;
* How Members were selected to receive such Letters;
* Member response rates;
* The frequency of mailings, including all dates on which such Letters were mailed;
* The results of the efforts; and
* Other methodologies used to ensure the accuracy of data.
1. A narrative and other information that advises OHA of:
2. the outcomes of all of the FWA prevention activities undertaken by Contractor; and
3. proposed or future process, policies, and procedure improvements to address deficiencies identified.
4. Contractor must identify where work or activities identified in its FWA Prevention Plan were not implemented or were implemented differently than initially described by Contractor in its Annual FWA Prevention Plan and explain how and why the FWA prevention activities changed.
5. A copy of each final report resulting from Contractor’s compliance reviews of its Subcontractors and Participating Providers completed during the prior Contract Year as well as any Corrective Action Plans resulting from such compliance reviews.

*NOTE: For Annual FWA Assessment requirement g. CCO must provide copies of any final reports and any corrective action plans (CAP) resulting from a compliance review conducted by the CCO of its subcontractors or participating providers in the previous Contract Year.*

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Glossary of terms used in this document and the Contract can be found on OHA’s CCO Contract Forms webpage, under ‘Resource Documents’: <https://www.oregon.gov/oha/HSD/OHP/Pages/CCO-Contract-Forms.aspx>