## CMS PROVIDER PARTICIPATION CONTRACTS AND/OR AGREEMENTS MATRIX- 1

COUNTY:

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IPA/Group/Provider Name					
First Tier & Downstream Contracts and/or Agreements					
CMS REGULATIONS – 42 CFR 422  * In addition to the CFR citations provided below, the following contract provisions are required in agreements between MA organizations and provider and suppliers of health care as stated in Chapter 11 of the Medicare Managed Care Manual Section 100.4.	Section/Page	Section/Page	Section/Page	Section/Page	Section/Page
All Provider Contracts					
HHS, the Comptroller General or their designees have the right to inspect, evaluate and audit any pertinent contracts, books, papers, and records for a period of 10 years from the final date of the contract period or the completion of any audit, whichever is later.  422.504(i)(2)(i) and (ii);					
Proviiders and suppliers agree to safeguard beneficiary privacy and confidentiality and assure the accuracy of beneficiary health records.  Chapter 11, Medicare Managed Care Manual					
Hold Harmless Provisions - Providers may not hold beneficiary liable for payment of fees that are the legal obligation of the MAO.  422.504(g)(1)(i); 422.504(i)(3)(i)					
Accordance with MAO's contractual obligations A provision requiring that any services performed will be in consistent and comply with the MA organization's contractual obligations					
422.504(i)(3)(iii);)					
Prompt Payment The agreement specifies a prompt payment requirement, the terms and conditions of which are developed and agreed to by the Mao and contracted providers and suppliers. Chapter 11, Medicare Managed Care Manual					
Accountability provision – Reporting Responsibilities					
Delegated activities and reporting responsibilities must be specified.  422.504(i)(3)(ii); 422.504(i)(4)  (i)					
Accountability Provision – Revocation.					

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