



OFFSHORE SUBCONTRACTOR DISCLOSURE AND ATTESTATION

CMS requires Medicare Advantage Organizations (MAOs) to notify CMS of MAO's and first-tier, downstream and/or related entities' (FDRs) offshore subcontractor activities.* As a contracted provider in the Delta Dental Medicare Advantage Network™, you are a FDR and in accordance with this regulation and your Delta Dental Medicare Advantage Network Addendum, you must complete and submit this required attestation to Delta Dental within 10 calendar days if you are currently contracted with an offshore subcontractor. This is an ongoing obligation and this form must be completed immediately upon contracting with an offshore subcontractor in the future.

Please note: A separate form must be completed for each office location.

SECTION A: Dental Entity Information	
Organization/Practice Name	
Tax Identification Number	Email Address
Physical Street Address (include suite)	
City	County
State	Zip
SECTION B: Offshore Subcontractor Information	
Offshore Subcontractor Name	
Offshore Subcontractor Country(ies)	
Offshore Subcontractor Address	
Offshore Subcontractor City, State, Zip Code	
<i>If multiple offshore locations, attach another sheet of paper with the full address of each offshore location, including the country, which will receive, process, transfer, handle, store or access PHI.</i>	
Describe Offshore Subcontractor Functions _____ _____	
Proposed or Actual Effective Date of Offshore Subcontractor ____ / ____ / _____ (MM/DD/YYYY)	

SECTION F: Authorized Signature	
By signing below, I attest that I have carefully reviewed the information provided and attest to its completeness and accuracy, and that I have the authority to fill out this form on behalf of the dental entity.	
Printed Name of Authorized Representative _____	
Title of Authorized Representative _____	
_____ Signature	____ / ____ / ____ Date Signed (MM/DD/YYYY)

Upon completion, please return the completed form to:

Email: medicareadvantage@deltadentalky.com

Mail: Delta Dental of Kentucky
 Attention: Provider Relations
 PO Box 242810
 Louisville, KY 40224

*The Centers for Medicare and Medicaid Services (CMS) defines an offshore subcontractor as follows: "The term subcontractor refers to any entity or organization that a Medicare Advantage Organization or Part D sponsor contracts with to fulfill or help fulfill requirements in their Part C and/or Part D contracts. The term subcontractor includes all first-tier, downstream and/or related entities (FDRs) as defined by Medicare regulations. The term offshore refers to any country that is not within the United States or one of the United States territories (American Samoa, Guam, Northern Marianas, Puerto Rico and Virgin Islands). Examples of countries that meet the definition of 'offshore' include Mexico, Canada, India, Germany, and Japan. Subcontractors that are considered offshore can be either American-owned companies with certain portions of their operations performed outside the United States or foreign-owned companies with their operations performed outside the United States. Offshore subcontractors provide services that are performed by workers located in offshore countries, regardless of whether the workers are employees of American or foreign companies."