

Quality health plans & benefits  
Healthier living  
Financial well-being  
Intelligent solutions



# FDR Compliance Newsletter

October 2016 – Issue 11

## Providers, enroll today

Make sure your patients have access to the drugs they need. After February 1, 2017, we can no longer cover claims for Medicare Part D drugs if you don't have an approved Medicare enrollment or if you've opted out.

The Centers for Medicare & Medicaid Services (CMS) encourages prescribers to enroll in Medicare as soon as possible. If you don't enroll, we can only provide members a 3-month provisional supply of a medication. We won't be able to cover additional prescriptions or refills of the same drug after the 90-day time period has ended.

### How to enroll

Visit the [CMS Prescriber Enrollment site](#) to:

- Enroll immediately
- Check your enrollment status
- Learn more about opting out

## FDR Guide updates

In July, we updated the [FDR Guide](#) to explain which employees must take CMS' General Compliance and Fraud, Waste and Abuse (FWA) training courses. We also added a link to our [Toolbox of Resources](#). There you'll find the training [grid](#) included in our July 2016 [FDR Compliance Newsletter](#).

You can find the most current version of our FDR materials at [www.aetnaeducation.com](http://www.aetnaeducation.com).

### In this issue

- [Providers, enroll today](#)
- [FDR Guide updates](#)
- [Failing to comply](#)
- [Fraud update](#)

### Quick links

- [Archived newsletters](#)
- [Aetna's FDR Guide](#) (updated 7/2016)
- [Medicare Managed Care Manual](#)
- [Medicare Prescription Drug Benefit Manual](#)
- [Aetna's Code of Conduct](#) (updated 10/2015)
- [CMS's General Compliance Training](#)
- [CMS's FWA Training](#)
- Exclusion lists:
  - [OIG's List of Excluded Individuals and Entities \(LEIE\)](#)
  - [GSA's System for Award Management \(SAM\)](#)

*Aetna maintains a comprehensive Medicare Compliance Program. It includes communication with Aetna Medicare FDRs. Dedicated to Aetna's Medicare Compliance Program is John Wells, Medicare Compliance Officer. He's based in Maryland. You can send questions or concerns for John and/or his Medicare compliance subject matter experts to [MedicareFDR@aetna.com](mailto:MedicareFDR@aetna.com).*

## Report to Aetna actual or potential fraud, waste and abuse OR non-compliance:

FDRs can have their own internal processes in place for reporting, however, instances which impact Aetna's Medicare business should be reported back to us by using one of the methods below:



By phone:  
**1-888-891-8910**  
(7 days a week, 24 hours a day)



Over the internet:  
<https://aetna.alertline.com>



By mail:  
**Corporate Compliance**  
**P.O. Box 370205**  
**West Hartford, CT 06137-0205**



## What is an FDR

### First tier, downstream and related entities

First Tier Entity is any party that enters into a written arrangement, acceptable to CMS, with a Medicare Advantage Organization or Part D plan sponsor or applicant to provide administrative services or healthcare services to a Medicare eligible individual under the Medicare Advantage program or Part D program.

Downstream Entity is any party that enters into a written arrangement, acceptable to CMS, with persons or entities involved with the Medicare Advantage benefit or Part D benefit, below the level of the arrangement between a Medicare Advantage Organization or applicant or a Part D plan sponsor or applicant and a first tier entity. These written arrangements continue down to the level of the ultimate provider of both health and administrative services.

Related Entity means any entity that is related to a Medicare Advantage Organization or Part D sponsor by common ownership or control and:

- Performs some of the Medicare Advantage Organization or Part D plan sponsor's management functions under contract or delegation; or
- Furnishes services to Medicare enrollees under an oral or written agreement; or
- Leases real property or sells materials to the Medicare Advantage Organization or Part D plan sponsor at a cost of more than \$2,500 during a contract period

## Failing to comply

We take action if you don't follow applicable laws, rules or regulations. Our response to non-compliance or FWA depends on the severity of the issue.

To address non-compliance we may:

- Provide training
- Request a corrective action plan (CAP)
- Terminate your contract

### What's a CAP?

CAPs ensure you take action to correct and prevent future non-compliance. When we request CAPs from FDRs, we require the completion of a root cause analysis. This ensures you've identified the underlying problem.

In response to your root cause analysis, you must provide a written CAP that:

- Addresses the root cause of failures
- Details your planned corrective actions
- Has timeframes for completing the corrective actions

You should also show your corrective actions were implemented and effective.

### Investigations into FWA

We collaborate with law enforcement on investigations of FWA. If you commit FWA, you could be subject to criminal or civil prosecution. If convicted criminally, you could face:

- Fines

- Imprisonment
- Exclusion from federal health care programs
- Loss of licenses

### Report your concerns

You are required to report concerns to Aetna when they impact Aetna's Medicare business. If you identify non-compliance that impacts Aetna, let us know. We'll work with you to ensure the issue is corrected. You can find ways to report on our [poster](#) and in our [Code of Conduct](#).

## Fraud update

In June of 2016 the [Medicare Fraud Strike Force](#) led a nationwide takedown. It resulted in criminal charges against 301 individuals who are alleged to have caused \$900 million in false billings.

You can help fight fraud by reporting non-compliance and fraud, waste and abuse (FWA). Preventing and correcting FWA helps ensure that younger generations will have Medicare when they need it.

### Look out for this

Here are a few things you can look for:

- **Expired supplies or drugs.** If the price is too good to be true, there may be a reason. Wholesalers or manufacturers may attempt to sell or resell fake, expired, or illegal drugs and supplies.
- **Free health care services or screenings.** Often "free" services require members to provide personal information. That can result in identity theft, or fraudulent billings.
- **Members asking for services or tests they don't need.** Members may be recruited to request services that aren't needed. Often it's because they are being offered money or gift cards in exchange for their Medicare number.

Visit [www.stopmedicarefraud.gov/](http://www.stopmedicarefraud.gov/) to learn more. Or review the key indicators of FWA in [CMS's FWA Training](#).

### Report concerns to Aetna

If you see something, say something. Aetna has a special investigations unit (SIU) that investigates FWA. You can call SIU at **1-800-338-6361**. Or send an e-mail to [aetnasiu@aetna.com](mailto:aetnasiu@aetna.com).