



Data Exchange (DEX)

State User Manual

Version 1.0 | 5/27/2026

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1. Introduction

The Data Exchange (DEX) application is a Centers for Medicare & Medicaid Services (CMS) system used by State Medicaid Agencies (SMAs) to report, share, and review adverse provider actions, including terminations and exclusions. DEX supports program integrity efforts by enabling timely and standardized data sharing across states and CMS.

This user manual provides a high-level overview of DEX functionality, navigation, and common user tasks.

2. Purpose of DEX

The primary purpose of DEX is to allow states to report adverse provider actions to CMS, enable states to view adverse actions reported by other states, support compliance with federal Medicaid program integrity requirements, and improve transparency and coordination across Medicaid programs.

3. User Roles and Access

DEX supports multiple user types with distinct responsibilities. This manual is divided into guidance specific to **State Medicaid Agency (State User)** and **CMS (Federal User)** roles.

3.1 State Medicaid Agency (State User)

State users are responsible for reporting and managing adverse provider actions originating within their state.

Typical responsibilities include reporting single and bulk provider terminations, ensuring appeal rights are exhausted prior to submission, uploading supporting documentation (e.g., termination letters), monitoring CMS review status and responding to corrections, and viewing adverse actions reported by other states.

State users must have an active CMS Enterprise Portal account and approved DEX access with state-level permissions.

3.2 CMS User

CMS users are responsible for reviewing, approving, and publishing adverse actions submitted by states.

Typical responsibilities include reviewing submitted termination records for completeness and compliance, approving or returning submissions with comments, publishing approved adverse actions to DEX for state visibility, and supporting program integrity oversight and data quality.

CMS users must have an active CMS Enterprise Portal account and approved DEX access with CMS-level review permissions.

4. Requesting Access to DEX via CMS Enterprise Portal

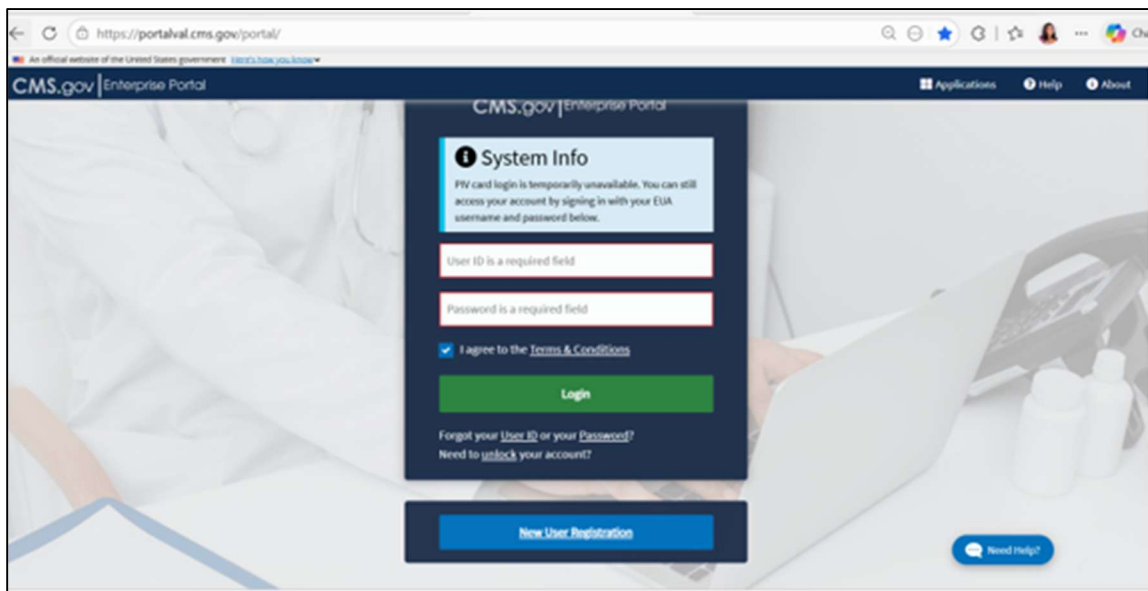
4.1 Overview

Users must request access to the DEX System through the CMS Enterprise Portal. This process includes user registration, application selection, and account creation.

4.2 Step 1: Access the CMS Enterprise Portal

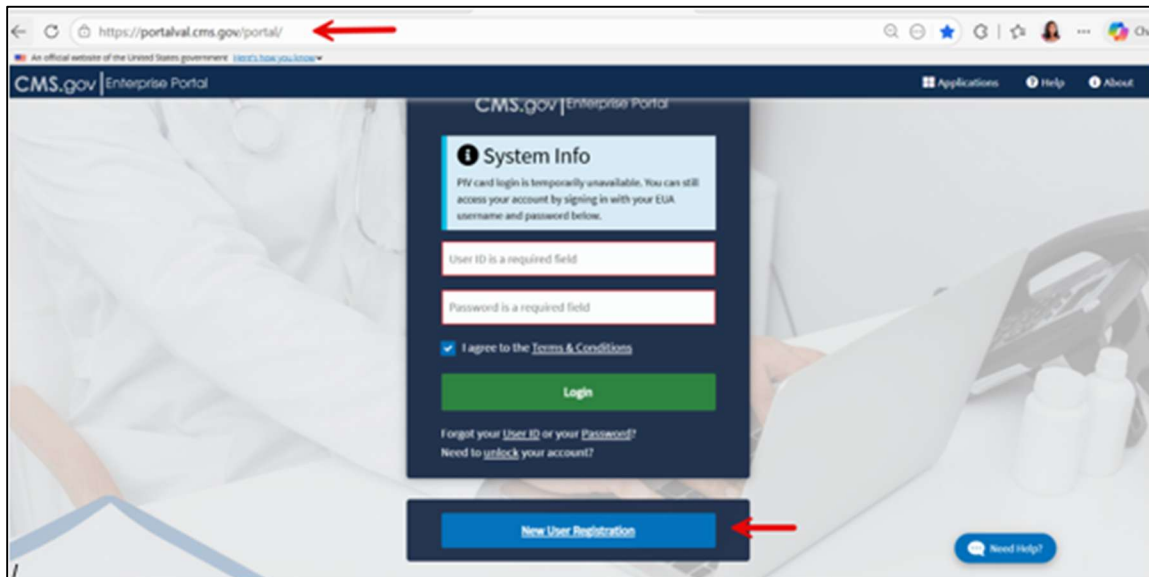
1. Navigate to the CMS Enterprise Portal: <https://portal.cms.gov/portal/>
2. On the login screen:
 - a. Enter your User ID and Password if you already have an account.OR
 - b. Select **New User Registration** to create a new account.

Note: If Personal Identity Verification (PIV) login is unavailable, users can log in using their Enterprise User Administration (EUA) credentials.



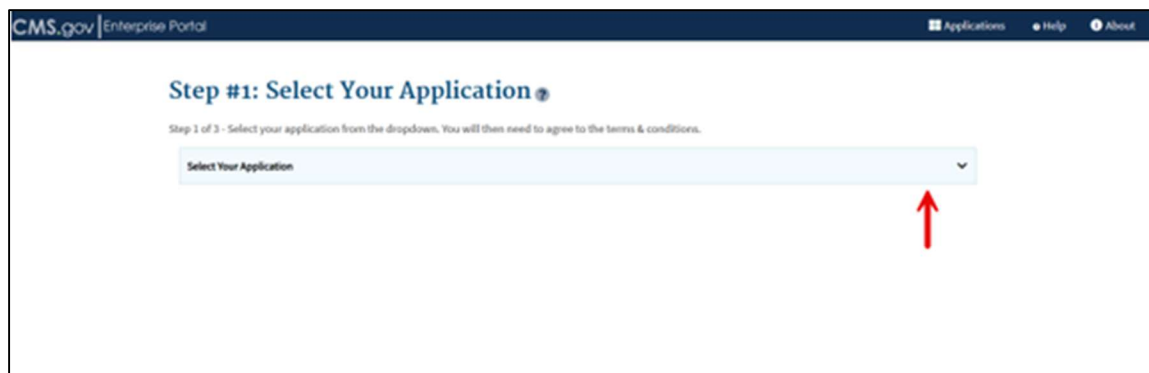
4.3 Step 2: Begin New User Registration

1. Select the **New User Registration** button.
2. The system will display Step 1 of 3: Select Your Application.

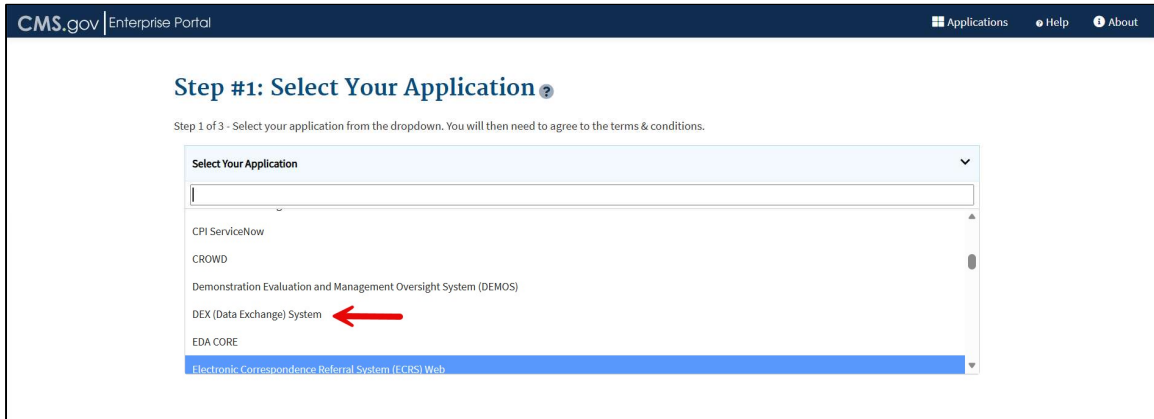


4.4 Step 3: Select the DEX Application

1. Select the **Select Your Application** dropdown.



2. Scroll through the list and select **DEX (Data Exchange) System**.
3. Review the application description.



CMS.gov | Enterprise Portal

Applications Help About

Step #1: Select Your Application ?

Step 1 of 3 - Select your application from the dropdown. You will then need to agree to the terms & conditions.

Select Your Application

CPI ServiceNow

CROWD

Demonstration Evaluation and Management Oversight System (DEMOS)

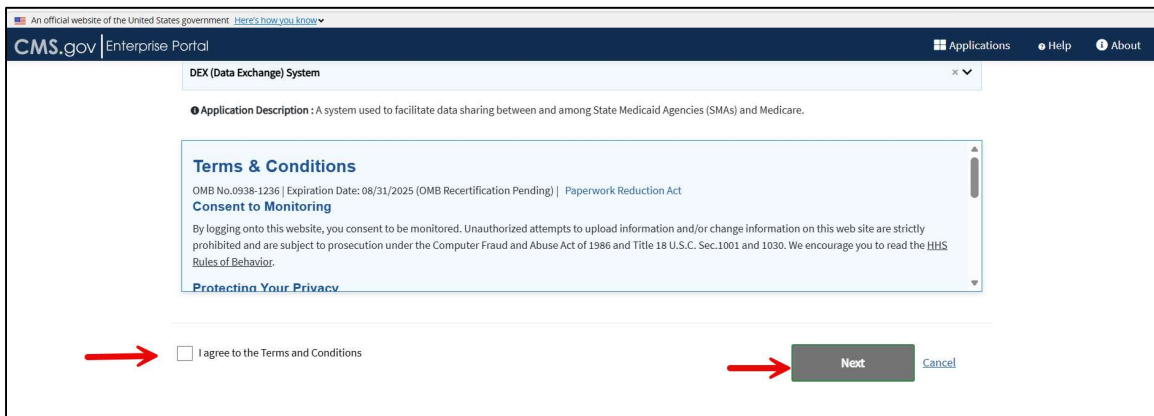
DEX (Data Exchange) System

EDA CORE

Electronic Correspondence Referral System (ECRS) Web

4.5 Step 4: Accept Terms & Conditions

1. Review the Terms & Conditions section.
2. Select **I agree to the Terms and Conditions**.
3. Select **Next**.



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CMS.gov | Enterprise Portal

Applications Help About

DEX (Data Exchange) System

Application Description: A system used to facilitate data sharing between and among State Medicaid Agencies (SMAs) and Medicare.

Terms & Conditions

OMB No.0938-1236 | Expiration Date: 08/31/2025 (OMB Recertification Pending) | Paperwork Reduction Act

Consent to Monitoring

By logging onto this website, you consent to be monitored. Unauthorized attempts to upload information and/or change information on this web site are strictly prohibited and are subject to prosecution under the Computer Fraud and Abuse Act of 1986 and Title 18 U.S.C. Sec.1001 and 1030. We encourage you to read the [HHS Rules of Behavior](#).

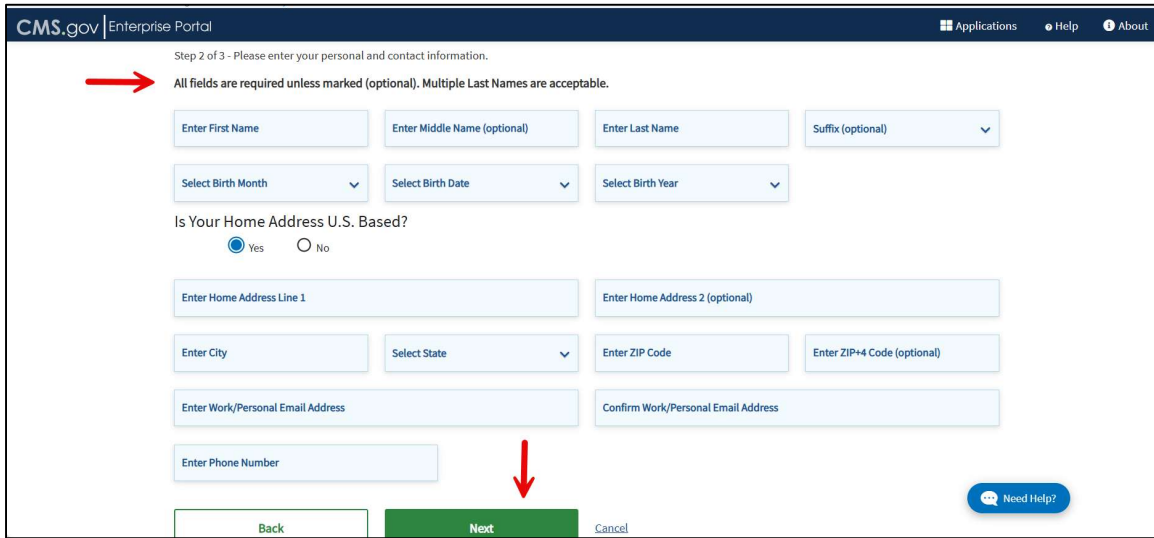
Protecting Your Privacy

☐ I agree to the Terms and Conditions

Next Cancel

4.6 Step 5: Enter Personal and Contact Information

1. Complete all required fields including:
 - a. Personal Information (Name, DOB)
 - b. Address Information
 - c. Contact Information (Email, Phone Number)
2. Ensure all information is accurate.
3. Select **Next** to proceed.



CMS.gov Enterprise Portal

Step 2 of 3 - Please enter your personal and contact information.

All fields are required unless marked (optional). Multiple Last Names are acceptable.

Enter First Name Enter Middle Name (optional) Enter Last Name Suffix (optional)

Select Birth Month Select Birth Date Select Birth Year

Is Your Home Address U.S. Based?

☒ Yes ☐ No

Enter Home Address Line 1 Enter Home Address 2 (optional)

Enter City Select State Enter ZIP Code Enter ZIP+4 Code (optional)

Enter Work/Personal Email Address Confirm Work/Personal Email Address

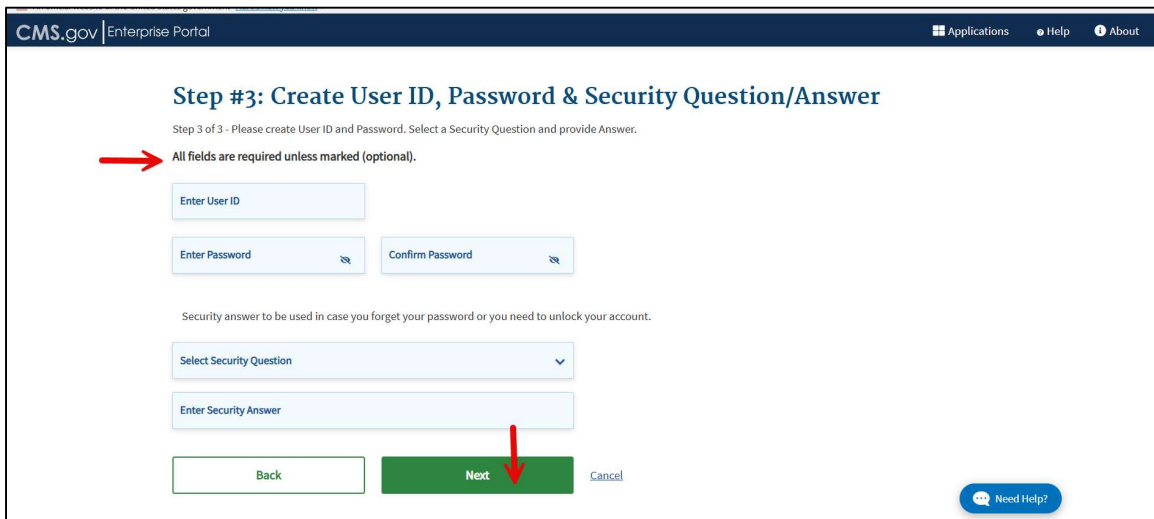
Enter Phone Number

Back Next Cancel

Need Help?

4.7 Step 6: Create User Credentials

1. Create a User ID.
2. Create and confirm your Password.
3. Select a Security Question and provide an answer.
4. Select **Next**.



CMS.gov Enterprise Portal

Step #3: Create User ID, Password & Security Question/Answer

Step 3 of 3 - Please create User ID and Password. Select a Security Question and provide Answer.

All fields are required unless marked (optional).

Enter User ID

Enter Password Confirm Password

Security answer to be used in case you forget your password or you need to unlock your account.

Select Security Question

Enter Security Answer

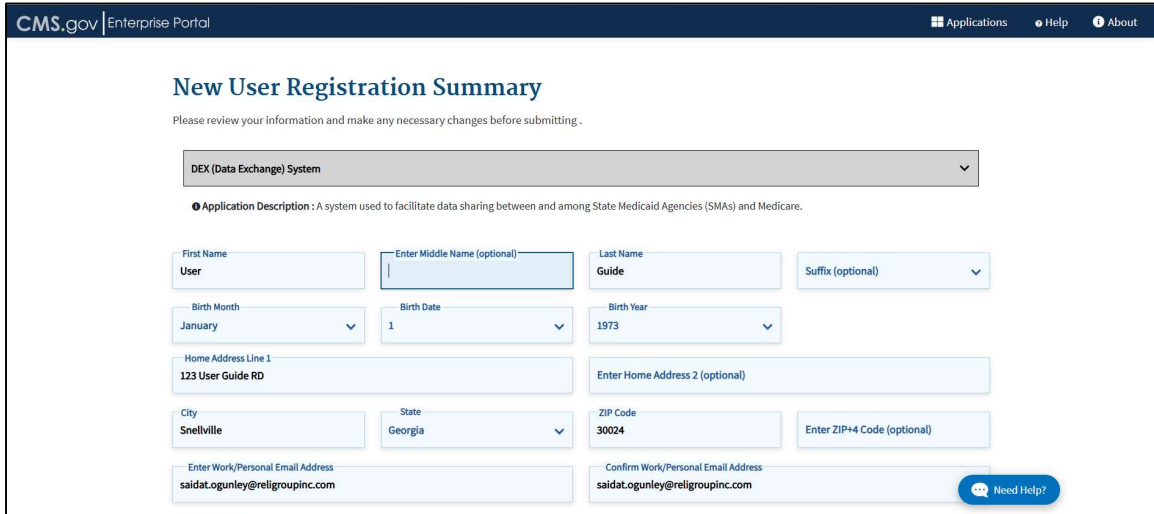
Back Next Cancel

Need Help?

4.8 Step 7: Review Registration Summary

1. Review all entered information.

2. Make corrections if necessary.
3. Select **Submit User** to complete registration.



CMS.gov Enterprise Portal Applications Help About

New User Registration Summary

Please review your information and make any necessary changes before submitting.

DEX (Data Exchange) System

Application Description: A system used to facilitate data sharing between and among State Medicaid Agencies (SMAs) and Medicare.

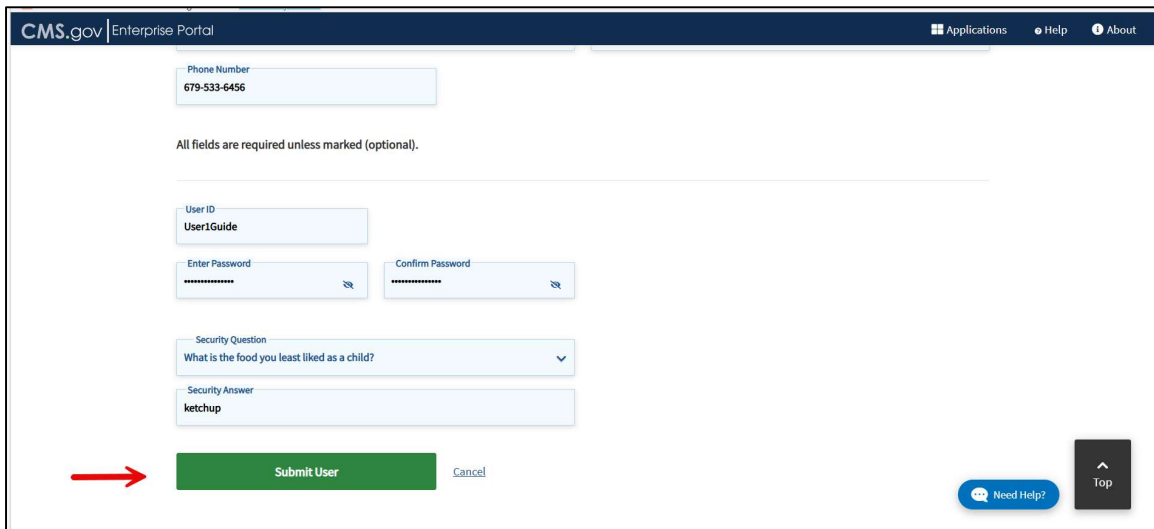
First Name: User **Enter Middle Name (optional):** **Last Name:** Guide **Suffix (optional):**

Birth Month: January **Birth Date:** 1 **Birth Year:** 1973

Home Address Line 1: 123 User Guide RD **Enter Home Address 2 (optional):**

City: Snellville **State:** Georgia **ZIP Code:** 30024 **Enter ZIP+4 Code (optional):**

Enter Work/Personal Email Address: saidat.ogunley@religroupinc.com **Confirm Work/Personal Email Address:** saidat.ogunley@religroupinc.com Need Help?



CMS.gov Enterprise Portal Applications Help About

Phone Number: 679-533-6456

All fields are required unless marked (optional).

