

## 2025 Fraud, Waste, and Abuse Deliverables – CCO Guidance Document

### Section I - FWA Prevention Policies and Procedures (FWA Prevention Handbook)

Contractor must develop a **FWA Prevention Handbook** wherein Contractor sets forth its **written policies and procedures** in accordance with the requirements set forth in Title 42 of the Code of Federal Regulations (42 CFR) §§438.600-438.610, 42 CFR §433.116, 42 CFR §438.214, 42 CFR §438.808, 42 CFR §455.20, 42 CFR §§455.104 through 455.106, 42 CFR §1002, Oregon Administrative Rule (OAR) 410-141-3520, OAR 410-141-3625, OAR 141-120-1510, and Exhibit B, Part 9 of the CCO Contract that will enable Contractor to detect and prevent potential FWA activities that have been engaged in by its employees, Subcontractors, Participating Providers, Members, and other third parties (Exhibit B, Part 9, Sections 10-12).

The **FWA PREVENTION HANDBOOK** must include documents that are in place for the **current Contract Year (i.e., CY 2025)** and have been reviewed within the last 12 months. The CCO may have a standalone document titled, “FWA Prevention Handbook” and/or a set of program policies and procedures that govern compliance related activities.

Although not required, the CCO is encouraged to have a written FWA Prevention Handbook to describe the organization’s compliance program that includes references to appropriate policies, procedures, and associated documents, as applicable.

A “**primary**” **policy and procedure** is the key document that addresses the specific requirement(s) of the element. An “**associated document**” is a document, such as a work instruction or job aid that describes step-by-step instructions for completing tasks within the process.

A **POLICY** outlines the rule(s) and regulation(s) of the organization, which are guidelines used to ensure consistency and compliance.

It is a resource that tells employees the “*what, who, why, or when*” behind the business’ operations. Policies tell the employee what is and what is not allowed. More specifically, a **policy** tells employees:

What the policy is and its classification.

Who is responsible for completing and enforcing a policy.

Why a policy is required.

When a policy needs to be used and enforced.

*Note: Instead of going into details, policies tend to be broad and general. This is because they are a core part of a company’s operations. Because of the broad nature of policies, they tend to change infrequently.*

A **PROCESS** is a big picture look at everything that needs to be done to comply with policies and then present a series of tasks (i.e., procedures) that lead to an end result. Think of processes as *roadmaps for what employees need to do*.

A **process** communicates:

Who is responsible for each part of the process.

What needs to be done (overview of complete task).

In which specific order the tasks need to be completed.

*Note: There can be multiple procedures within one process. Often, processes involve multiple departments. When writing processes, consider adding links to the specific procedures to make it easier for employees to find the next steps they need.*

A **PROCEDURE** is the step-by-step instructions for each individual task within the process. These are the *step-by-step instructions for how to execute the processes within a company*. A procedure would take one specific step in the process and go into thorough details on how to complete that part. So essentially, here is how you perform task “A” in system “X.”

Example: Since the *process* is a roadmap, *procedures* become the detailed instructions for how to turn the car on, how to put the car in drive, how to change lanes, etc.

**Procedures** address:

How to perform a task in a specific system (e.g., conducting FWA training, conducting medical record reviews as part of a PI audit, conducting specific compliance and FWA investigations, reporting specific violations, etc.).

How to adapt to specific variables (e.g., if “X” occurs, do this).

What questions to ask.

*Note: Because procedures are so granular, they are continuously changing and improving. You regularly need to update the procedures for new steps, clarifications, or new details.*

**THE CONTRACTOR’S FWA PREVENTION HANDBOOK FOR THE CURRENT CONTRACT YEAR MUST INCLUDE, AT A MINIMUM, ALL OF THE FOLLOWING:**

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
1	<p><b>Chief Compliance Officer:</b> <i>*Revised requirement language.</i></p> <p>a. Designation and identification of a Chief Compliance Officer who reports directly to the CEO and the Board of Directors.</p> <p>b. Responsibilities include:</p> <ul style="list-style-type: none"> <li>• Developing and implementing the written policies and procedures set forth in Paragraph b, Section 12 of Exhibit B, Part 9; and <i>*Revised contract citation.</i></li> <li>• Creating the Annual FWA Prevention Plan (as such Plan is described in Exhibit B, Part 9, Section 13). <i>*Revised contract citation.</i></li> </ul>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Handbook (if standalone document).</li> <li>• Primary policy and procedure that <u>describes the reporting structure</u> of Compliance Team and <u>responsibilities</u> of the Chief Compliance officer.</li> <li>• Organizational chart <u>illustrating the reporting structure</u> of the compliance team.</li> <li>• Job description of the Chief Compliance Officer outlining <u>qualifications and responsibilities</u> of the individual.</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• Include documented criteria for selecting the Chief Compliance Officer within the policy and procedure.</li> </ul>
2	<p><b>Regulatory Compliance Committee:</b></p> <p>a. 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 at least two members of the Board of Directors.</p> <p>b. The Regulatory Compliance Committee is responsible for overseeing the Contractor’s FWA prevention program and compliance with the terms and conditions of the Contract.</p>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Handbook (if standalone document).</li> <li>• Primary policy and procedure that <u>governs the Regulatory Compliance Committee</u>, including the <u>responsibilities</u> of the committee.</li> <li>• Regulatory Compliance Committee Charter showing <u>names, titles, and organizations</u> represented for all members. <ul style="list-style-type: none"> <li>– <i>Individuals meeting the requirements for CCO senior-level management and board member representation must be <u>clearly identified.</u></i></li> </ul> </li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• Include documented criteria for selecting the Regulatory Committee Members within the policy and procedure.</li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
		<ul style="list-style-type: none"> <li>In addition to the member types required by OHA, the CCO should ensure at least one of the senior level management employees consists of a budgetary official with authority to commit resources.</li> </ul>
3	<p><b>FWA Prevention Resources: Compliance/SIU Team:</b> <i>*Revised requirement language and new components.</i></p> <p>The establishment of a division, department, or team of employees that is dedicated to, and is responsible for, <u>implementing the Annual FWA Prevention Plan</u>; and</p> <ol style="list-style-type: none"> <li><b>Professional employee:</b> (1) Identifies at least one professional employee who reports directly to the Chief Compliance Officer. (2) Demonstrates professional employee is an investigator, attorney, paralegal, professional coder, or auditor. <i>*Formerly component (c).</i></li> <li><b>Contractor’s division, department, SIU, or team FTE requirements:</b> must also meet the requirements of Exhibit B, Part 9, Section 11. Policies and procedures must specify correct FTE requirements based on the Contractor’s maximum enrollment limit. <i>*New component.</i></li> <li><b>Contractor’s division, department, SIU, or team composition:</b> When Contractor designates the FTE Employees, Contractor’s <b>policies and procedures and position descriptions</b> must: <i>*New component.</i> <ol style="list-style-type: none"> <li>Describe how roles work and are apportioned, and</li> <li>Describe hiring practices and qualifications, and</li> <li>Define the scope of each FTE Employee’s role.</li> </ol> <p><i>NOTE: The names of all FTE employees must be included in the position descriptions for all filled positions.</i></p> </li> </ol>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>FWA Prevention Handbook (if standalone document).</li> <li>Organizational chart illustrating the <u>name and reporting structure</u> for each individual on the CCO’s team. <ul style="list-style-type: none"> <li><i>At least one professional employee reporting directly to the Chief Compliance Officer must be an investigator, attorney, paralegal, professional coder, or auditor.</i></li> </ul> </li> <li>Primary policy and procedure that: <ul style="list-style-type: none"> <li><u>Defines the FTE requirements</u> based upon the CCO’s maximum enrollment limit.</li> <li><u>Describes hiring practices:</u> the process steps for hiring new employees (e.g., identifying the hiring need, devise recruitment plan, write job description, advertise the position, recruit the position, review applications, phone interviews/screening, interviews, applicant assessment, background check, decision, reference checks, job offer, hiring, onboarding).</li> </ul> </li> <li>Job/position description for <u>each position</u> making up the CCO’s team, which includes: <ul style="list-style-type: none"> <li>Name and FTE of employee.</li> <li><u>Role of the position:</u> the formal definition of the employee’s position; also known as a job title, job position, or position specification.</li> <li><u>Scope of the position:</u> the main duties and responsibilities assigned to the job; also known as the essential functions.</li> <li><u>Apportionment of responsibilities:</u> the allocation of work, assignment of duties, and task distribution.</li> </ul> </li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
	<p>d. <b>Ensuring and increasing qualifications of team:</b> (1) Description of continuous work toward increasing the qualifications of its employees. (2) Training plan outlines all planned trainings to be provided by or attended by CCO staff during the upcoming year. <i>*Formerly component (d).</i></p> <p><i>Note: Investigators must meet mandatory core and specialized training program requirements for such employees. *Formerly assessed as part of component (e).</i></p> <p>e. <b>Team knowledge:</b> (1) Identifies individuals who are knowledgeable about the provision of medical assistance under Title XIX of the Social Security Act and about the operations of health care providers. (2) Demonstrates staff identified possess such requirements. <i>*Formerly component (f).</i></p> <p>f. <b>Specialized skills:</b> (1) Identifies individuals who have forensic or other specialized skills that support the investigation of cases (e.g., nurse reviewers, certified financial forensic auditor, etc.). (2) Specifies organization employing such individuals (e.g., CCO or contracted organization). (3) Describes the forensic or specialized skills required for each individual (e.g., medical claims investigations, working knowledge of medical policy guidelines and professional coding, prior health fraud audit, analysis, or investigation experience). (4) Demonstrates staff identified possess such qualifications. <i>*Formerly component (g).</i></p> <p><i>Necessary documentation may include without limitation a combination of policies and procedures, a position description, contracts or other agreements, employee training/education record or professional certifications, or other documentation of work</i></p>	<ul style="list-style-type: none"> <li>▪ <i>A combined position, which requires an individual to fill more than one role (e.g., auditor and compliance analyst) would require the job/position description to define the responsibilities for each role separately.</i></li> <li>– <u>Minimum qualifications for the position:</u> the minimum level of knowledge required to do the job (i.e., education, experience, knowledge, skills, and abilities).             <ul style="list-style-type: none"> <li>▪ <b>Investigators</b> must meet mandatory core and specialized training requirements must be defined in the position descriptions for investigator positions. <i>Core and specialized training must include <u>one or more of the following</u>: Bachelor’s degree in criminal justice, fraud management, forensic accounting, or related field; time working in the position that would equal time spent earning a bachelor’s degree (4 years); combination of associate’s degree with time working in the position that would equal time spent earning a bachelor’s degree; current certification or enrollment in a certification program, such as Certified Fraud Examiner (CFE), Accredited Healthcare Fraud Investigator (AHFI), Certified Professional Coder (CPC), or other fraud-related certifications.</i></li> <li>▪ Individuals with <b>forensic or other specialized skills</b> that support investigation of cases could include <i>nurse reviewers, certified forensic auditors, CPCs, and individuals with medical claim investigation work experience, working knowledge of medical policy guidelines and professional coding, prior health care fraud auditing experience, analysis, or investigation experience.</i></li> </ul> </li> </ul>

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	<p><i>history such as an employment verification letter or offer letter which includes the date(s) of employment and position.</i></p>	<ul style="list-style-type: none"> <li>• Evidence <u>demonstrating the CCO has</u> (1) at least one professional employee reporting directly to the Chief Compliance Officer (e.g., show position titles and reporting structure on organizational chart and/or within position/job descriptions), (2) the required number of auditors and investigators based on FTE requirements (e.g., illustrate FTE numbers for each position on the organizational chart and/or within position/job descriptions), and (3) appropriate qualifications for auditors, investigators, and those assisting with investigations (e.g., individual summaries for each FTE employee listing qualifications, such as education, work experience, certifications, skills).             <ul style="list-style-type: none"> <li>– <i>Evidence must include <u>names of FTE employees</u> for all positions filled.</i></li> <li>– <i>The CCO must ensure the qualifications of FTE employees align with the qualifications listed within the position/job descriptions.</i></li> </ul> </li> <li>• Written <u>plan for increasing qualifications</u> of existing staff (e.g., enrollment in certification programs, continuing education units to maintain certifications; attendance at conferences and webinars specific to compliance and program integrity, internal training events, etc.).             <ul style="list-style-type: none"> <li>– <i>This information should be included within the FWA Prevention Plan/work plan.</i></li> </ul> </li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• To prevent, detect, and respond to FWA, the CCO should ensure its team is qualified to meet all levels of violations. Skills required are coding, Medicaid rules, health care procedures and clinical terms, industry standards, policies and recommendations, contracts and provider enrollment, auditing, investigations, and billing.</li> <li>• Expertise of an effective team may include research analyst(s)/statistician(s)/data scientist(s), clinical experts, medical</li> </ul>

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		<p>reviewer(s)/auditor(s), coding/claim expert(s), policy/contract experts, financial auditor(s)/financial analyst(s), and investigator(s).</p> <ul style="list-style-type: none"> <li>The skills and expertise found in your organization’s exiting operations can improve the quality and effectiveness of your team.</li> <li>Leverage existing expertise available within the organization and through existing contracts/agreements.</li> </ul> <p><i>Note: Questions specific to the 2025 CCO Contract staffing requirement changes should be directed to Caleb Richards at <a href="mailto:caleb.richards@oha.oregon.gov">caleb.richards@oha.oregon.gov</a> and Fritz Jenkins at <a href="mailto:fritz.jenkins@oha.oregon.gov">fritz.jenkins@oha.oregon.gov</a>.</i></p>
4	<p><b>Compliance with the Contract:</b> <i>*Revised contract citation.</i>            A statement or narrative in the FWA Prevention Handbook that articulates the Contractor’s commitment to complying with the terms and conditions in Exhibit B, Part 9, Sections 1-20 and all other applicable State and federal laws.</p>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>FWA Prevention Handbook (if standalone document).</li> <li>Primary policy and procedure that includes the CCO’s <u>statement of organizational commitment</u> to complying with terms of the contract.</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>The policy and procedure should also include the intent of the program and program goals.</li> </ul>
5	<p><b>Written Standards of Conduct:</b>  <u>Written standards of conduct</u> 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.</p>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>FWA Prevention Handbook (if standalone document).</li> <li>Primary policy and procedure or document that describes the CCO’s <u>standards of conduct</u>.</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>Standards of conduct should detail your organization’s commitment to ethical behavior, as well as your vision and values. The standards of conduct should also indicate that compliance is the responsibility of all</li> </ul>

