

# FDR Compliance Newsletter

Mercy Care Advantage, 4350 E. Cotton Center Blvd., Bldg. D, Phoenix, Arizona 85040

August 2018 | Issue 4

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## Archived FDR Newsletters

<https://www.mercycareplan.com/providers/FDR/>

This newsletter is provided solely for informational purposes and is not intended as legal advice. Questions concerning the application or interpretation of any law mentioned in this newsletter should be discussed with your attorney.

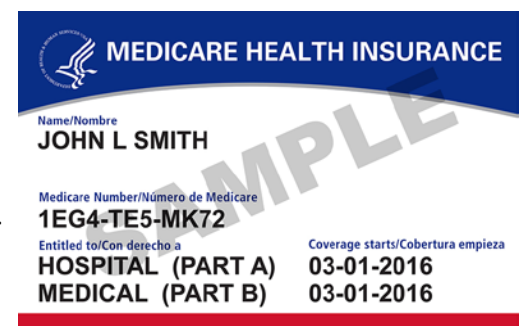


## New Medicare Cards are coming

In April 2018, the Centers for Medicare & Medicaid Services, (CMS) began mailing new Medicare ID cards with a new Medicare number to all individuals eligible for Medicare. The mailings will be staggered with completion expected by April 2019. Instead of a social security number, the new cards will have a new number that's unique to each person. The new Medicare number replaces the existing health insurance claim number on Medicare cards. The new Medicare number won't change Medicare benefits. Upon receiving their new card, individuals are being instructed to destroy their old Medicare card and start using the new card right away.

Medicare fraud continues to be a big problem and there are scams occurring to try and get the new Medicare card numbers. Individuals need to be reminded to protect their new Medicare card information. Neither Medicare nor Mercy Care Advantage will ever call a member to ask for their Medicare card number.

Below is a sample image of the new Medicare card.



# Medicare Parts C & D Audit Protocols

On April 2, 2018, the Centers for Medicare & Medicaid Services (CMS) announced an opportunity for sponsoring organizations and other stakeholders to comment on the proposed Medicare Parts C and D Program Audit Protocols and Timeliness Monitoring Data Requests and other supporting data collection instruments. The comment period closed on June 1, 2018. On July 9, 2018 CMS issued a memo announcing that they are reviewing and making changes in response to public comments received. In the near future CMS intends to release the revised audit protocols with an additional 30-day public comment period.

CMS anticipates the new audit protocols will still be approved by 2019, but stated they intend to delay implementation until audit year 2020. This will allow stakeholders sufficient time to fully implement the changes, program system changes, and practice pulling universes. Therefore, the current audit protocols and record layouts for universes used in 2017 and 2018 will continue to be utilized for audits conducted in 2019 (*under the existing OMB approved 0938-1000 which expires 04/30/2020*).

## Reporting FWA or Non-Compliance

FDR's should have their own internal processes in place for identification and reporting potential fraud, waste and abuse OR non-compliance, however, instances which impact Mercy Care Advantage business must be reported to us by using one of the following methods:

1. Contact Medicare Compliance directly by phone or email;
2. Use the fraud and abuse form available on our Plan website; <https://www.mercycareplan.com/fraud-abuse>
3. Call the AlertLine toll-free at **1-888-891-8910** (24 hours a day, 7 days a week)

## Training change

CMS is making changes to the training requirements that apply to FDRs. Starting in 2019, CMS will no longer require FDR employees to complete the CMS General Compliance and Fraud Waste and Abuse training. *This change does not mean that FDRs are exempt from complying with Medicare program requirements.*

The updated CMS Guidance is available at 83 FR 16440. If you have questions about this change, please contact Chris Macias.



## What is FDR?

**FDR = First tier, downstream and related entities**

A **first tier** entity is any party that enters into a written arrangement with our organization to provide administrative or health care services for our Medicare business.

A **downstream** entity is any party that enters into a written arrangement with persons or entities below the level of the first tier's arrangement with our organization. These arrangements continue down to the level of the ultimate provider of both health and administrative services.

A **related** entity is an entity that is linked to our organization by common ownership or control and provides functions to support our Medicare business.