

Important Reminder for Medicare Advantage Providers Review Policies for Preventing Medicare Fraud, Waste and Abuse

As a mission-driven company, Florida Blue strives to offer an affordable, high-quality health care network for our members and the communities we serve. We comply with all Centers for Medicare & Medicaid Services (CMS) requirements and are committed to serving our members with the highest integrity and ethical business conduct.

Every year, we share our standards of conduct with our first tier, downstream, and related entities¹ (FDR). CMS requires us to ensure our FDRs adhere to these standards or adopt and follow a code of conduct particular to their own organization.

The code of conduct should reflect a commitment to detecting, preventing, and correcting noncompliance with Medicare requirements when delivering Medicare services. FDRs also are required to complete General Compliance and Fraud, Waste and Abuse (FWA) Training. To help, we are sharing additional details below to support your compliance efforts.

Compass Code of Ethical Business Conduct

Our [Compass Code of Ethical Business Conduct](#) contains the principles and values by which we operate. It is also available to you by visiting floridablue.com, selecting **Providers**, then **Ethics and Compliance**.

You may adopt our values and principles as your own or implement a similar program for your practice. If you create your own program, be sure it includes, at a minimum, those elements described at 42 CFR §§ 422.503(b)(4)(vi)(A) and 423.504(b)(4)(vi)(A) or our Compass Code of Ethical Business conduct.

Compliance Information

You may also access and review general compliance information under our [Ethics & Compliance section](#) (visit floridablue.com, select **Providers**, and then **Ethics and Compliance**). This section includes:

- Frequently Asked Questions for First Tier, Downstream and Related Entities
- Medicare Compliance and Fraud, Waste and Abuse (FWA) Training
- The Office of Inspector General (OIG) and General Services Administration (GSA) exclusion lists

The Florida Blue Business Ethics, Integrity & Compliance Division will contact select providers by email in the coming months to discuss these CMS requirements.

Confidential Reporting

Our Compliance and Ethics [policy](#) includes a link to [EthicsPoint](#), a third-party vendor. EthicsPoint is a confidential, easy-to-use tool for contacting the Florida Blue Business Ethics, Integrity & Compliance Division to ask questions or report compliance and ethics issues or concerns.

¹First Tier Entity is any party that enters into a written arrangement acceptable to CMS with a Medicare Advantage Organization or Part D plan sponsor or applicant to provide administrative services or health care services to a Medicare eligible individual under the MA program or Part D program. (See 42 C.F.R. § 423.501).

When filing a report through EthicsPoint, you can choose to remain anonymous. You can also report insurance fraud and abuse by filing a report with Florida Blue's Special Investigation Unit. The reporting form can be found at floridablue.com/general/fraud-form.

If You Have Questions

Please call our Business Ethics, Integrity & Compliance Division at 800-477-3736 ext. 56300 if you need more information.

You can also contact our Special Investigation Unit by calling our Fraud Hotline at 800-678-8355 or emailing specinvestunit@bcbsfl.com.