

Important Information Regarding Annual Attestation of Compliance

Dear Molina Medicare/MMP First Tier Entity (FTE):

Molina Healthcare Inc. (MHI) contracts with the Centers for Medicare and Medicaid Services (CMS) to provide Medicare Advantage Prescription Drug (MAPD) Plans and Medicare Medicaid Plans (MMP/Molina Dual Options). CMS requires us to ensure that the delegated entities (FTEs) who assist us in providing services related to the operation, administration and/or care of our Medicare members are meeting the CMS compliance program requirements.

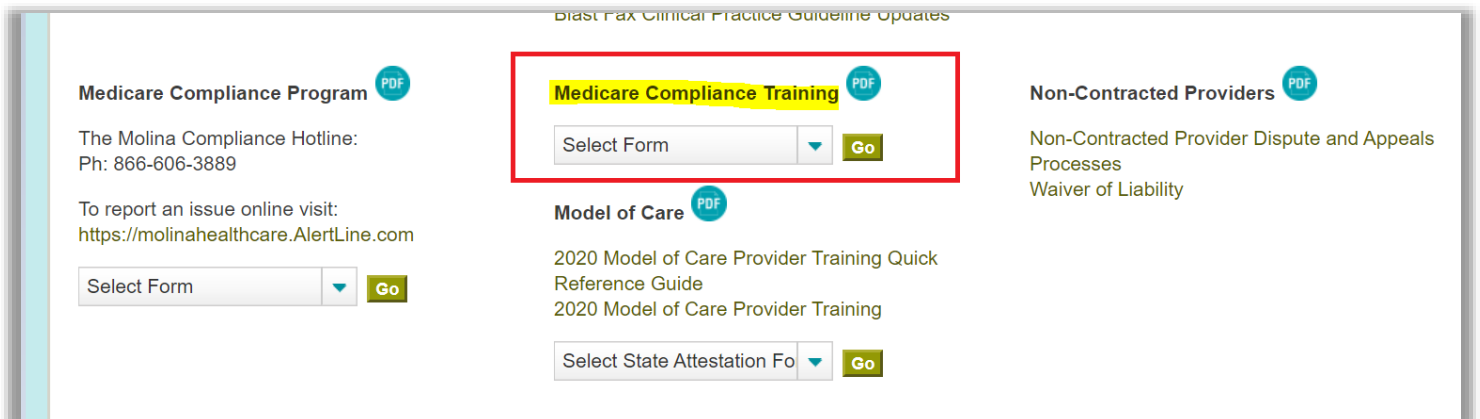
Molina fulfills the oversight requirements by collecting annual attestations from each of its FTEs. Molina also audits several delegated entities each year to validate the attestations. We ask that you complete the following documents:

FTE Compliance Attestation Form Offshore Attestation Form

The documents are available online at www.molinahealthcare.com in the “Health Care Professionals” webpage. First select the appropriate State located at the top of the webpage in the drop-down list, then scroll down to the bottom of the page and select the appropriate Line of Business.



Once you are in the Health Care Professionals webpage then scroll down to “Medicare Compliance Training” towards the bottom where the forms can be retrieved from the selected drop-down list.



ACTION REQUIRED

Complete and submit your attestation in one of the two ways described below. Submission through the Industry Collaboration Effort (ICE) website is the preferred method, but if you experience difficulties you may submit via email.
**Note: 1st time users of ICE website will need to follow separate "ICE Attestation Login Instructions" to create an ID and password.*

Due Date: Monday, November 30, 2020

SUBMISSION OF ATTESTATION VIA ICE WEBSITE

1. Select the ICE Login Page at the following link with your *ICE log in ID and password, <https://www.iceforhealth.org/clientadmin/loginIce.asp> **REMINDER: Use Google Chrome!**
2. Complete the attestation electronically.
3. Complete the Offshore Subcontracting Attestation if your organization offshores any protected health information.
4. After completion you must hit the **submit** button at the bottom-center of the page. You will receive an email confirmation of the submission. The save button will not save or submit the form.

SUBMISSION OF ATTESTATION VIA EMAIL

1. Complete the attached FTE Attestation.
2. Complete the attached Offshore Attestation if your organization offshores any protected health information.
3. Email to MHIAttestations@MolinaHealthCare.Com.

For any questions or to notify us if you are not the appropriate person to respond to this request, please send an email to MHIAttestations@MolinaHealthCare.Com.

Thank you in advance for your prompt attention to this request.

Molina Compliance