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		employees and describe how to report incidents of non-compliant or unethical behaviors.
6	<p><b>Disciplinary Guidelines to Enforce and Publicize Compliance Standards:</b></p> <ul style="list-style-type: none"> <li>a. A description of Contractor’s disciplinary guidelines used to enforce compliance standards; and</li> <li>b. Description of how those guidelines are publicized.</li> </ul>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Handbook (if standalone document).</li> <li>• Primary policy and procedure that <u>describes disciplinary actions</u> for those who fail to comply with the applicable requirements and written standards of conduct and <u>how those guidelines are publicized</u>.</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• The CCO’s procedures should specify mechanisms to (1) prevent, identify, investigate, and refer suspected FWA cases, (2) identify how assessments will be made, (3) associate specific disciplinary action(s) for specific offenses, and (4) enable staff to report suspected activities (e.g., hotline or anonymous comment cards).</li> <li>• The CCO's enforcement of standards must be well publicized through various means (i.e., employee handbook, policies and procedures, FWA compliance training, CCO website, live presentations, and provider manual).</li> </ul>
7	<p><b>Training and Education:</b></p> <ul style="list-style-type: none"> <li>a. A <u>system</u> to provide and require annual attendance at training and education regarding Contractor’s FWA policies and procedures by: <ul style="list-style-type: none"> <li>• Contractor’s Compliance Officer, senior management (including Board of Directors), and all other employees.</li> </ul> </li> <li>b. Subcontractors and Participating Providers. Training <u>content</u> must include, without limitation: <ul style="list-style-type: none"> <li>• The right, pursuant to Section 1902(a)(68) of the Social Security Act, to be protected as a</li> </ul> </li> </ul>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Handbook (if standalone document).</li> <li>• Primary policy and procedure that describes the CCO’s process for <u>providing FWA training to each audience</u>, such as employees, Board of Directors, subcontractors, and participating providers.</li> <li>• CY 2025 training materials (e.g., PowerPoint slides) to be used to provide training on the content outlined in component (b), including <u>materials used for employees, Board of Directors, subcontractors, and participating providers</u>. <ul style="list-style-type: none"> <li>– <i>If the CCO uses the same materials for all audiences, the training materials must be labeled to demonstrate intended audience.</i></li> </ul> </li> </ul>



No.	Requirement	Minimum Expectation(s) and Best Practice(s)
	<p>whistleblower for reporting any suspected FWA.</p> <ul style="list-style-type: none"> <li>Information necessary for its employees, Subcontractors, and Participating Providers to fully comply with the FWA requirements of the Contract.</li> <li>Oregon Medicaid-specific referral and reporting information, including any time parameters required for compliance with Exhibit B, Part 9.</li> </ul>	<ul style="list-style-type: none"> <li><i>The CCO should not submit videos as compliance without written transcripts or associate slides. Submissions of videos without documented content will not be reviewed.</i></li> <li>Training schedule/plan (<u>specific</u> to FWA training).</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>The CCO should consider using the same base training materials for all audiences and supplement with additional information, where appropriate.</li> <li>The CCO should include its training schedule as part of its FWA Prevention Plan and Workplan.</li> <li>For <b>newly contracted provider FWA training</b>, while an online learning management system that tracks training completion would be considered a best practice for newly contracted providers, it is acceptable for CCOs to submit the training materials and signed attestations from the providers and their staff as evidence of training completion. <ul style="list-style-type: none"> <li><i>Training provided to contracted providers should include correct billing practices and mechanisms for a provider to report and return overpayments. Training should also include information on pertinent laws, such as False Claims Act, Civil Monetary Penalties Law, whistleblower protections, Anti-Kickback Statute, Exclusion Statute, and Physician Self-Referral Law.</i></li> </ul> </li> <li>For <b>annual provider FWA training</b>, the CCO could develop a refresher training document or provider newsletter to send to providers annually along with the Provider Manual and FWA Prevention Handbook. The information included in the document that accompanies the Provider Manual and FWA Prevention Handbook should include, at a minimum, the pertinent laws, expectations of the CCO for providers to follow the policies and procedures outlined in the FWA Prevention</li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
		<p>Handbook and Provider Manual, and specific reporting requirements and time frames (e.g., reporting fraud, reporting overpayments, disclosure and exclusion requirements) with references to specific policies or pages within the FWA Prevention Handbook for additional information. The annual provider training is a great way to communicate expectations for billing, coding, documentation, etc. The CCO should use information gleaned from FWA prevention activities to determine the topics or content that would be helpful for providers.</p>
8	<p><b>Additional Training and Education for Employees Conducting Provider Credentialing:</b> <i>*Revised contract citation.</i></p> <p>a. In addition to the training and education required under Exhibit B, Part 9, Section 12, Para. B (8), a <u>system to provide annual education and training</u> to Contractor’s employees who are responsible for credentialing Providers and Subcontracting with third parties. <i>*Revised contract citation.</i></p> <p>b. Such annual education and training content must include material relating to, as set forth in 42 CFR §§438.608(b) and 438.214(d), all of the following:</p> <ul style="list-style-type: none"> <li>– The credentialing (<i>i.e., procedures, including time frames</i>) and enrollment (<i>i.e., disclosure of ownership and control, business transactions, and information for persons convicted of crimes against federal-related health care programs, including Medicare, Medicaid, and/or Children’s Health Insurance Program</i>) and screening requirements (<i>i.e., identification of moderate to high risk providers, verification of Medicaid enrollment with OHA prior to credentialing</i>) of Providers and Subcontractors; and</li> <li>– The prohibition of employing, Subcontracting or otherwise being Affiliated with (or any combination or all of the foregoing) sanctioned individuals. <i>This</i></li> </ul>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Handbook (if standalone document).</li> <li>• Primary policy and procedure that describes the CCO’s process for <u>providing training to employees who are responsible for credentialing</u>.</li> <li>• CY 2025 training materials to be used to educate employees, who are responsible for credentialing on the content specified in component (b).</li> <li>• CY 2025 training schedule (<u>specific</u> to content outlined in component [b]).</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• The CCO should develop a formal training document that includes all the required content for newly hired and existing credentialing staff to complete and maintain a training completion log to demonstrate compliance.</li> <li>• The CCO should add this annual training to its FWA Prevention Plan and Workplan to ensure compliance with providing the training as required.</li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
	<i>includes appropriate verification procedures through appropriate database checks.</i>	
9	<p><b>Effective Communication:</b></p> <p>Systems designed to maintain effective lines of communication between the Contractor’s Compliance Officer and the Contractor’s employees and Subcontractors.</p>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>FWA Prevention Handbook (if standalone document).</li> <li>Primary policy and procedure that includes the mechanisms established for <u>employees, subcontractors, and providers to confidentially report</u> violations directly to the CCO's Compliance Officer (e.g., anonymous hotline, email, telephone, in-person, oral and/or written grievances, etc.).</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>The CCO should ensure the State's contact information has been published in all employee handbooks, provider manuals, member handbooks and other member communications, CCO's website, member newsletters, or any other distribution impacting large segments of the CCO's membership.</li> <li>The CCO should also have a written process for receiving, interpreting, distributing, and implementing regulatory guidance to staff, subcontractors, and providers.</li> </ul>
10	<p><b>Response to Allegations of Improper or Illegal Activities:</b></p> <p><i>*Revised requirement.</i></p> <ol style="list-style-type: none"> <li>Systems to respond promptly to allegations of improper or illegal activities;</li> <li>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; and</li> <li>Include policies for when Contractor may perform an on-site visit for PI audits and investigations of Participating Providers. <i>*New component.</i></li> </ol>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>FWA Prevention Handbook (if standalone document).</li> <li>Primary policy and procedure that provides a <u>summary of the systems</u> put in place by the CCO to promptly respond to reports of potential instances of non-compliance and suspected FWA and mechanisms used to enforcement of appropriate disciplinary actions. <i>*Detailed processes and procedures for will be assessed within Section II–Annual FWA Prevention Plan.</i></li> <li>Primary policy and procedure that describes what may trigger the CCO to <u>perform an on-site visit</u> for PI audits and investigations.</li> </ul>

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		<p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>This summary is typically captured within the FWA Prevention Handbook or Compliance/FWA program description.</li> </ul>
11	<p><b>Reporting FWA–Exclusions:</b> <i>*Revised contract citation.</i></p> <p>Procedures for reporting suspected FWA to the appropriate agencies in accordance with Exhibit B, Part 9, Section 18, Para (a) of the CCO Contract.</p> <p>In addition to its reporting requirements with respect to Providers under Exhibit B, Part 9, Contractor must <u>immediately report</u> 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.</p>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>FWA Prevention Handbook (if standalone document).</li> <li>Primary policy and procedure that describes the CCO’s process for <u>conducting sanction and exclusion checks</u> and <u>reporting</u> excluded providers to OHA’s Provider Enrollment Unit.</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>The CCO’s procedures should include the process steps for “how” the CCO will perform sanctions and exclusion checks as well as reporting when excluded providers identified.</li> <li>Although not identified in this requirement, the CCO’s Compliance Program should also include its employment screenings conducted for all prospective and existing employees, including sanction and exclusion screening.</li> </ul>
12	<p><b>Reporting FWA–Quarterly and Annual Reporting of Program Integrity (PI) Audits:</b> <i>*Revised requirement language and new components.</i></p> <p>Procedures for reporting suspected FWA to the appropriate agencies in accordance with Exhibit B, Part 9, Section 18, Para. (b) of the CCO Contract. <i>*Revised contract citation.</i></p> <ol style="list-style-type: none"> <li><u>Using the template provided by OHA</u> (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.</li> <li>The Annual and Quarterly FWA Audit Reports must include all data points listed in the template, information on any</li> </ol>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>FWA Prevention Handbook (if standalone document).</li> <li>Primary policy and procedure that describes: <ul style="list-style-type: none"> <li>The CCO’s process for <u>submitting</u> quarterly and annual reports to OHA for all PI audits performed (opened, in-process, and closed for the reporting period).</li> <li>The CCO’s process for <u>remediating deficiencies</u> with quarterly and annual reports identified by OHA.</li> <li><u>Provisions for OHA OPI</u> to review quarterly and annual reports and requesting PI Audit supporting documentation.</li> </ul> </li> </ul> <p><b>Best practice:</b></p>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
	<p>Provider <u>Overpayments</u> that were recovered, the <u>source</u> of the Provider Overpayment recovery, and any <u>Sanctions or Corrective Actions</u> imposed by Contractor on its Subcontractors or Providers.</p> <p>c. For both the Quarterly and Annual FWA Audit Reports, Contractor must report all PI Audits <u>opened, in-process, and closed</u> during the reporting period.</p> <p>d. Contractor must also provide to OHA with each Quarterly FWA Audit Report a <u>copy of the final PI Audit report</u>, which meets the requirements of Exhibit B, Part 9, Section 15, Para. b, Sub Para. (3), Sub-Sub Para. (b) for each PI Audit identified in the FWA Audit Report as closed during the reporting quarter; as well as any other final PI Audit Reports that have not been submitted. <i>*Revised requirement language.</i></p> <p>e. The <u>Annual FWA Audit Report is due January 31</u> of each Contract Year and must be provided to OHA by Administrative Notice via the CCO Contract Deliverables Portal.</p> <p>f. OHA will notify Contractor, via Administrative Notice, within sixty (60) days from the due date, or within sixty (60) days from the received date if after the due date, of the compliance status of its Annual FWA Audit Report. In the event OHA disapproves of the Annual FWA Audit Report (including one or more of Contractor’s final PI Audit reports for audits identified in the Annual FWA Audit Report as closed) for failing to meet the terms and conditions of this Contract and any other Applicable Laws, Contractor shall, in order to remedy the deficiencies, follow the process set forth in Sec. 5, Ex. D of this Contract. <i>*New component.</i></p> <p>g. In addition, OHA OPI may review Contractor’s Quarterly and Annual FWA Audit Reports and copies of final PI Audit</p>	<ul style="list-style-type: none"> <li>• The CCO should clearly state all FWA Audit reporting requirements within its policy and describe the reporting requirements for referrals and cases investigated separately to avoid confusion and potential non-compliance.</li> <li>• The CCO’s procedures should include the process steps taken to complete and submit quarterly and annual reports, and any associated desk procedures for individual tasks within the process.</li> </ul> <p><i>Note: For submission of quarterly and annual reports, the CCO’s policies and procedures must either identify CCO Contract Deliverables Portal (CDP) or include a statement that the CCO will submit quarterly and annual reports via Administrative Notice “as defined in Exhibit D” of the CCO Contract.</i></p>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
	<p>reports and request PI Audit supporting documents, Exhibit B, Part 9, Section 20 of the CCO Contract. <i>*New component.</i></p> <p>h. <u>The Quarterly FWA Audit Report is due thirty (30) days following the end of each calendar quarter</u> and must be provided to OHA by Administrative Notice via the CCO Contract Deliverables Portal. <i>*Formerly component (f).</i></p> <p><i>NOTE: CCO policies and procedures must demonstrate CCO has developed and maintains an internal process for collecting these data and reporting it to OHA, timely.</i></p>	
<p>13</p>	<p><b>Reporting FWA–Quarterly and Annual Reporting of FWA Referrals and Investigations:</b> <i>*Revised requirement language and new components.</i></p> <p>Procedures for reporting suspected FWA to the appropriate agencies in accordance with Exhibit B, Part 9, Section 18, Para. (c) of the CCO Contract. <i>*Revised contract citation.</i></p> <p>a. <u>Using the template provided by OHA</u> (located on the CCO Contract Forms Website), Contractor must submit to OHA, via the CCO Contract Deliverables Portal, an annual and quarterly summary report of <u>FWA Referrals and cases investigated.</u></p> <p>b. The report must include, <u>regardless of Contractor’s own suspicions or lack thereof</u>, any incident with any of the characteristics listed in Exhibit B, Part 9, Section 17</p> <p>c. The report must include all of Contractor’s <u>open and closed preliminary investigations of suspected and credible cases.</u></p> <p>d. The <u>annual FWA Referrals and Investigations Report is due January 31</u> of each Contract Year following the reporting year and must be provided to OHA by Administrative Notice via the CCO Contract Deliverables Portal.</p>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Handbook (if standalone document).</li> <li>• Primary policy and procedure that describes:             <ul style="list-style-type: none"> <li>– The CCO’s process for <u>submitting</u> quarterly and annual reports to OHA for referrals and preliminary investigations of suspected and credible cases.</li> <li>– The CCO’s process for <u>remediating deficiencies</u> with quarterly and annual reports identified by OHA.</li> <li>– <u>Provisions for OHA OPI</u> to review quarterly and annual reports and requesting investigation supporting documentation.</li> </ul> </li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• The CCO should clearly state all Referral and Cases Investigated reporting requirements within its policy and describe the reporting requirements for FWA Audits separately to avoid confusion and potential non-compliance.</li> <li>• The CCO’s procedures should include the process steps taken to complete and submit quarterly and annual reports and any associated desk procedures for individual tasks within the process.</li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
	<p>e. OHA will notify Contractor, via Administrative Notice, within sixty (60) days from the due date, or within sixty (60) days from the received date if after the due date, of the compliance status of its Annual Referrals and Investigations Report. In the event OHA disapproves of the Annual Referrals and Investigations Report for failing to meet the terms and conditions of this Contract and any other Applicable Laws, Contractor shall, in order to remedy the deficiencies, follow the process set forth in Sec. 5, Ex. D of this Contract. <i>*New component.</i></p> <p>f. In addition, OHA OPI may review Contractor’s Quarterly and Annual FWA Referrals and Investigations Reports and request investigation supporting documents, as outlined in Exhibit B, Part 9, Section 20 of the CCO Contract. <i>*New component.</i></p> <p>g. <u>The quarterly FWA Referrals and Investigations Report is due thirty (30) days following the end of each calendar quarter</u> and must be provided to OHA by Administrative Notice via the CCO Contract Deliverables Portal. <i>*Formerly component (e).</i></p> <p><i>NOTE: CCO policies and procedures must demonstrate CCO has developed and maintains an internal process for collecting these data and reporting it to OHA, timely.</i></p>	<p><i>Note: For submission of quarterly and annual reports, the CCO’s policies and procedures must either identify CDP or include a statement that the CCO will submit quarterly and annual reports via Administrative Notice “as defined in Exhibit D” of the CCO Contract.</i></p>
14	<p><b>Reporting FWA–Reporting of Suspected FWA:</b> <i>*Revised requirement language.</i></p> <p>Procedures for reporting suspected FWA to the appropriate agencies in accordance with Exhibit B, Part 9, Section 18, Para. (d) of the CCO Contract. <i>*Revised contract citation.</i></p> <p>In addition to the annual and quarterly summary of FWA Referrals and Investigations, Contractor must:</p>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Handbook (if standalone document).</li> <li>• Primary policy and procedure that describes the CCO’s process for <u>making referrals</u> of all suspected cases of FWA to the appropriate agencies within the required time frames (i.e., <b>promptly but in no event more than seven days</b>).</li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
	<p>a. 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 Department of Justice (DOJ)’s Medicaid Fraud Control Unit (MFCU).</p> <p>b. Reporting (i.e., referrals) must be made <b>promptly but in no event more than seven (7) days</b> after Contractor is initially made aware of the suspicious case. <i>*Revised requirement language.</i></p> <p><i>NOTE: CCO policies and procedures must demonstrate CCO has developed and maintains an internal process for collecting these data and reporting it to OHA and MFCU, timely.</i></p>	<p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>The purpose of the 7-day reporting requirement is to ensure coordination between the CCO, OHA, and MFCU. It also allows OHA and MFCU time to determine if there is a related investigation or litigation and provide instructions to the CCO to avoid compromising those investigations. The CCO should investigate the issue as much as possible within the seven days and share any information collected (i.e., <i>who</i> is making the allegation, <i>what</i> is the issue, <i>when</i> did the issue occur, <i>where</i> did the allegation come from/how was it discovered) with OHA and MFCU.</li> <li>The CCO’s procedures should include the process steps taken to collect necessary information when the CCO identifies suspected cases of FWA and making the report to OHA and MFCU and any associated desk procedures for individual tasks within the process.</li> </ul>
15	<p><b>Reporting FWA–Reporting of Suspected FWA: <i>*New Element.</i></b></p> <p>Procedures for reporting suspected FWA to the appropriate agencies in accordance with Exhibit B, Part 9, Section 18, Para. (d) of the CCO Contract.</p> <p>All reporting must be made as set forth in Exhibit B, Part 9, Section 18, Para. (d)(1).</p> <p>a. Contractor and any Subcontractor sending a referral to OPI and MFCU of suspected Provider FWA or issues with the characteristics of those in Sec. 17 above of this Ex B, Part 9 shall use the FWA Referral Form provided by OHA (available on the CCO Contract Forms Website). The FWA Referral Form must, when sent to OPI and MFCU, include, at a minimum, the following information:</p> <ol style="list-style-type: none"> <li>Contractor’s name;</li> <li>Name of Provider or Member;</li> <li>The suspected issue or allegation;</li> </ol>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>FWA Prevention Handbook (if standalone document).</li> <li>Primary policy and procedure that outlines the <u>minimum required elements</u> to be completed on the <b>FWA Referral Form</b> to meet the 7-day reporting requirement.</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>The CCO’s policy and procedure should specify the minimum required elements for the FWA Referral Form separately from the minimum required elements when sending communications regarding the referral.</li> </ul> <p><i>Note: Questions specific to the 2025 CCO Contract reporting requirements should be directed to Caleb Richards at <a href="mailto:caleb.richards@oha.oregon.gov">caleb.richards@oha.oregon.gov</a> and Fritz Jenkins at <a href="mailto:fritz.jenkins@oha.oregon.gov">fritz.jenkins@oha.oregon.gov</a>.</i></p>



