



The

Vendor Vine

VIVA HEALTH, Inc. provides this newsletter as a resource to its contracted entities that meet the CMS definition of a first tier, downstream or related entity (FDR). This newsletter is published annually and will be available on our website at <http://www.VivaHealth.com/FDR>.

We hope you find this newsletter helpful. We value your feedback and suggestions! If there are topics you would like for us to address in a future newsletter, please let us know. You can reach out to one of the contacts listed in the “Your VIVA HEALTH Contacts” box on the last page of this newsletter.

VIVA MEDICARE Earns High Marks From CMS

For 2019, VIVA MEDICARE earned **4 out of 5 stars** from CMS on its Medicare quality performance. The score is based on 48 different quality measures that illustrate everything from customer service to how well the plan helps its members stay healthy. In addition, VIVA MEDICARE received the highest members’ rating of a plan given in Alabama according to the 2019 *Medicare & You Handbook* for the **ninth year in a row**.



Rated Four Stars or Higher
for the Last Four Years



Highest Members’ Rating
of a Plan Given in Alabama

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*We appreciate our
FDRs’ support in
helping us achieve these
excellent ratings!*

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VIVA HEALTH'S Annual Compliance And Offshore Attestation

FDRs are required to complete VIVA HEALTH's Annual Compliance and Offshore Attestation. This form is available on our website at <https://www.VivaHealth.com/FDR>.

If you have not done so already, please go to our website to obtain the form, complete it, and return it to VIVA HEALTH by November 30, 2018. Please remember, the attestation must be completed by an authorized representative of your organization.

VIVA MEDICARE Is Growing!

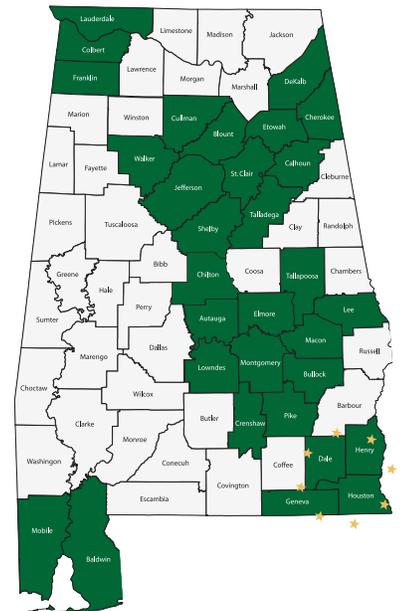
VIVA MEDICARE is expanding its service area for 2019 to include Dale, Geneva, Henry, and Houston counties in Alabama. This expansion into the Dothan market will help increase our footprint in the Southeast region of the state.

If you receive eligibility or other data feeds from VIVA MEDICARE, you will begin to see membership in the new group numbers and Provider System (PORG) we have established for the expansion.

Members residing in the expansion counties will have the same VIVA MEDICARE product offerings as other members in the state with the exception of our VIVA MEDICARE Me product (this plan is currently available only to members in and around the Birmingham area).

Although the Dothan expansion counties are effective 1/1/19, the Annual Election Period has begun and runs through 12/7/18. This means we are currently enrolling members in these counties and you may begin seeing membership in these counties through eligibility feeds (if applicable).

If you have any questions or need more detailed information about the new group numbers, PORG, or about the expansion, please feel free to reach out to us for assistance. *We are glad that you are growing with us!*



Being Audit Ready

As we head toward the end of the calendar year, we can close the door on the 2018 CMS Program Audit schedule. Typically, CMS sends the last Program Audit notices out by the first of October to allow enough time for these audits to be completed by the end of the year. So while we can relax a little right now and look forward to the holiday season, we have to stay diligent because the new audit season begins in February.

CMS announced that the 2018 Audit Program Protocols will be used again in 2019. This could possibly allow CMS to audit even more plans in 2019 because the protocols have changed very little since 2017. For a copy of the CMS Program Audit Protocols, see the link below.

CMS Program Audit: <https://www.cms.gov/Medicare/Compliance-and-Audits/Part-C-and-Part-D-Compliance-and-Audits/ProgramAudits.html>

It is CMS' goal to audit each Medicare Advantage plan every three years. Currently, CMS is not meeting this goal, but they are managing to audit more plans each year. VIVA HEALTH's last Program Audit was in 2014, so we are definitely back in the 2019 audit pool. Without knowing CMS' schedule, we must assume we are on the CMS Program Audit schedule and must be audit ready in 2019.

As a VIVA HEALTH FDR, you are considered to be VIVA HEALTH in the eyes of CMS. This means CMS, as well as VIVA HEALTH, expect all FDRs performing delegated services to be audit ready. Being audit ready is more than just pulling data and producing data. It means staying up-to-date with the constantly evolving CMS rules and expectations. It requires proactively reviewing your processes and data to identify potential faults and correcting them as soon as possible. It also means communicating regularly with your VIVA HEALTH contact to facilitate the flow of information in both directions. Being audit ready does not mean that mistakes will not happen, but it means mistakes are identified and corrected before they become systemic issues.