User ID: User1Guide

Enter Password: **Confirm Password:**

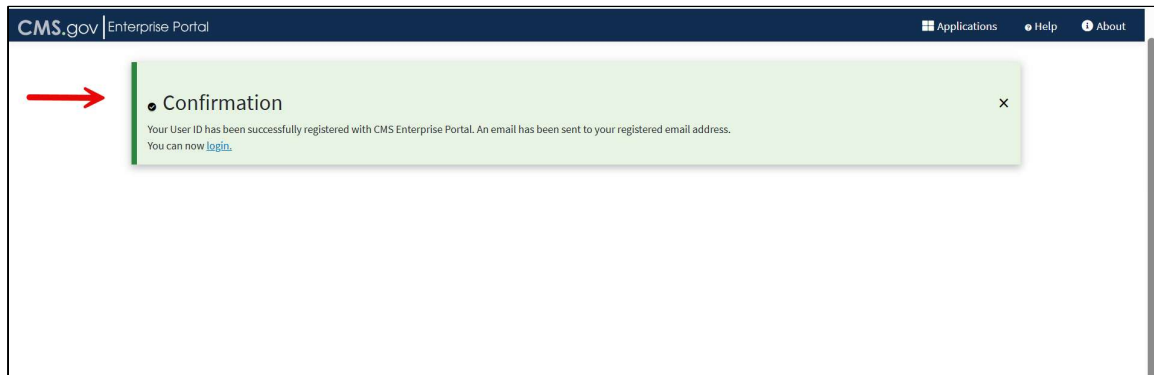
Security Question: What is the food you least liked as a child?

Security Answer: ketchup

→ **Submit User** [Cancel](#) Need Help? Top

4.9 Step 8: Confirmation

1. A confirmation message will display upon successful submission.
2. A confirmation email will be sent.
3. Return to the login page to access the portal.

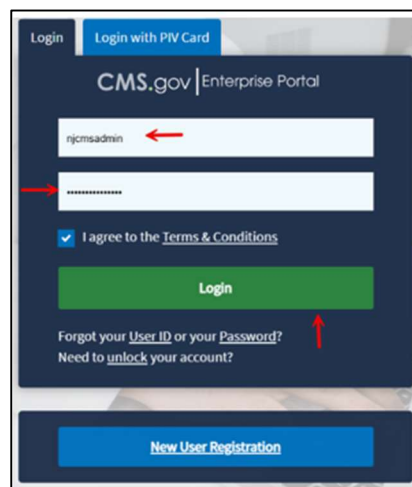


4.10 Post-Registration Notes

- Additional role-based access may be required.
- Contact the CMS administrator or DEX support if access is not granted.
- State Medicaid Agency User Roles and Access
 - DEX State Admin
 - DEX State Basic
 - DEX Reporting and Screening

5. System Access and Login

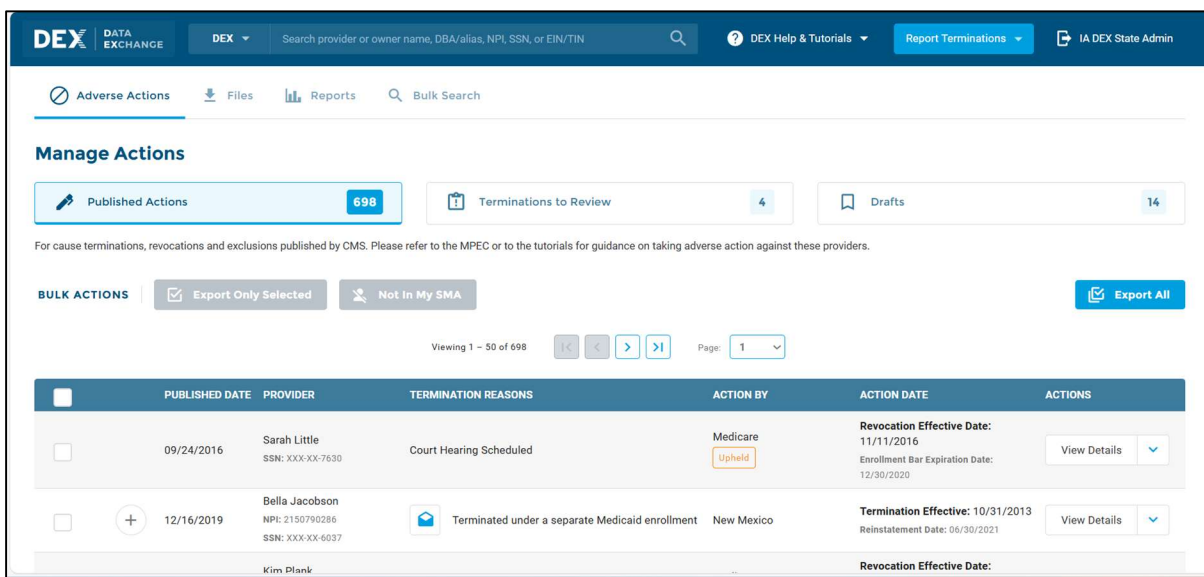
1. Navigate to the CMS Enterprise Portal.
2. Log in using your CMS User ID and password.



3. Select **DEX** from the list of available applications.



4. The DEX Home Dashboard will display after successful login.



Manage Actions

Published Actions **698** | Terminations to Review **4** | Drafts **14**

For cause terminations, revocations and exclusions published by CMS. Please refer to the MPEC or to the tutorials for guidance on taking adverse action against these providers.

BULK ACTIONS | ☒ Export Only Selected | ☐ Not In My SMA | [Export All](#)

Viewing 1 – 50 of 698 | Page: 1

	PUBLISHED DATE	PROVIDER	TERMINATION REASONS	ACTION BY	ACTION DATE	ACTIONS
☐	09/24/2016	Sarah Little SSN: XXXXX-7630	Court Hearing Scheduled	Medicare Upheld	Revocation Effective Date: 11/11/2016 Enrollment Bar Expiration Date: 12/30/2020	View Details
☐ +	12/16/2019	Bella Jacobson NPI: 2150790286 SSN: XXXXX-6037	Terminated under a separate Medicaid enrollment	New Mexico	Termination Effective: 10/31/2013 Reinstatement Date: 06/30/2021	View Details
		Kim Plank			Revocation Effective Date:	

6. DEX Role Based Permissions

6.1 DEX State Admin

The **DEX State Admin** role has the **most comprehensive access** among state users and can perform full lifecycle actions across the system. The State Admin role can approve DEX state users in their state, search DEX and the Social Security Administration (SSA) Death Master File (DMF), report terminations to CMS, and upload and download data files.

Provider Management

- Add Provider to DEX
- Edit Provider

Termination Management

- Add Termination
- Withdraw Termination
- Reinstate Provider
- Edit Terminations in all statuses:
 - Draft
 - Pending CMS Review
 - Pending SMA Review
 - Published
 - Not Published

Bulk Actions

- Bulk Upload Terminations
- Bulk Download Termination Letters

Search & Inquiry

- Provider Search
- Bulk Search
- Death Master File (DMF) Search
- Search Published Terminations

Dashboard & Worklist

- View Dashboard
- Filter Dashboard
- Take Actions on Dashboard Items

- Perform Bulk Actions
- Bulk Export Items

Files & Reports

- Upload Files
- Download Files
- Download Termination Files
- Generate Reports
- Export Reports

Rescission

- Rescind Termination

Summary:

The DEX State Admin has **end-to-end control**, including creation, modification, bulk processing, reporting, and rescission capabilities.

6.2 DEX Reporting and Screening

This role is focused on **data access, reporting, and screening activities**, with broad visibility but limited administrative control. State reporting and screening users can search DEX and the SSA DMF, report termination to CMS, and upload and download data files.

Search & Screening

- Provider Search
- Bulk Search
- Death Master File (DMF) Search
- Search Published Terminations

Dashboard

- View Dashboard
- Filter Dashboard

Reports

- Generate Reports
- Export Reports

Files

- Download Files
- Download Termination Files

Summary:

This role supports **analysis and oversight**, with strong access to reporting and screening tools, but **no ability to create or modify terminations or providers**.

6.3 DEX Screening

The **DEX Screening** role is more limited and focused strictly on **review and lookup activities**. State screening users can search DEX and the SSA DMF.

Search & Screening

- Provider Search
- Bulk Search
- Death Master File (DMF) Search
- Search Published Terminations

Dashboard

- View Dashboard
- Filter Dashboard

Reports & Files (Limited)

- Generate Reports
- Export Reports
- Download Files

Summary:

This role is designed for **read-only screening and validation**, with no administrative or bulk action capabilities.

6.4 DEX State Basic

The **DEX State Basic** role provides **restricted access** for general state users who need visibility but minimal control. State Basic users can search DEX and SSA DMF.

Search

- Provider Search
- Bulk Search
- Death Master File (DMF) Search
- Search Published Terminations

Dashboard

- View Dashboard
- Filter Dashboard

Files & Reports (Limited)

- Download Files
- Download Termination Files
- Generate Reports
- Export Reports

Summary:

This role is **view-heavy with limited interaction**, intended for users who need **access to data but not management capabilities**.

6.5 DEX State Outreach

State outreach users are generally Business Function Leads.

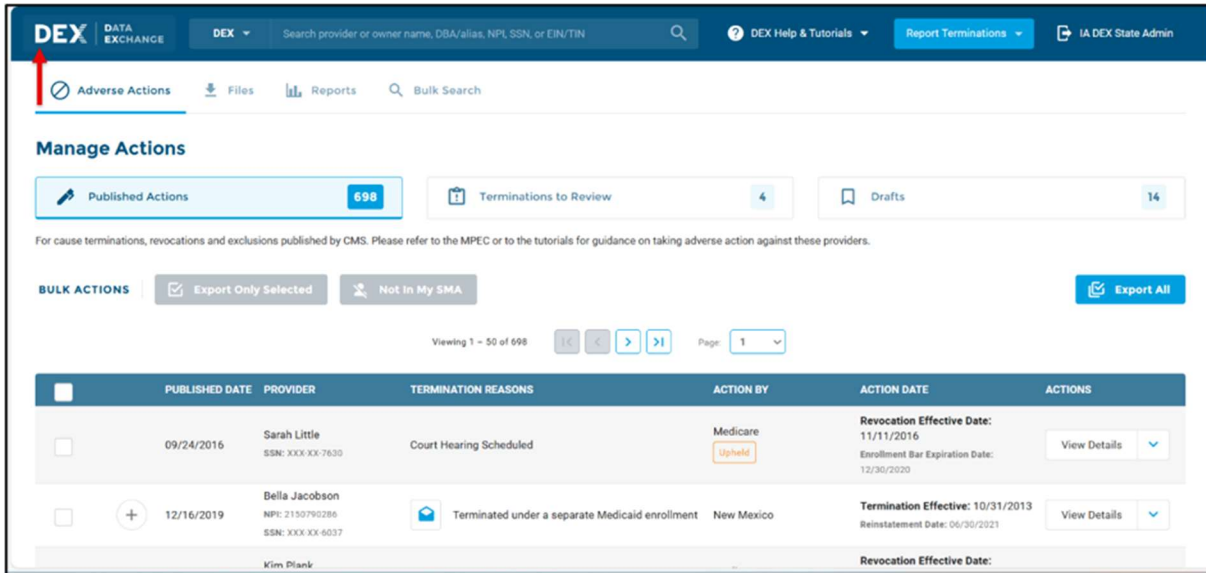
7. DEX Home Dashboard Overview

The DEX Home Dashboard serves as the main landing page and may include a navigation menu, notifications or alerts, summary of recent submissions, and quick access to common actions.

8. Navigation Menu

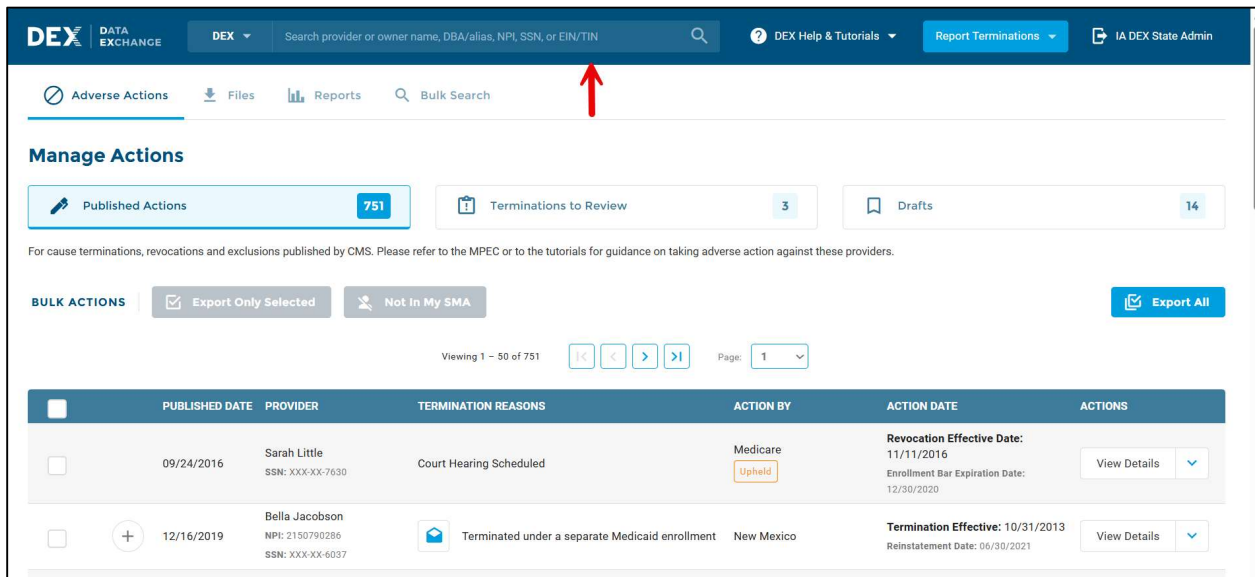
The navigation menu allows users to access key DEX features, which include:

- **Home** – Returns to the dashboard



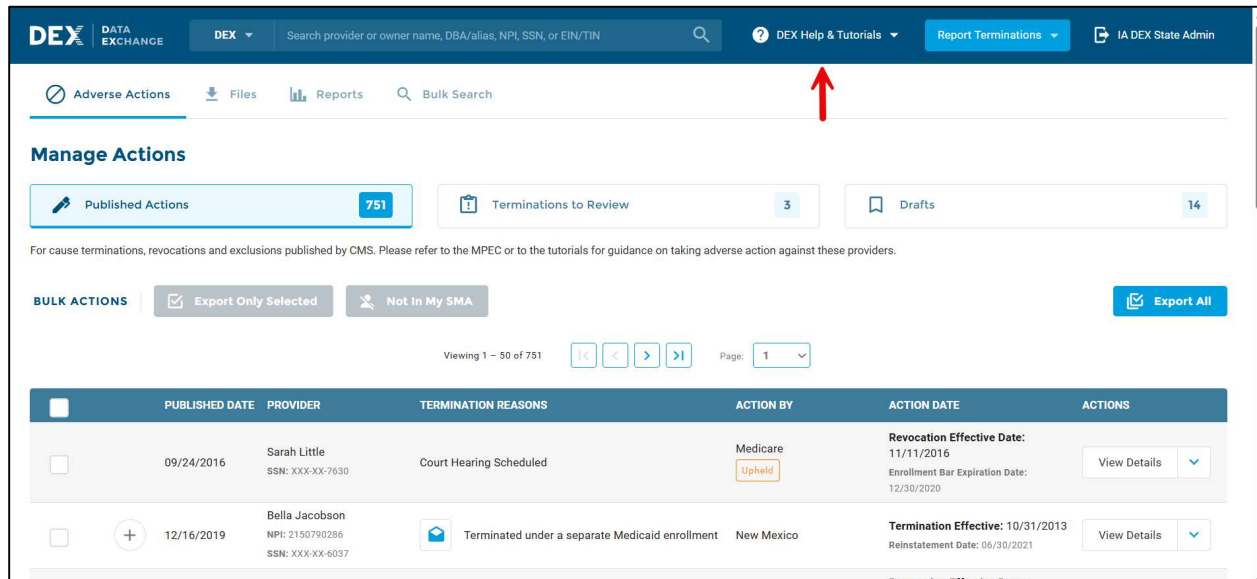
The screenshot shows the DEX Data Exchange dashboard. The top navigation bar includes the DEX logo, a search bar, and links for 'DEX Help & Tutorials', 'Report Terminations', and 'IA DEX State Admin'. The main navigation menu has links for 'Adverse Actions', 'Files', 'Reports', and 'Bulk Search'. The 'Manage Actions' section displays a summary of actions: 'Published Actions' (698), 'Terminations to Review' (4), and 'Drafts' (14). Below this, there are filters for 'BULK ACTIONS' (Export Only Selected, Not In My SMA) and an 'Export All' button. A table lists actions with columns: PUBLISHED DATE, PROVIDER, TERMINATION REASONS, ACTION BY, ACTION DATE, and ACTIONS. The table shows two entries: one for Sarah Little (09/24/2016) and one for Bella Jacobson (12/16/2019). A red arrow points to the 'Adverse Actions' link in the top navigation bar.

- **Search** – Search withing DEX using providers or owners names, DBA, SSN, NPI or EIN/TIN



The screenshot shows the DEX Data Exchange dashboard. The top navigation bar includes the DEX logo, a search bar, and links for 'DEX Help & Tutorials', 'Report Terminations', and 'IA DEX State Admin'. The main navigation menu has links for 'Adverse Actions', 'Files', 'Reports', and 'Bulk Search'. The 'Manage Actions' section displays a summary of actions: 'Published Actions' (751), 'Terminations to Review' (3), and 'Drafts' (14). Below this, there are filters for 'BULK ACTIONS' (Export Only Selected, Not In My SMA) and an 'Export All' button. A table lists actions with columns: PUBLISHED DATE, PROVIDER, TERMINATION REASONS, ACTION BY, ACTION DATE, and ACTIONS. The table shows two entries: one for Sarah Little (09/24/2016) and one for Bella Jacobson (12/16/2019). A red arrow points to the search bar in the top navigation bar.

- **Help** – Access DEX help and tutorials



DEX DATA EXCHANGE | DEX | Search provider or owner name, DBA/alias, NPI, SSN, or EIN/TIN | DEX Help & Tutorials | Report Terminations | IA DEX State Admin

Adverse Actions | Files | Reports | Bulk Search

Manage Actions

Published Actions **751** | Terminations to Review **3** | Drafts **14**

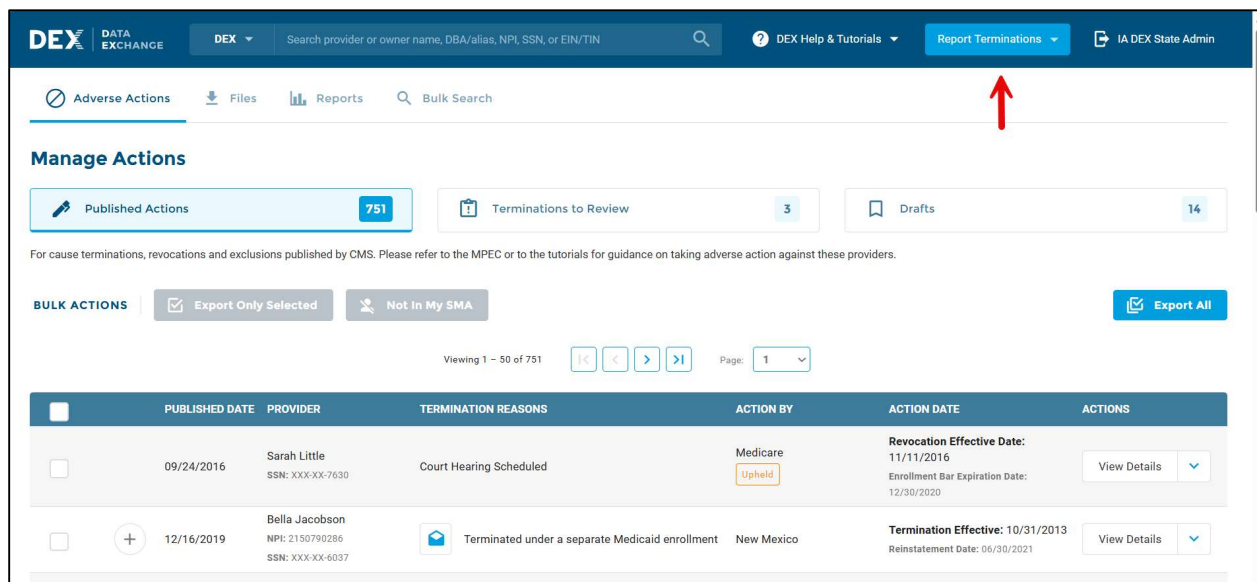
For cause terminations, revocations and exclusions published by CMS. Please refer to the MPEC or to the tutorials for guidance on taking adverse action against these providers.

BULK ACTIONS | ☒ Export Only Selected | ☐ Not In My SMA | [Export All](#)

Viewing 1 – 50 of 751 | Page: 1

	PUBLISHED DATE	PROVIDER	TERMINATION REASONS	ACTION BY	ACTION DATE	ACTIONS
☐	09/24/2016	Sarah Little SSN: XXX-XX-7630	Court Hearing Scheduled	Medicare Upheld	Revocation Effective Date: 11/11/2016 Enrollment Bar Expiration Date: 12/30/2020	View Details
☐ +	12/16/2019	Bella Jacobson NPI: 2150790286 SSN: XXX-XX-6037	Terminated under a separate Medicaid enrollment	New Mexico	Termination Effective: 10/31/2013 Reinstatement Date: 06/30/2021	View Details

- **Report Termination** – Reporting terminations in DEX



DEX DATA EXCHANGE | DEX | Search provider or owner name, DBA/alias, NPI, SSN, or EIN/TIN | DEX Help & Tutorials | Report Terminations | IA DEX State Admin

Adverse Actions | Files | Reports | Bulk Search

Manage Actions

Published Actions **751** | Terminations to Review **3** | Drafts **14**

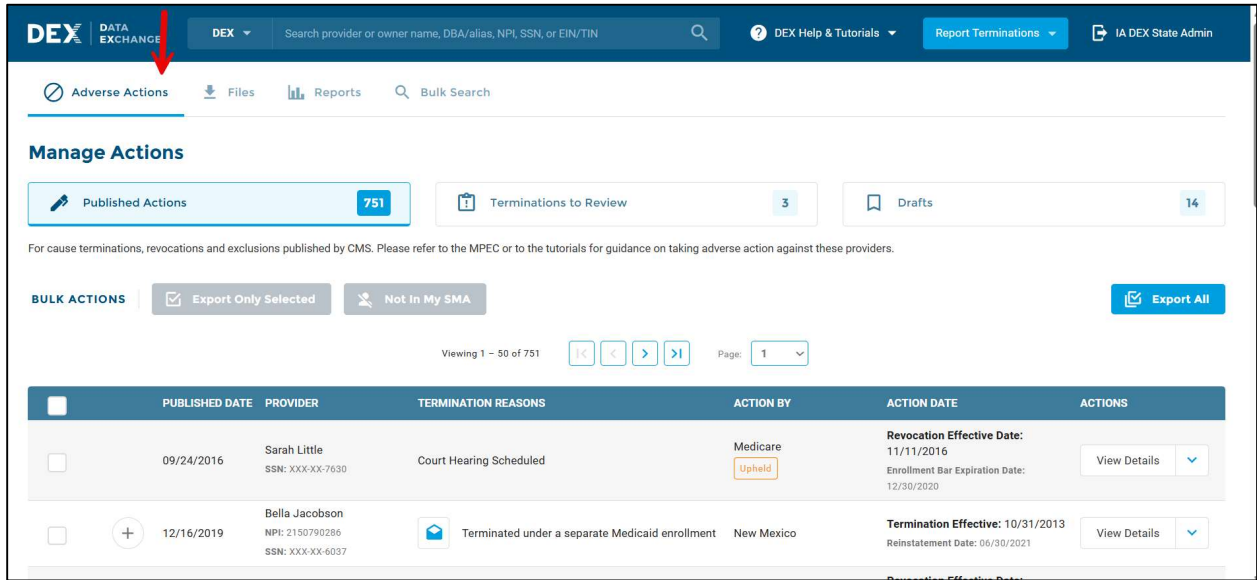
For cause terminations, revocations and exclusions published by CMS. Please refer to the MPEC or to the tutorials for guidance on taking adverse action against these providers.