No.	Requirement	Minimum Expectation(s) and Best Practice(s)
	<ul style="list-style-type: none"> <li>iv. The information or data Contractor has already reviewed; and</li> <li>v. Planned next steps for further investigation</li> </ul>	
16	<p><b>Reporting FWA–Reporting of Suspected FWA: <i>*New element.</i></b>            Procedures for reporting suspected FWA to the appropriate agencies in accordance with Exhibit B, Part 9, Section 18, Para. (d) of the CCO Contract. All reporting must be made as set forth in Exhibit B, Part 9, Section 18, Para. (d)(2).</p> <ul style="list-style-type: none"> <li>a. Contractor shall include, and require all Subcontractors to include, in each written communication or referral sent to OPI and MFCU the following:               <ul style="list-style-type: none"> <li>i. Contractor’s name;</li> <li>ii. Contractor’s Medicaid contract number; and</li> <li>iii. Which entity (Contractor or Subcontractor), and the name and title of the individual within the entity who is performing the investigation, PI Audit, or other review, and their contract information;</li> <li>iv. Contractor may provide the above information to OPI by completing the FWA Referral Form.</li> </ul> </li> </ul>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Handbook (if standalone document).</li> <li>• Primary policy and procedure that outlines the <u>minimum required elements</u> to be included on <b>all communications</b> sent to OPI regarding referrals.</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• The CCO’s policy and procedure should specify the minimum required elements for communications regarding referrals separately from the minimum required elements for the FWA Referral Form.</li> </ul> <p><i>Note: Questions specific to the 2025 CCO Contract reporting requirements should be directed to Caleb Richards at <a href="mailto:caleb.richards@oha.oregon.gov">caleb.richards@oha.oregon.gov</a> and Fritz Jenkins at <a href="mailto:fritz.jenkins@oha.oregon.gov">fritz.jenkins@oha.oregon.gov</a>.</i></p>
17	<p><b>Reporting FWA–Reporting of Suspected FWA: <i>*New element.</i></b>            Procedures for reporting suspected FWA to the appropriate agencies in accordance with Exhibit B, Part 9, Section 18, Para. (d)(3) of the CCO Contract.</p> <ul style="list-style-type: none"> <li>a. Individual whistleblowers or any other person(s) who make a report of suspected Fraud, Waste, Abuse, or non-compliance to Contractor, or its Subcontractors, shall not be required to use the FWA Referral Form or be required to include identifying information in their anonymous reports. All anonymous FWA reporting shall be accepted by Contractor, Subcontractors, and Participating Providers.</li> </ul>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Handbook (if standalone document).</li> <li>• Primary policy and procedure that describes the requirements for the CCO, subcontractors, and participating providers to <u>accept anonymous FWA reporting, regardless</u> of whether all identifying information has been included in the anonymous report, and <u>not require the use of the FWA Referral Form.</u></li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• The CCO should ensure its policy and procedure specifies the requirements for the CCO, subcontractors, and participating providers</li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
		<p>to accept anonymous FWA reporting and avoid generalized statements to clearly demonstrate compliance with the requirement.</p> <p><i>Note: Questions specific to the 2025 CCO Contract reporting requirements should be directed to Caleb Richards at <a href="mailto:caleb.richards@oha.oregon.gov">caleb.richards@oha.oregon.gov</a> and Fritz Jenkins at <a href="mailto:fritz.jenkins@oha.oregon.gov">fritz.jenkins@oha.oregon.gov</a>.</i></p>
18	<p><b>Reporting FWA—Characteristics of FWA:</b> <i>*Formerly element 15 with revised contract citations.</i></p> <p>Procedures for reporting suspected FWA to the appropriate agencies in accordance with Exhibit B, Part 9, Section 18, Para. (e) of the CCO Contract. <i>revised contract citation.</i></p> <p>a. 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 Exhibit B, Part 9, Section 17. <i>*Revised contract citation.</i></p> <p><i>NOTE: CCO policies and procedures must demonstrate CCO has developed and maintains an internal process for reporting to MFCU, timely.</i></p>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>FWA Prevention Handbook (if standalone document).</li> <li>Primary policy and procedure that describes the CCO’s process for <u>reporting incidents with any of the characteristics</u> listed in Exhibit B, Part 9, Section 16 of the CCO Contract to the appropriate agency.</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>The CCO’s policy and procedure should list the characteristics within its policies and not just refer to the CCO contract.</li> </ul>
19	<p><b>Reporting FWA—Cooperation with MFCU and OPI:</b> <i>*Formerly element 16 with revised contract citations.</i></p> <p>Procedures for reporting suspected FWA to the appropriate agencies in accordance with Exhibit B, Part 9, Section 18, Para. (f) of the CCO Contract. <i>*Revised contract citation.</i></p> <p>Contractor must cooperate in good faith with MFCU and OPI, or their designees, in any investigation or PI Audit relating to FWA as follows:</p> <p>a. 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</p>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>FWA Prevention Handbook (if standalone document).</li> <li>Primary policy and procedure that describes the CCO’s process for <u>cooperating on investigations</u> or PI Audits relating to FWA and lists the requirements outlined within components (a) through (d).</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>The CCO should ensure its policy and procedure specifies every requirement listed in components (a) through (d), including the specific copies of documentation that must be provided, items subject to review and audit, auditing bodies, etc.</li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
	<p>required to be provided under Exhibit B, Part 9, Section 18, Para. (f), Subparagraph (1) of the CCO Contract must be provided without cost to MFCU, OPI, or their designees; <i>*Revised contract citation.</i></p> <p>b. 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;</p> <p>c. 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</p> <p>d. In the event that Contractor reports suspected FWA by Contractor’s Subcontractors, Providers, Members, or other third parties, or learns of an MFCU, 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).</p> <p><i>NOTE: CCO policies and procedures must demonstrate CCO has developed and maintains an internal process for cooperating with an MFCU and Office of Program Integrity (OPI) investigation or audit, timely.</i></p>	
20	<p><b>Reporting FWA–Suspension of Payments:</b> <i>*Formerly element 17 with revised contract citation.</i></p> <p>Procedures for reporting suspected FWA to the appropriate agencies in accordance with Exhibit B, Part 9, Section 18, Para. (g) of the CCO Contract. <i>*Revised contract citation.</i></p>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Handbook (if standalone document).</li> <li>• Primary policy and procedure that describes the CCO’s process for <u>suspension of payments</u> that addresses the requirements listed in components (a) through (d).</li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
	<p>a. Subject to 42 CFR §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.</p> <p>b. 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.</p> <p>c. Subject to 42 CFR §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 CFR §455.23(e).</p> <p>d. In the event OHA determines a credible allegation of Fraud has been made against a Subcontractor, Contractor must cooperate with OHA to determine, in accordance with the criteria set forth in 42 CFR §455.23, whether sums otherwise payable by Contractor to such Subcontractor must be suspended, or whether good cause exists not to suspend such payments.</p> <p><i>NOTE: CCO policies and procedures must demonstrate CCO has developed and maintains an internal process for complying with the requirements of this section, timely.</i></p>	<p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• The CCO’s procedures should include the process steps for the CCO’s suspension process and any associated desk procedures for individual tasks within the process, including performing check holds, withholding payments, restricting future enrollment and payments for non-par providers, etc.</li> <li>• The CCO’s policy and/or associated procedures should demonstrate the CCO understands the requirements of 42 C.F.R. §455.23(c), which further explains that suspension of payments will not continue after either: (1) The agency or the prosecuting authorities determine that there is insufficient evidence of fraud by the provider or (2) Legal proceedings related to the provider’s alleged fraud are completed.</li> </ul>
21	<p><b>Reporting FWA–Where to Report FWA:</b> <i>*Formerly element 18 with revised requirement language and contract citation.</i></p> <p>a. Procedures for reporting <u>suspected and/or confirmed FWA</u> to the appropriate agencies in accordance with Exhibit B, Part 9, Section 18, Para. (h) and Para. (i) of the CCO Contract.</p>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Handbook (if standalone document).</li> <li>• Primary policy and procedure for <u>reporting suspected and/or confirmed FWA</u> to the appropriate agencies. <ul style="list-style-type: none"> <li>– <i>The CCO must ensure its policies and procedures, and any related documents that include reporting information,</i></li> </ul> </li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
	<p>b. Contractor must include the following information for MFCU and OPI in its FWA Prevention Handbook and Member Handbook. <i>*Revised contract citation.</i></p> <p><b>Where to Report a Case of Fraud or Abuse by a Provider</b>                      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 any methods listed below for MFCU and OPI: <i>*Revised requirement language.</i></p> <p><b>Medicaid Fraud Control Unit (MFCU)</b>                      Oregon Department of Justice                      100 SW Market Street                      Portland, OR 97201                      Phone: 971-673-1880                      Fax: 971-673-1890                      Secure email: Medicaid.Fraud.Referral@doj.state.or.us</p> <p><b>OHA Office of Program Integrity (OPI)</b>                      500 Summer St. NE E-36                      Salem, OR 97301                      Secure email: OPI.Referrals@oha.oregon.gov                      Hotline: 1-888-FRAUD01 (888-372-8301)  <a href="https://www.oregon.gov/oha/FOD/PIAU/Pages/Report-Fraud.aspx">https://www.oregon.gov/oha/FOD/PIAU/Pages/Report-Fraud.aspx</a></p> <p>c. Contractor shall include the following information for the ODHS FIU in its FWA Prevention Handbook and Member Handbook. <i>*Revised requirement language.</i></p>	<p><i>include the contact information <u>exactly as it is written</u> within this template.</i></p> <ul style="list-style-type: none"> <li>Member handbook.</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>The CCO’s procedures should include the process steps for reporting the various types of suspected and/or confirmed FWA and any associated desk procedures for individual tasks within the process.</li> <li>When including links within documents, the CCO should verify links are still active and reach the appropriate webpage.</li> </ul> <p><i>Note: Some contact information has been revised. The CCO should ensure all references to MFCU, OPI, and ODHS FIU are reflected accurately in all documents.</i></p> <p><i>Questions specific to the 2025 CCO Contract requirements related to reporting agency references and contact information should be directed to Caleb Richards at <a href="mailto:caleb.richards@oha.oregon.gov">caleb.richards@oha.oregon.gov</a> and Fritz Jenkins at <a href="mailto:fritz.jenkins@oha.oregon.gov">fritz.jenkins@oha.oregon.gov</a>.</i></p>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
	<p><b>Where to Report a Case of Fraud or Abuse by a Member</b>            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 ODHS Fraud Investigation Unit (FIU). Such reporting may be made by mail, phone, or facsimile transmission using the following contact information:  <i>*Revised requirement language.</i></p> <p><b>ODHS Fraud Investigation Unit</b>            PO Box 14150            Salem, OR 97309            Hotline: 1-888-FRAUD01 (888-372-8301)            Fax: 503-373-1525 Attn: Hotline</p> <p><a href="https://www.oregon.gov/odhs/financial-recovery/Pages/fraud.aspx">https://www.oregon.gov/odhs/financial-recovery/Pages/fraud.aspx</a></p>	
22	<p><b>Whistleblower Protection:</b> <i>*Formerly element 19 with revised contract citation.</i></p> <p>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 suspected FWA under applicable whistleblower laws. The disclosures described in Subparagraph (13) 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.</p>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Handbook (if standalone document).</li> <li>• Primary policy and procedure that includes detailed information regarding <u>False Claims Act and other Federal and State laws</u> described in section 1902(a)(68) of the Act, including information about rights of employees to be protected as whistleblowers.</li> <li>• Employee handbook.</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• Information within policy and procedure should include <u>all</u> of the following:               <ul style="list-style-type: none"> <li>– Details regarding the False Claims Act.</li> <li>– Administrative remedies for false claims and statements established under chapter 38, title 31 of the United States Code.</li> </ul> </li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
		<ul style="list-style-type: none"> <li>– State laws pertaining to civil or criminal penalties for false claims and statements.</li> <li>– Whistleblower protections under State laws with respect to preventing and detecting FWA.</li> </ul>
23	<p><b>Procedures to Verify Services:</b> <i>*Formerly element 20.</i></p> <ol style="list-style-type: none"> <li>a. Procedures to routinely verify whether services that have been represented to have been delivered by Participating Providers and Subcontractors were received by Members; and</li> <li>b. 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 mailing service verification letters to Members, sampling, or other methods.</li> </ol>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Handbook (if standalone document).</li> <li>• Primary policy and procedure that describes the CCO’s process used for: <ul style="list-style-type: none"> <li>– <u>Verifying</u> services (including the frequency, sample size, methods, etc.);</li> <li>– <u>Investigating</u> services not delivered or where the member paid out of pocket for services; and</li> <li>– <u>Collecting</u> overpayments.</li> </ul> </li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• The CCO’s procedures should include the process steps for verifying member services and investigating services not delivered or where the member paid out of pocket for services as well as any associated desk procedures for individual tasks within the process.</li> <li>• The CCO should also include member verification processes within its FWA Prevention Plan and workplan.</li> </ul>
24	<p><b>Receive, Record and Respond:</b> <i>*Formerly element 21.</i></p> <ol style="list-style-type: none"> <li>a. A system to: (1) receive, (2) record, and (3) respond to compliance questions, or reports of potential or actual non-compliance from employees, Participating Providers, Subcontractors, and Members; and</li> <li>b. Maintain the confidentiality of the person(s) posing questions or making reports.</li> </ol>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Handbook (if standalone document).</li> <li>• Primary policy and procedure that addresses: <ul style="list-style-type: none"> <li>– The CCO’s process for <u>receiving, recording, and responding to</u> (1) compliance questions <u>and</u> (2) reports of potential or actual non-compliance.</li> </ul> </li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
		<ul style="list-style-type: none"> <li>– Mechanisms used to <u>maintain the confidentiality</u> of the individual posing questions or a making report.</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• The CCO’s procedures should include the process steps for receiving, recording, and responding to questions and reports of potential and non-compliance as well as any associated desk procedures for individual tasks within the process (e.g., how are questions or reports received, who receives them, where are they recorded, what happens next, etc.). The process may be different depending on where the question or report is generated (e.g., employee, member, provider, etc.) or the nature of the question or report, which may impact how it is received and by whom. Therefore, the procedures should specify the individual processes.</li> <li>• The CCO should offer multiple ways for individuals to make a report, including the option of making an anonymous report, internal referral forms, shared compliance/fraud tips mailbox, publicize a compliance/fraud tips 24/7 hotline.</li> <li>• The CCO should index every FWA lead via administrative files in a case management system that can be tracked for reporting purposes.</li> </ul>
25	<p><b>Provision for Contractor to Self-Report Overpayments to OHA:</b>  <i>*Formerly element 22.</i></p> <p>Provisions for Contractor to self-report to OHA, any Overpayment <u>it received from OHA</u> under the Contract, or any other contract, agreement, or memorandum of understanding (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.</p>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Handbook (if standalone document).</li> <li>• Primary policy and procedure that describes the CCO’s process for <u>reporting overpayments the CCO receives from OHA</u>, including the required time frame.</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• The CCO’s procedures should include the process steps taken when overpayments are identified and any associated desk procedures for individual tasks within the process.</li> </ul>



