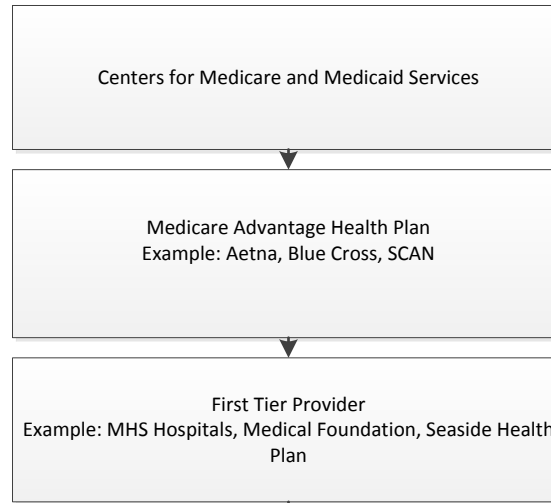


MHS

Medicare Advantage Attestation Process

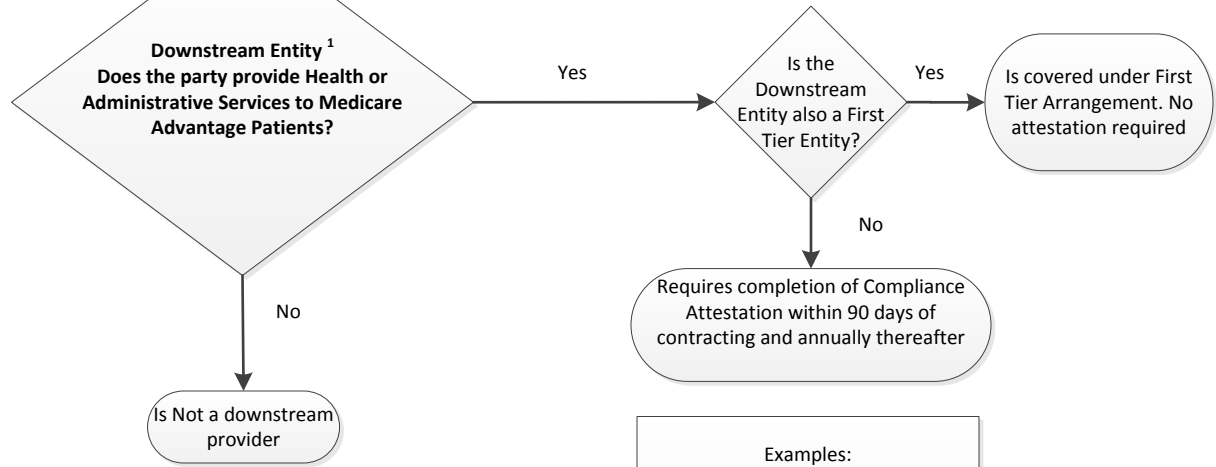
Organization Chart and Downstream Entity Decision Tree



¹Downstream 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.

Below are some factors to consider in determining whether an entity is a downstream entity:

- The function to be performed by the delegated entity;
- Whether the function is something the sponsor is required to do or to provide under its contract with CMS, the applicable federal regulations or CMS guidance;
- To what extent the function directly impacts enrollees;
- To what extent the delegated entity has interaction with enrollees, either orally or in writing;
- Whether the delegated entity has access to beneficiary information or personal health information;
- Whether the delegated entity has decision-making authority (e.g., enrollment vendor deciding time frames) or whether the entity strictly takes direction from the sponsor;
- The extent to which the function places the delegated entity in a position to commit health care fraud, waste or abuse; and
- The risk that the entity could harm enrollees or otherwise violate Medicare program requirements or commit FWA.



- Examples:
- Landscaping
 - Housekeeping
 - Property Maintenance

- Examples:
- Billing Companies
 - Collection Agencies
 - Contracted Physicians
 - DME Suppliers
 - Sub Capitation Providers
 - IT companies that retain patient information