

FDR Newsletter

QUARTER 4 | JANUARY 2023

IN THIS ISSUE

2022 B – UHP
Compliance
Attestation

QUICK LINKS

- [OIG's List of Excluded Individuals and Entities \(LEIE\)](#)
- [System for Award Management \(SAM\)](#)
- [Banner University Health Plan's Compliance Program](#)

The Banner – University Health Plans Compliance Program is committed to compliance and meeting requirements of all applicable laws and regulations of CMS and AHCCCS.



IN THE NEWS

Thank You!

The B – UHP team would like to thank all our FDRs, vendors, partners, and providers for all that you've done to continuously serve our members. We wish you all a healthy and happy New Year!

2022 B – UHP Annual Compliance Attestation

The B - UHP team would also like to take this opportunity to thank our FDR's who completed the 2022 Compliance Attestation. Your partnership is greatly appreciated.

If you have any questions or concerns in regard to the 2022 FDR Compliance Attestation, please feel free to reach out to the B – UHP Vendor Oversight Team at BUHPVendorOversight@bannerhealth.com.

Compliance Program

Banner Medicaid and Medicare Health Plans are committed to compliance and meeting requirements of all applicable laws and regulations of CMS and AHCCCS. A key component of our commitment to meeting our obligations under these governmental programs and contractual relationships includes adopting standards that uphold these principles, which is the basis for this Compliance Program. The Compliance Program is described in several documents including the Code of Conduct, policies and procedures, as well as the Fraud, Waste, and Abuse Plan. Please review our Compliance Program and Fraud, Waste and Abuse Plan (January 1st through December 31st), which includes the Banner Medicaid and Medicare Health Plans' code of conduct as well as the Banner Health Code of Conduct. As part of our compliance program, please review the FDR Guide to help ensure your compliance with CMS, AHCCCS, and Banner Medicaid and Medicare Health Plans' requirements.

www.banneruhp.com/materials-and-services/compliance-program

Training

2023 Banner Medicaid and Medicare Health Plans FDR General Compliance and Fraud, Waste, and Abuse Training

Banner Medicaid and Medicare Health Plans' 2023 General Compliance and FWA training is now available on our website. FDRs can take our training or a comparable training. FDRs are required to complete an attestation and submit it to Banner Medicaid and Medicare Health Plans indicating that the employees involved in the administration of Medicare Part C and D benefits or involved in the Medicaid lines of business have satisfied the training requirement.

For FDRs (Subcontractors) under the Medicaid or Medicare lines of business, the following are required training elements:

- a. Detailed information about the Federal False Claims Act,
- b. The administrative remedies for false claims and statements,
- c. Any State laws relating to civil or criminal liability or penalties for false claims and statements, and
- d. The whistleblower protections under such laws.

Documentation of internal training can be through an individual certificate or a list showing the information for all of those who completed the training using the Banner Medicaid and Medicare Health Plans training on the website or a comparable training.

If you identify or suspect FWA or non-compliance issues, immediately notify the Banner Insurance Division Compliance Department:

24- hour hotline (confidential and anonymous reporting): (888) 747-7989

Preclusion List

The preclusion list is sent out monthly and lists providers and prescribers who are precluded from receiving payment for Medicare Advantage (MA) items and services or Part D drugs furnished or prescribed to Medicare beneficiaries.

Requires denial of payment for items or services furnished by an individual on the Preclusion List. Effective as of the April Preclusion List, any prescriber or provider is to be precluded from all B – UHP lines of business (AHCCCS and Medicare).

Email: BHPCompliance@BannerHealth.com

Secure Fax: (520) 874-7072

Compliance Department Mail:

Banner Medicaid and Medicare Health Plans Compliance Department

2701 E Elvira Rd

Tucson, AZ 85756

Contact the Medicaid Compliance Officer Terri Dorazio via phone (520) 874-2847 (office) or (520) 548-7862 (cell) or email Theresa.Dorazio@BannerHealth.com

Contact the Interim Medicare Compliance Officer Kristina Corlette via phone (602) 747-2431 or email: BMAComplianceOfficer@BannerHealth.com

Banner Medicaid and Medicare Health Plans Customer Care Contact Information

B – UHP Customer Care

Banner – University Family Care/ACC (800) 582-8686

Banner – University Family Care/ALTCS (833) 318-4146

Banner – Medicare Advantage Dual (HMO D-SNP) (877) 874-3930

Banner Medicare Advantage Customer Care

Banner Medicare Advantage Prime HMO (844) 549-1857

Banner Medicare Advantage Plus PPO (844) 549-1859

Banner Medicare RX PDP (844) 549-1859

AHCCCS Office of the Inspector General

Providers are required to report any suspected FWA to the Banner Medicaid Health Plans Compliance Department and directly to AHCCCS OIG:

Provider Fraud

- In Arizona: (602) 417-4045

- Toll Free Outside of Arizona Only: (888) ITS-NOT-OK or (888) 487-6686

Website: www.azahcccs.gov (select Fraud Prevention)

Mail:

Inspector General

801 E Jefferson St.

MD 4500

Phoenix, AZ 85034

Member Fraud

- In Arizona: (602) 417-4193

- Toll Free Outside of Arizona Only: (888) ITS-NOT-OK or (888) 487-6686

Medicare

Providers are required to report all suspected fraud, waste, and abuse to the Banner Medicare Health Plans Compliance Department or to Medicare

Phone: (800) HHS-TIPS (800-447-8477)

Fax: (800) 223-8164

Mail:

US Department of Health & Human Services

Office of the Inspector General

ATTN: OIG HOTLINE OPERATIONS

PO Box 23489

Washington, DC 20026