No.	Requirement	Minimum Expectation(s) and Best Practice(s)
	<p><i>NOTE: CCO policies and procedures must demonstrate CCO has developed and maintains an internal process for identifying Overpayment and reporting it to OHA, timely.</i></p>	
26	<p><b>Provision for Contractor to Report Overpayment to OHA:</b>  <i>*Formerly element 23 with revised contract citation.</i></p> <ol style="list-style-type: none"> <li>a. Provisions for Contractor to <u>conduct PI Audits</u> to identify overpayments.</li> <li>b. Provisions to report to OHA any Overpayments <u>the Contractor made to Providers, Subcontractors, or other third parties</u> 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.</li> <li>c. If identification of Overpayment was the result of <u>self-reporting to Contractor by a Provider, Subcontractor, other third party</u>, such foregoing reporting provision must include the obligation of the Provider, Subcontractor, or other third party 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.</li> <li>d. If Overpayment was <u>identified by Contractor as a result of a PI Audit or investigation</u>, the Contractor must report the Overpayment to OHA promptly, but in no event more than seven (7) days after identifying such Overpayment.</li> <li>e. If Contractor suspects an Overpayment identified during a PI Audit or investigation is due to suspected or potential (or both) FWA, such Overpayment must be reported by the Contractor in accordance with Exhibit B, Part 9, Section 18 of the CCO Contract. <i>*Revised contract citation.</i></li> </ol>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Handbook (if standalone document).</li> <li>• Primary policy and procedure that demonstrates that the CCO <u>conducts PI audits</u> as a method to identify overpayments.</li> <li>• Primary policy and procedure that describes the CCO’s process for <u>reporting requirements</u> regarding overpayments to providers, subcontractors, and other third parties. The policy and procedure must include: <ul style="list-style-type: none"> <li>– Provisions for the <b>CCO to report to OHA</b> any overpayments made to providers, subcontractors, and other third parties regardless of whether the overpayment was a <u>result of self-reporting or identified by the CCO</u> and regardless of whether the overpayment was the <u>result of FWA or an accounting or system error</u>.</li> <li>– Provisions for <b>providers, subcontractors, and other third parties to report to the CCO</b> such overpayments within <b>60 days</b>.</li> <li>– Provision for the CCO to report <u>overpayments identified as a result of PI audit or investigation</u> <b>promptly, but no more than seven (7) days</b> after identification.</li> <li>– Provision for the CCO to report overpayments <u>due to suspected or potential FWA</u> to appropriate reporting agencies (i.e., MFCU and OPI).</li> <li>– Provision that requires providers, subcontractors, or other third parties to <u>include a written statement</u> identifying the reason(s) for the return of overpayments.</li> </ul> </li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
	<p>f. 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.</p>	<p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>The CCO's procedures should include the process steps taken when overpayments are identified and any associated desk procedures for individual tasks within the process.</li> </ul>
27	<p><b>Accurate Quarterly and Annual Financial Reporting on Exhibit L:</b> <i>*Formerly element 24 with revised contract citations.</i></p> <p>a. In addition to the procedures for reporting required under Exhibit B, Part 9 of the CCO Contract, Contractor must develop and maintain a procedure for accurately <u>reporting all Overpayments on its quarterly and annual Financial Reports as required under Exhibit L, Section 3.</u></p> <p>b. Contractor's Exhibit L Report must include all Overpayments, identified or recovered <u>regardless</u> of whether the Overpayments were the result of:</p> <ul style="list-style-type: none"> <li>Self-reporting under Exhibit B, Part 9, Section 12, Para. (b), Subparagraphs (16) and (17) of the CCO Contract; or <i>*Revised contract citation.</i></li> <li>A routine or planned PI Audit, or the result of a PI Audit under Sub Para. 22 or other review. <i>*Revised contract citations.</i></li> </ul> <p><i>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.</i></p>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>FWA Prevention Handbook (if standalone document).</li> <li>Primary policy and procedure that describes the CCO's process for <u>Exhibit L reporting</u>, including all requirements in components (a) and (b).</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>The CCO's procedures should include the process steps taken to complete and submit the Exhibit L report as well as any associated desk procedures for individual tasks within the process.</li> </ul>
28	<p><b>Member Reporting Process:</b> <i>*Formerly element 25.</i></p> <p>A process for Members to report suspected FWA anonymously and to be protected from retaliation under applicable whistleblower laws.</p>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>FWA Prevention Handbook (if standalone document).</li> <li>Primary policy and procedure that describes the CCO's process for <u>members to report FWA anonymously and to be protected from retaliation</u> under applicable whistleblower laws.</li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
		<p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>The CCO's procedures should outline the mechanism for the member to report (e.g., hotline), identify who receives the reported information, and how the CCO ensures the member is protected from retaliation (e.g., monitoring).</li> </ul>
29	<p><b>Notification of a Change in the Enrollee's Circumstances:</b>  <i>*Formerly element 26.</i></p> <p>Procedures for prompt notification to OHA when Contractor receives information about changes in a Member's circumstances that might impact eligibility, including:</p> <ol style="list-style-type: none"> <li>Changes in a Member's residence; and</li> <li>Death of a Member.</li> </ol>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>FWA Prevention Handbook (if standalone document).</li> <li>Primary policy and procedure that describes the CCO's process for <u>promptly notifying OHA of changes in a member's circumstances</u>, including both changes in a member's residence and death of a member.</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>The CCO's procedures should specify how the work is conducted, when and who performs the task, and how and where the CCO is sending the information to OHA.</li> </ul>
30	<p><b>Notification of a Change in a Provider's Circumstances:</b>  <i>*Formerly element 27.</i></p> <p>A procedure pursuant to which Contractor shall:</p> <ol style="list-style-type: none"> <li>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.</li> <li>Such Administrative Notice must be made to OHA <b>within thirty (30) days</b> of receipt of such information.</li> <li>When the termination of a Participating Provider is for-cause, Administrative Notice must be provided to OHA's Provider Enrollment Unit within <b>fifteen (15) days</b> of</li> </ol>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>FWA Prevention Handbook (if standalone document).</li> <li>Primary policy and procedure that describes the CCO's process for <u>notifying OHA of changes in a provider's circumstances</u>, including both the <b>30-day</b> and <b>15-day requirements</b>.</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>The CCO's procedure should specify how the work is conducted, when and who performs the task, and how and where the CCO is sending the information to OHA.</li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
	termination, with a statement of the cause (Exhibit B, Part 4, Section 5, Para. (k) of the CCO Contract).	
31	<p><b>Requirements for Performing PI Audits: <i>*New element.</i></b></p> <p>a. Policies and Procedures pursuant to which Contractor shall perform PI Audits required under Exhibit B, Part 9, Section 15 within <b>twenty (20) Business Days</b> when Contractor:</p> <ol style="list-style-type: none"> <li>i. Receives a written notice of potential at-risk overpayment from OPI; or</li> <li>ii. Is notified of a potential overpayment by an employee, Subcontractor, Provider, Member, or any other internal or external source.</li> </ol>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Handbook (if standalone document).</li> <li>• Primary policy and procedure that describes the requirements for <u>performing PI Audits</u>, including the <b>20 business day</b> time frame.</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• The CCO’s procedure should include the process steps for initiating a PI Audit when the CCO: <ul style="list-style-type: none"> <li>– Receives a written notice of potential at-risk overpayment from OPI; or</li> <li>– Is notified of a potential overpayment by an employee, subcontractor, provider, member, or any other internal or external source.</li> </ul> </li> </ul> <p><i>Note: Questions specific to the 2025 CCO Contract requirements related to PI Audit requirements or 20-day time frame should be directed to Caleb Richards at <a href="mailto:caleb.richards@oha.oregon.gov">caleb.richards@oha.oregon.gov</a> and Fritz Jenkins at <a href="mailto:fritz.jenkins@oha.oregon.gov">fritz.jenkins@oha.oregon.gov</a>.</i></p>
32	<p><b>Requirements for Performing PI Audits: <i>*New element.</i></b></p> <p>Each PI audit shall include all of the following:</p> <p>a. Validate or verify the following information about the Provider (Provider entities as well as billing Providers and individual rendering Providers as may be applicable):</p> <ol style="list-style-type: none"> <li>i. Provider name(s);</li> <li>ii. All applicable Provider Medicaid Identification Number(s) and all enrollment file data (e.g, Provider address(es), all practice location(s), and, as applicable</li> </ol>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Handbook (if standalone document).</li> <li>• Primary policy and procedure that describes the <u>minimum activities required</u> for PI Audits, including components (a) through (h).</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• The CCO’s procedure should include the process steps for conducting PI Audits (i.e., specific activities) and any associated desk procedures for individual tasks within the process.</li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
	<p>for the Provider type, the TIN/SSN/EIN, NPI, and taxonomy codes);</p> <ul style="list-style-type: none"> <li>iii. Member(s) name(s) and Medicaid ID number, as applicable;</li> <li>iv. Oregon business registration status, legal business name, and, if applicable, assumed business name;</li> <li>v. Exclusion status of Provider(s) (LEIE &amp; SAM) and any person(s) with ownership or control interest (including all managing employees), as these terms are defined by 42 CFR 455.101;</li> <li>vi. Provider license(s) and billing and rendering provider(s), as applicable;</li> <li>vii. Provider certification(s).</li> </ul> <ul style="list-style-type: none"> <li>b. Collect information about the billing issues identified;</li> <li>c. Select a PI Audit focus or question, including the billing code(s) selected for review;</li> <li>d. Review all Encounter claims or a statistically valid sample of Encounter claims;</li> <li>e. Review clinical or other financial records,</li> <li>f. Identify Overpayment or other audit findings;</li> <li>g. Outcome(s) of a Provider appeal of the audit findings; and</li> <li>h. Overpayment recovery, repayment plan, or other corrective action to prevent future Overpayments.</li> </ul>	<p><i>Note: Questions specific to the 2025 CCO Contract requirements related to PI Audit requirements should be directed to Caleb Richards at <a href="mailto:caleb.richards@oha.oregon.gov">caleb.richards@oha.oregon.gov</a> and Fritz Jenkins at <a href="mailto:fritz.jenkins@oha.oregon.gov">fritz.jenkins@oha.oregon.gov</a>.</i></p>
33	<p><b>PI Audit Report Content:</b> <i>*New element.</i></p> <ul style="list-style-type: none"> <li>a. Procedures outlining information required to be documented in each final PI Audit report: <ul style="list-style-type: none"> <li>i. The information gathered about the Provider(s) under Sub. Para.(a) i above of this Sub.Para. (3),</li> <li>ii. The date range of the Encounter claims audited;</li> </ul> </li> </ul>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Handbook (if standalone document).</li> <li>• Primary policy and procedure that describes: <ul style="list-style-type: none"> <li>– The <u>minimum content</u> required for PI Audit reports, including components (a) and (b).</li> </ul> </li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
	<ul style="list-style-type: none"> <li>iii. PI Audit focus or question, including the billing code(s) selected for review;</li> <li>iv. Summary table: Data mining and report on the universe and sample of Encounters audited; the clinical or financial records reviewed;</li> <li>v. Referrals made by Contractor to licensing boards or other state or federal regulatory entities;</li> <li>vi. Summary of audit criteria applied and the resulting financial and other relevant findings,</li> <li>vii. Final Overpayment;</li> <li>viii. The outcome of any Provider appeal(s), as applicable;</li> <li>ix. Summary of Overpayments recovered, repayment plan, and other Provider corrective action(s) or education or both to prevent future Overpayments by Contractor and the disposition of the PI Audit; and</li> <li>x. Other relevant audit findings as Contractor deems necessary.</li> </ul> <p>b. Policies and Procedures pursuant to which Contractor shall review all PI Audit(s) performed by its Subcontractor. Contractor shall evaluate its Subcontractor’s completed final PI Audit report to determine whether these are complete, accurate, and includes the same information required under Exhibit B, Part 9, Section 15, Para. b.</p>	<ul style="list-style-type: none"> <li>– The provision for the CCO to <u>evaluate its subcontractors’ completed final PI Audit reports</u> to determine whether they are complete, accurate, and includes the same required content.</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• The CCO’s procedure should include the process steps for reviewing subcontractors’ final PI Audit reports to ensure completeness, accuracy, and inclusion of required content (e.g., department responsible, any associated time frames, actions taken when issues are identified).</li> </ul> <p><i>Note: Questions specific to the 2025 CCO Contract requirements related to PI Audit report contents should be directed to Caleb Richards at <a href="mailto:caleb.richards@oha.oregon.gov">caleb.richards@oha.oregon.gov</a> and Fritz Jenkins at <a href="mailto:fritz.jenkins@oha.oregon.gov">fritz.jenkins@oha.oregon.gov</a>.</i></p>
34	<p><b>Responding to Requests for Additional Information: <i>*New element.</i></b></p> <p>Procedures for Contractor to respond to a written request from OPI for additional information or Encounter Data about any PI Audit conducted by Contractor or its Subcontractor.</p> <ul style="list-style-type: none"> <li>a. Contractor shall, and shall contractually require all of its Subcontractors to, in addition to those requirements set forth</li> </ul>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Handbook (if standalone document).</li> <li>• Primary policy and procedure that describes: <ul style="list-style-type: none"> <li>– The CCO’s process for <u>responding to a written request</u> from OPI for additional information or encounter data about any PI Audit conducted by the CCO or its subcontractor.</li> </ul> </li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
	<p>in Exhibit B, Part 4, Section 11, Para. B (1)(k) and (l), to comply with all of the following:</p> <ul style="list-style-type: none"> <li>i. Contractor and Subcontractor shall maintain records, including records of all PI Audits and investigations related to suspected Fraud, Waste, and Abuse or overpayments. The records must include the detail necessary to substantiate all actions taken and outcome(s) reached for each PI audit or investigation for the CCO Contract.</li> <li>ii. Allow access to all PI Audit and investigation supporting documents, information, systems, and facilities in accordance with Exhibit B, Part 9, Section 18 and Exhibit D, Section 15 of the CCO Contract.</li> </ul> <p>b. Contractor must not Delegate to its Subcontractors, Contractor’s obligation under Sub. Para. (23) to respond to an OPI request for additional information or Encounter Data about a PI audit or investigation.</p> <p>c. Contractor must send a response to OPI <b>within five (5) business days</b> regardless of whether the records are maintained by Contractor or maintained separately with one or more of the Contractor’s Subcontractors.</p> <p>d. Contractor shall send to OPI copies of all PI Audit files, Encounter Data, and other PI Audit supporting documentation in any form and criteria used for the PI Audit <b>within twenty (20) business days of a request</b> as required by Exhibit B, Part 9, Section 20.</p>	<ul style="list-style-type: none"> <li>– Requirements for the CCO and subcontractors to <u>maintain records of PI Audits and investigations</u> related to suspected FWA or overpayments.</li> <li>– Requirements for <u>records to include detail</u> necessary to substantiate all actions taken and outcome(s) reached for each PI Audit or investigation.</li> <li>– Provisions for the CCO and its subcontractors to <u>allow OPI access</u> to all PI Audit or investigation supporting documentation, information systems, and facilities.</li> <li>– Provision that the CCO <u>must not delegate the responsibility</u> to respond to OPI’s request for additional information to its subcontractors.</li> <li>– Provision for the CCO to <u>respond to OPI’s request</u> within five <b>(5) business days</b> regardless of whether records are maintained by the CCO or with subcontractor(s).</li> <li>– Provision for the CCO to <u>send OPI copies</u> of all requested documentation within <b>20 business days</b> of the request.</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• The CCO’s procedure should include the process steps for responding to OPI’s requests for additional information, including the process for working with subcontractor(s) to obtain necessary information (e.g., department responsible, any associated time frames, actions taken when subcontractors fail to comply).</li> </ul> <p><i>Note: Questions specific to the 2025 CCO Contract requirements related to responding to OPI requests for additional information should be directed to Caleb Richards at <a href="mailto:caleb.richards@oha.oregon.gov">caleb.richards@oha.oregon.gov</a> and Fritz Jenkins at <a href="mailto:fritz.jenkins@oha.oregon.gov">fritz.jenkins@oha.oregon.gov</a>.</i></p>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
35	<p><b>FWA Information for Contractor’s Employees and Members:</b>  <i>*Formerly element 28.</i></p> <p>a. Contractor must provide its FWA Prevention Handbook to all employees or otherwise include its complete contents in Contractor’s <u>employee handbook</u>.</p> <p>b. Contractor must include, at minimum, in its <u>Member Handbook</u>, the following information relating to FWA:</p> <ul style="list-style-type: none"> <li>• A statement or narrative that articulates Contractor’s commitment to: <ul style="list-style-type: none"> <li>○ Prevent FWA; and</li> <li>○ Complying with all Applicable Laws, including, without limitation, the State’s False Claims Act and the Federal False Claims Act.</li> </ul> </li> <li>• Examples of Fraud, Waste, and Abuse.</li> <li>• Where and how to report suspected FWA. A Member’s right to report suspected FWA anonymously and to be protected under the applicable whistleblower laws.</li> </ul>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Handbook (if standalone document).</li> <li>• Primary policy and procedure that describes the CCO’s process for <u>providing information</u> regarding compliance and FWA to employees.</li> <li>• Employee handbook. <ul style="list-style-type: none"> <li>– The employee handbook must be provided if the CCO indicates that <u>this is the mechanism used to provide the required information to employees</u>.</li> </ul> </li> <li>• Member handbook.</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• The CCO should ensure its employee handbook is updated when policies and procedures are updated to ensure consistency among documents and information provided to employees.</li> <li>• HSAG recommends the CCO add the employee handbook to its annual document review to ensure compliance.</li> </ul>
36	<p><b>Compliance Monitoring Criteria:</b> <i>*New element.</i></p> <p>Criteria developed and implemented to perform routine internal monitoring and routine evaluation of Subcontractors and Participating Providers for other related compliance risks.</p>	<p><i>Note: This element will be reviewed independently by OHA/OPI. The CCOs must complete the review tool included as Appendix A.</i></p> <p><i>Questions specific to the 2025 CCO Contract requirements related to submission of criteria used to monitor and evaluate subcontractors and participating providers should be directed to Caleb Richards at <a href="mailto:caleb.richards@oha.oregon.gov">caleb.richards@oha.oregon.gov</a> and Fritz Jenkins at <a href="mailto:fritz.jenkins@oha.oregon.gov">fritz.jenkins@oha.oregon.gov</a>.</i></p>



## Section II – 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 Officer, 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 (Exhibit B, Part 9, Section 13).

The **FWA PREVENTION PLAN** and **WORKPLAN** submitted must be for the current Contract Year (i.e., **CY 2025**).

The **FWA PREVENTION PLAN** should define specific goals and objectives, which will guide the CCO with the implementation of its program. It must describe **“how” the CCO will implement** the Compliance Program described within the FWA Prevention Handbook and associated policies, and include (measures, criteria, and methods to evaluate effectiveness). The CCO should develop its FWA Prevention Plan based upon findings from the Annual FWA Assessment.

This is typically a narrative document that references **associated policies and procedures and/or process documents** (e.g., workflows, job aids, work instructions, etc.), to support and further describe activities identified within the FWA Prevention Plan. If the CCO plans to use the associated documents to support what is documented in the FWA Prevention Plan, the CCO's FWA Prevention Plan **must direct reviewers to the appropriate documents**.

The **WORKPLAN** outlines projects, including audits, evaluations, and trainings to be addressed during the **current Contract Year (i.e., CY 2025)**, and 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. As a best practice, the CCO should also include a column to indicate completion dates.

**THE CONTRACTOR’S ANNUAL FWA PREVENTION PLAN FOR THE CURRENT CONTRACT YEAR MUST INCLUDE, AT MINIMUM, ALL OF THE FOLLOWING:**

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
1	<p><b>Monitoring and Auditing of FWA Risks:</b>  Contractor’s <u>written plan</u> includes:</p> <ol style="list-style-type: none"> <li>a. Description of <u>FWA prevention and detection</u> activities planned for the <u>current Contract Year</u>, such as routine internal monitoring, reporting, and PI Auditing of FWA risks.</li> <li>b. Work plan lists all PI Audits <u>planned for the current Contract Year</u>, 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.</li> </ol>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Plan.</li> <li>• CY 2025 Workplan listing <b>all PI Audits and monitoring activities</b> planned. <i>*Audits look for overpayments. The outcome is a <u>financial finding</u>.</i></li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• In addition to listing the PI Audits and monitoring activities planned for the current Contract Year within its workplan, the CCO should: <ul style="list-style-type: none"> <li>– Provide a <u>brief description of the activities within its FWA Prevention Plan</u>.</li> <li>– For the PI Audits chosen, the CCO should include the <u>brief rationale for selecting specific providers</u> (e.g., the provider was identified through antifraud software multiple times the prior year, however, overpayments were not identified though targeted reviews).</li> </ul> </li> <li>• Routine monitoring/oversight processes should assist the CCO with identifying fraud and informing audit plans. When a pattern is detected by routine monitoring/oversight processes, the CCO should plan the audit based on what has been detected in the surveillance phase. Selecting an audit focus or question starts with reviewing data already available to the organization.</li> <li>• The CCO should also provide a brief description of its <u>payment accuracy prevention and detection activities</u> using pre- and post-payment tools (e.g., specific post-adjudication and pre-check runs for claims, monitoring of provider coding behaviors, evaluations of billing errors and inconsistencies on prospective high dollar Diagnosis Related Group-cost outlier facility claims, mid-adjudication clinical editing and</li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
		<p>reviews of physician and facility claims, post-adjudication/pre-payment detection of suspicious claims, pre-payment data mining edits focused on compliance with provider contract terms and identification of provider billing error trends, retrospective data mining for waste, data mining for claim overpayments, etc.) within its FWA Prevention Plan, including any that are subcontracted to a third party vendor.</p>
2	<p><b>Monitoring and Auditing of Other Compliance Related Risks:</b>                      Contractor’s <u>written plan</u> includes:</p> <ol style="list-style-type: none"> <li>a. Description of <u>compliance review activities</u> planned for the current Contract Year, such as routine internal monitoring, reporting, and auditing of other related compliance risks.</li> <li>b. Work plan lists all compliance reviews <u>planned for the current Contract Year</u>, identifies individual(s) or department resources used to conduct the reviews, data or information sources, whether each review is conducted in person/on-site or by desk review, or both, and when each review is scheduled to begin.</li> </ol>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Plan.</li> <li>• CY 2025 Workplan listing <b>all compliance review activities</b> planned, including compliance audits. <i>*Compliance reviews look for compliance with rules and regulations, including contractual requirements. The outcome is a <u>corrective action plan</u> that is designed to address the issue.</i> <ul style="list-style-type: none"> <li>– Compliance reviews listed in the workplan must be specific to individuals or organizations and include complete information as required in component (b). <i>*Reviews listed as placeholders with incomplete information or generic statements will result in Not Compliant findings.</i></li> <li>– All subcontractors listed on the CCO’s subcontractor delegation reports submitted to OHA for CY 2025 <u>must be included</u> on the workplan.</li> </ul> </li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• Any provider chosen for a PI Audit should also be identified for a compliance review. A provider identified for unplanned PI Audits should also be added to the workplan and undergo a compliance review to evaluate the provider’s internal processes, policies, and procedures for compliance with contractual requirements, which may provide an explanation for the aberrant behavior(s) that initially flagged the provider for the PI Audit.</li> </ul>
3	<p><b>Prompt Response:</b></p>	<p><b>Relevant document(s):</b></p>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
	<p>Contractor’s <u>written plan</u> includes:</p> <ol style="list-style-type: none"> <li>a. <u>The CCO’s process for promptly responding to allegations of suspected FWA, including 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). Contractor is prohibited from referring allegations of FWA to a Subcontractor who is also a party to the allegation.</u></li> <li>b. <u>The CCO’s process for promptly responding to allegations of other related compliance issues, including 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).</u></li> </ol>	<ul style="list-style-type: none"> <li>• FWA Prevention Plan.</li> <li>• Primary policy and procedure that describes the CCO’s process for <u>promptly responding</u> to: <ul style="list-style-type: none"> <li>– Allegations of <u>FWA</u>; and</li> <li>– Other related <u>compliance issues</u>.</li> </ul> </li> <li>• Associated documents (if needed to further describe the <u>step-by-step instructions</u> for completing tasks within the process).</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• The FWA Prevention Plan should include a brief summary of the CCO’s process and reference associated policies and procedures.</li> <li>• The CCO’s procedures should include the process steps for receiving allegations, triaging, and referring to MFCU/OPI and internal quality or compliance department(s) as well as any associated desk procedures for individual tasks within the process.</li> </ul>
4	<p><b>Investigations:</b></p> <p>Contractor’s <u>written plan</u> must address:</p> <ol style="list-style-type: none"> <li>a. Investigation of <u>potential FWA</u> as reported or identified in the course of self-evaluation and PI Audits.</li> <li>b. Investigation of <u>other related compliance problems</u> as reported or identified in the course of self-evaluation and PI Audits.</li> </ol>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Plan.</li> <li>• Primary policy and procedure that describes the CCO’s process for <u>conducting investigations</u> of: <ul style="list-style-type: none"> <li>– Allegations of <u>FWA</u>; and</li> <li>– Allegations of other related <u>compliance issues</u>.</li> </ul> </li> <li>• Associated documents (if needed to further describe the <u>step-by-step instructions</u> for completing tasks within the process).</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• The FWA Prevention Plan should include a brief summary of the CCO’s process and reference associated policies and procedures.</li> </ul>


No.	Requirement	Minimum Expectation(s) and Best Practice(s)
		<ul style="list-style-type: none"> <li>The CCO’s procedures should include the process steps for <i>how</i> the CCO will conduct investigations as well as any associated desk procedures for individual tasks within the process. The process may be different depending on whether it is a potential FWA investigation or compliance issue, therefore, the procedures should specify the individual processes.</li> <li>The CCO should document all steps of investigations in detail and keep a case activity log for all stages of the investigation, including preliminary, expanded and recoupment.</li> </ul>
5	<p><b>Prompt and Thorough Correction:</b> Contractor’s written plan must address:</p> <ol style="list-style-type: none"> <li>Prompt and thorough correction of <u>any and all incidents of FWA</u>, in a manner that is designed to reduce the potential recurrence, including the CCO’s process for coordination of suspected criminal acts with law enforcement agencies, opening PI Audits to recover overpayments, and referring cases internally for further compliance.</li> <li>Prompt and thorough correction of <u>any and all incidents of other related compliance problems</u> in a manner that is designed to reduce the potential for recurrence, including coordination of suspected criminal acts with law enforcement agencies, opening PI Audits to recover overpayments, and referring cases internally for further compliance.</li> </ol>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>FWA Prevention Plan.</li> <li>Primary policy and procedure that describes the CCO’s process for <u>prompt and thorough correction</u> of any and all:             <ul style="list-style-type: none"> <li>Incidents of <u>FWA</u>; and</li> <li>Incidents of other related <u>compliance issues</u>.</li> </ul> </li> <li>Associated documents (if needed, to further describe the <u>step-by-step instructions</u> for completing tasks within the process).</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>The FWA Prevention Plan should include a brief summary of the CCO’s process and reference associated policies and procedures.</li> <li>The CCO’s procedures should include the process steps for <i>how</i> the CCO will correct and coordinate with law enforcement agencies (when necessary) as well as any associated desk procedures for individual tasks within the process. The process may be different depending on whether it is a FWA or compliance incident, therefore, the procedures should specify the individual processes.</li> <li>The CCO should identify specific corrective actions used by the CCO to reduce the potential for recurrence for incidents of:</li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
		<ul style="list-style-type: none"> <li>- FWA (e.g., recoupment/provider/subcontractor education—if SIU determines there was only a billing error but not abuse or fraud, corrective action plan to resolve billing or service issues, federal and/or State referral, referral to law enforcement agencies, 100% prepayment review, etc.); and</li> <li>- Compliance (e.g., provider/subcontractor education, corrective action plan, federal and/or State referral, referral to law enforcement agencies, etc.).</li> <li>- Additional corrective actions for both FWA and compliance issues should include increased monitoring of regulatory compliance, possible revisions to internal controls, and possible systems updates).</li> </ul>
6	<p><b>Activities that Support FWA Prevention and Compliance:</b> Contractor’s written plan must address:</p> <ul style="list-style-type: none"> <li>a. Activities that support <u>ongoing compliance with the FWA prevention</u> under the Contract.</li> <li>b. Activities that support <u>ongoing compliance with other related compliance requirements</u> under the Contract.</li> </ul>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Plan.</li> <li>• CY 2025 Workplan listing <b>all FWA prevention and compliance monitoring activities</b> planned. <ul style="list-style-type: none"> <li>- <i>FWA prevention activities may include, but are not limited to: FWA training, provider orientation, annual ownership disclosure process for staff, subcontractors, and providers, review of member and provider materials, screening and exclusion checks and prohibited affiliations, review of credentialing activities and committee minutes, collaboration with internal departments and with other CCOs and OHA to identify risks, review of OIG workplan, trending and reporting on issues discovered through prospective and retrospective auditing and monitoring.</i></li> <li>- <i>Other compliance related activities may include, but are not limited to: annual reviews of provider and subcontractor contracts/review of issues uncovered through routine monitoring activities, subcontractor audits, HIPAA risk</i></li> </ul> </li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
		<p><i>assessments, workgroups in place to ensure compliance, monitoring of corrective action plans.</i></p> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>The FWA Prevention Plan should also include a narrative of the activities in place that support ongoing compliance with <u>FWA prevention</u> and <u>other related compliance requirements</u>.</li> </ul>
7	<p><b>Risk Evaluation Procedures:</b> Contractor’s written plan must address:</p> <ol style="list-style-type: none"> <li>Risk evaluation procedures to enable compliance in identified problem areas such as (at a minimum): claims, Prior Authorization, service verification, utilization management and quality review.</li> <li>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.</li> </ol>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>FWA Prevention Plan.</li> <li>CY 2025 Workplan listing the <b>annual risk evaluation/assessment</b>.</li> <li>Annual compliance/fraud risk assessment <u>methodology and template</u>. The CCO’s annual risk assessment <u>must include</u>: <ul style="list-style-type: none"> <li><u>Areas reviewed</u> (i.e., at a minimum areas must include claims, prior authorization, service verification, utilization management, and quality review) and <u>activities used</u> (risk evaluation procedures) to assess the specific areas.</li> <li><u>Methodology</u> for assessing the risk of fraud and the likelihood and impact of potential fraud. <ul style="list-style-type: none"> <li><i>Likelihood assessment – the possibility that a given event will occur taking into account current controls/mitigation activities in place (e.g., How likely is it that fraud will occur?).</i></li> <li><i>Impact assessment – the extent to which a risk event might affect the financial and/or reputational enterprise (e.g., What would the impact be if the fraud were to occur?).</i></li> </ul> </li> </ul> </li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>The annual risk assessment should be <u>used to define, develop, and implement appropriate oversight for the year</u> (as documented in the FWA prevention monitoring and auditing workplan), which should be</li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
		<p>reviewed and approved annually by the Regulatory Compliance Committee and Board of Directors.</p> <ul style="list-style-type: none"> <li>• When identifying risks, the CCO should <u>ensure it considers both internal departments and operational areas and external entities</u> (e.g., providers, delegated entities/subcontractors, vendors, members). For each of these entities, the CCO should identify specific FWA threats (e.g., how can FWA occur in this area). OHA has identified the following operational areas specifically—i.e., claims, prior authorization, service verification, utilization management, and quality review. At a minimum, the CCO should include these areas along with the other areas identified by the organization.</li> <li>• It is important to also consider the CCO’s <u>rationale for identifying specific threats</u> (e.g., why is it a concern, where did it come from, was it a prior incident, new incident, something that occurred in another health plan, is it mandated by regulation, etc.) and any existing controls the CCO has already implemented along with actions it has taken/will be taking to mitigate risks.</li> </ul> <p><b>Resources:</b> The Association of Certified Fraud Examiners (ACFE) website (<a href="https://www.acfe.com/fraud-resources/fraud-risk-tools">https://www.acfe.com/fraud-resources/fraud-risk-tools</a>) has a downloadable fraud risk template. The template is robust and includes risk assessment scoring scales, risk assessment matrix, heat map, fraud risk ranking, control activities matrix, allegations-disposition, monitoring actions, and tabs with examples of the information that may be included in the risk assessment matrix, etc.</p> <p>The attached GAO Fraud Risk Scoring Handout provides detailed guidance for fraud risk scoring and prioritization.</p>



No.	Requirement	Minimum Expectation(s) and Best Practice(s)
		 <p>GAO Fraud Risk Scoring Handout.pc</p>
8	<p><b>Payment Accuracy:</b> Contractor’s <u>written plan</u> must address 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.</p>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• FWA Prevention Plan.</li> <li>• CY 2025 Workplan listing the <b>encounter data validation activities</b> planned.</li> <li>• Primary policy and procedure that describes the CCO’s process for <u>conducting encounter data validation activities</u>.</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• The FWA Prevention Plan should include a brief summary of the encounter data validation activities conducted and reference associated policies and procedures.</li> <li>• Planned encounter data validation activities should be included within the workplan.</li> <li>• The CCO’s procedures should include the process steps for “how” the CCO will conduct the encounter data validation activities as well as any associated desk procedures for individual tasks within the process.</li> </ul>

### Section III – 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 Contractor's efforts over the prior Contract Year and their effectiveness. Contractor shall implement a structured and constant process to assess, Monitor, and improve the quality and effectiveness of PI Audits and investigations. An effective Medicaid Program Integrity and risk management approach means that Contractor's program integrity program or SIU has internal controls to (i) prevent instances of Fraud, Waste, Abuse and other misconduct from occurring; (ii) detect instances of potential Fraud, Waste, Abuse and other misconduct; and (iii) respond appropriately when integrity breakdowns are identified (Exhibit B, Part 9, Section 19).

