

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 $^{\text{TM}}$, 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			
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.			
Describe Offshore Subcontractor Functions			
Proposed or Actual Effective Date of Offshore Subco	ontractor		

SECTION C: Precautions for Personal Health Information (PHI)				
Description of the PHI that will be provided to the offshore entity (select all that apply):				
[] Names [] Ages [] Dates of Birth [] Addresses [] Phone Numbers	[] Full Social Security Numbers [] Partial Social Security Numbers [] Medicare HICN/MBI Numbers [] Delta Dental Member ID Numbers [] Claims History		[] Diagnosesis [] Medical/Dental History [] Banking/Financial Information [] Other (specify):	
Tax Identification Numbe	er	Email Addre	ess	
Physical Street Address	(include suite)			
City		County		
State		Zip		
SECTION D: Attestation of Safeguards to Protect Beneficiary Information in the Offshore Subcontract				
Offshore subcontracting arrangement has policies and procedures in place to ensure Medicare beneficiary PHI and other personal information remains secure				
[] Yes [] No				
Offshore subcontracting arrangement prohibits subcontractor's access to Medicare data not associated with the Dental Entity's contract with the offshore subcontractor				
[] Yes [] No				
Offshore subcontracting arrangement has policies and procedures in place that allow for immediate termination of the subcontract upon discovery of a significant security breach				
[] Yes [] No				
Offshore subcontracting arrangement includes all required Medicare Advantage plan language (e.g. records retention requirements, compliance with Medicare Part C and D requirements, etc.)				
[] Yes [] No				
SECTION E: Attestation of Audit Requirements to Ensure Protection of PHI				
Dental entity will conduct an annual audit of the offshore subcontractor				
[] Yes [] No				
Audit results will be used by the organization to evaluate the continuation of its relationship with the offshore subcontractor				
[] Yes [] No				
Dental entity agrees to share the offshore subcontractor's audit results with Delta Dental of Arizona upon request [] Yes [] No				

SECTION F: Authorized Signature	
By signing below, I attest that I have carefully review completeness and accuracy, and that I have the authentity.	•
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."