



# FINAL MAPD PROGRAM AUDIT PROTOCOL TRAINING

AUGUST 17TH, 24TH, 26TH, 2021 • 2:00-4:00 PM EDT



## Medicare Part C and Part D Compliance Program Effectiveness (CPE) Program Audit Protocol and Data Request August 26, 2021

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# CPE Program Audit Protocol Overview

- Program Audit Protocol
  - Audit Elements Tested
  - Method of Evaluation
- Program Audit Data Request
  - Review Technical Specifications



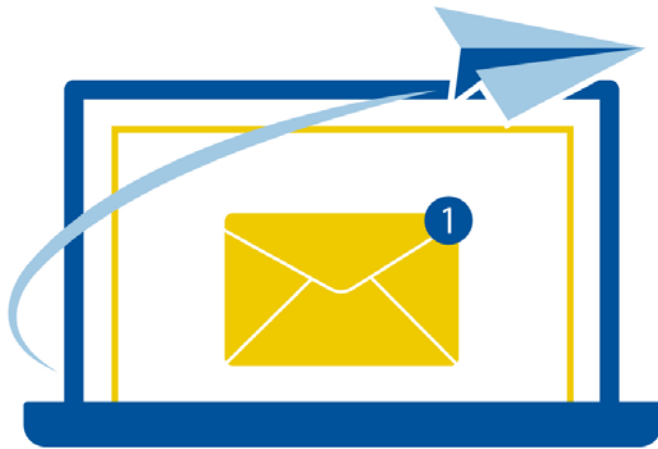


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# CPE Program Audit Protocol



- Specifications and tools are for auditing/monitoring activities, not interpreting policy
- Not all data points are used to determine compliance



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# Audit Elements Tested

- Prevention Controls and Activities
- Detection Controls and Activities
- Correction Controls and Activities







# Compliance Oversight Activities (COA) Record Layout Instructions (1 of 2)

- Submit a list of all compliance oversight activities that occurred during 26-weeks prior to and including the date of the audit engagement letter
  - Monitoring, auditing, and investigations of internal operations and first tier entities
  - Activities initiated, performed, or closed, related to the Sponsoring organization's Medicare Advantage (Part C) and/or Prescription Drug (Part D) business during the universe request period





# Compliance Oversight Activities (COA) Record Layout Instructions (2 of 2)

- Daily activities should be rolled up into an aggregate time period of one month
- Consistent naming conventions must be used
  - Agent Broker or Agent/Broker
- All fields must be populated
  - Enter “0” in Column ID I if there are no deficiencies
  - Enter NA in Column ID J if there are no deficiencies as identified in Column I





# Supplemental Documentation

- Compliance Officer Questionnaire
- First Tier, Downstream, and Related Entities (FDR) Operations Oversight Questionnaire
- Customized Organizational Structure and Governance PowerPoint Presentation
- Standards of Conduct/Code of Conduct document
- Risk Assessments and Compliance Performance Mechanisms
- Audit and Monitoring Work Plans (for both internal operations and FDRs)





# Universe Integrity Testing

- Integrity testing conducted using a desk review
- Completeness and accuracy check of all supplemental documentation
  - Questionnaires are complete
  - Document requests represent those in effect during scope of universe request
- Completeness and accuracy check of Universe Table 1
  - Submitted according to instructions within the table







# Sample Selection



## 6 tracer case sample selections

- Provided to organization two weeks prior to entrance conference
- Must be uploaded to HPMS prior to entrance conference
- Submitted materials reviewed with tracer case summary prior to onsite audit

20 samples of audit participants and 2 First Tier Entities (FTEs)



# Tracer Case Summary Submissions (1 of 2)

- Each summary must include:
  - Issue/Activity Overview
  - Compliance and business units involved in detecting and correcting issue
  - Detailed explanation of issue/activity
  - Root cause analysis
  - Actions taken
  - Processes and procedures affected by the issue(s)/activity





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# Tracer Case Summary Submissions (2 of 2)

- Each summary must include:
  - Steps taken to correct the issue(s)/deficiencies at SO and/or FDR levels
  - How issue was escalated
  - All relevant communications within SO and with its FDRs regarding the issue
  - Each prevention control and safeguard implemented in response