The **ANNUAL FWA ASSESSMENT** submitted must include an evaluation of the effectiveness of the CCO's FWA PREVENTION PLAN from the prior Contract Year (**i.e., CY 2024**).

The CCO should use the **ANNUAL FWA ASSESSMENT** as an opportunity to:

- Evaluate compliance with all regulatory and contractual Medicaid program integrity obligations.
- Review outcomes of all the FWA prevention activities and identify strengths, gaps, and challenges within the program.
- Consider policy and process changes necessary to address deficiencies identified.
- Use the information to strengthen the FWA Prevention Plan and workplan for the next year.

**RECOMMENDATION:** The CCO should structure its Annual FWA Assessment following the format of the requirements in this review tool.

**NOTE: OPI has notified HSAG that CCOs should NOT submit any Quarterly or Annual FWA Referrals and Investigations or FWA Audit Reports as supporting evidence for this FWA Deliverables Review due to the sensitivity of the information included within the reports.**

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

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
1	<p><b>Assessment of Compliance and FWA Activities–Preliminary Investigations:</b> <i>*Revised requirement language and new component.</i></p> <ol style="list-style-type: none"> <li>a. A <u>high-level synopsis</u> of the FWA investigations conducted by Contractor;</li> <li>b. <u>Lessons learned</u> from these investigations; and</li> <li>c. <u>Strategies being employed</u> to improve Contractor’s FWA prevention program.</li> </ol>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• Annual FWA Assessment that clearly addresses <b>FWA investigations</b> and each of the required components (a) through (c). <ul style="list-style-type: none"> <li>– <i>The CCO must <u>identify this section</u> of the Annual FWA Assessment as “FWA investigations” and demonstrate that it has <u>addressed all components</u>.</i></li> </ul> </li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• The CCO should present the information using either a <u>table format or use subheadings</u> for each of the required components.</li> <li>• The <u>high-level synopsis</u> of the FWA investigations conducted should include themes for opening the investigations and outcomes.</li> </ul>
2	<p><b>Assessment of Compliance and FWA Activities–PI Audits:</b> <i>*Revised requirement language and eliminated components.</i></p> <p>For each PI audit conducted in response to referrals and investigations, the Contractor must provide:</p> <ol style="list-style-type: none"> <li>a. A high-level synopsis of the Subcontractor and Participating Provider PI Audits conducted by Contractor <u>in response to referrals and investigations</u>; and</li> <li>b. Strategies being employed to improve Contractor’s FWA prevention program.</li> </ol>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• Annual FWA Assessment that clearly addresses <b>PI audits conducted in response to referrals and investigations</b> and each of the required components (a) and (b). <ul style="list-style-type: none"> <li>– <i>The CCO must <u>identify this section</u> of the Annual FWA Assessment as “PI audits conducted in response to referrals and investigations” and demonstrate that it has <u>addressed all components</u>.</i></li> <li>– <i>The CCO must <u>identify</u> whether the entities listed were <u>subcontractors or participating providers</u>.</i></li> <li>– <i>This section <u>should not include</u> PI audits that were planned and listed in the CCO’s CY 2024 FWA Prevention workplan. The assessment of planed PI audits must be presented in element 5.</i></li> </ul> </li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• The CCO should present the information using either a <u>table format or subheadings</u> for each of the required components.</li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
		<ul style="list-style-type: none"> <li>The high-level synopsis of the FWA investigations conducted should include themes for opening the PI Audits and outcomes.</li> </ul>
3	<p><b>Assessment of Compliance and FWA Activities</b>  <b>Compliance Reviews:</b> <i>*Revised requirement language.</i>                      For each compliance review conducted in response to reported or suspected non-compliance, the Contractor must provide:</p> <ol style="list-style-type: none"> <li>A summary of all <b>unplanned compliance reviews</b> performed by the Contractor of its Subcontractors, Participating Providers, and any other third parties during the prior contract year;</li> <li>Rationale for conducting the review</li> <li>Whether the review was performed on-site or based on a review of documentation;</li> <li>Outcomes of the compliance reviews (e.g., any non-compliance identified, identification of suspected criminal acts, etc.); and</li> <li>Any corrective action taken.</li> </ol>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>Annual FWA Assessment that clearly addresses <b>compliance reviews conducted in response to reported or suspected non-compliance</b> and each of the required components (a) through (e).                             <ul style="list-style-type: none"> <li>The CCO must <u>identify this section</u> of the Annual FWA Assessment as “compliance reviews conducted in response to reported or suspected non-compliance” and demonstrate that it has <u>addressed all components</u>.</li> <li>The CCO must <u>identify whether the entities listed were subcontractors or participating providers</u>.</li> <li>This section <u>should not include</u> compliance reviews that were planned and listed in the CCO’s CY 2024 FWA Prevention workplan. Those compliance reviews must be presented in element 6.</li> </ul> </li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>The CCO should present the information using either a <u>table format or subheadings</u> for each of the required components.</li> </ul>
4	<p><b>Assessment of Training and Education Activities:</b>  <i>*Revised requirement language.</i>                      Identify the training and education provided <u>during the prior Contract Year</u> and attended by:</p> <ol style="list-style-type: none"> <li>Contractor’s Chief Compliance Officer, and all employees including senior management;</li> <li>Board of Directors; <i>*New component.</i></li> <li>Providers; and</li> <li>Subcontractors.</li> </ol>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>Annual FWA Assessment that includes a brief summary of the <b>training and education provided during CY 2024 for each audience</b> (employees, board of directors, subcontractors, providers).                             <ul style="list-style-type: none"> <li>The CCO must <u>identify this section</u> of the Annual FWA Assessment as “CY 2024 training and education” and demonstrate that it has <u>addressed all components</u>.</li> <li>The CCO’s assessment must clearly <u>describe the training provided for each audience and reference associated documents</u> demonstrating training for each.</li> </ul> </li> <li><u>Evidence</u> of FWA training completion in CY 2024 for:</li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
		<ul style="list-style-type: none"> <li>– Employees</li> <li>– Board members</li> <li>– Subcontractors</li> <li>– Participating providers, as applicable</li> </ul> <ul style="list-style-type: none"> <li>• <u>Evidence</u> of training completion for employees responsible for credentialing conducted during CY 2024.</li> <li>• If <u>subcontractors</u> use their own training materials, <u>evidence</u> of the CCO reviewing and approving subcontractor training materials.</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• To demonstrate compliance with providing FWA training to <u>newly contracted participating providers</u>, the CCO should (at a minimum) identify providers that were onboarded during CY 2024. While an online learning management system that tracks training completion would be considered a best practice for newly contracted providers, it is acceptable for CCOs to submit the training materials and signed/dated attestations from the providers and their staff as evidence of training completion.</li> <li>• To demonstrate compliance with delivering <u>annual FWA training to providers</u>, the CCO could submit (1) the newsletter or training document(s) sent with the Provider Manual and FWA Prevention Handbook <u>and</u> (2) the list of providers and dates the information was distributed to providers.</li> <li>• The CCO should ensure documentation is dated and clearly demonstrates training completion for all required attendees.</li> </ul>
5	<p><b>Assessment of Compliance and FWA Prevention Activities–Planned Provider PI Audits:</b> <i>*Revised requirement language and eliminated components.</i></p>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• Annual FWA Assessment that clearly addresses planned PI Audits and each of the required components (a) through (c).</li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
	<p>Contractor’s Annual FWA Assessment Report must include:</p> <ul style="list-style-type: none"> <li>a. A high-level self-evaluation of the <b>planned Provider PI Audit</b> activities Contractor performed <u>during the prior Contract Year</u>; <i>*Revised requirement language.</i></li> <li>b. Whether such PI Audit activity was in accordance with Contractor’s Annual FWA Prevention Plan from the <u>prior Contract Year</u>;</li> <li>c. A description of the methodology used to identify high-risk Providers and services chosen for PI audits.</li> </ul> <p><i>*The work and activities reported in the Annual FWA Assessment Report must align with the <u>prior year’s Annual FWA Prevention Plan</u>. The work and activities must be clearly described and be specific to the reporting year.</i></p>	<ul style="list-style-type: none"> <li>– <i>The CCO must <u>identify this section</u> of the Annual FWA Assessment as “planned PI Audits” and demonstrate that it has <u>addressed all components</u>.</i></li> <li>– <i>This section <u>should not include</u> PI audits that were conducted in response to referrals and investigations that was presented in element 2.</i></li> <li>• CY 2024 FWA Prevention Plan/workplan.             <ul style="list-style-type: none"> <li>– <i>The CCO must ensure that it includes a high-level self-evaluation (within the Annual FWA Assessment) of <u>each planned PI audit listed on the CY 2024 workplan</u>.</i></li> <li>– <i>If the CCO’s summary does not match the PI audits listed on the CY 2024 workplan, the CCO must include an <u>explanation</u> (within the Annual FWA Assessment) of <u>how</u> and <u>why</u> the PI audits changed.</i></li> </ul> </li> <li>• Methodology used to identify the high-risk providers and services chosen for PI Audits that were listed on the CY 2024 workplan.             <ul style="list-style-type: none"> <li>– <i>The intent is for the CCO to describe <u>why it chose these specific PI Audits</u> and address how the CCO triages and selects providers and services performed by providers for PI audits or other types of internal reviews. At a minimum, it should encompass the types of data the CCO is going to collect, the sources of the data, as well as how it is being collected and analyzed.</i></li> </ul> </li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• The CCO should present the high-level self-evaluation using a table format with columns to list each of the planned PI Audits conducted in CY 2024, whether the PI Audit activity was in accordance with the PI Audits identified on the CY 2024 workplan, and methodology used to identify the providers chosen.</li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
6	<p><b>Assessment of Compliance and FWA Prevention Activities–Planned Compliance Reviews:</b> <i>*Revised requirement language.</i></p> <p>Contractor Annual FWA Assessment Report must include:</p> <ul style="list-style-type: none"> <li>a. A summary of the <b>planned compliance review activity</b> Contractor performed of Subcontractors, Participating Providers, and any other third party <u>during the prior Contract Year</u>; <i>*Revised requirement language.</i></li> <li>b. Description of the data analytics relied upon;</li> <li>c. Narrative of whether and how such activity was or was not performed in accordance with Contractor’s Annual FWA Prevention Plan for the prior Contract Year; <i>*Revised requirement language.</i></li> <li>d. Narrative of the outcomes of the compliance reviews (e.g., any non-compliance identified, identification of suspected criminal acts, etc.); <i>*Revised requirement language.</i> and</li> <li>e. A copy of the corrective action plan for any required action taken. <i>*Revised requirement language.</i></li> </ul> <p><i>*The work and activities reported in the Annual FWA Assessment Report must align with the <u>prior year’s</u> Annual FWA Prevention Plan. The work and activities must be clearly described and be specific to the reporting year.</i></p>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• Annual FWA Assessment that clearly addresses <b>planned compliance reviews</b> and each of the required components (a) through (e). <ul style="list-style-type: none"> <li>– <i>The CCO must <u>identify this section</u> of the Annual FWA Assessment as “planned compliance reviews” and demonstrate that it has <u>addressed all components</u>.</i></li> <li>– <i>The CCO must <u>identify</u> whether the entities listed were <u>subcontractors or participating providers</u>.</i></li> <li>– <i>This section <u>should not include</u> compliance reviews that were conducted in response to reported or suspected non-compliance that was presented in element 3.</i></li> </ul> </li> <li>• CY 2024 FWA Prevention Plan/workplan. <ul style="list-style-type: none"> <li>– <i>The CCO must ensure that it includes a high-level self-evaluation (within the Annual FWA Assessment) of <u>each planned compliance review listed on the CY 2024 workplan</u>.</i></li> <li>– <i>If the CCO’s summary does not match the compliance reviews listed on the CY 2024 workplan, the CCO must include an <u>explanation</u> (within the Annual FWA Assessment) of <u>how</u> and <u>why</u> the compliance reviews changed.</i></li> </ul> </li> <li>• A copy of any corrective action plans issued in CY 2024 as a result of the compliance review activity. <ul style="list-style-type: none"> <li>– <i>The CCO’s summary (within the Annual FWA Assessment) must <u>indicate whether or not</u> a corrective action plan was implemented to address issues identified and <u>reference</u> the associated document that addresses the corrective action.</i></li> <li>– <i>If a formal <u>corrective action plan</u> was <u>not issued</u>, the CCO must <u>specify</u> (within the Annual FWA Assessment) how it addressed any issues identified.</i></li> </ul> </li> </ul> <p><b>Best practice:</b></p>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
		<ul style="list-style-type: none"> <li>The CCO should present the summary of planned compliance reviews using a table format with columns for each component.</li> </ul>
7	<p><b>Assessment of Compliance and FWA Prevention Activities–Requests for Technical Assistance:</b> Contractor must include it its report:</p> <p>Any applicable request for technical assistance from OHA, DOJ’s MFCU, or CMS <u>during the prior Contract Year</u> on improving the compliance activities performed by Contractor.</p>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>Annual FWA Assessment that <b>lists any technical assistance</b> requested in CY 2024.                             <ul style="list-style-type: none"> <li><i>The CCO must <u>identify this section</u> of the Annual FWA Assessment as “technical assistance” and demonstrate that it includes dates, technical assistance received, and organization providing technical assistance.</i></li> </ul> </li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>Information <u>should also include</u> any guidance or recommendations received from OHA related to strengthening audit activities.</li> </ul>
8	<p><b>Assessment of Compliance and FWA Prevention Activities–Service Verification Letters:</b> Contractor must include in its report:</p> <ol style="list-style-type: none"> <li>A sample of the service verification letters mailed to Members.</li> <li>A summary report on:                             <ul style="list-style-type: none"> <li>The number of service verification letters sent;</li> <li>How Members were selected to receive such Letters;</li> <li>Member response rates;</li> <li>The frequency of mailings, including all dates on which such Letters were mailed;</li> <li>The results of the efforts; and</li> <li>Other methodologies used to ensure the accuracy of data.</li> </ul> </li> </ol>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>Annual FWA Assessment that clearly addresses <b>service verification activities</b> each of the bulleted requirements of component (b).                             <ul style="list-style-type: none"> <li><i>The CCO must <u>identify this section</u> of the Annual FWA Assessment as “service verification activities” and demonstrate that it has <u>addressed all requirements in component (b)</u>.</i></li> </ul> </li> <li>CY 2024 FWA Prevention Plan/workplan.                             <ul style="list-style-type: none"> <li><i>The information must be presented in a <u>format that aligns with the CCO’s policy and 2024 workplan</u>. For example, if the CCO’s policy and procedure includes sending service verification letters quarterly, the CCO must submit <u>results</u> for four quarters even if the activity crosses over the year. Meaning, if the assessment is completed the last quarter of every year, the CCO should include Q4 from the prior year and Qs 1-3 of the assessment year. Otherwise data from the last quarter will always be missing from the CCO’s analysis.</i></li> </ul> </li> </ul>



