



Mercy Care Advantage  
4750 S. 44th Place, Suite 150  
Phoenix, AZ 85040

## **CY2026 Annual FDR Attestation for Medicare Compliance Program Requirements**

Dear: First Tier Delegated Entity,

Your Organization is receiving this notice because your Organization is contracted with Mercy Care as a First Tier, Downstream, or Related Entity (FDR) for our Mercy Care Advantage Plan. Under our Medicare contract with the Centers for Medicare & Medicaid Services (CMS) Mercy Care is committed to ensuring proper communication and education for employees and FDRs to provide education regarding the importance of conducting business ethically and in compliance with the federal laws applicable to the Medicare program, which includes CMS rules, regulations, and sub-regulatory guidance.

As a contracted FDR, your Organization is required to have processes in place to help prevent, detect, and correct noncompliance with the Medicare compliance program requirements. Your Organization's employees and sub-contractors must abide by federal laws related to the Medicare program as well as CMS rules, regulations, and sub-regulatory guidance.

The Medicare Compliance Program requirements can be referenced in Center for Medicare & Medicaid Services Medicare Managed Care Manual – Chapter 21 Compliance Program Guidelines available at:

<http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/mc86c21.pdf>

Mercy Care has an FDR web page available on the Mercy Care Provider website. This web page contains information and resources such as our Medicare Compliance Program and compliance policies, Aetna/CVS Code of Conduct and FDR newsletters to assist our contracted FDRs with Medicare program compliance. We encourage FDRs to routinely check for new information and resources at <https://www.mercycareaz.org/providers/newsletters-notices.html>

### **ACTION REQUIRED**

- Please review the information in the enclosed Annual FDR Attestation and have it signed by the person within your Organization who is authorized to do so, such as the Compliance Officer or other executive management personnel.
- Please return your Organization's signed Annual FDR Attestation by **April, 15 2026**.
- Please email to: [MercyCareAdvantageMedicareCompliance@AETNA.com](mailto:MercyCareAdvantageMedicareCompliance@AETNA.com)

If you have any questions about the information in the attestation or need to report identified non-compliance or potential fraud, waste, and abuse, please contact me directly. Contracted FDRs must promptly disclose identified compliance deficiencies and/or suspected FWA involving the Mercy Care Advantage line of business within 72 hours of identification even if the issue is still being fully investigated to determine root cause.



## Annual FDR Attestation

Please review the requirements listed below to confirm your Organization and contracted downstream entities (if applicable) have implemented the following measures to promote and help prevent, detect, and correct non-compliance with the Medicare compliance program requirements:

- 1. Maintenance of a Code of Conduct and Compliance Policies:** Our Organization has established and publicized compliance policies and procedures, standards of conduct, and compliance reference material that meet the requirements outlined in 42 CFR § 422.503(b) (4) (vi)(A) and 42 CFR § 423.504(b)(4)(vi)(A) that are distributed to all applicable Organization officers, board members, employees and downstream entities at the time of hire, appointment or contracting and at least annually thereafter or when requirements change that require updating.
- 2. Exclusion / Debarment:** Our Organization conducts screening against the US Department of Health & Human Services Office of Inspector General (OIG) and the General Services Administration's System for Award Management (SAM) exclusion lists prior to hire or contracting, and monthly thereafter, for employees and contracted downstream entities. Our Organization will promptly remove any person or entity from work on Mercy Care Advantage if identified on these lists.
- 3. Reporting Mechanisms:** Our Organization communicates to employees how to report suspected or detected non-compliance or potential FWA, and that it is their obligation to report without fear of retaliation or intimidation against anyone who reports in good faith.
- 4. General Compliance and Fraud, Waste and Abuse ("FWA") Training:** Our Organization will conduct appropriate training and education for employees and downstream entities that includes but is not limited to: general compliance and FWA training, specialized training including training on laws, regulatory requirements, and sub-regulatory guidance and. Training is provided at the time hire, annually thereafter, or when regulatory or sub-regulatory changes occur.
- 5. Oversight and Monitoring:** Our Organization will conduct internal oversight of the services that we perform for Mercy Care and Mercy Care Advantage to ensure that compliance is maintained with applicable laws, rules, and regulations. This includes robust oversight of any approved downstream entities to ensure they comply with all the requirements described in this attestation. Our Organization agrees to provide required information and participate in monitoring projects and/or audits conducted by CMS and/or Mercy Care.
- 6. Offshore Contracting:** Our Organization agrees to first notify Mercy Care before sending any work to being performed by an offshore contractor. Our Organization agrees to provide Mercy Care with a completed Offshore Services Attestation for review and consideration of such requests.
- 7. Record Maintenance:** Our organization will retain documented evidence of compliance with all of the above, including training and exclusion screening (i.e., sign-in sheets, certificates, attestations, OIG, and GSA search results, etc.) for at least ten (10) years, and provide such documentation to Mercy Care or CMS upon request.



### Organization Information and Signature

I certify to the best of my knowledge, information, and belief, that our Organization and contracted downstream entities have implemented the required processes and measures required to support Medicare compliance program requirements.

Our Organization agrees to maintain and produce supporting evidence documentation in accordance with federal regulations, which is no less than 10 years. We understand the inability to produce this evidence may result in a request for a Corrective Action Plan or other contractual remediation. In addition, our Organization acknowledges that a violation of any laws, regulations, or Mercy Care policies is grounds for disciplinary action, up to and including termination of our Organization's contractual status.

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Authorized representative printed name and title

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Signature of authorized representative Date

Phone number of authorized representatives \_\_\_\_\_

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Organization name

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Organization mailing address