Medicare Advantage and Part D Compliance Program and FDR Oversight Consulting

Last reviewed October 2026 · https://www.integralhs.com/medicare-advantage-part-d-compliance-program

What to have ready

These items shorten the gap assessment. Each ties to the regulation (eCFR current as of September 30, 2026) or to Chapter 21 / Chapter 9.

- Your compliance program description, showing measures to "prevent, detect, and correct" noncompliance and fraud, waste and abuse (422.503(b)(4)(vi) [https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-B/part-422/subpart-K/section-422.503]).
- The compliance officer's job description and employer of record (422.503(b)(4)(vi)(B)(1) [https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-B/part-422/subpart-K/section-422.503]).
- Compliance committee charter and the last year of minutes.
- Training records for the last year, including orientation for new employees, executives, managers and governing body members (422.503(b)(4)(vi)(C)(2) [https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-B/part-422/subpart-K/section-422.503]).
- Your monitoring and auditing work plan, including any audits of first tier entities (422.503(b)(4)(vi)(F) [https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-B/part-422/subpart-K/section-422.503]).
- A current FDR inventory, with the services each entity provides (422.500 definitions [https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-B/part-422/subpart-A/section-422.500]).
- Your FDR contracts and delegation agreements, checked for the ongoing monitoring clause (422.504(i)(4)(iii) [https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-B/part-422/subpart-K/section-422.504]).
- Evidence of FDR monitoring. Chapter 21 / Chapter 9 says "Sponsors must conduct specific monitoring of first tier entities to ensure they fulfill the compliance program requirements" (section 50.6.6 [https://www.cms.gov/regulations-and-guidance/guidance/manuals/downloads/mc86c21.pdf]).
- Exclusion screening records for employees, governing body members and FDRs. The guidelines call for review of the OIG LEIE and the GSA exclusion list "prior to the hiring or contracting" and "monthly thereafter" (section 50.6.8 [https://www.cms.gov/regulations-and-guidance/guidance/manuals/downloads/mc86c21.pdf]). The manual names the older EPLS system; GSA moved EPLS into SAM in July 2012 (OIG bulletin [https://oig.hhs.gov/documents/root/10422/Special%20Advisory%20Bulletin%20on%20the%20Exclusion%20from%20Participation%20in%20Federal%20Health%20Care%20Programs.pdf]), so IHS builds screening against SAM.gov. That is IHS's reading; the manual and the current regulation text at 42 CFR 455.436 still name EPLS.
- A list of any compliance functions handled outside the sponsor, its parent or a corporate affiliate (section 40 [https://www.cms.gov/regulations-and-guidance/guidance/manuals/downloads/mc86c21.pdf]).