No.	Requirement	Minimum Expectation(s) and Best Practice(s)
	<p><i>*The work and activities reported in the Annual FWA Assessment Report must align with the prior year’s Annual FWA Prevention Plan. The work and activities must be clearly described and be specific to the reporting year.</i></p>	<ul style="list-style-type: none"> <li>• Sample service verification letter.</li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>• The CCO should present the summary of service verification results using a table format to clearly represent results of the activities.</li> </ul>
<p>9</p>	<p><b>Narrative Assessment of Annual FWA Activities– Outcomes:</b>                      A narrative and other information that advises OHA of:                      Outcomes of all of the <b>FWA prevention activities</b> undertaken by Contractor <u>during the prior Contract Year.</u></p>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• Annual FWA Assessment that includes the <b>outcomes of all FWA prevention activities</b> conducted during <b>CY 2024.</b> <ul style="list-style-type: none"> <li>– <i>The CCO must <u>identify this section</u> of the Annual FWA Assessment as “outcomes of FWA prevention activities” and include a narrative and other pertinent information regarding the outcomes of all FWA prevention activities conducted during CY 2024.</i></li> </ul> </li> <li>• CY 2024 FWA Prevention Plan/workplan.                             <ul style="list-style-type: none"> <li>– <i>The CCO must ensure it has included (within the Annual FWA Assessment) an outcome <u>for each FWA prevention activity</u> listed on the CY 2024 FWA Prevention Plan and workplan (e.g., risk assessment, encounter data validation, data mining activities, utilization management reviews, hotline or reporting mechanism monitoring, etc.).</i></li> <li>– <i>Outcomes of <u>FWA prevention activities already addressed within other elements</u> (i.e., FWA investigations – element 1, PI audits conducted in response to referrals and investigations – element 2, compliance reviews conducted in response to reported or suspected non-compliance – element 3, training and education provided – element 4, planned PI audits – element 5, planned compliance reviews – element 6, and service verification activities – element 8) do not need to be repeated in this element.</i></li> </ul> </li> </ul> <p><b>Best practice:</b></p>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
		<ul style="list-style-type: none"> <li>The CCO should also use this space to <u>describe</u> the information gleaned through the FWA prevention activities conducted and <u>identify</u> strengths, gaps, and challenges within the CCO’s program integrity program.</li> </ul>
10	<p><b>Narrative Assessment of Annual FWA Activities– Activities to Assess, Monitor, and Improve the Quality and Effectiveness of PI Audits and Investigations:</b> <i>*New element.</i></p> <p>A narrative and other information that advises OHA of:</p> <p>Activities undertaken by the Contractor to assess, monitor, and improve the <b>quality and effectiveness</b> (as defined in <i>Exhibit B, Part 4, Section 19, Para. b.</i>) of <b>PI audits and investigations</b>.</p> <p><i>Note: For the purposes of the Annual FWA Assessment Report, “effectiveness” is defined as: An effective Medicaid Program Integrity and risk management approach means that Contractor’s program integrity program or SIU has <b>internal controls</b> to <u>prevent</u> instances of Fraud, Waste, Abuse and other misconduct from occurring; to <u>detect</u> instances of potential Fraud, Waste, Abuse and other misconduct; and to <u>respond</u> appropriately when integrity breakdowns are identified.</i></p>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>Annual FWA Assessment that addresses specific activities the CCO has conducted to assess, monitor, and improve the <b>quality and effectiveness of PI Audits and investigations</b>. <ul style="list-style-type: none"> <li><i>The CCO must <u>identify this section</u> of the Annual FWA Assessment as “assessment of the quality and effectiveness of PI Audits and investigations” and ensure that it includes a <u>narrative describing specific activities</u>.</i></li> </ul> </li> </ul> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>When assessing the quality and effectiveness the CCO’s PI Audits and investigations specifically related to internal controls to prevent instances of FWA and misconduct, detect instances of FWA and misconduct, and respond to integrity breakdowns, <u>the CCO should consider the following:</u> <ul style="list-style-type: none"> <li><i>Were the PI Audits and investigations conducted and reported timely?</i></li> <li><i>Did the CCO complete the PI Audits and investigations in accordance with its own policies and State requirements?</i></li> <li><i>Did the CCO meet its internal goals (e.g., defined percentage) for conducting PI Audits?</i></li> <li><i>Did the CCO’s subcontractors meet expectations for conducting PI Audits and investigations, and timely reporting to the CCO?</i></li> <li><i>Did the PI Audits include a review of clinical and billing records to verify that no duplicate payments were made,</i></li> </ul> </li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
		<p><i>appropriate services were rendered and billed, appropriate codes were utilized, and accurate encounter data was reported to the State?</i></p> <ul style="list-style-type: none"> <li>– <i>Was appropriate corrective action taken when FWA and/or compliance issues were identified?</i></li> <li>– <i>Was suspected criminal activity reported to appropriate agencies, as required?</i></li> <li>– <i>Were overpayments reported timely by the CCO, providers, and/or subcontractors?</i></li> </ul>
<p>11</p>	<p><b>Narrative Assessment of Annual FWA Activities Improvements to Address Deficiencies:</b> <i>*Formerly element 10.</i></p> <p>A narrative and other information that advises OHA of:</p> <p>Proposed or future improvements to processes, policies, and procedures to address deficiencies identified through the FWA prevention activities conducted during the prior Contract Year.</p>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>• Annual FWA Assessment that addresses any proposed or future <b>improvements to processes, policies, and procedures</b> planned to address deficiencies identified through FWA prevention activities. <ul style="list-style-type: none"> <li>– <i>The CCO must <u>identify this section</u> of the Annual FWA Assessment as “improvements to address deficiencies identified” and ensure that it includes a <u>narrative describing specific proposed or future improvements</u>.</i></li> <li>– <i>The CCO’s narrative must also <u>provide brief context for the proposed or future improvements</u> (i.e., inclusion of deficiencies identified through FWA prevention activities that led to the proposed or future improvements).</i></li> <li>– <i>Proposed or future improvements to processes, policies, and procedures specific to FWA investigations and PI Audits already addressed within element 10 do not need to be repeated for this element. However, the CCO will need to clearly identify the relevant information regarding improvements within element 10.</i></li> </ul> </li> </ul> <p><b>Best practice:</b></p>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
		<ul style="list-style-type: none"> <li>• When addressing deficiencies identified through FWA prevention activities and determining process, policy, and/or procedure changes needed, <u>the CCO should consider the following:</u> <ul style="list-style-type: none"> <li>– <i>Does the CCO have inadequate or inconsistent written policies and procedures for program integrity?</i></li> <li>– <i>Is there a need to reinforce safety in reporting and encourage open lines of communication between the employees and the Chief Compliance Officer?</i></li> <li>– <i>Has there been an increase in employee non-compliance? Should the CCO review its system for training and effectively communicating the key information necessary for compliance?</i></li> <li>– <i>Does the CCO have an ineffective case tracking system?</i></li> <li>– <i>Is subcontractor oversight lacking in effective program integrity measures?</i></li> <li>– <i>Are the CCO’s processes for conducting routine monitoring and auditing of compliance risks not robust enough to ensure that the CCO’s employees and network providers are performing their respective duties in a manner that is safe, legal, transparent, and in compliance with its contracts?</i></li> <li>– <i>Is there inadequate representation (i.e., variety of backgrounds, including auditing, clinical, legal, and statistical experience) on the Regulatory Compliance Committee to oversee the organization’s compliance program and its compliance with the requirements under the contract?</i></li> <li>– <i>Is the compliance risk assessment not evaluating current risks facing the CCO?</i></li> <li>– <i>Has there been continued or repeated non-compliance indicating corrective actions have not been effective to reduce the potential for recurrence?</i></li> </ul> </li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
		<ul style="list-style-type: none"> <li>Proposed or future improvements may include, but are not limited to, changes to policies and procedures and/or contract amendments to specify expectations more clearly, increased monitoring activities, additional reporting requirements of subcontractors, revisions to training content, etc.</li> </ul>
12	<p><b>Narrative Assessment of Annual FWA Activities– Workplan Modifications:</b> <i>*Formerly element 11 with revised requirement language.</i></p> <p>A narrative and other information that advises OHA of:</p> <ol style="list-style-type: none"> <li>With particularity, whether work or activities identified in the <u>prior Contract Year’s</u> FWA Prevention Plan <b>were or were not implemented or were implemented differently</b> than initially described in the Contractor’s FWA Prevention Plan. <i>*Revised requirement language.</i></li> <li>An explanation of how and why the FWA prevention activities changed.</li> </ol>	<p><b>Relevant document(s):</b></p> <ul style="list-style-type: none"> <li>Annual FWA Assessment that addresses CY 2024 <b>workplan modifications</b>. <ul style="list-style-type: none"> <li><i>The CCO must <u>identify this section</u> of the Annual FWA Assessment as “CY 2024 workplan modifications” and ensure that it includes a narrative and any relevant information that summarizes the completion of FWA prevention activities outlined in the CY 2024 FWA Prevention Plan and workplan.</i></li> </ul> </li> <li>CY 2024 FWA Prevention Plan/workplan. <ul style="list-style-type: none"> <li><i>The CCO’s narrative (within the Annual FWA Assessment) must indicate whether <u>all the FWA prevention activities</u> outlined in the CY 2024 FWA Prevention Plan and workplan were <u>implemented as described</u>, and whether any FWA prevention activities were <u>not implemented at all</u> or were <u>implemented differently</u> than described.</i></li> <li><i>For any FWA prevention activities not implemented or implemented differently, the CCO must include an <u>explanation</u> (within the Annual FWA Assessment) of <u>how</u> and <u>why</u> the FWA prevention activities changed.</i></li> <li><i>Completion outcomes of planned PI Audits and planned compliance reviews, including explanations for how and why activities were not implemented or were implemented differently already addressed within element 5 (planned PI Audits and element 6 (planned compliance reviews) do not need to be repeated in this element. However, the CCO will</i></li> </ul> </li> </ul>

No.	Requirement	Minimum Expectation(s) and Best Practice(s)
		<p><i>need to clearly identify the relevant information regarding workplan modifications within the respective elements.</i></p> <p><b>Best practice:</b></p> <ul style="list-style-type: none"> <li>The CCO should <u>crosswalk its 2024 FWA Prevention Plan and workplan with the Annual FWA Assessment</u> to confirm outcomes for all FWA prevention activities are included within either element 5 (planned PI Audits), element 6 (planned compliance reviews), or element 9 (all remaining FWA prevention activities) <u>and</u> ensure that any activity not conducted or conducted differently than described is addressed (i.e., <i>what</i> changed and <i>why</i>).</li> </ul>