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| Department: COMPLIANCE | Version #: 6 |
| Title: Access to Facilities and Records | |
| Process Owner: Chief Compliance Officer | Date Created: 02/05/2018 Last Reviewed Date: 4/26/2023 |
| Document Type: Policy | Approver(s): ATRIO Policy Review Committee |
| References: 42 CFR 422.501; 42 CFR 423.505; MMCM Chapter 11, Section 110.4.3 | Date Approved: 11/7/2019 |

Printed copies are for reference only. Please refer to the S/Policies and Procedures for the most recent version.

Purpose: To comply with the Code of Federal Regulations, Centers for Medicare and Medicaid, State and other regulatory bodies laws, rules and regulations requiring access to facilities and records.

Summary: To ensure the Department of Health and Human Services (HHS), the Comptroller General, or their designee, and other regulatory bodies have access to facilities and records relating to the ATRIO Health Plan' contract with Centers for Medicare and Medicaid Services.

Scope: This policy applies to all ATRIO, ATRIO Employees and Contractors (collectively, ATRIO Health Plans), and First Tier, Downstream and Related Entities (FDRs).

Definitions:

1. **FDR:** First Tier, Downstream and Related Entities.
 - a. **First Tier Entity:** Any party that enters into a written arrangement, acceptable to CMS, with ATRIO Health Plans to provide administrative services or health care services to an enrollee in ATRIO's Medicare Advantage or Dual Special Needs plan.
 - b. **Downstream Entity:** Any party that enters into a written arrangement, acceptable to CMS, with persons or entities involved with the MA benefit or Part D benefit, below the level of the arrangement between ATRIO Health Plans and a First Tier Entity. These written arrangements continue down to the level of the ultimate provider of both health and administrative services.
 - c. **Related Entity:** Any entity that is related to ATRIO Health Plans by common ownership or control and: (a) performs some of ATRIO Health Plans' management functions under contract or delegation; or (b) furnishes services to Medicare enrollees under an oral or written agreement.

Policy: ATRIO Health Plans and FDRs, will allow HHS, the Comptroller General, or regulatory bodies access to facilities and records sufficient to:

- Accommodate periodic auditing of the financial records (including data related to Medicare utilization, costs, encounter data, and computation of the bid proposal); To enable CMS to inspect or otherwise evaluate the quality, appropriateness and timeliness of services performed under the contract and the facilities of the organization;
- To enable CMS to audit and inspect any books and records of the ATRIO Health Plans that pertain to the ability of the organization to bear the risk of potential financial losses, to services performed, or determinations of amounts payable under the contract;
- To properly reflect all direct and indirect costs claimed to have been incurred and used in the preparation of the bid proposal;
- To establish component rates of the bid proposal for determining additional and supplementary benefits;
- To determine the rates utilized in setting premiums for State insurance agency purposes, and for other government and private purchasers;
- Records relating to ownership and operation of the ATRIO Health Plans' financial, medical, and other record keeping systems; and maintain the following records:
 - Asset acquisition, lease, sale, or other ownership issues;
 - Agreements, contracts, and subcontracts;
 - Franchise, marketing, and management agreements;
 - Schedules of charges for the ATRIO Health Plans' fee-for-service patients;
 - Documentation of matters pertaining to costs of operations;
 - Documentation of amounts of income received by source and payment;
 - Cash Flow statements; and
 - Any financial reports filed with other Federal programs or State authorities;
 - Financial statements and Federal income tax or informational return

Record Retention:

ATRIO Health Plans' agrees to maintain for a period of 10 years books, records, documents, and other evidence of accounting procedures and practices that are sufficient to accommodate periodic auditing or a longer period as required by law.

References: