



# Compliance Training Attestation-Medicare Shared Savings

Practice Name: \_\_\_\_\_

Practice TAX ID# \_\_\_\_\_

Date: \_\_\_\_\_

The staff from this MSSP practice attest that we have attended the Arvon CIN Compliance Training and reviewed the Compliance Program information for the Medicare Shared Savings Program. We understand that it is our responsibility to report all actual or potential non-compliance issues to the compliance officer or to the confidential Trust Line.

**ACO Confidential Compliance Hotline-Trust Line:** 800-805-2283

**ACO Compliance Officer:** Patrice Gray [patrice.gray@corewellhealth.org](mailto:patrice.gray@corewellhealth.org)

Compliance information located on: <https://www.beaumont-ac.org/about-us/compliance>

Practice Attestation Representative Printed Name	Signature

Please return to Arvon CIN. [felicia.brown2@corewellhealth.org](mailto:felicia.brown2@corewellhealth.org) or fax: 947-522-0038 (Attn: Felicia Quality department)