# Interviews

- Compliance Officer
- Individuals responsible for Special Investigations (SIU) and Fraud, Waste, and Abuse (FWA) oversight
- First Tier, Downstream, Related Entity (FDR) oversight





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## Program Audit Protocols



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# CPE Compliance Standard 1.1

(1 of 2)

- Assess Sponsoring Organization's Compliance Policy and Procedures and Standards of Conduct:
  - Commitment to comply with Federal and State standards
  - Compliance expectation
  - Compliance program implementation
  - Employee guidance on potential compliance issues
  - Identify how to report compliance issues and to who
  - Plan of action for compliance issues
  - Policy of non-intimidation and non-retaliation





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# CPE Compliance Standard 1.1

(2 of 2)

- 20 audit participant samples and 2 FTE samples selected to ensure accessibility of:
  - Compliance policies and procedures
  - Standards of Conduct
  - For FTEs: Attestation of receipt of policies and procedures and standards of conduct





# CPE Compliance Standard 1.2

- Designated an employee as the compliance officer
  - Must be employee of organization, parent organization, or corporate affiliate
- Compliance Office and Compliance Committee demonstrated accountability and reporting of compliance issues to management and governing body
- Governing body exercised oversight of Medicare compliance program
  - \*Discussion may include oversight on preliminary issues discovered during audit field







# CPE Compliance Standard 1.3

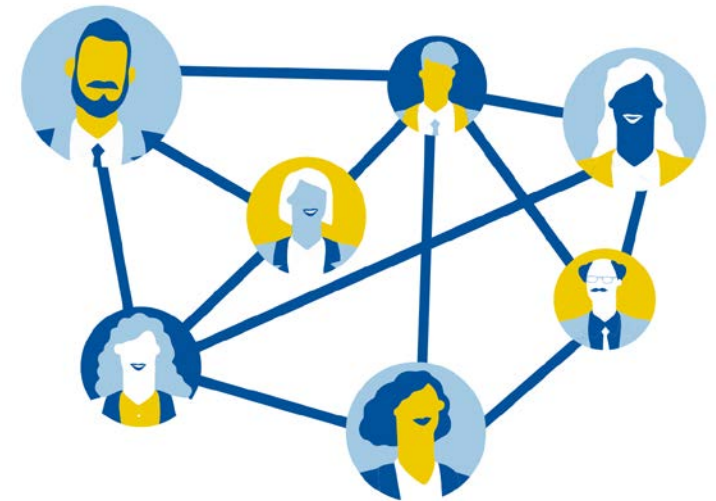
- Determine whether compliance training was provided annually to the Sponsoring Organization's
  - Compliance Officer
  - Employees
  - Chief Executive Office
  - Other senior administrators, managers, and governing body





# CPE Compliance Standard 1.4

- Ensure Sponsoring Organization established effective lines of communication between:
  - Compliance Officer
  - Members of Compliance Committee
  - Employees
  - Managers and Governing Body
  - First Tier, Downstream, Related Entities
- Implemented reporting system for compliance issues
  - Must allow a method for anonymous and confidential reporting





# CPE Compliance Standard 1.5

- Ensure Sponsoring organization has well-publicized disciplinary standards
  - Articulate expectations for reporting compliance and assist in their resolution
  - Identify noncompliance or unethical behavior
  - Provide for timely, consistent, and effective enforcement of disciplinary standards

— COMPLIANCE —





# CPE Compliance Standard 1.6

- Sponsoring organization implemented effective system for routine monitoring and identification of compliance risks
  - Includes internal monitoring/audits operations and FTEs







# CPE Compliance Standard 1.7

- Determine Sponsoring organization promptly responded to compliance issues
  - Investigating potential compliance problems
  - Correcting compliance problems promptly and thoroughly





# Questions?

- Questions related to the program audit process can be sent to the program audit mailbox at [part\\_c\\_part\\_d\\_audit@cms.hhs.gov](mailto:part_c_part_d_audit@cms.hhs.gov).

