

## Medicaid Provider Enrollment Disclosures: Convictions Snapshot

Individual Medicaid providers must disclose convictions for their involvement in any offense related to Medicare, Medicaid, or the Children’s Health Insurance Program (CHIP) since those programs began.[1] Provider entities are also required to disclose convictions of persons who have ownership or control interests in the provider, or who are agents or managing employees of the entity.[2]

The State Medicaid agency (SMA) must deny or terminate any provider’s enrollment if any person with a 5 percent or more ownership interest in the provider has been convicted of any offense related to that person’s involvement with the Medicare, Medicaid, or CHIP program in the last 10 years. The SMA can make an exception if it determines that such action is not in the best interests of the Medicaid program. The SMA must put such a determination in writing.[3]

SMAs may deny enrollment or re-enrollment for other convictions without making any such determination.[4] The SMA may also deny enrollment or terminate enrollment of any provider who did not accurately disclose convictions of program-related offenses.[5] Other convictions can lead to exclusion from the program, which prevents enrollment or leads to termination. Convictions leading to mandatory exclusion include those related to controlled substances. Convictions leading to permissive exclusion include fraud offenses involving other government programs.[6] Similarly, providers are excluded from Federal health care programs if they are debarred from contracting with Federal agencies. Debarment can result from conviction of various financial crimes.[7]

SMAs have the discretion to apply provider-screening methods more stringent than, or in addition to, those required by the Federal regulations.[8] For example, New York’s Medicaid program may deny enrollment to a provider convicted of any crime involving theft or fraud or that is an offense against the public administration of public health and morals.[9]

Since June 1, 2016, SMAs are required under the Affordable Care Act to verify convictions of owners, agents, and managing employees of providers categorized as high risk. SMAs conduct a fingerprint-based criminal background check.[10, 11, 12] SMAs that did not implement fingerprint-based background checks by June 1, 2016, were required by then to have a CMS-approved plan in place to implement the checks.[13]

### For More Information

CMS will provide more enrollment information, including information about a recent report from the U.S. Department of Health and Human Services, Office of Inspector General, in the forthcoming “Medicaid Provider Enrollment” Toolkit. The toolkit will be posted to the Medicaid Program Integrity Education page at <https://www.cms.gov/Medicare-Medicaid-Coordination/Fraud-Prevention/Medicaid-Integrity-Education/edmic-landing.html> on the CMS website.



To see the electronic version of this E-Bulletin and E-Bulletins on other topics posted to the Medicaid Program Integrity Education page, visit <https://www.cms.gov/Medicare-Medicaid-Coordination/Fraud-Prevention/Medicaid-Integrity-Education/edmic-landing.html> on the CMS website.

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## References

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