



**ACO Participant and Preferred Provider  
Compliance Program Attestation 2021**

<b>Trinity Health ACO Participant or Preferred Provider Name and Address</b>	
--	--

Trinity Health ACO is enrolled as an Accountable Care Organization ("ACO") participating in the Medicare Next Generation Model Program. The Centers for Medicare and Medicaid Services ("CMS") requires Trinity Health ACO to maintain a compliance plan that meets certain minimum elements as specified in Next Generation Model Participation Agreement. These requirements include the provision of compliance training for the ACO and its ACO Participants and Preferred Providers.

As an ACO Participant or Preferred Provider in Trinity Health ACO, the above named organization attests to the following:

- Trinity Health ACO's Code of Conduct and Integrity & Compliance policies have been provided to all Participants and Preferred Providers;
- Trinity Health ACO's compliance training program has been provided to ACO Participants and Preferred Providers and is also available at <https://trinityhealth.wistia.com/medias/6tvwbdzc39?wvideo=6tvwbdzc39>;
- Participants and/or Preferred Providers in Trinity Health ACO have reviewed the Integrity & Compliance Program materials and training program referenced above;
- Participants and/or Preferred Providers agree to abide by the Trinity Health ACO Code of Conduct and Integrity & Compliance Program policies throughout its participation in Trinity Health ACO;
- Participants and/or Preferred Providers agree to timely notify Trinity Health ACO of any probable violations of law related to its participation in Trinity Health ACO, and understands Trinity Health ACO is obligated to report probably violation of law to an appropriate law enforcement agency.

Signature:	Date:
Print Name:	
Title:	

***Complete Page 2 if this attestation is intended to cover more than one individual.***

Please scan and email or mail the completed form to: [Dan.Such@NM.org](mailto:Dan.Such@NM.org) FAX: 708-923-4268



The following providers participating in Trinity Health ACO are covered by this attestation:

Signature	Printed Name	NPI#