

# FDR Compliance Program - Annual Attestation Form

**PLEASE DO NOT COMPLETE THIS FORM UNLESS YOU HAVE RECEIVED A REQUEST FROM MOLECULAR TESTING LABS TO SUBMIT A SIGNED FDR ATTESTATION.**

This form is intended for Vendors classified as First Tier Entities that offer administrative services and/or healthcare services or products for MTL's applicable products and services. By completing this attestation, you are confirming your dedication to adhere to the regulations set forth by the Centers for Medicare & Medicaid Services. These regulations encompass all services and/or products provided by Vendor as MTL's Downstream Entity for MTL's Medicare products and services. It is important to note that these requirements also extend to any Downstream Entities utilized for MTL's applicable products and services.

Vendor Name: \_\_\_\_\_

By: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

**Please initial the blank line in each section below to indicate your agreement to comply with that section.**

**I. Code of Conduct**

*42 CFR 422.503 and 423.504(b)(4)(vi)(A)*

Vendor agrees to distribute a Code of Conduct (either its own, or MTL's Code of Conduct) in compliance with the applicable regulations.

\_\_\_\_ Vendor agrees to distribute the Code of Conduct to all relevant employees and independent contractors within 90 days of their date of hire, following any updates or revisions, and on an annual basis thereafter.

**II. General Compliance and Fraud, Waste, and Abuse Training**

\_\_\_\_ Vendor will effectively disseminate its policies on General Compliance and Fraud, Waste, and Abuse to all eligible employees and independent contractors through its own Code of Conduct or the Code of Conduct provided in MTL's Compliance Program Guide. It will adhere to the stipulated distribution timeline of the Code of Conduct to all eligible employees and independent contractors within 90 days of their employment commencement, following any revisions, and on an annual basis thereafter.

**III. Office of Inspector General and General Services Administration's System for Award Management Exclusion Screening**

*42 CFR 422.503, 422.752(a)(8), 423.504(b)(4)(vi)(F), and 423.752(a)(6)*

\_\_\_\_ Vendor conducts thorough screenings of its employees and downstream entities against the exclusion lists maintained by the US Department of Health & Human Services Office of Inspector General and the General Services Administration's System for Award Management prior to their hiring or contracting. Subsequently, these screenings are conducted on a monthly basis for all individuals such as current employees, new employees, temporary employees, volunteers, contractors, and

consultants to verify their eligibility for participation in federal programs. It is imperative for Vendor to remove any individual or entity identified on these exclusion lists from working on products and services provided to MTL.

#### **IV. Reporting Mechanisms**

*42 CFR 422.503 and 423.504(b)(4)(vi)(E)*

\_\_\_\_ Vendor ensures that its employees and downstream entities comprehend the disciplinary standards and obligation to report all suspected or known instances of non-compliance and/or Fraud, Waste, and Abuse activity. Additionally, Vendor maintains and enforces disciplinary standards in a prompt and consistent manner. This information is communicated to relevant employees and downstream entities, outlining procedures for reporting suspected or detected non-compliance or potential Fraud, Waste, and Abuse. It is emphasized that individuals are obligated to report without fear of retaliation or intimidation. Vendor is encouraged to review MTL's Code of Conduct for information on reporting methods.

#### **V. Offshore Operations**

For any services rendered by Vendor that entail the receipt, processing, transferring, handling, storing, or accessing of Protected Health Information (PHI), Vendor (select one):

\_\_\_\_ Would like to formally request permission to provide services on behalf of MTL Offshore. Prior to proceeding, Vendor will diligently complete and submit a MTL Offshore Approval Form for official endorsement, as required by MTL, before transferring any member information offshore.

\_\_\_\_ Does not engage in any offshore projects nor does it have subsidiary entities carrying out offshore projects.

\_\_\_\_ Already conducts offshore services and has obtained prior approval from MTL to do so.

#### **VI. Downstream Entity Oversight** (only applicable to those who subcontract delegated functions to another entity/vendor)

Vendor (select one):

\_\_\_\_ Utilizes downstream entities for MTL products and services and implements necessary measures to ensure their compliance with the requirements stated in this attestation, in addition to relevant laws, policies, and regulations.

\_\_\_\_ Does not utilize downstream entities to perform services for MTL-delegated work.

#### **VII. Operational Oversight**

\_\_\_\_ Vendor hereby affirms that internal oversight is regularly conducted on the products and/or services provided for MTL Medicare products and services to ensure adherence to applicable laws, policies, and regulations. Vendor confirms capability to furnish all necessary reporting data for audit and reporting purposes as needed.

#### **VIII. Record Retention**

*§ 422.504 Contract provisions*

\_\_\_\_ Vendor hereby affirms its commitment to adhering to Medicare laws, regulations, and CMS requirements pertaining to the retention of records for a minimum period of 10 years. This obligation extends to both employee documentation and documents related to delegated functions.

**IX. FDR Point(s) of Contact**

Please provide the designated point(s) of contact within your organization for all pertinent Compliance communications:

Name(s): \_\_\_\_\_

Title(s): \_\_\_\_\_

Email(s): \_\_\_\_\_

Phone number(s): \_\_\_\_\_

Name(s): \_\_\_\_\_

Title(s): \_\_\_\_\_

Email(s): \_\_\_\_\_

Phone number(s): \_\_\_\_\_

**Medicare Compliance Program Guidelines Attestation**

\_\_\_\_ I hereby certify, in my capacity as an authorized representative of the Vendor, that the aforementioned statements are accurate and truthful to the best of my knowledge. Furthermore, Vendor commits to retaining documentation substantiating the aforementioned statements and will provide such evidence upon request. It is understood by Vendor that failure to produce this evidence may lead to a request for a Corrective Action Plan or other contractual resolutions, including potential contract termination.