We value your participation with VIVA HEALTH and your effort to do things right. If you have any questions or concerns about being audit ready, please contact us (see "Your VIVA Contacts"). You may also reach our Compliance Officer as follows:

Charlie Cutcliffe, *VIVA HEALTH Compliance Officer*
205-558-7606 or by email at ccutcliffe@uabmc.edu



Business Email Compromise (BEC)

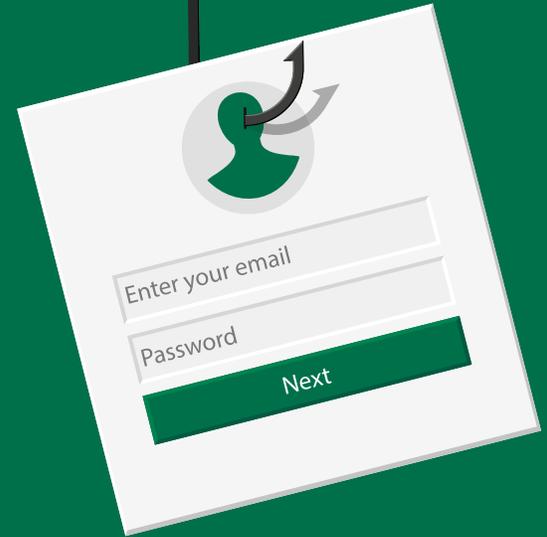
The Office for Civil Rights announced that Anthem, Inc. has agreed to pay \$16 million for a breach, the largest in health data history, that exposed PHI of 79 million people. This breach was facilitated by a phishing email that at least one employee clicked on which provided hackers access to Anthem's network. A civil settlement of \$115 million was approved to be split among the plaintiffs in the class-action lawsuit against Anthem.

Phishing emails remain the No. 1 threat companies face in terms of Information Security. Although there are many different approaches, the scammers typically try to impersonate an executive or use persuasive language in their phishing emails to trick recipients into such things as replying back with sensitive information, clicking on links to fake websites, or downloading attachments that contain malware (including ransomware).

On June 29, the FBI released its 2017 Internet Crime Report:

- **301,580** complaints made, exceeding \$1.4 billion in losses
- **25,344** reports of phishing incidents, resulting in losses of **\$29,703,421**
- Phishing and email scams continue to be a major concern

It's critical that our business associates (BAs) educate their employees on the dangers of phishing emails. Such attacks could not only compromise our BA's data, but could also impact VIVA HEALTH's data that is stored, transmitted, or accessed by our BAs.



What to watch for in phishing emails?

- Known sender name, but "mailto" doesn't match – example below:
From: Lynn Murphree
[mailto:admin@company-execs.com]
- Unknown sender
- Unexpected attachment
- Sender name in the address does not match the name in the email signature
- Poor grammar
- Sense of urgency
- Asking for sensitive information
(banking information, passwords, etc.)

For additional information regarding cybersecurity education, please visit the Department of Health and Human Services' website at <https://www.hhs.gov/hipaa/for-professionals/security/guidance/cybersecurity/index.html>.



Changes To Medicare FDR Compliance and Fraud Waste & Abuse (FWA) Training for 2019

Beginning 1/1/19, CMS is no longer requiring FDRs to complete CMS-published training modules to satisfy the annual Compliance and FWA training requirement. CMS' stated goal is to reduce administrative burden and to provide each Plan Sponsor with flexibility to oversee FDR compliance as it deems necessary.



While the requirement for Compliance and FWA training utilizing the CMS-published training modules is no longer required, VIVA HEALTH will continue to require all FDRs to complete Compliance training, and in some cases, FWA training. A FDR's Compliance and FWA training (if applicable) must address the 7 Elements of an Effective Compliance Program as defined by the Department of Health and Human Services – Office of Inspector General (OIG) in 64 FR 61893. We expect that FDRs performing functions that could involve Medicare FWA provide appropriate training for their employees and stakeholders.

To avoid creating duplicative training requirements for our FDRs, VIVA HEALTH will accept the following Compliance and FWA training modules:

- FDR developed training (provided it meets the OIG requirements as stated previously);
- America's Health Insurance Plan's (AHIP's) Compliance/FWA Training found at: <https://www.ahipmedicaretraining.com/ext/ahip/login.php>;
- VIVA HEALTH's training; or
- CMS-published training for providers (if the information remains publically available).

Please remember that FDRs are responsible for identifying the individuals involved in Medicare operations that are required to complete training. FDRs must maintain appropriate documentation of training completion.

Should you have any questions about this topic, please feel free to reach out to us.

Your VIVA HEALTH Contacts

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