BULK ACTIONS | ☒ Export Only Selected | ☐ Not In My SMA | [Export All](#)

Viewing 1 – 50 of 751 | Page: 1

	PUBLISHED DATE	PROVIDER	TERMINATION REASONS	ACTION BY	ACTION DATE	ACTIONS
☐	09/24/2016	Sarah Little SSN: XXX-XX-7630	Court Hearing Scheduled	Medicare Upheld	Revocation Effective Date: 11/11/2016 Enrollment Bar Expiration Date: 12/30/2020	View Details
☐ +	12/16/2019	Bella Jacobson NPI: 2150790286 SSN: XXX-XX-6037	Terminated under a separate Medicaid enrollment	New Mexico	Termination Effective: 10/31/2013 Reinstatement Date: 06/30/2021	View Details

- **Adverse Actions** – Manage actions within the application



DEX DATA EXCHANGE | DEX | Search provider or owner name, DBA/alias, NPI, SSN, or EIN/TIN | DEX Help & Tutorials | Report Terminations | IA DEX State Admin

Adverse Actions | Files | Reports | Bulk Search

Manage Actions

Published Actions **751** | Terminations to Review **3** | Drafts **14**

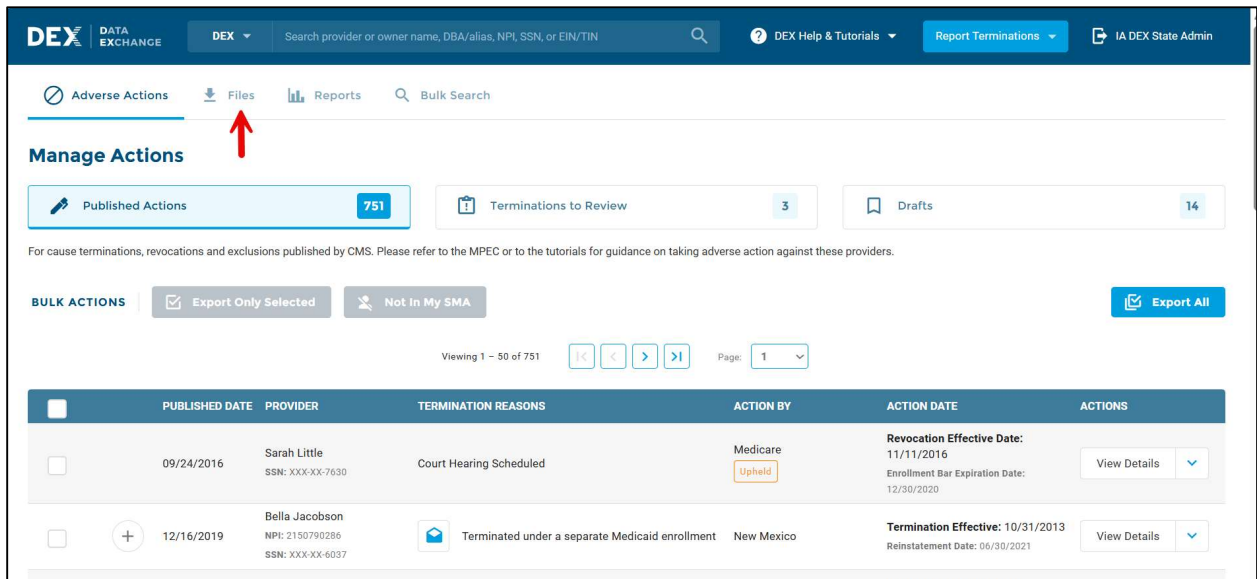
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BULK ACTIONS | ☒ Export Only Selected | ☐ Not In My SMA | [Export All](#)

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☐ +	12/16/2019	Bella Jacobson NPI: 2150790286 SSN: XXX-XX-6037	Terminated under a separate Medicaid enrollment	New Mexico	Termination Effective: 10/31/2013 Reinstatement Date: 06/30/2021	View Details

- **Files** – Access files shared in DEX



DEX DATA EXCHANGE | DEX | Search provider or owner name, DBA/alias, NPI, SSN, or EIN/TIN | DEX Help & Tutorials | Report Terminations | IA DEX State Admin

Adverse Actions | **Files** | Reports | Bulk Search

Manage Actions

Published Actions **751** | Terminations to Review **3** | Drafts **14**

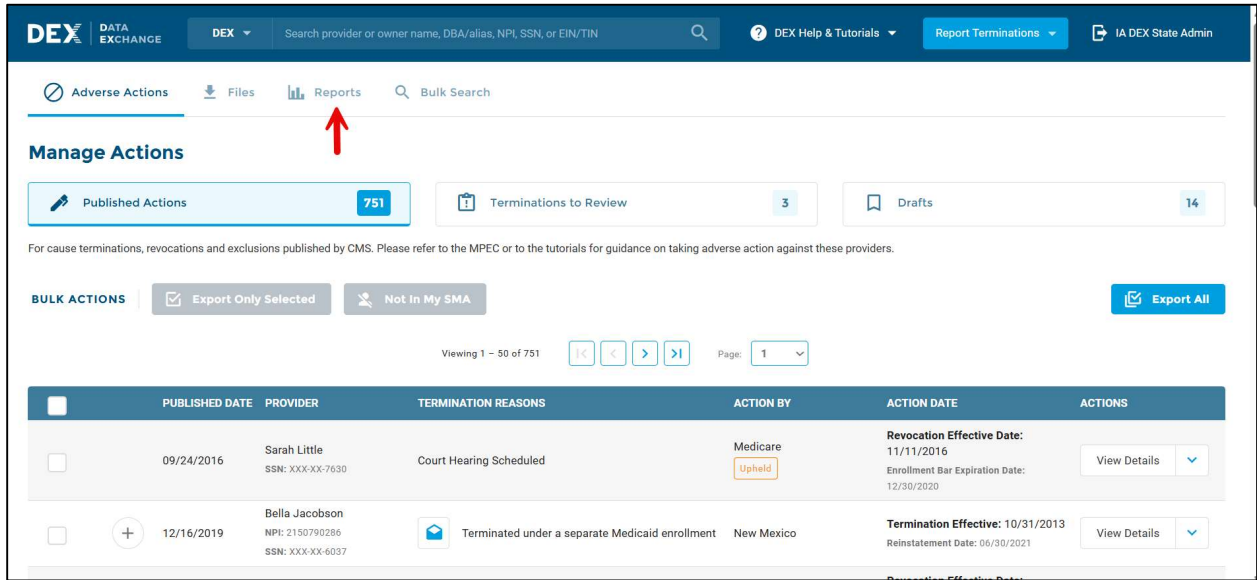
For cause terminations, revocations and exclusions published by CMS. Please refer to the MPEC or to the tutorials for guidance on taking adverse action against these providers.

BULK ACTIONS | ☒ Export Only Selected | ☐ Not In My SMA | [Export All](#)

Viewing 1 – 50 of 751 | Page: 1

	PUBLISHED DATE	PROVIDER	TERMINATION REASONS	ACTION BY	ACTION DATE	ACTIONS
☐	09/24/2016	Sarah Little SSN: XXX-XX-7630	Court Hearing Scheduled	Medicare Upheld	Revocation Effective Date: 11/11/2016 Enrollment Bar Expiration Date: 12/30/2020	View Details
☐ +	12/16/2019	Bella Jacobson NPI: 2150790286 SSN: XXX-XX-6037	Terminated under a separate Medicaid enrollment	New Mexico	Termination Effective: 10/31/2013 Reinstatement Date: 06/30/2021	View Details

- **Reports** – Download all available reports in DEX



DEX DATA EXCHANGE | DEX | Search provider or owner name, DBA/alias, NPI, SSN, or EIN/TIN | DEX Help & Tutorials | Report Terminations | IA DEX State Admin

Adverse Actions | Files | **Reports** | Bulk Search

Manage Actions

Published Actions **751** | Terminations to Review **3** | Drafts **14**

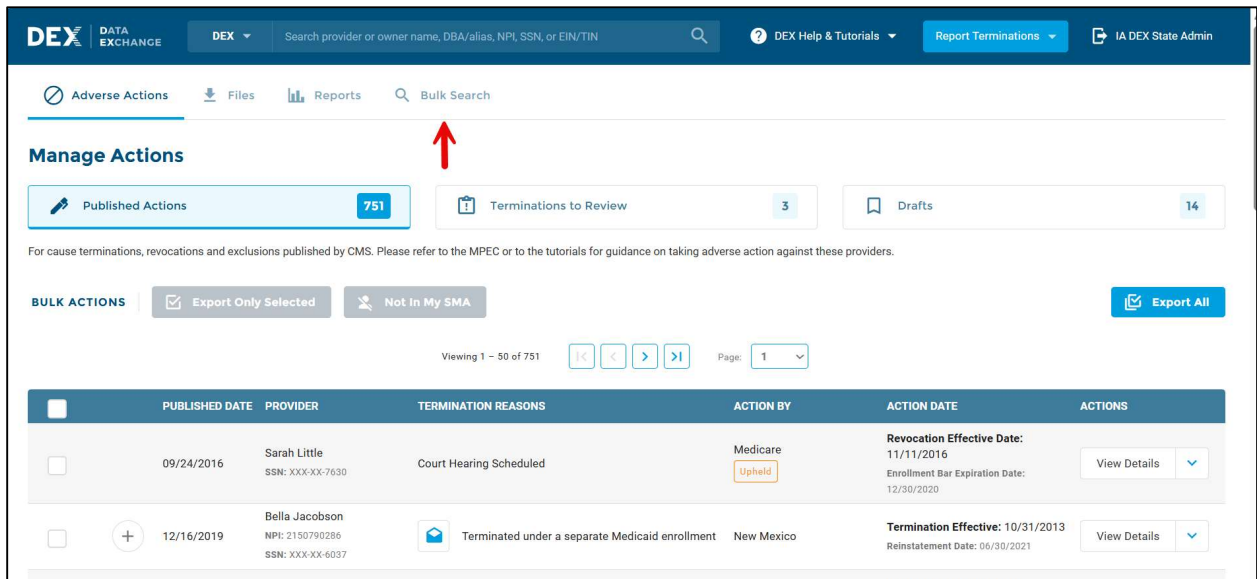
For cause terminations, revocations and exclusions published by CMS. Please refer to the MPEC or to the tutorials for guidance on taking adverse action against these providers.

BULK ACTIONS | ☒ Export Only Selected | ☐ Not In My SMA | [Export All](#)

Viewing 1 – 50 of 751 | Page: 1

	PUBLISHED DATE	PROVIDER	TERMINATION REASONS	ACTION BY	ACTION DATE	ACTIONS
☐	09/24/2016	Sarah Little SSN: XXX-XX-7630	Court Hearing Scheduled	Medicare Upheld	Revocation Effective Date: 11/11/2016 Enrollment Bar Expiration Date: 12/30/2020	View Details
☐ +	12/16/2019	Bella Jacobson NPI: 2150790286 SSN: XXX-XX-6037	Terminated under a separate Medicaid enrollment	New Mexico	Termination Effective: 10/31/2013 Reinstatement Date: 06/30/2021	View Details

- **Bulk Search** – How to perform a bulk search and DMF bulk search



DEX DATA EXCHANGE | DEX | Search provider or owner name, DBA/alias, NPI, SSN, or EIN/TIN | DEX Help & Tutorials | Report Terminations | IA DEX State Admin

Adverse Actions | Files | Reports | **Bulk Search**

Manage Actions

Published Actions **751** | Terminations to Review **3** | Drafts **14**

For cause terminations, revocations and exclusions published by CMS. Please refer to the MPEC or to the tutorials for guidance on taking adverse action against these providers.

BULK ACTIONS | ☒ Export Only Selected | ☐ Not In My SMA | [Export All](#)

Viewing 1 – 50 of 751 | Page: 1

	PUBLISHED DATE	PROVIDER	TERMINATION REASONS	ACTION BY	ACTION DATE	ACTIONS
☐	09/24/2016	Sarah Little SSN: XXX-XX-7630	Court Hearing Scheduled	Medicare Upheld	Revocation Effective Date: 11/11/2016 Enrollment Bar Expiration Date: 12/30/2020	View Details
☐ +	12/16/2019	Bella Jacobson NPI: 2150790286 SSN: XXX-XX-6037	Terminated under a separate Medicaid enrollment	New Mexico	Termination Effective: 10/31/2013 Reinstatement Date: 06/30/2021	View Details

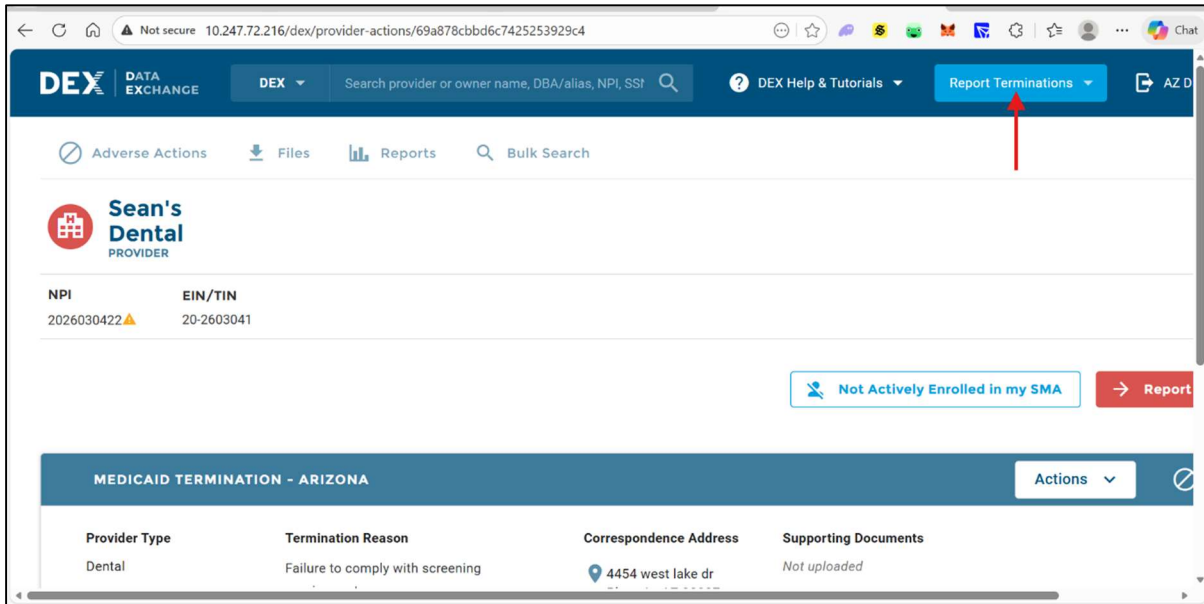
9. Reporting a Single Termination (State User)

9.1 When to Use

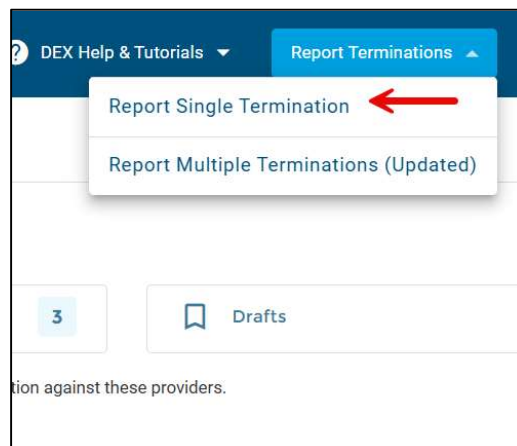
State users use single termination reporting when submitting an adverse action for one provider.

9.2 Step-By-Step Guide

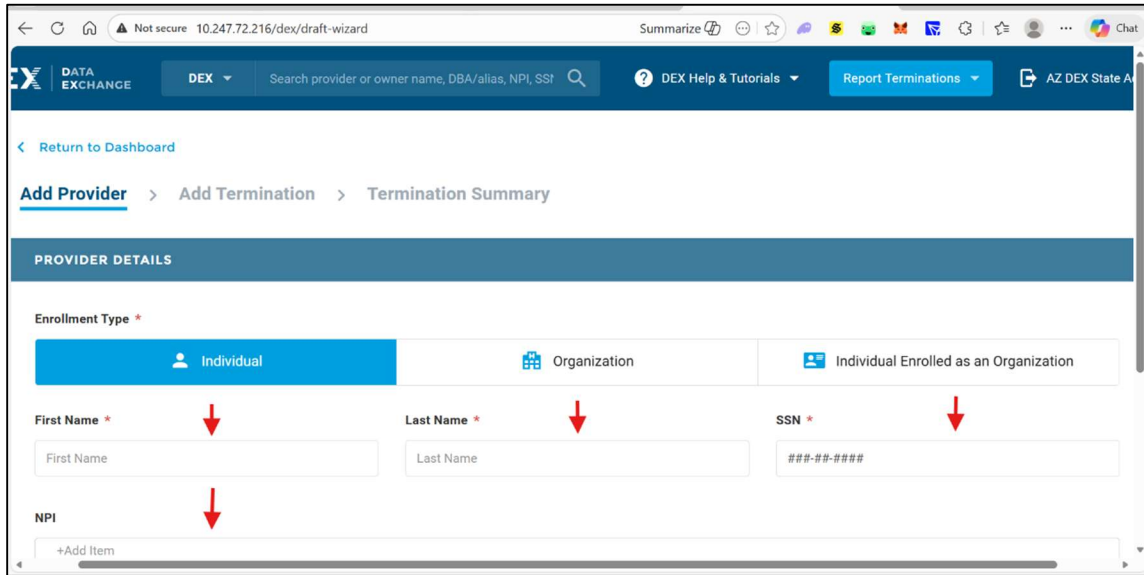
1. Select **Report Terminations** from the navigation menu.



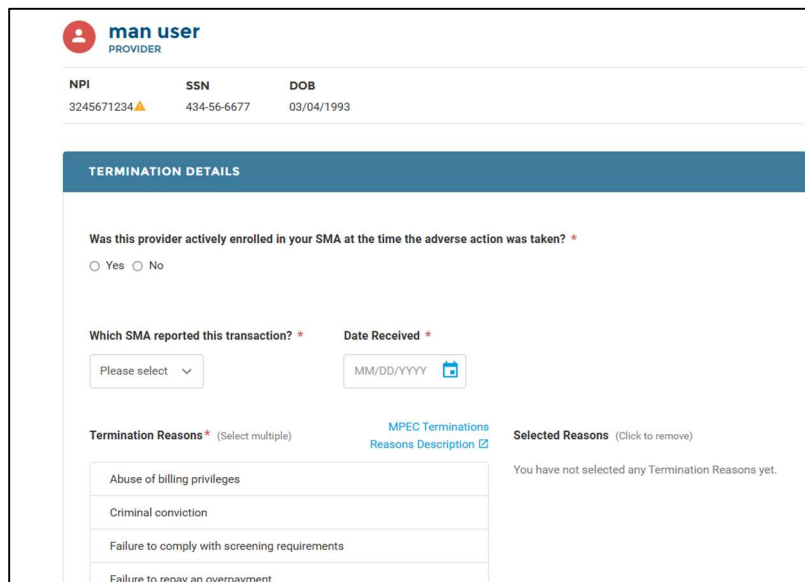
2. Select **Report Single Termination**.



3. Enter the required provider information (e.g., National Provider Identifier [NPI], provider name, enrollment type).



4. Enter termination details, including:
 - a. Termination effective date
 - b. Termination reason
 - c. Appeal status (confirm appeal rights are exhausted)



5. Review the information for accuracy and completeness.

STATE LICENSE(S)

+ Add State License

CORRESPONDENCE ADDRESS

Address Line 1 *

Address Line 2

City *

State *

Zip Code *

23 main rd

e.g. Suite 100

fitchburg

Florida

23456

+ Add Practice Address

Return to Add Provider

Cancel

Save as Draft

Save & Continue →

PROVIDER DETAILS

Edit Provider

NAME	REPORTING SMA	NPI	SSN	ALIAS	DATE OF BIRTH
man user	FL	3245671234	434-56-6677	Not entered	03/04/1993

TERMINATION DETAILS

Edit Termination

Provider Type

Clinical Psychologist

Termination Effective Date

03/03/2026

Enrollment Bar Expiration Date

Indefinite

Appeals Period Expired?

Yes

Termination Letter

Open Termination Letter

Termination Reason

Abuse of billing privileges

[MPEC Terminations Reasons Description](#)

Correspondence Address

23 main rd
fitchburg, FL 23456

Practice Address

Not entered

Supporting Documents

Not uploaded

Additional Comments

Not entered

Medicare Action

Not entered

CMS Notes

Not entered

☐ * I acknowledge that provider and termination data cannot be added, edited, or removed after this termination is submitted.

6. Submit the termination for CMS review.

Appeals Period Expired?

Yes

23 main rd
fitchburg, FL 23456

Practice Address

Not entered

CMS Notes

Not entered

☒ * I acknowledge that provider and termination data cannot be added, edited, or removed after this termination is submitted.

[Return to Add Termination](#)
[Cancel](#)
[Save as Draft](#)
[Report Termination](#)

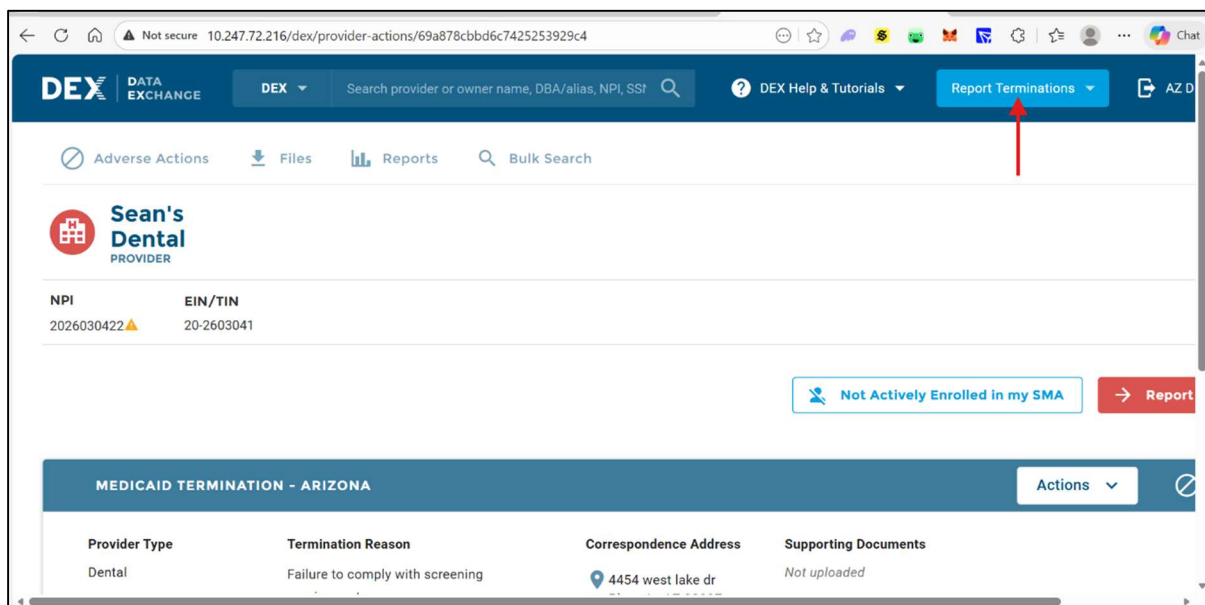
10. Reporting Bulk Terminations (State User)

10.1 When to Use

State users use bulk termination reporting when submitting multiple provider terminations at one time.

10.2 Step-By-Step Guide

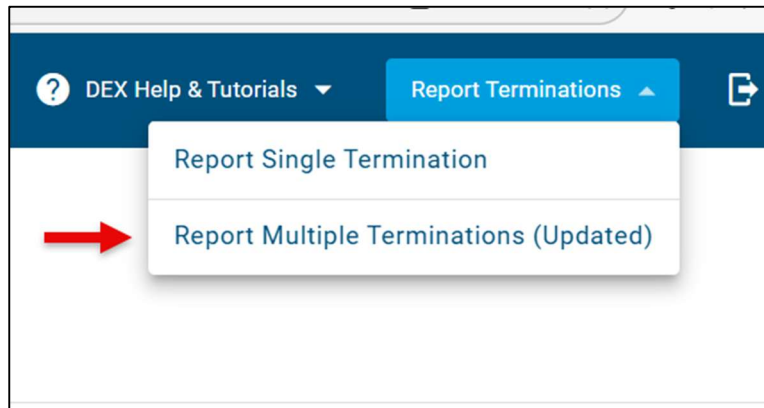
1. Select **Report Terminations** from the navigation menu.



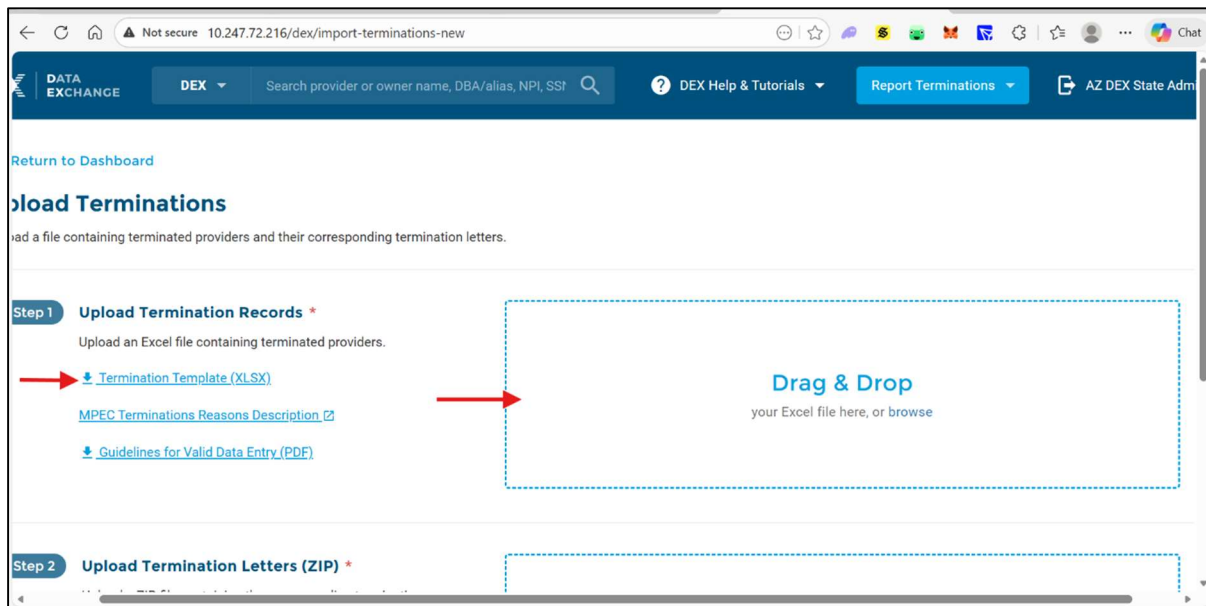
The screenshot shows the DEX DATA EXCHANGE web application. The navigation menu at the top includes 'Adverse Actions', 'Files', 'Reports', and 'Bulk Search'. The 'Report Terminations' button is highlighted in blue and has a red arrow pointing to it. Below the navigation menu, the user's profile for 'Sean's Dental PROVIDER' is displayed, showing NPI 2026030422 and EIN/TIN 20-2603041. A button labeled 'Not Actively Enrolled in my SMA' and a red 'Report' button are visible. At the bottom, a table titled 'MEDICAID TERMINATION - ARIZONA' shows a single row with the following details:

Provider Type	Termination Reason	Correspondence Address	Supporting Documents
Dental	Failure to comply with screening	4454 west lake dr	Not uploaded

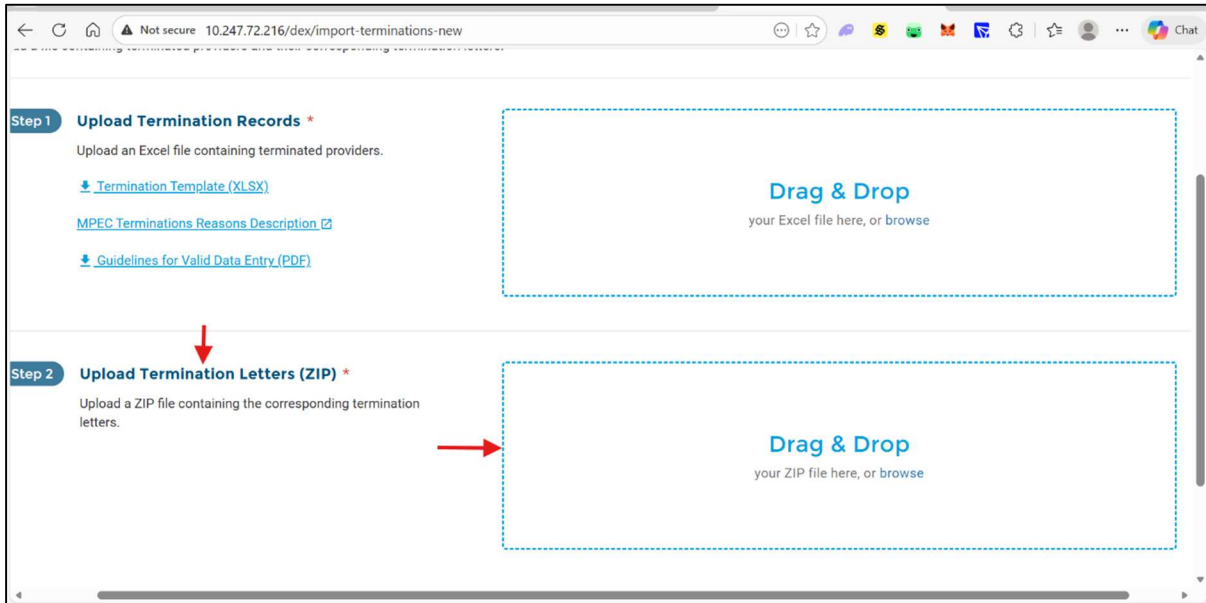
2. Select **Report Multiple Terminations (Updated)**.



3. Download the CMS-provided bulk termination template.



4. Complete all required fields for each provider, ensuring accuracy.
5. Upload the completed template into DEX.
6. Attach supporting documentation if required (e.g., termination letters).



The screenshot shows a web browser window with the URL `10.247.72.216/dex/import-terminations-new`. The page has two main sections:

- Step 1: Upload Termination Records ***
Upload an Excel file containing terminated providers.
Links: [Termination Template \(XLSX\)](#), [MPEC Terminations Reasons Description](#), [Guidelines for Valid Data Entry \(PDF\)](#).
A large dashed blue box contains the text "Drag & Drop" and "your Excel file here, or browse".
- Step 2: Upload Termination Letters (ZIP) ***
Upload a ZIP file containing the corresponding termination letters.
A large dashed blue box contains the text "Drag & Drop" and "your ZIP file here, or browse".

A red arrow points from the "Upload Termination Records" section down to the "Upload Termination Letters (ZIP)" section.

7. Submit the bulk file for CMS review.

11. CMS Review and Status Tracking

11.1 State User Perspective

After submission, termination records are routed to CMS for review. CMS may approve, reject, or return submissions for correction.

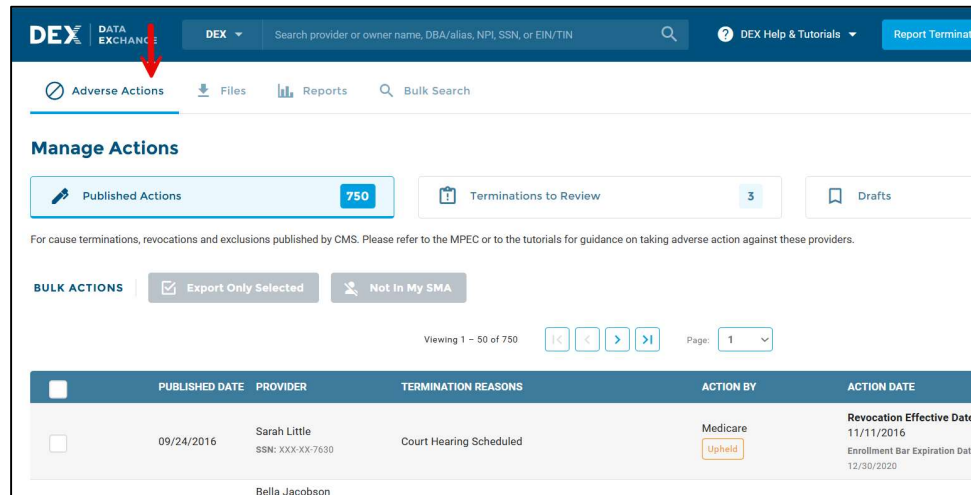
State users can monitor submission status under **My Submissions** where statuses may include Submitted, Under Review, Returned for Correction, or Approved.

Returned submissions must be corrected and resubmitted by the state user.

11.2 Adverse Action

- **Adverse Action** – The Adverse Actions section within DEX is the primary workspace where users can view, manage, and act on provider-related enforcement activities. These actions represent formal decisions made by CMS or State Medicaid Agencies (SMAs) regarding a provider's participation in federal or state healthcare programs. Adverse actions include Medicaid Terminations and Medicare Revocations.

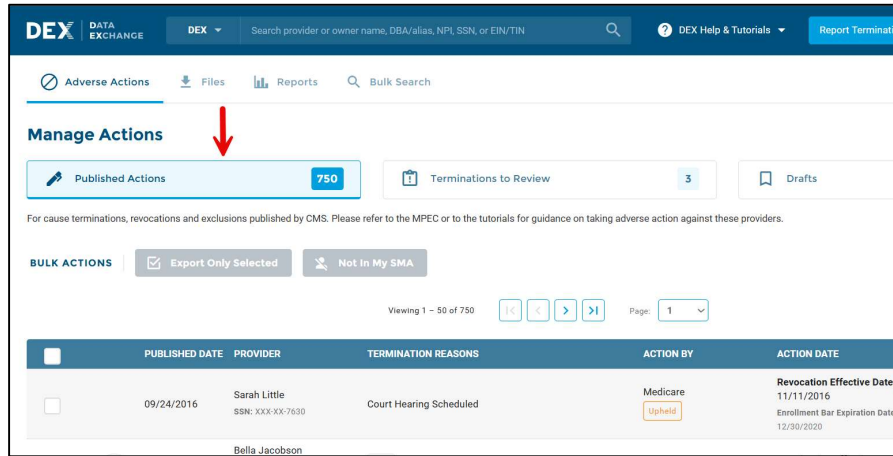
This section enables users to track the full lifecycle of these actions, from draft creation to final publication and to perform necessary follow-up activities.



11.3 Manage Actions Dashboard

The **Manage Actions** page provides a centralized dashboard with three primary categories:

1. Published Actions
 - a. Displays all adverse actions that have been **officially published by CMS**
 - b. These actions are considered **final and enforceable**
 - c. Users can review details such as:
 - i. Provider name and identifiers (e.g., Social Security Number [SSN]/NPI)
 - ii. Termination or revocation reason
 - iii. Actioning entity (e.g., Medicare, specific state)
 - iv. Effective dates (e.g., revocation or termination date)
 - d. This section supports **state-level decision-making** for enrollment actions



Manage Actions

Published Actions 750 | Terminations to Review 3 | Drafts

For cause terminations, revocations and exclusions published by CMS. Please refer to the MPEC or to the tutorials for guidance on taking adverse action against these providers.

BULK ACTIONS | ☒ Export Only Selected | ☐ Not In My SMA

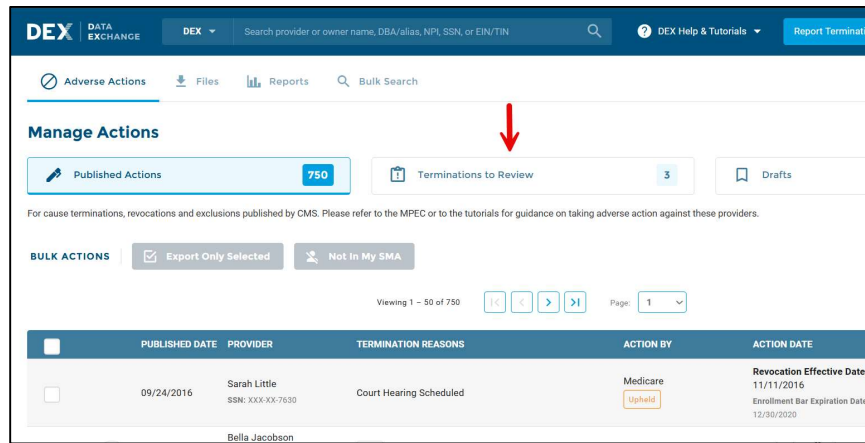
Viewing 1 - 50 of 750 | Page: 1

	PUBLISHED DATE	PROVIDER	TERMINATION REASONS	ACTION BY	ACTION DATE
☐	09/24/2016	Sarah Little SSN: XXX-XX-7630	Court Hearing Scheduled	Medicare Upheld	Revocation Effective Date 11/11/2016 Enrollment Bar Expiration Date 12/30/2020

Bella Jacobson

2. Terminations to Review

- Contains adverse actions that are **pending review**
- These may require **SMA or CMS evaluation before a final decision is made**
- Typically part of the **CMS and contractor review workflow**



Manage Actions

Published Actions 750 | Terminations to Review 3 | Drafts

For cause terminations, revocations and exclusions published by CMS. Please refer to the MPEC or to the tutorials for guidance on taking adverse action against these providers.

BULK ACTIONS | ☒ Export Only Selected | ☐ Not In My SMA

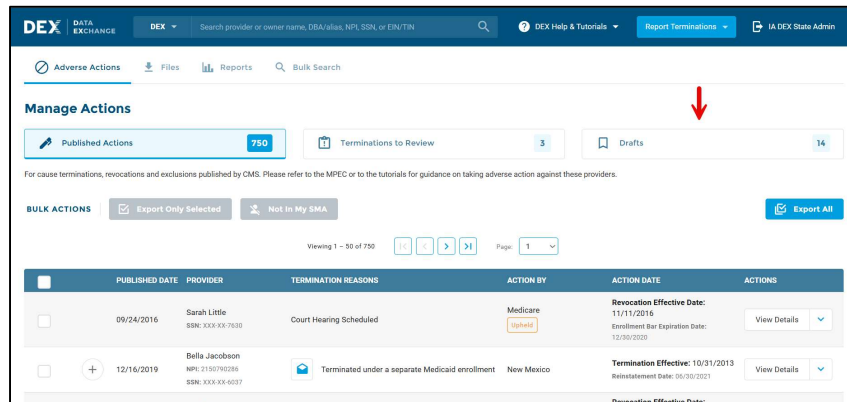
Viewing 1 - 50 of 750 | Page: 1

	PUBLISHED DATE	PROVIDER	TERMINATION REASONS	ACTION BY	ACTION DATE
☐	09/24/2016	Sarah Little SSN: XXX-XX-7630	Court Hearing Scheduled	Medicare Upheld	Revocation Effective Date 11/11/2016 Enrollment Bar Expiration Date 12/30/2020

Bella Jacobson

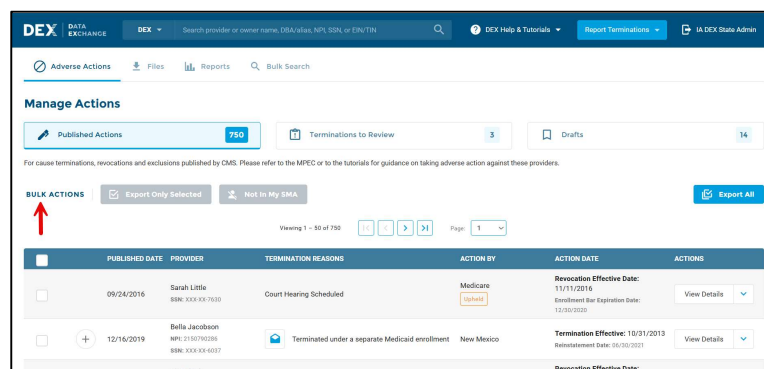
3. Drafts

- Displays adverse actions that are **still in draft status**
- These records are not yet submitted for review or publication
- Users can continue editing and preparing these actions before submission



11.4 Bulk Action Options

- Within the Adverse Actions page, the system provides bulk processing options that allow users to efficiently manage and export multiple records at once.



11.5 Export Only Selected

- The Export Only Selected option allows users to download a subset of records that they have manually selected from the list.

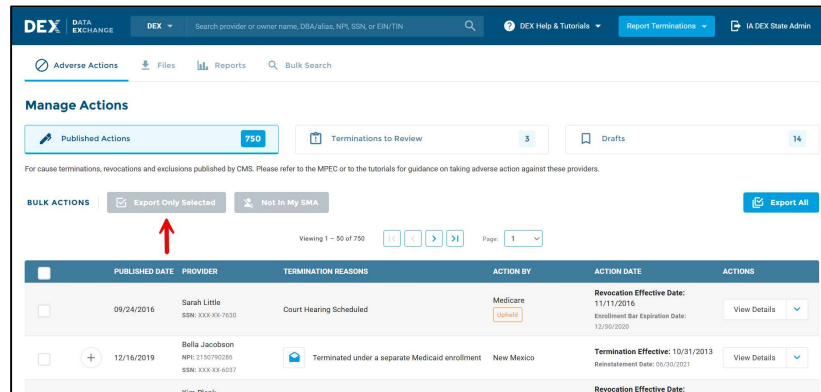
How it works:

- Users select one or more records using the checkboxes provided in the table
- Once selections are made, this button becomes actionable
- The system exports only the selected records into a downloadable file (e.g., Excel or CSV)

Purpose:

- Enables targeted data extraction

- Useful when users need to work with specific providers or cases rather than the full dataset



11.6 Not In My SMA

- The Not In My SMA option is used to filter out records that do not belong to the user's State Medicaid Agency (SMA).

How it works:

- When applied, the system removes or hides records that are associated with other states
- The list is refined to show only records that are relevant to the user's assigned SMA

Purpose:

- Helps users focus on state-specific responsibilities
- Reduces noise from irrelevant data across other jurisdictions
- Improves efficiency and clarity when reviewing actions

11.7 Export All

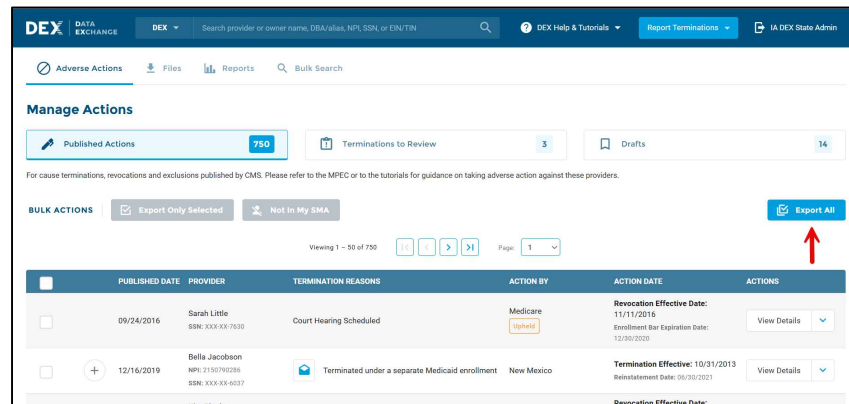
- The Export All option allows users to download the entire dataset currently displayed on the screen, regardless of selection.

How it works:

- No manual selection is required
- The system exports all records in the current view or result set

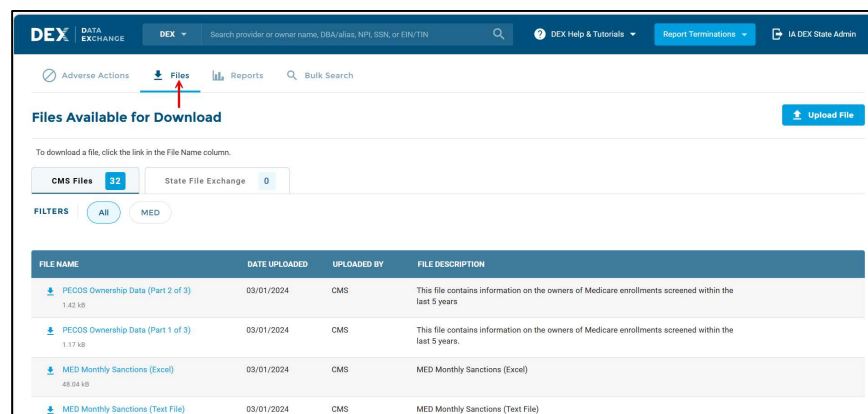
Purpose:

- Enables full data extraction for reporting or analysis
- Useful for generating comprehensive reports or maintaining offline records



11.8 Files Tab

The Files tab in DEX provides a centralized location where users can access, download, and manage system-generated and CMS-provided files. These files support program operations, data analysis, and compliance activities related to provider enrollment, screening, and adverse actions. This section ensures that users have timely access to critical datasets and reference files needed to perform their responsibilities within DEX.



11.8.1 Purpose of the Files Tab

The Files tab is designed to:

- Provide secure access to CMS-distributed data files
- Support state-level review and decision-making

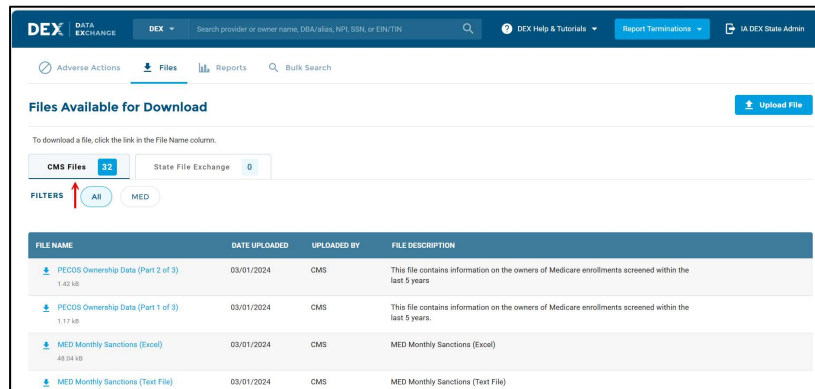
- Enable the download of screening and enrollment-related datasets
- Facilitate data sharing between CMS and SMAs
- Serve as a repository for historical and current files

11.8.2 Key Features and Functionality

11.8.2.1 File Categories

The Files tab is organized into categories to separate different types of file exchanges:

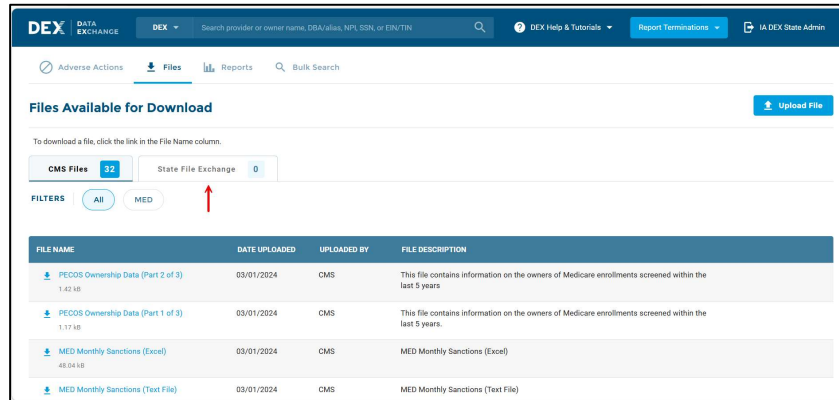
- **CMS Files**
 - Contains files provided by CMS for state use
 - Includes datasets such as:
 - Provider Enrollment, Chain, and Ownership System (PECOS) ownership data
 - MED (Medicare Exclusion Database) monthly sanctions files
 - Displays the total number of available files (e.g., 32 files)



The screenshot shows the DEX Data Exchange interface. The 'Files' tab is selected, displaying 'Files Available for Download'. It shows 32 CMS Files and 0 State File Exchange. Filters for 'All' and 'MED' are available. A table lists the following files:

FILE NAME	DATE UPLOADED	UPLOADED BY	FILE DESCRIPTION
PECOS Ownership Data (Part 2 of 3) 1.42 kB	03/01/2024	CMS	This file contains information on the owners of Medicare enrollments screened within the last 5 years.
PECOS Ownership Data (Part 1 of 3) 1.17 kB	03/01/2024	CMS	This file contains information on the owners of Medicare enrollments screened within the last 5 years.
MED Monthly Sanctions (Excel) 40.04 kB	03/01/2024	CMS	MED Monthly Sanctions (Excel)
MED Monthly Sanctions (Text File)	03/01/2024	CMS	MED Monthly Sanctions (Text File)

- **State File Exchange**
 - Intended for file sharing between states and the system
 - May include uploads initiated by state users
 - Displays the number of available files (if any)



Files Available for Download

To download a file, click the link in the File Name column.

CMS Files: 32 State File Exchange: 0

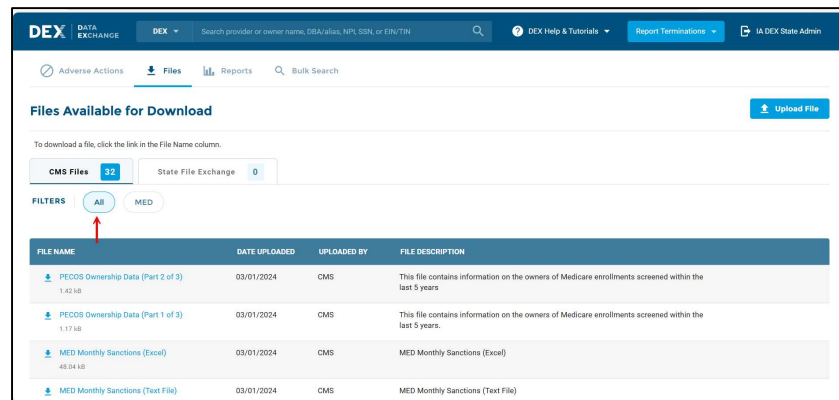
FILTERS: All MED

FILE NAME	DATE UPLOADED	UPLOADED BY	FILE DESCRIPTION
PECOS Ownership Data (Part 2 of 3) 1.42 KB	03/01/2024	CMS	This file contains information on the owners of Medicare enrollments screened within the last 5 years.
PECOS Ownership Data (Part 1 of 3) 1.17 KB	03/01/2024	CMS	This file contains information on the owners of Medicare enrollments screened within the last 5 years.
MED Monthly Sanctions (Excel) 48.04 KB	03/01/2024	CMS	MED Monthly Sanctions (Excel)
MED Monthly Sanctions (Text File)	03/01/2024	CMS	MED Monthly Sanctions (Text File)

11.8.2.2 File Filters

Users can refine the list of files using available filters:

- **All**
 - Displays all available files across categories



Files Available for Download

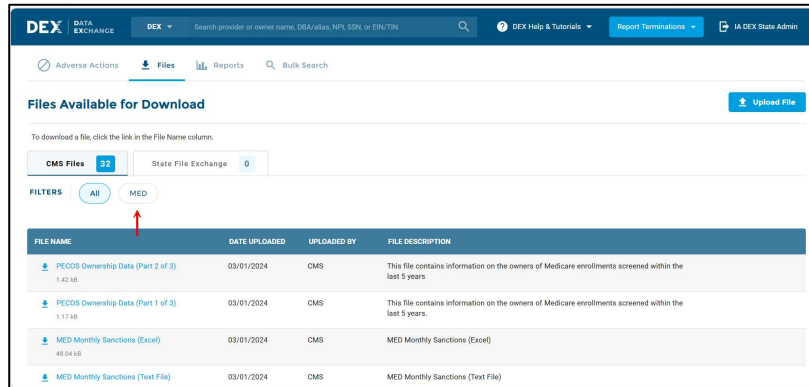
To download a file, click the link in the File Name column.

CMS Files: 32 State File Exchange: 0

FILTERS: All MED

FILE NAME	DATE UPLOADED	UPLOADED BY	FILE DESCRIPTION
PECOS Ownership Data (Part 2 of 3) 1.42 KB	03/01/2024	CMS	This file contains information on the owners of Medicare enrollments screened within the last 5 years.
PECOS Ownership Data (Part 1 of 3) 1.17 KB	03/01/2024	CMS	This file contains information on the owners of Medicare enrollments screened within the last 5 years.
MED Monthly Sanctions (Excel) 48.04 KB	03/01/2024	CMS	MED Monthly Sanctions (Excel)
MED Monthly Sanctions (Text File)	03/01/2024	CMS	MED Monthly Sanctions (Text File)

- **MED**
 - Filters the list to show only MED-related files (e.g., sanctions data)



Files Available for Download

To download a file, click the link in the File Name column.

Filters: **CMS Files** 32 **State File Exchange** 0

FILE NAME **DATE UPLOADED** **UPLOADED BY** **FILE DESCRIPTION**

PECOS Ownership Data (Part 2 of 3) 1.42 KB	03/01/2024	CMS	This file contains information on the owners of Medicare enrollments screened within the last 5 years.
PECOS Ownership Data (Part 1 of 3) 1.17 KB	03/01/2024	CMS	This file contains information on the owners of Medicare enrollments screened within the last 5 years.
MED Monthly Sanctions (Excel) 48.04 KB	03/01/2024	CMS	MED Monthly Sanctions (Excel)
MED Monthly Sanctions (Text File)	03/01/2024	CMS	MED Monthly Sanctions (Text File)

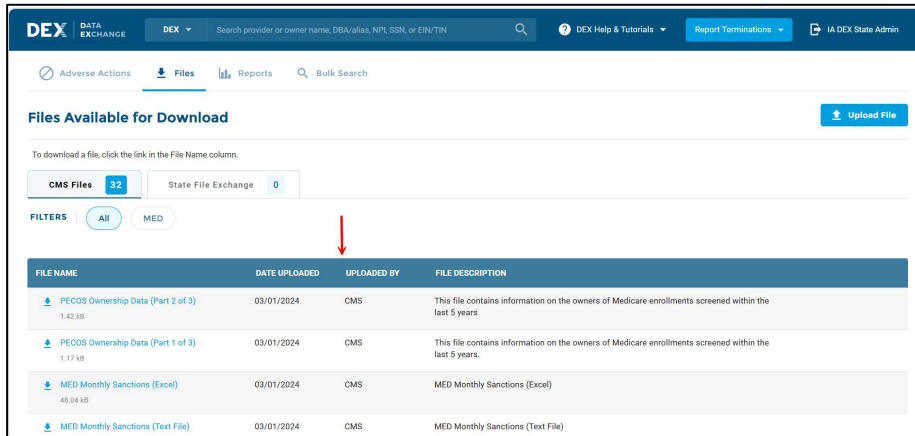
These filters allow users to quickly locate specific file types.

11.8.2.3 File Listing Table

The Files tab displays available files in a structured table with the following columns:

- **File Name**
 - Clickable link used to download the file
 - May include file size and format (e.g., Excel, Text)
- **Date Uploaded**
 - Indicates when the file was made available in DEX
- **Uploaded By**
 - Identifies the source of the file (e.g., CMS)
- **File Description**
 - Provides context about the file contents
 - Example:

"This file contains information on the owners of Medicare enrollments screened within the last 5 years."



The screenshot shows the DEX Data Exchange interface. At the top, there's a navigation bar with 'DEX DATA EXCHANGE', a search bar, and links for 'DEX Help & Tutorials', 'Report Terminations', and 'IA DEX State Admin'. Below this is a section titled 'Files Available for Download' with an 'Upload File' button. It shows counts for 'CMS Files' (32) and 'State File Exchange' (0). There are filters for 'All' and 'MED'. A table lists available files with columns: FILE NAME, DATE UPLOADED, UPLOADED BY, and FILE DESCRIPTION. A red arrow points to the 'FILE NAME' column header.

FILE NAME	DATE UPLOADED	UPLOADED BY	FILE DESCRIPTION
PECOS Ownership Data (Part 2 of 3) 1.42 kB	03/01/2024	CMS	This file contains information on the owners of Medicare enrollments screened within the last 5 years.
PECOS Ownership Data (Part 1 of 3) 1.17 kB	03/01/2024	CMS	This file contains information on the owners of Medicare enrollments screened within the last 5 years.
MED Monthly Sanctions (Excel) 48.04 kB	03/01/2024	CMS	MED Monthly Sanctions (Excel)
MED Monthly Sanctions (Text File)	03/01/2024	CMS	MED Monthly Sanctions (Text File)

11.8.2.4 File Download Functionality

- Users can download files by clicking the file name link
- Files may be available in multiple formats (e.g., Excel, Text)
- Supports retrieval of:
 - Screening data
 - Ownership data
 - Sanctions and exclusion datasets

11.8.2.5 File Upload Capability

- The **Upload File** button allows authorized users to upload files into the system
- Typically used for:
 - State submissions
 - Data exchange processes

11.8.3 Types of Files Available

Based on the current interface, files include:

- **PECOS Ownership Data**
 - Contains ownership details of Medicare-enrolled providers
 - Used for screening and validation purposes
- **MED Monthly Sanctions Files**

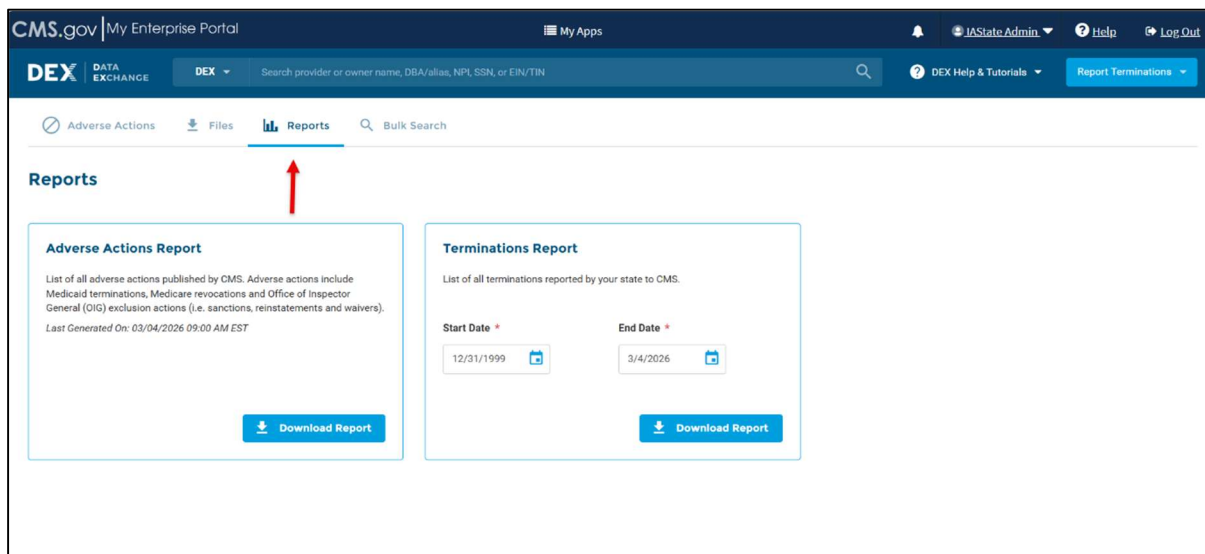
- Includes sanction-related data
- Supports monitoring of provider compliance and exclusions

The **Files** tab serves as a **central repository and access point** for all relevant data files within DEX. It allows users to efficiently **retrieve, review, and manage files** necessary for provider screening, reporting, and compliance activities.

11.8.4 Reports

Overview

The Reports tab in DEX provides users with the ability to generate and download structured reports related to adverse actions and terminations. This feature supports data analysis, auditing, compliance monitoring, and reporting needs for both CMS and SMAs. The Reports tab serves as a central reporting hub, enabling users to extract both system-generated datasets and customized reports based on specific criteria.



11.8.5 Available Reports

The Reports tab includes two primary report types:

11.8.5.1 Adverse Action Report

The Adverse Actions Report provides a comprehensive list of all adverse actions that have been published by CMS.

Included Data

This report includes:

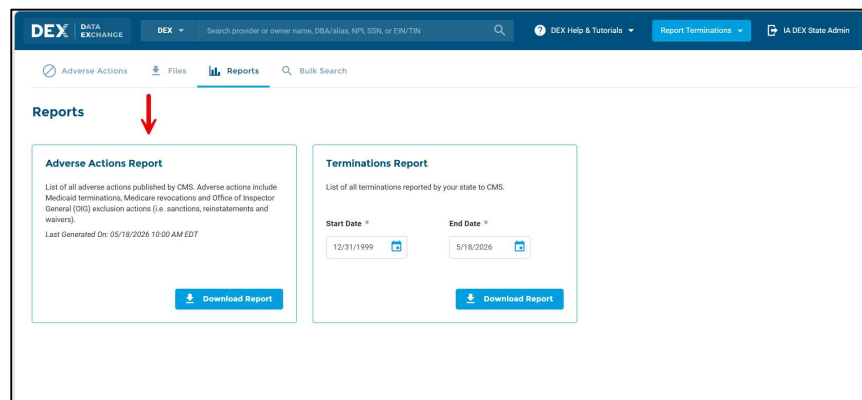
- Medicaid Terminations
- Medicare Revocations

Key Features

- Displays the last generated timestamp, indicating when the report was most recently updated
- Provides a **Download Report** button for quick access
- Does not require user-defined filters (pre-generated dataset)

Purpose

- Enables users to review finalized enforcement actions
- Supports compliance tracking and program integrity efforts
- Provides a complete view of CMS-published adverse actions



11.8.5.2 Terminations Report

Description

- The Terminations Report provides a list of all terminations that have been reported by the user's SMA to CMS.

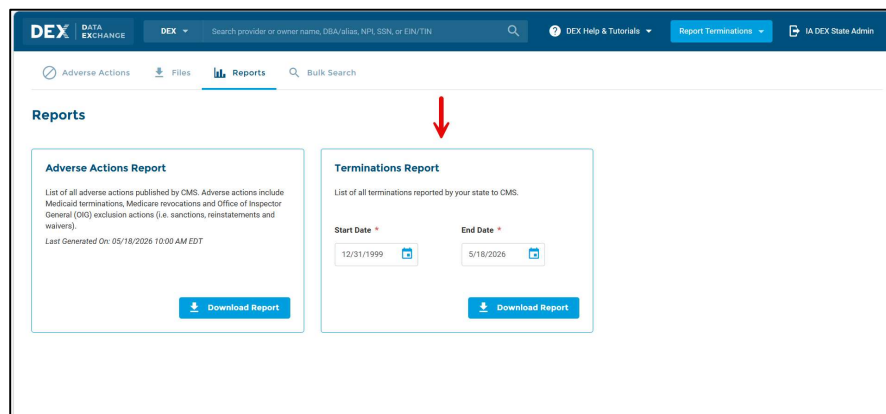
Key Features

- Allows users to define a custom date range using:
 - Start Date (required)

- End Date (required)
- Includes a **Download Report** button to generate the report based on selected criteria

Purpose

- Enables state-specific reporting and tracking
- Allows users to analyze termination activity over a defined period
- Supports internal audits and performance monitoring



11.8.5.3 Report Generation and Download

- Reports are generated in a downloadable format (e.g., Excel or CSV)
- Users can:
 - Instantly download pre-generated reports (Adverse Actions Report)
 - Generate customized reports based on selected parameters (Terminations Report)
- The **Download Report** button initiates the file download

12. Bulk Search

Bulk Search allows users to submit multiple provider or organization identifiers in a single request and retrieve matching results from DEX and DMF.

12.1 Prerequisites

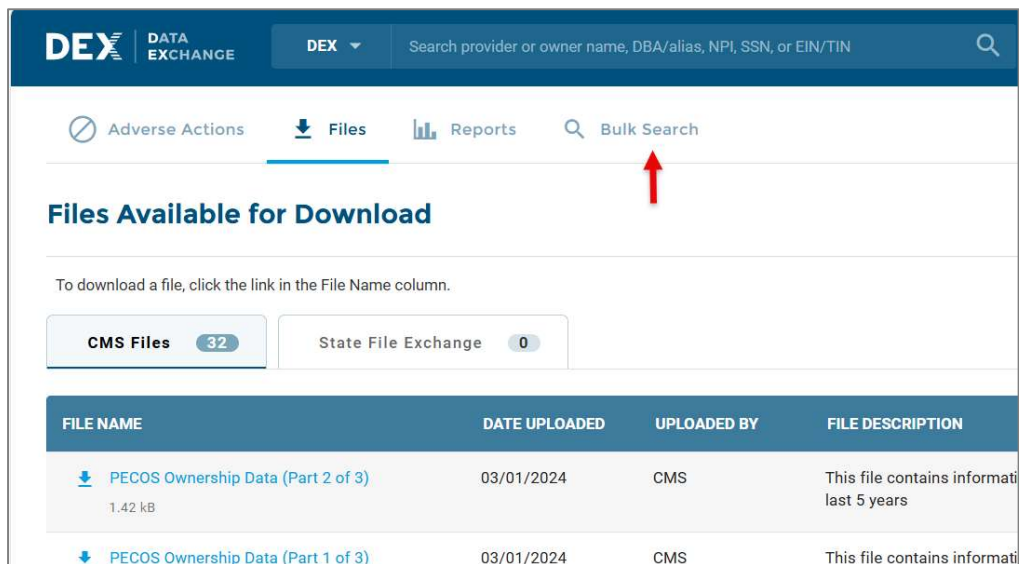
- The user is logged into the CMS.gov My Enterprise Portal.

- The user has access to the DEX application.
- Required identifiers are available (e.g., NPI, SSN, Employer Identification Number [EIN]/Taxpayer Identification Number [TIN], names).
- Ability to download, edit, and save CSV files.

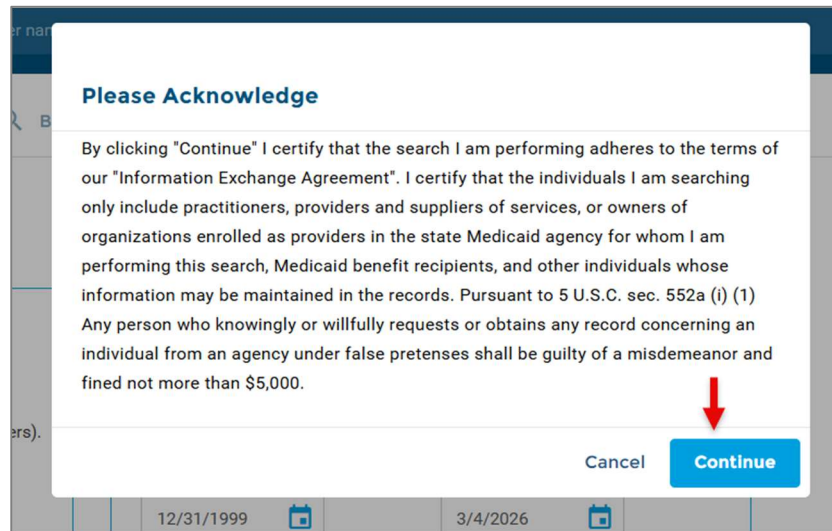
12.2 Procedure

Step 1: Access Bulk Search

1. Log in to CMS.gov and select **DEX** from My Apps.
2. From the DEX navigation menu, select **Bulk Search** (magnifying glass icon).



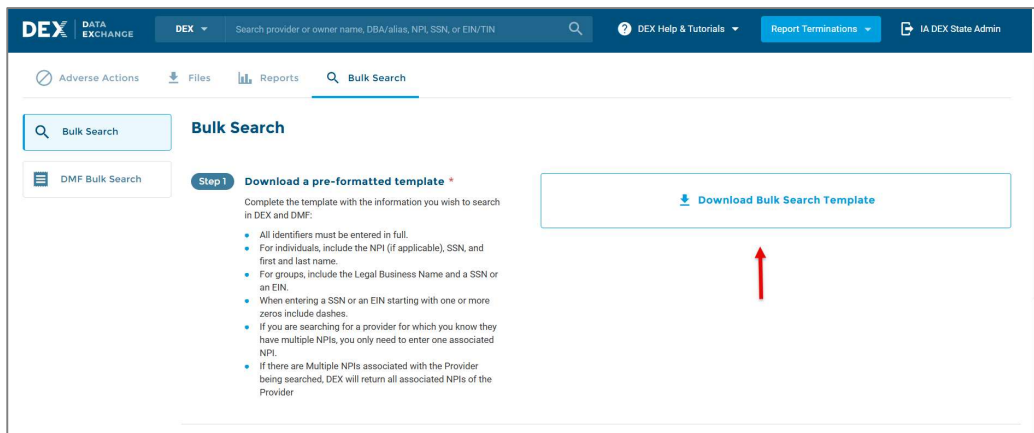
3. Acknowledge the **Information Exchange Agreement**.



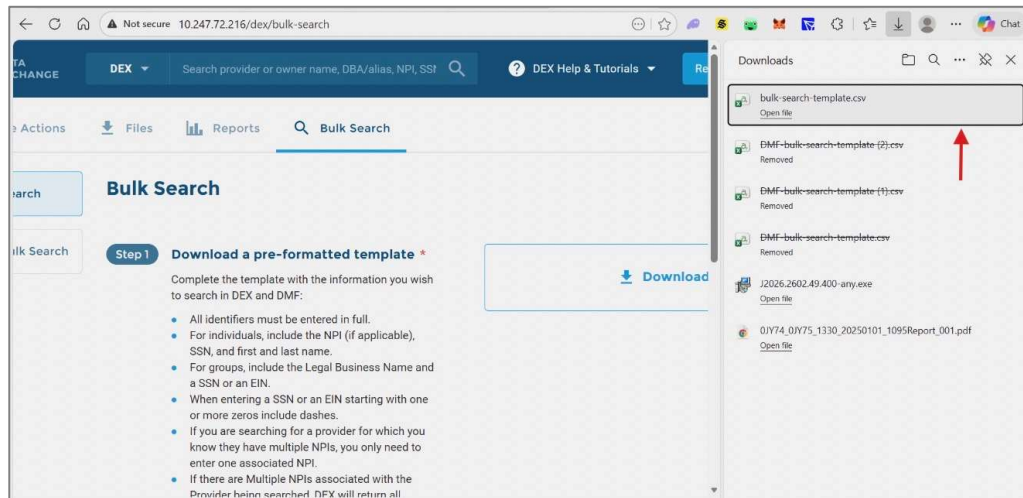
4. If performing a DMF-only search, select **DMF Bulk Search** from the left panel.

Step 2: Download the Bulk Search Template

1. Under Step 1 on the page, select **Download Bulk Search Template**.



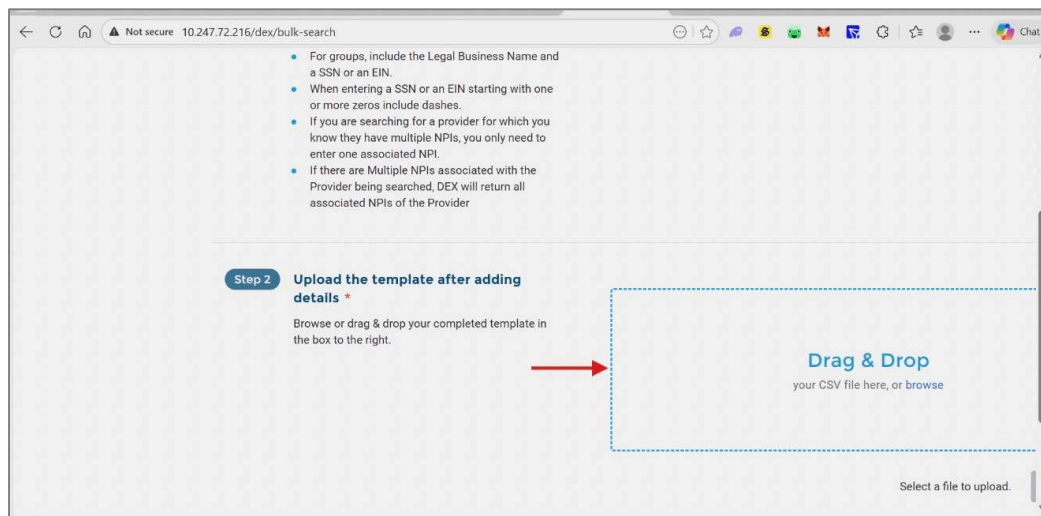
2. Save the template file to your computer.



3. Open the template and review the required columns and formatting instructions.

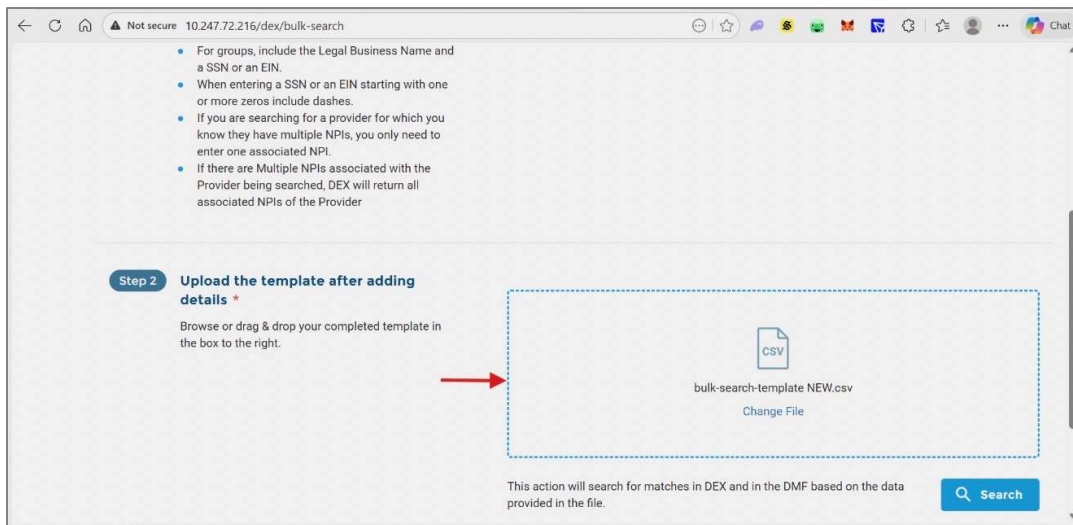
Formatting Requirements

- All identifiers must be entered in full.
- For individuals: include NPI (if applicable), SSN, First Name, and Last Name.
- For groups/organizations: include Legal Business Name and SSN or EIN.
- If SSN or EIN begins with one or more zeros, include dashes to preserve leading zeros.
- If a provider has multiple NPIs, only one associated NPI is required; DEX will return all associated NPIs.



Step 3: Complete the Template

1. Enter provider/entity information into the appropriate columns.
2. Do not modify column headers or column order.
3. Save the completed file in CSV format.
4. Retain a copy of the completed file for tracking and audit purposes.

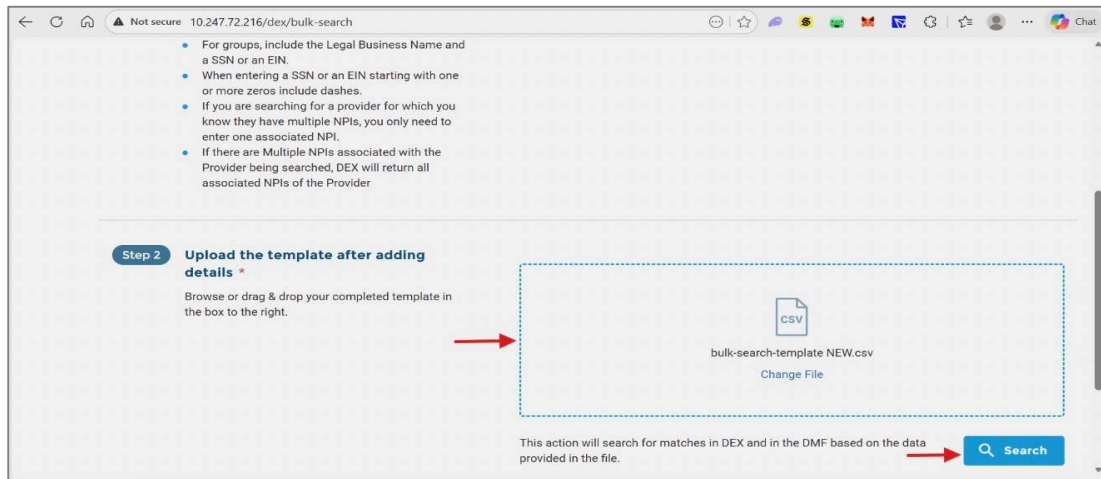


Step 4: Upload the Completed Template

1. Scroll to **Step 2: Upload the template after adding details.**
2. Drag and drop the CSV file into the upload box OR select **browse** to locate the file.
3. Confirm the file is successfully selected/uploaded.

Step 5: Execute the Bulk Search

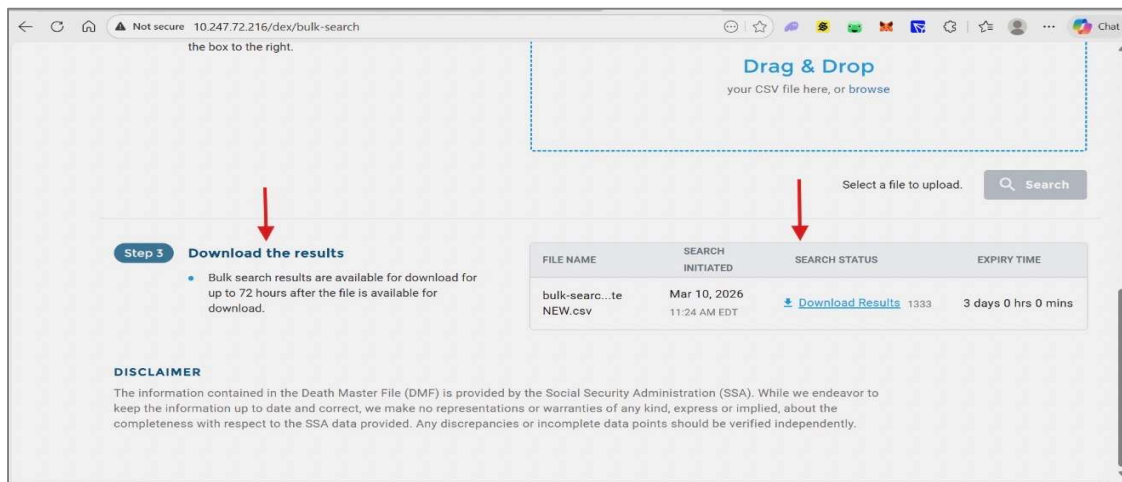
1. Select the **Search** button.



2. Allow the system time to process the file.
3. Wait for results to be returned.

Step 6: Review Results

1. Review the returned results for accuracy.
2. Verify provider/entity identifiers and associated NPIs (if applicable).
3. Download or save results according to your organization's procedures.



12.3 Troubleshooting

- If the upload fails, confirm the file is saved as CSV (not XLSX).
- If no results are returned, verify identifiers are complete and correctly formatted.

- If leading zeros are missing, ensure SSN/EIN includes dashes.
- If incorrect matches appear, verify the spelling of names and identifier accuracy.

13. Death Master File (DMF) Bulk Search

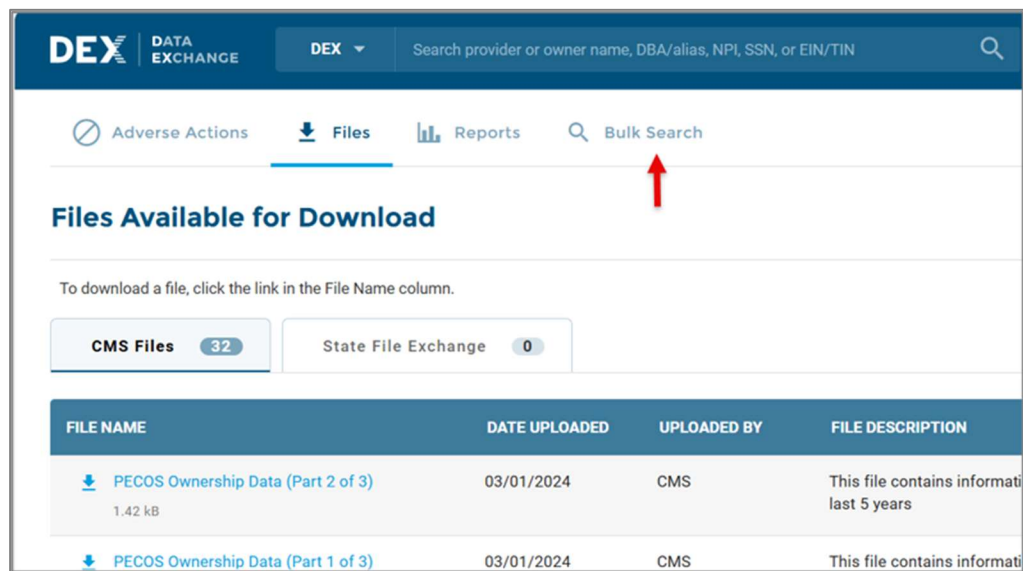
13.1 Purpose

DMF Bulk Search allows users to submit multiple identifiers in a single request to check records against the DMF data provided by the Social Security Administration (SSA).

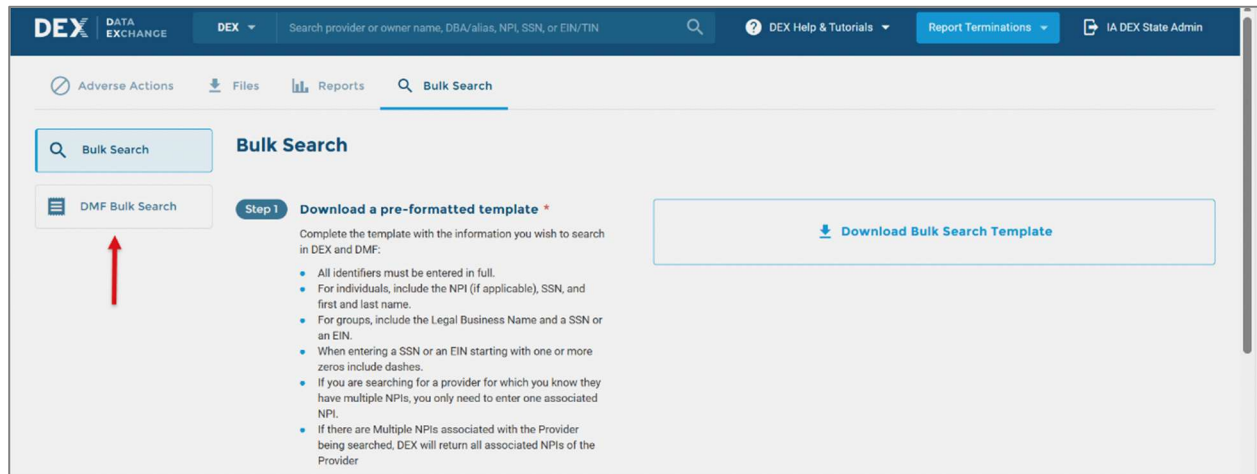
13.2 Prerequisites

- The user is logged into CMS.gov My Enterprise Portal.
- The user has access to the DEX application.
- Required identifiers are available (e.g., First Name, Last Name, NPI, and/or SSN as applicable).
- Ability to download, edit, and save CSV files.

DEX Navigation: **Bulk Search**

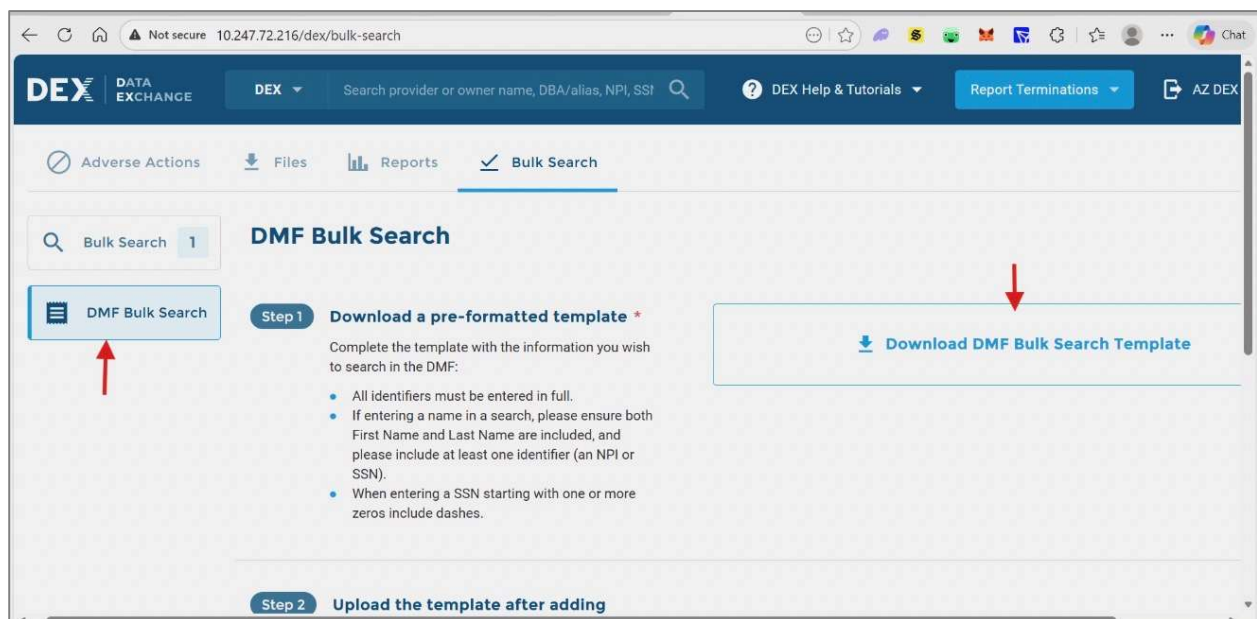


Left panel option: **DMF Bulk Search**



Step 2: Download the DMF Bulk Search Template

1. In **Step 1: Download a pre-formatted template**, select **Download DMF Bulk Search Template**.



2. Save the template file to your computer.
3. Open the template and review required columns and formatting requirements.

DMF Template Requirements

- All identifiers must be entered in full.

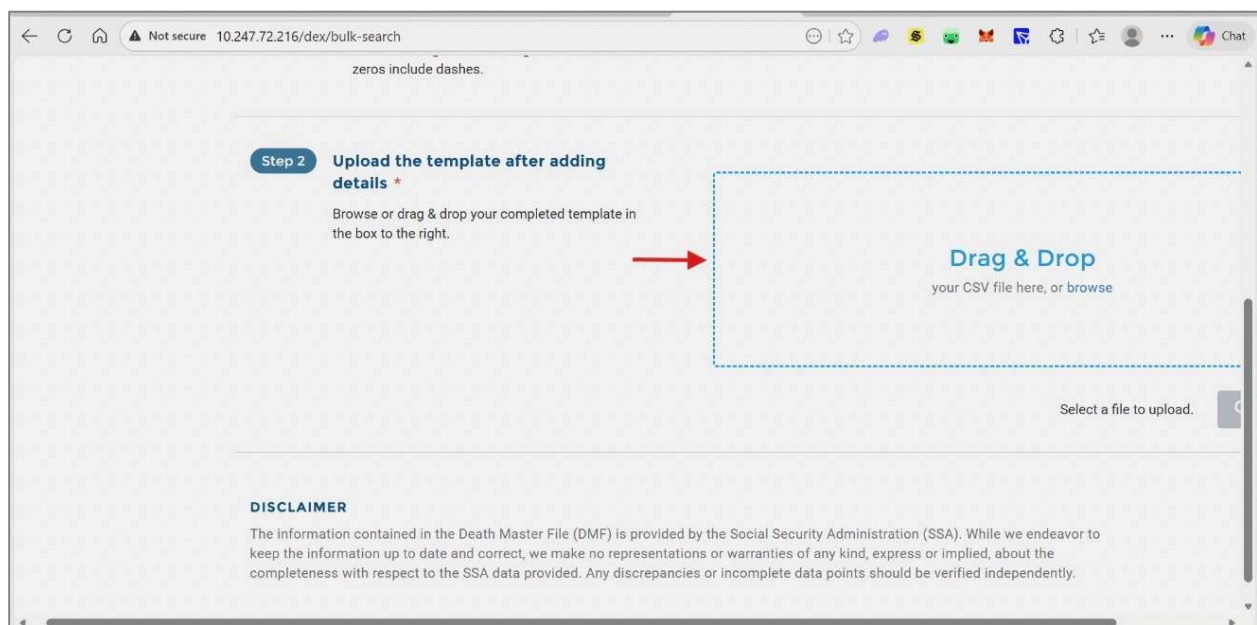
- If entering a name, include both First Name and Last Name and include at least one identifier (an NPI or SSN).
- When entering an SSN starting with one or more zeros, include dashes to preserve leading zeros.

Step 3: Complete and Save the Template

1. Enter the required information for each individual in the appropriate columns.
2. Do not modify column headers or column order.
3. Save the completed file in CSV format.
4. Retain a copy of the completed CSV for tracking and audit purposes.

Step 4: Upload the Completed CSV

1. In **Step 2: Upload the template after adding details**, upload your completed CSV file using one of the following methods:

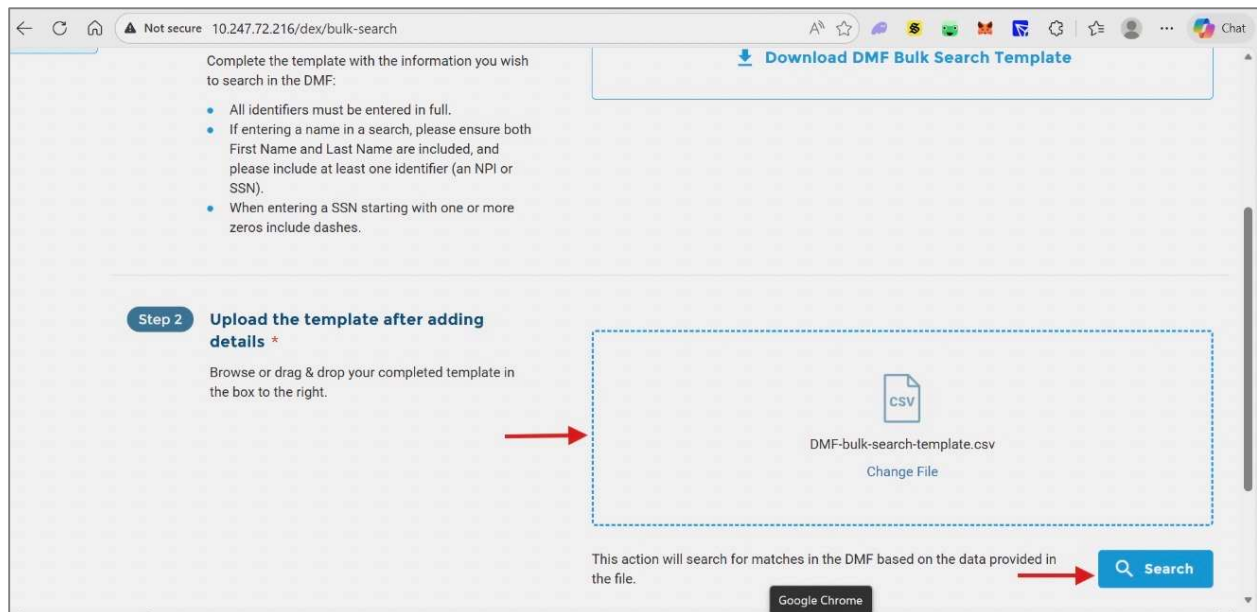


- a. Drag and drop the CSV file into the upload box.
- OR
- b. Select **Browse** to locate and select the file.

2. Confirm the file is selected/uploaded successfully (the page will indicate a file is ready to upload).

Step 5: Run the DMF Bulk Search

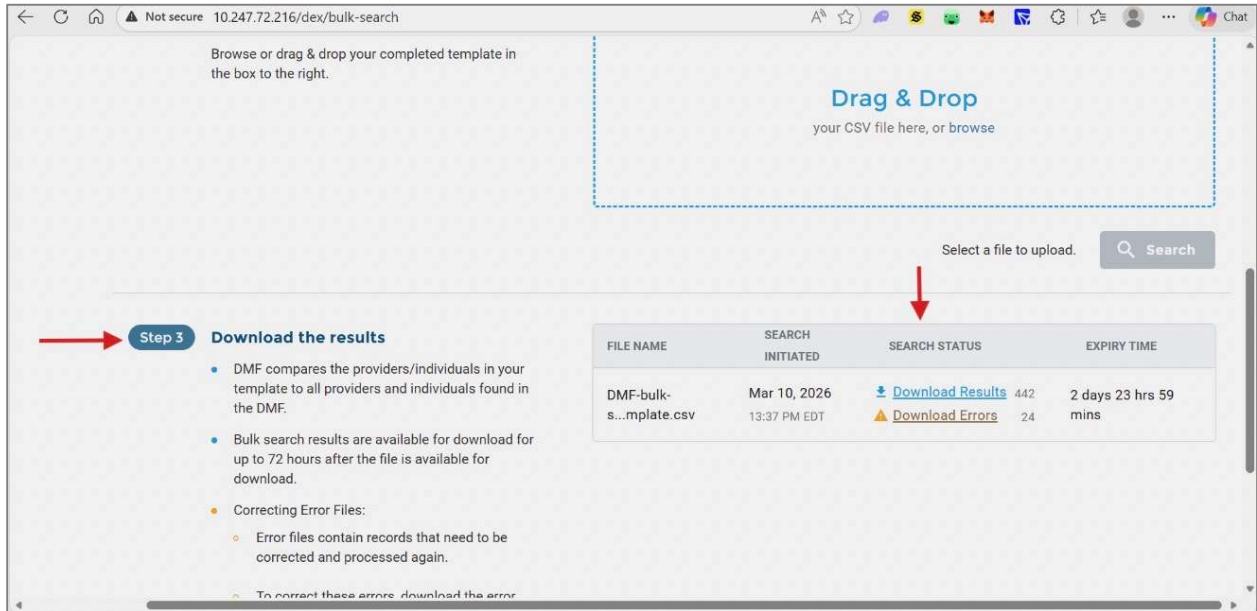
1. Select the **Search** button.



2. Allow the system to process the uploaded file.
3. Review the returned DMF results for each submitted record.

Step 6: Review Results and Follow Up

1. Validate the results align to the individuals submitted (name and identifier matching).
2. If discrepancies are identified, verify the source data and resubmit using corrected identifiers as needed.
3. Save or export results according to your organization's procedures (if available in your environment).



Browse or drag & drop your completed template in the box to the right.

Drag & Drop
your CSV file here, or browse

Select a file to upload.

Step 3 Download the results

- DMF compares the providers/individuals in your template to all providers and individuals found in the DMF.
- Bulk search results are available for download for up to 72 hours after the file is available for download.
- Correcting Error Files:
 - Error files contain records that need to be corrected and processed again.
 - To correct these errors, download the error

FILE NAME	SEARCH INITIATED	SEARCH STATUS	EXPIRY TIME
DMF-bulk-s...mplate.csv	Mar 10, 2026 13:37 PM EDT	Download Results 442 Download Errors 24	2 days 23 hrs 59 mins

13.3 Disclaimer

The information contained in the DMF is provided by the SSA. While efforts are made to keep the information up to date and correct, no representations or warranties of any kind are made regarding completeness. Any discrepancies or incomplete data points should be verified independently.

13.4 Troubleshooting

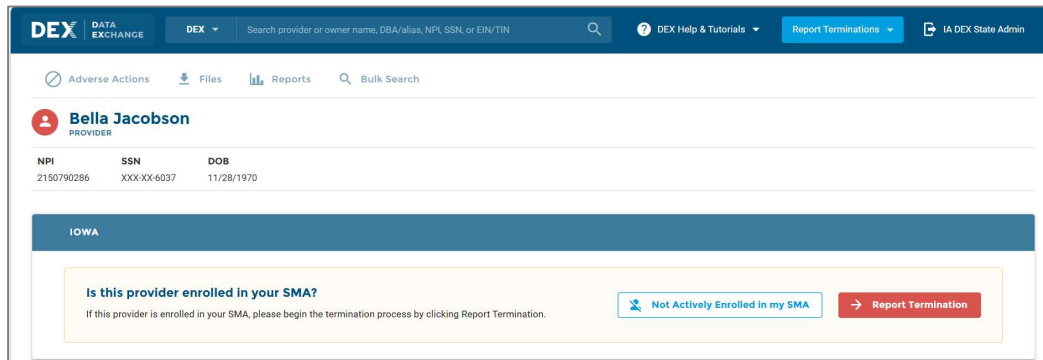
- If the upload does not work, confirm the file is saved as CSV (not XLSX).
- If there are no results or unexpected results, confirm First Name and Last Name are included and at least one identifier (NPI or SSN) is provided.
- If leading zeros are missing in the SSN, ensure dashes are included (e.g., 001-23-4567).

14. Provider Card

14.1 Overview

The Provider Card in DEX displays key identifying and demographic information for a specific provider. It serves as a quick reference header when viewing provider-related records such as adverse actions, terminations, or screening results.

This section ensures that users can easily confirm the identity of the provider before taking any action or reviewing detailed records.



14.2 Purpose of the Provider Card

The Provider Card is designed to:

- Provide immediate visibility into core provider details
- Ensure users are working with the correct provider record
- Support accurate review and decision-making
- Serve as a contextual header across provider-related workflows

14.3 Key Components of the Provider Card

1. Provider Name and Role

- a. Displays the full name of the provider (e.g., Bella Jacobson)
- b. Includes a label indicating the entity type (Provider)

This helps users quickly identify **who the record belongs to**.

2. Provider Identifiers

The card includes critical identifiers used across healthcare systems:

- a. NPI (National Provider Identifier)
 - i. A unique identification number assigned to healthcare providers
Example: 2150790286
- b. SSN

- ii. Displayed in a masked format for security (e.g., XXX-XX-6037)
- iii. Used for identity verification

These identifiers are essential for **cross-referencing and validation**.

3. Date of Birth (DOB)

- a. Displays the provider's date of birth (e.g., 11/28/1970)

This adds an additional layer of **identity confirmation**, especially when providers may have similar names.

14.3.1 State Context Header

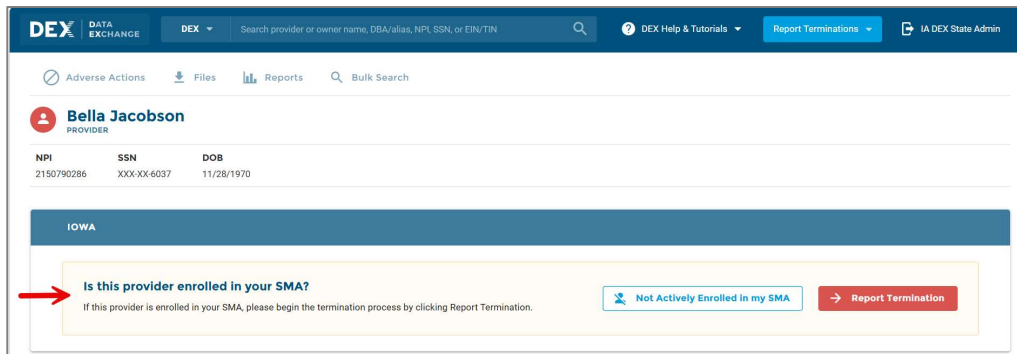
- The card includes a state-specific header (e.g., IOWA)
- This indicates the current SMA context in which the provider is being evaluated

This ensures users understand that actions taken will apply **within the selected state jurisdiction**.

14.4 Enrollment Status Message Panel

14.4.1 Purpose

- The message panel provides real-time guidance to the user regarding the provider's enrollment status within their SMA and directs the appropriate next steps.



The screenshot shows the DEX Data Exchange interface. At the top, there's a header with the DEX logo, a search bar, and navigation links. Below the header, the provider's information is displayed, including the name Bella Jacobson, NPI, SSN, and DOB. A message panel for the state of IOWA is shown, asking 'Is this provider enrolled in your SMA?' and providing two buttons: 'Not Actively Enrolled in my SMA' and 'Report Termination'.

Displayed Message

- Primary Prompt:
"Is this provider enrolled in your SMA?"
- Instructional Text:

"If this provider is enrolled in your SMA, please begin the termination process by clicking Report Termination."

14.4.2 Action Buttons

1. Not Actively Enrolled in my SMA

- a. Allows the user to indicate that the provider is not currently enrolled in their state
- b. Selecting this option:
 - i. Confirms that no termination action is required
 - ii. Helps prevent unnecessary or incorrect submissions

2. Report Termination

- a. Initiates the termination reporting workflow
- b. Used when the provider is actively enrolled in the SMA
- c. Leads the user to complete and submit a termination record to CMS

14.5 How This Section is Used

This combined Provider Card and message panel enables users to:

- Verify provider identity before taking action
- Determine whether the provider is relevant to their SMA
- Decide the appropriate course of action:
 - Proceed with termination reporting
 - Confirm no action is needed

14.6 How the Provider Card is Used

The Provider Card appears at the top of provider-related pages and is used to:

- Anchor the user within the correct provider context
- Provide consistent identification details across workflows
- Reduce errors when:
 - Reviewing adverse actions

- Processing terminations
- Conducting searches or screenings

15. Medicare Revocation Card

15.1 Overview

The Medicare Revocation Card displays detailed information about a provider's Medicare revocation action. It provides users with a comprehensive view of the revocation record, including the reason, effective dates, addresses, and CMS-related metadata. This card is used to support review, validation, and decision-making regarding provider eligibility and enforcement actions.

15.2 Header Section

15.2.1 Title

"Medicare Revocation – Enrollment ID: 020090219000629 | Enrollment State: OH"

Description:

- **Medicare Revocation** – Indicates the type of adverse action
- **Enrollment ID** – A unique identifier assigned to the provider's Medicare enrollment record
- **Enrollment State (OH)** – The state associated with the provider's Medicare enrollment

This section provides **quick context** about the specific revocation record being viewed.

MEDICARE REVOCATION - ENROLLMENT ID: 020090219000629 ENROLLMENT STATE: OH			
NPI 1061085217 Revocation Effective Date 10/17/2016 Enrollment Bar Expiration Date 08/13/2019	Revocation Reason Felony Conviction/Guilty Plea/Adjudicated Pretrial Diversion	Correspondence Address 12312 Some Lane Herndon, VA 20171	Published Date 03/15/2017
	CMS Notes This record is expected to import with no errors	Practice Address Practice Lane Chantilly, VA 20918	Date Last Updated 12/09/2019

15.2.2 Revocation

Medicare Revocation is the termination of a provider's or supplier's Medicare billing privileges, carried out by the Centers for Medicare & Medicaid Services (CMS), pursuant to 42 C.F.R. § 424.535. Medicare revocations occur when a provider's Medicare billing privileges and any

corresponding provider agreement have been adversely terminated from the Medicare program.

15.2.3 Status Indicator (Top Right Corner)

15.2.3.1 Status: Revoked

Description:

- Displays the status of the Medicare enrollment
- In this case, "Revoked" indicates that:
 - The provider's Medicare enrollment has been officially terminated by CMS
 - The provider is no longer authorized to participate in Medicare

This is a **critical visual indicator** used to quickly understand the enforcement status.



MEDICARE REVOCATION - ENROLLMENT ID: O20090219000629 ENROLLMENT STATE: OH			
NPI 1061085217	Revocation Reason Felony Conviction/Guilty Plea/Adjudicated Pretrial Diversion	Correspondence Address 12312 Some Lane Herndon, VA 20171	Published Date 03/15/2017
Revocation Effective Date 10/17/2016	CMS Notes This record is expected to import with no errors	Practice Address Practice Lane Chantilly, VA 20918	Date Last Updated 12/09/2019
Enrollment Bar Expiration Date 08/13/2019			

15.2.3.2 Status: Deactivated

Description:

- Displays the status of the Medicare enrollment
- Medicare Deactivation is an administrative action through which a provider's or supplier's Medicare billing privileges are rendered inactive under 42 C.F.R. § 424.540. A provider or supplier whose billing privileges have been deactivated may have them restored by submitting the necessary enrollment information, completing any required updates, and otherwise coming back into compliance with Medicare enrollment requirements

This is a **critical visual indicator** used to quickly understand the enforcement status.



MEDICARE REVOCATION - ENROLLMENT ID: 120160712000570 ENROLLMENT STATE: MI			
Information changes have been made			
NPI 1265490791	Revocation Reason 424535(A)(13) Prescribing Authority	Correspondence Address 18341 Us Highway 41 Lansse, MI 49946-8024	Data Notes Record No Longer Qualifies: Revocation is followed by a subsequent deactivation
Revocation Effective Date 04/27/2017	Practice Address 18341 Us Highway 41 Lansse, MI 49946-8024	Published Date 10/15/2017	Date Last Updated 12/09/2024
Enrollment Bar Expiration Date 05/26/2018			

15.2.3.3 Status: Approved

Description:

- Displays the status of the Medicare enrollment
- A provider or supplier has met all applicable enrollment requirements and is authorized to bill the Medicare program for covered items and services.

This is a **critical visual indicator** used to quickly understand the enforcement status.

15.3 Field-Level Details

15.3.1 National Provider Identifier (NPI)

- Example: 1061085217
- A unique identifier assigned to the provider



MEDICARE REVOCATION - ENROLLMENT ID: 020090219000629 ENROLLMENT STATE: OH			
NPI 1061085217	Revocation Reason Felony Conviction/Guilty Plea/Adjudicated Pretrial Diversion	Correspondence Address 12312 Some Lane Herndon, VA 20171	Published Date 03/15/2017
Revocation Effective Date 10/17/2016	CMS Notes This record is expected to import with no errors	Practice Address Practice Lane Chantilly, VA 20918	Date Last Updated 12/09/2019
Enrollment Bar Expiration Date 08/13/2019			

15.3.2 Revocation Reason

- Example: *Felony Conviction / Guilty Plea / Adjudicated Pretrial Diversion*

This explains the **regulatory or legal basis** for the revocation.

This helps users understand **why the provider was revoked**.

MEDICARE REVOCATION - ENROLLMENT ID: 020090219000629 ENROLLMENT STATE: OH				Revoked
NPI 1061085217	Revocation Reason Felony Conviction/Guilty Plea/Adjudicated Pretrial Diversion	Correspondence Address 12312 Some Lane Herndon, VA 20171	Published Date 03/15/2017	
Revocation Effective Date 10/17/2016	CMS Notes This record is expected to import with no errors	Practice Address Practice Lane Chantilly, VA 20918	Date Last Updated 12/09/2019	
Enrollment Bar Expiration Date 08/13/2019				

15.3.3 Revocation Effective Date

- Example: 10/17/2016

The date on which the revocation officially took effect.

This is important for compliance timelines and enforcement tracking.

MEDICARE REVOCATION - ENROLLMENT ID: 020090219000629 ENROLLMENT STATE: OH				Revoked
NPI 1061085217	Revocation Reason Felony Conviction/Guilty Plea/Adjudicated Pretrial Diversion	Correspondence Address 12312 Some Lane Herndon, VA 20171	Published Date 03/15/2017	
Revocation Effective Date 10/17/2016	CMS Notes This record is expected to import with no errors	Practice Address Practice Lane Chantilly, VA 20918	Date Last Updated 12/09/2019	
Enrollment Bar Expiration Date 08/13/2019				

15.3.4 Enrollment Bar Expiration Date

- Example: 08/13/2019

Indicates the date when the provider's re-enrollment restriction (bar) expires.

Until this date, the provider is not eligible to re-enroll in Medicare.

MEDICARE REVOCATION - ENROLLMENT ID: 020090219000629 ENROLLMENT STATE: OH				Revoked
NPI 1061085217	Revocation Reason Felony Conviction/Guilty Plea/Adjudicated Pretrial Diversion	Correspondence Address 12312 Some Lane Herndon, VA 20171	Published Date 03/15/2017	
Revocation Effective Date 10/17/2016	CMS Notes This record is expected to import with no errors	Practice Address Practice Lane Chantilly, VA 20918	Date Last Updated 12/09/2019	
Enrollment Bar Expiration Date 08/13/2019				

15.3.5 CMS Notes

- Example: "This record is expected to import with no errors"

Provides internal CMS comments or system notes related to the record.

These notes may include:

- Processing expectations
- Data quality indicators
- Administrative remarks

MEDICARE REVOCATION - ENROLLMENT ID: O20090219000629 ENROLLMENT STATE: OH			
NPI 1061085217	Revocation Reason Felony Conviction/Guilty Plea/Adjudicated Pretrial Diversion	Correspondence Address 12312 Some Lane Herndon, VA 20171	Published Date 03/15/2017
Revocation Effective Date 10/17/2016	CMS Notes This record is expected to import with no errors	Practice Address Practice Lane Chantilly, VA 20918	Date Last Updated 12/09/2019
Enrollment Bar Expiration Date 08/13/2019			

15.3.6 Correspondence Address

- Example:

12312 Some Lane

Herndon, VA 20171

The official mailing address used for communications with the provider.

MEDICARE REVOCATION - ENROLLMENT ID: O20090219000629 ENROLLMENT STATE: OH			
NPI 1061085217	Revocation Reason Felony Conviction/Guilty Plea/Adjudicated Pretrial Diversion	Correspondence Address 12312 Some Lane Herndon, VA 20171	Published Date 03/15/2017
Revocation Effective Date 10/17/2016	CMS Notes This record is expected to import with no errors	Practice Address Practice Lane Chantilly, VA 20918	Date Last Updated 12/09/2019
Enrollment Bar Expiration Date 08/13/2019			

15.3.7 Practice Address

- Example:

Practice Lane

Chantilly, VA 20918

The physical location where the provider conducts business or delivers services.

MEDICARE REVOCATION - ENROLLMENT ID: 020090219000629 ENROLLMENT STATE: OH				Revoked
NPI 1061085217	Revocation Reason Felony Conviction/Guilty Plea/Adjudicated Pretrial Diversion	Correspondence Address 12312 Some Lane Herndon, VA 20171	Published Date 03/15/2017	
Revocation Effective Date 10/17/2016	CMS Notes This record is expected to import with no errors	Practice Address Practice Lane Chantilly, VA 20918	Date Last Updated 12/09/2019	
Enrollment Bar Expiration Date 08/13/2019				

15.3.8 Published Date

- Example: 03/15/2017

The date when the revocation action was published in DEX by CMS.

This represents when the information became visible to users and states.

MEDICARE REVOCATION - ENROLLMENT ID: 020090219000629 ENROLLMENT STATE: OH				Revoked
NPI 1061085217	Revocation Reason Felony Conviction/Guilty Plea/Adjudicated Pretrial Diversion	Correspondence Address 12312 Some Lane Herndon, VA 20171	Published Date 03/15/2017	
Revocation Effective Date 10/17/2016	CMS Notes This record is expected to import with no errors	Practice Address Practice Lane Chantilly, VA 20918	Date Last Updated 12/09/2019	
Enrollment Bar Expiration Date 08/13/2019				

15.3.9 Date Last Updated

- Example: 12/09/2019

Indicates the most recent date the record was modified or updated.

Useful for:

- Tracking changes
- Ensuring users are viewing the latest data

MEDICARE REVOCATION - ENROLLMENT ID: 020090219000629 ENROLLMENT STATE: OH				Revoked
NPI 1061085217	Revocation Reason Felony Conviction/Guilty Plea/Adjudicated Pretrial Diversion	Correspondence Address 12312 Some Lane Herndon, VA 20171	Published Date 03/15/2017	
Revocation Effective Date 10/17/2016	CMS Notes This record is expected to import with no errors	Practice Address Practice Lane Chantilly, VA 20918	Date Last Updated 12/09/2019	
Enrollment Bar Expiration Date 08/13/2019				

15.4 How This Card is Used

The Medicare Revocation Card enables users to:

- Review key enforcement details for a provider
- Understand the reason and timeline of the revocation
- Determine eligibility for re-enrollment
- Validate provider information across systems
- Support state-level decision-making and compliance actions

15.5 Appealing a Medicare Revocation

A provider can appeal a **revocation in DEX** to protect the provider's ability to continue practicing and participating in federal healthcare programs. Upon internal CMS review, these are the available 'Appeal Statuses' in DEX.

- **Overtured:**
An overturned status indicates that a provider's or supplier's previously revoked Medicare billing privileges are reinstated following a successful appeal through the administrative process established under 42 C.F.R. § 424.545 and 42 C.F.R. Part 498.
- **Dismissed:**
A dismissed appeal status indicates that a provider's or supplier's request to appeal a revocation under 42 C.F.R. § 424.535 was terminated without a ruling on the merits. The original revocation remains in effect.
- **Rescinded:**
A rescinded status indicates that a revocation action previously issued against a provider or supplier has been withdrawn or cancelled by CMS, effectively restoring the provider's Medicare billing privileges.
- **Upheld:**
An upheld appeal status indicates that a provider's or supplier's appeal of a revocation action under 42 C.F.R. § 424.535 was reviewed and the original revocation was affirmed by the reviewing authority. The revocation remains in effect, and any associated re-enrollment bar continues to apply.

16. Medicaid Termination Card

16.1 Overview

The Medicaid Termination Card provides a detailed view of a provider's termination action initiated by a SMA. It includes all relevant information needed to understand the reason, timing, supporting documentation, and status of the termination. This card supports state-level enforcement, compliance tracking, and coordination with CMS.

16.2 Header Section

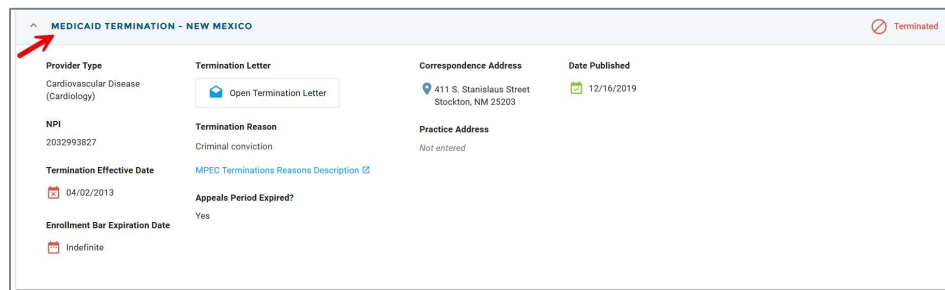
16.2.1 Title

- "Medicaid Termination – New Mexico"

Description:

- Medicaid Termination – Identifies the type of adverse action
- New Mexico – Indicates the state (SMA) that reported the termination

This confirms that the action is state-reported, not directly initiated by CMS.



MEDICAID TERMINATION - NEW MEXICO			
Provider Type Cardiovascular Disease (Cardiology)	Termination Letter Open Termination Letter	Correspondence Address 411 S. Stanislaus Street Stockton, NM 25203	Date Published 12/16/2019
NPI 2032993827	Termination Reason Criminal conviction	Practice Address Not entered	
Termination Effective Date 04/02/2013	MPEC Terminations Reasons Description		
Enrollment Bar Expiration Date Indefinite	Appeals Period Expired? Yes		

16.2.2 Status Indicator (Top Right Corner)

16.2.2.1 Status: Terminated

Description:

- Displays the status of the provider within the state program
- "Terminated" indicates that:
 - The provider has been officially removed from participation in the state Medicaid program

- The termination is finalized and in effect

This is a **critical visual indicator** used to quickly assess enforcement status.

16.3 Field-Level Details

16.3.1 *Provider Type*

- Example: *Cardiovascular Disease (Cardiology)*

Identifies the provider's **specialty** within the healthcare system.

16.3.2 *National Provider Identifier (NPI)*

- Example: 2032993827

A unique identifier used to track the provider across systems.

16.3.3 *Termination Effective Date*

- Example: 04/02/2013

The date when the termination officially took effect.

This is critical for:

- Compliance timelines
- Determining when services should no longer be rendered

16.3.4 *Enrollment Bar Expiration Date*

- Example: *Indefinite*

Indicates how long the provider is prohibited from re-enrolling in Medicaid.

- *Indefinite* means:
 - The provider is **permanently barred** unless otherwise overturned or reinstated

16.3.5 *Termination Letter*

- Action: **"Open Termination Letter"**

Provides access to the official termination notice/document.

This document typically includes:

- Formal reasoning

- Legal references
- Notification details sent to the provider

16.3.6 *Termination Reason*

- Example: *Criminal conviction*

Explains the basis for the termination

This helps users understand:

- Why enforcement action was taken
- Whether it aligns with federal/state policy

16.3.7 *Medicaid Provider Enrollment Compendium (MPEC) Termination Reasons Description (Link)*

- Example: *"MPEC Terminations Reasons Description"*

External reference link that provides detailed definitions and policy guidance for termination reasons.

Supports:

- Standardization
- Regulatory interpretation

16.3.8 *Appeals Period Expired*

- Example: Yes

Indicates whether the provider's appeal window has passed.

- Yes means:
 - The provider can **no longer appeal the termination**
 - The action is considered **final and enforceable**

16.3.9 *Correspondence Address*

- Example:

411 S. Stanislaus Street

Stockton, NM 25203

The address used for official communications with the provider, including termination notices.

16.3.10 Practice Address

- Example: *Not entered*

Represents the provider's **business/service location**.

- If not entered:
 - The information was not provided or not available in the system

16.3.11 Date Published

- Example: *12/16/2019*

The date the termination was published in DEX and made visible to users.

This is important for:

- Tracking when states and CMS became aware of the action
- Reporting and audit timelines

16.4 How This Card is Used

The Medicaid Termination Card enables users to:

- Review state-reported enforcement actions
- Understand the reason and severity of termination
- Verify whether the action is final (appeals expired)
- Access supporting documentation (termination letter)
- Determine re-enrollment eligibility

17. Reporting Ownership Data for a Termination

17.1 Overview

Ownership data is collected as part of the Medicaid Termination reporting process. States are required to report all individuals and entities that have an ownership interest of **5 percent or**

greater in the terminated provider, including ownership information from the previous five years.

Ownership reporting applies only to the following provider enrollment types:

- **Organization**
- **Individual Enrolled as an Organization**

Ownership reporting is **not required for Individual providers**, as individual providers do not have owners associated with their enrollment record.

An owner may be:

- An individual person
- An entity (organization)
- A provider already existing within DEX

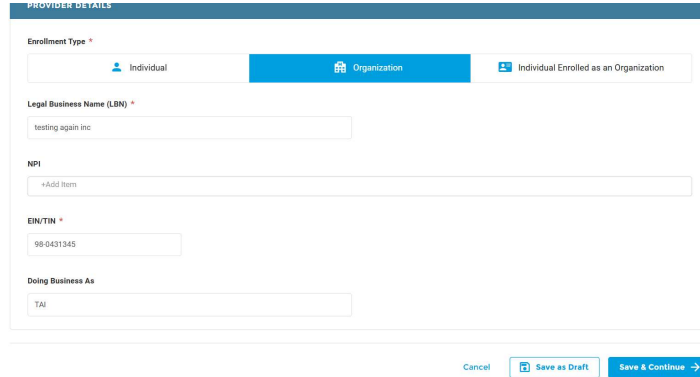
After ownership information is submitted with a termination, the ownership record enters the CMS ownership review workflow where CMS Administrators or the designated contractor validate the ownership information before it becomes verified.

17.2 Prerequisites

17.2.1

Before ownership information can be entered:

1. A provider record must be created.
2. The provider enrollment type must be either:
 - Organization, or
 - Individual Enrolled as an Organization.
3. The termination details must be entered and saved.

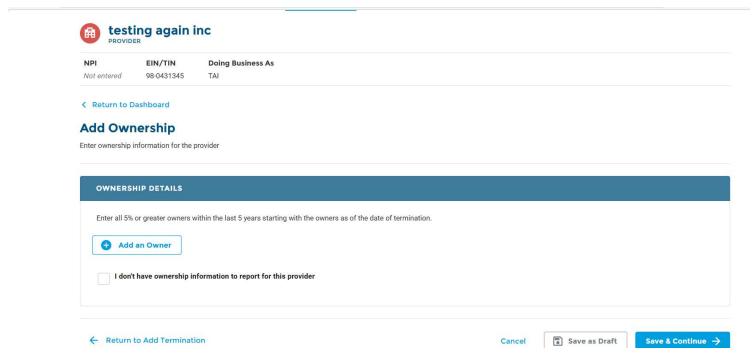


The screenshot shows the 'PROVIDER DETAILS' form. It has three tabs: 'Individual' (selected), 'Organization', and 'Individual Enrolled as an Organization'. The 'Legal Business Name (LBN)' field contains 'testing again inc'. The 'NPI' field has an '+Add Item' button. The 'EIN/TIN' field contains '98-0431345'. The 'Doing Business As' field contains 'TAI'. At the bottom are 'Cancel', 'Save as Draft', and 'Save & Continue' buttons.

The provider information page captures the Legal Business Name (LBN), NPI (if available), EIN/TIN, and Doing Business As (DBA) information before proceeding to ownership reporting.

17.2.2 Adding Ownership Information

After completing the provider and termination information, DEX automatically navigates to the **Add Ownership** page.



The screenshot shows the 'Add Ownership' page for 'testing again inc'. It displays the provider's NPI (Not entered), EIN/TIN (98-0431345), and Doing Business As (TAI). There is a 'Return to Dashboard' link. The 'Add Ownership' section has a sub-header 'Enter ownership information for the provider'. Below this is the 'OWNERSHIP DETAILS' section with instructions: 'Enter all 5% or greater owners within the last 5 years starting with the owners as of the date of termination.' There is an 'Add an Owner' button and a checkbox for 'I don't have ownership information to report for this provider'. At the bottom are 'Return to Add Termination', 'Cancel', 'Save as Draft', and 'Save & Continue' buttons.

The Ownership Details section displays instructions reminding users to report all owners with a **5% or greater ownership interest within the last five years**, beginning with owners who existed as of the termination date.

To add an owner:

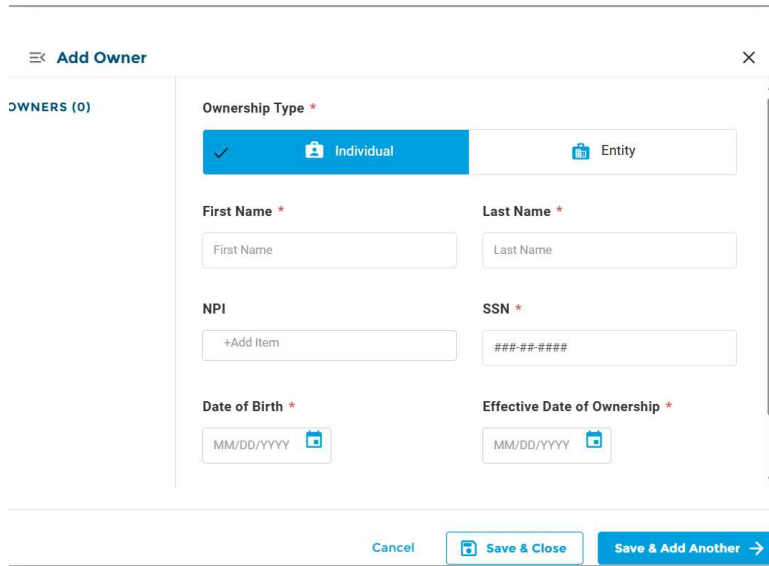
1. Select **Add an Owner**.
2. Complete the required ownership information.
3. Save the owner record.
4. Repeat as necessary for additional owners.

If ownership information is unavailable, select the checkbox:

"I don't have ownership information to report for this provider."

17.3 Entering Owner Information

17.3.1 *When the Add Owner dialog opens, users must identify the owner type and provide the required information.*



17.3.2 Owner Types

DEX supports two owner types:

17.3.2.1 Individual Owner

For individual owners, enter:

- First Name
- Last Name
- SSN
- Date of Birth
- Ownership Effective Date
- NPI (optional, if applicable)

17.3.2.2 Entity Owner

For entity owners, enter organizational ownership information, including identifying information and ownership dates.

Required Question

Users must indicate whether the owner was a:

"5% or greater owner as of the date of the termination."

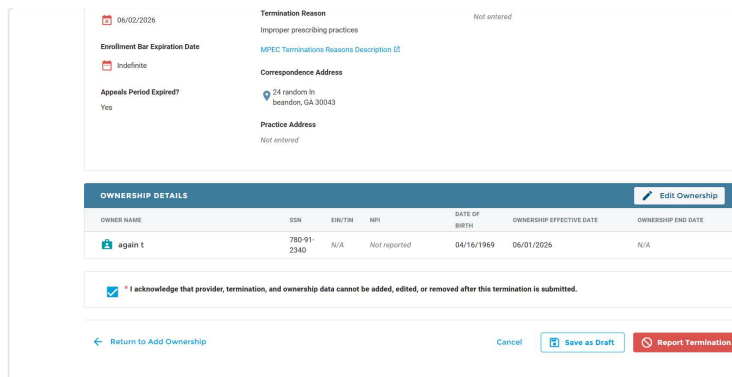
Select:

- Yes
- No

17.4 Submitting Ownership Information

After all ownership records have been entered:

1. Review the ownership table.
2. Verify that all required owners have been reported.
3. Select the acknowledgment checkbox.



The screenshot shows a form for terminating ownership. It includes fields for Termination Reason (Improper prescribing practices), Enrollment Bar Expiration Date (Indefinite), Correspondence Address (24 random in Berkeley, CA 94703), and Practice Address (Not entered). Below these is a table titled 'OWNERSHIP DETAILS' with columns for OWNER NAME, SSN, EIN/TIN, NPI, DATE OF BIRTH, OWNERSHIP EFFECTIVE DATE, and OWNERSHIP END DATE. The table contains one entry for 'again t' with SSN 780-91-2340, N/A EIN/TIN, Not reported NPI, 04/16/1969 birth date, 06/01/2025 effective date, and N/A end date. At the bottom, there is a checkbox labeled 'I acknowledge that provider, termination, and ownership data cannot be added, edited, or removed after this termination is submitted.' which is checked. Navigation buttons at the bottom include 'Return to Add Ownership', 'Cancel', 'Save as Draft', and 'Report Termination'.

OWNER NAME	SSN	EIN/TIN	NPI	DATE OF BIRTH	OWNERSHIP EFFECTIVE DATE	OWNERSHIP END DATE
again t	780-91-2340	N/A	Not reported	04/16/1969	06/01/2025	N/A

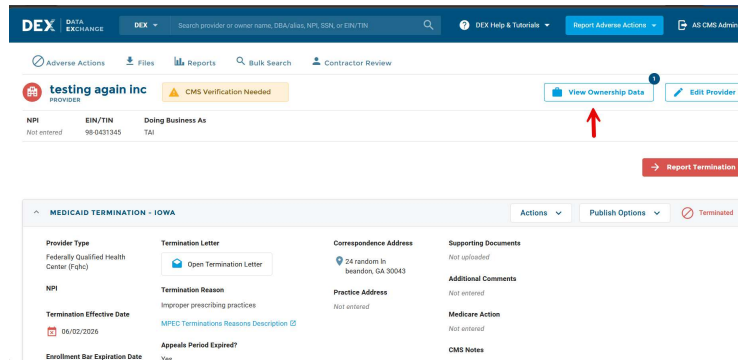
The acknowledgment statement confirms:

"I acknowledge that provider, termination, and ownership data cannot be added, edited, or removed after this termination is submitted."

4. Select **Report Termination** to submit the termination and associated ownership data.

17.5 Ownership Review Workflow

Once a termination is submitted, ownership information enters the CMS ownership review process.

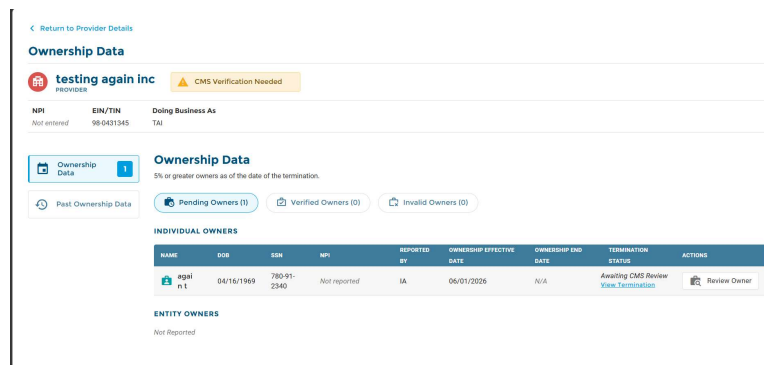


The screenshot shows the DEX Data Exchange interface. At the top, there's a navigation bar with 'DEX DATA EXCHANGE', a search bar, and links for 'Report Adverse Actions' and 'All CMS Admin'. Below the navigation bar, there's a section for 'testing again inc' with a 'CMS Verification Needed' warning. A red arrow points to the 'View Ownership Data' button. Below this, there's a 'MEDICAID TERMINATION - IOWA' section with various fields like 'Provider Type', 'Termination Letter', 'Correspondence Address', 'Supporting Documents', 'NPI', 'Termination Reason', 'Practice Address', 'Additional Comments', 'Termination Effective Date', 'Appeals Period Expired?', 'Medicare Action', and 'CMS Notes'.

CMS Administrators and authorized contractors can access ownership information by selecting **View Ownership Data** from the provider record.

17.6 Ownership Queues

Ownership records are organized into review queues.



The screenshot shows the 'Ownership Data' page. It includes a 'Return to Provider Details' link, a 'testing again inc' provider record, and a 'CMS Verification Needed' warning. Below this, there's a 'Ownership Data' section with a 'Pending Owners (1)' button. A table titled 'INDIVIDUAL OWNERS' shows the following data:

NAME	DOB	SSN	NPI	REPORTED BY	OWNERSHIP EFFECTIVE DATE	OWNERSHIP END DATE	TERMINATION STATUS	ACTIONS
agail n t	04/16/1969	780-91-2340	Not reported	IA	06/01/2026	N/A	Awaiting CMS Review View Termination	Review Owner

Below the table, there's a section for 'ENTITY OWNERS' which is currently empty.

The Ownership Data page contains three review statuses:

Queue	Description
Pending Owners	Ownership records awaiting CMS review and verification.

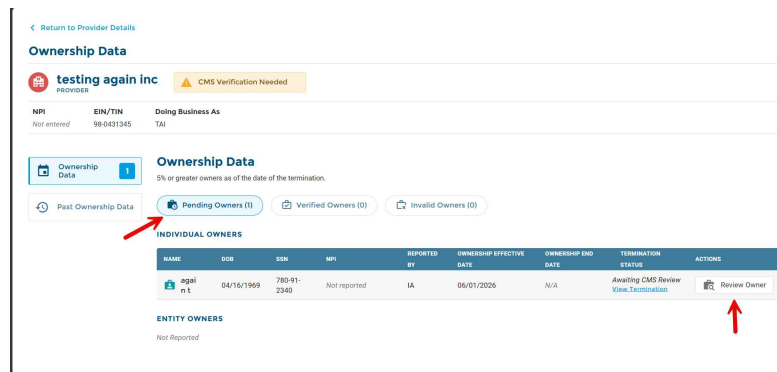
Queue	Description
Verified Owners	Ownership records successfully reviewed and approved by CMS.
Invalid Owners	Ownership records determined to be incomplete, inaccurate, or unable to be verified.

When initially submitted, all ownership records are placed in the **Pending Owners** queue.

17.7 Reviewing an Owner

To review a pending owner:

1. Navigate to the **Pending Owners** tab.
2. Locate the ownership record.
3. Select **Review Owner**.



The ownership review page displays all information submitted by the state, including:

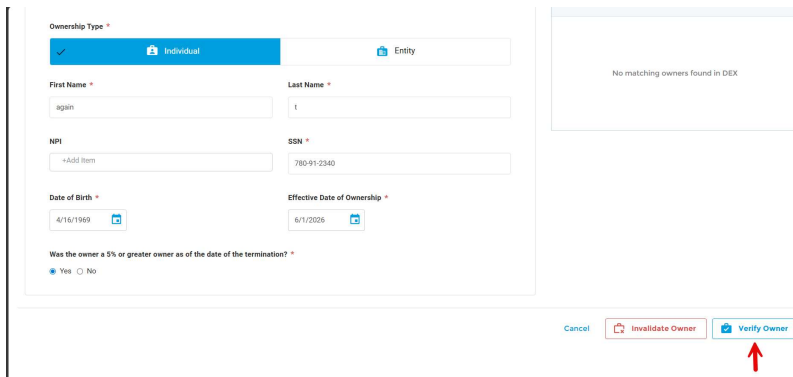
- Owner Name
- SSN
- Date of Birth
- NPI
- Ownership Effective Date
- Ownership Status

CMS reviewers can compare the submitted information with available DEX records and supporting information.

17.8 Verifying an Owner

If the ownership information is accurate and complete:

1. Review the owner details.
2. Select **Verify Owner**.



The screenshot shows a web form for verifying an owner. The form is divided into two main sections. The left section contains fields for 'Ownership Type' (with 'Individual' selected), 'First Name' (with 'again' entered), 'Last Name' (with 't' entered), 'NPI' (with '+Add Item' button), 'SSN' (with '780-91-2340' entered), 'Date of Birth' (with '4/15/1969' and a calendar icon), and 'Effective Date of Ownership' (with '6/1/2025' and a calendar icon). Below these fields is a question: 'Was the owner a 5% or greater owner as of the date of the termination?' with radio buttons for 'Yes' (selected) and 'No'. The right section is a box with the text 'No matching owners found in DEX'. At the bottom of the form are three buttons: 'Cancel', 'Invalidate Owner' (with a red icon), and 'Verify Owner' (with a blue icon). A red arrow points to the 'Verify Owner' button.

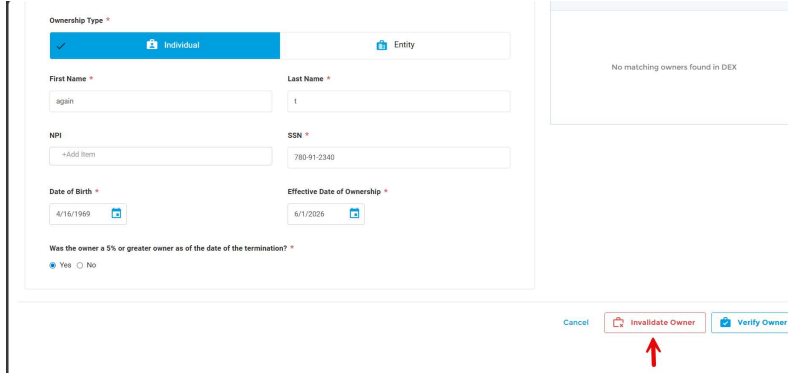
When verified:

- The owner is removed from the Pending Owners queue.
- The owner is moved to the Verified Owners queue.
- The ownership record is considered validated by CMS.

17.9 Verifying an Owner

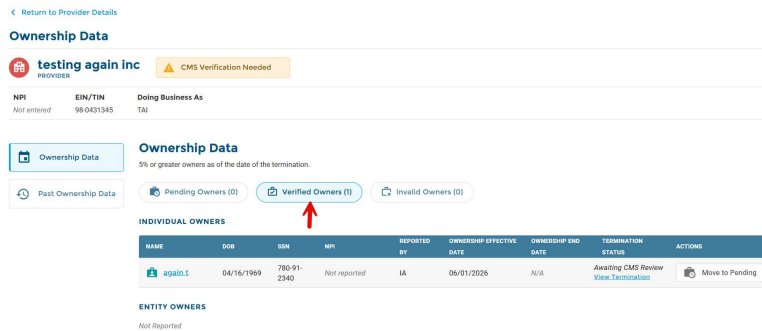
If the ownership information is incomplete, inaccurate, or cannot be validated:

1. Review the owner information.
2. Select **Invalidate Owner**.



17.10 Verified Owners Queue

Verified ownership records appear in the **Verified Owners** queue and indicate that CMS has completed its review and validation activities.



NAME	DOB	SSN	NPI	REPORTED BY	OWNERSHIP EFFECTIVE DATE	OWNERSHIP END DATE	TERMINATION STATUS	ACTIONS
again.I	04/16/1969	780-91-2340	Not reported	IA	06/01/2026	N/A	Awaiting CMS Review View Termination	Move to Pending

17.10.1 Workflow Diagram

State Reports Termination → Add Ownership Data → Submit Termination → Pending Owners → Review Owner → Verify Owner (Verified Owners) **OR** Invalidate Owner (Invalid Owners)

This process ensures ownership information associated with Medicaid terminations is reviewed, validated, and maintained consistently within DEX.

17.10.2 Past Ownership Data

This tab displays historical ownership records. An owner appears here when they are marked as Not Current and have an End Date recorded, indicating their ownership period has concluded.

DEX
DATA
EXCHANGE

DEX

Search provider or owner name, DBA/alias, NPI, SSN, or EIN/TIN

DEX Help & Tutorials

Report Terminations

LA DEX State Admin

[Return to Provider Details](#)

testing again inc

PROVIDER

NPI
Not entered

EIN/TIN
98-0431345

Doing Business As
TAI

Ownership Data

Past Ownership Data

Submitted Owners (0)

Verified Owners (0)

Invalid Owners (0)

INDIVIDUAL OWNERS
Not Reported

ENTITY OWNERS
Not Reported

Appendix 1: Published Actions Table Description

Overview

The Published Actions table within the Adverse Actions module displays a list of all adverse actions that have been officially published by CMS. These actions include Medicaid terminations and Medicare revocations. Each row in the table represents a single provider action record, with key fields that provide visibility into the provider, reason, responsible entity, and important action dates.

Field Descriptions

1. Published Date

The Published Date indicates the date on which the adverse action was officially published by CMS in DEX.

- This date reflects when the record became visible to users
- It may differ from the actual effective date of the action
- Used for:
 - Tracking when actions were communicated to states
 - Reporting and audit timelines

2. Provider

The Provider field displays identifying information for the affected provider.

This includes:

- Provider Name (e.g., Sarah Little, Bella Jacobson)
- NPI, when available
- SSN (masked format) for identity verification

This field ensures users can accurately identify and validate the provider associated with the action.

3. Termination Reasons

The Termination Reasons field describes the basis for the adverse action.

- Provides a clear explanation of why the provider was terminated or revoked
- Examples may include:
 - *Court Hearing Scheduled*
 - *Voluntarily Surrendered*
 - *Terminated under a separate Medicaid enrollment*

This field supports:

- Regulatory understanding
- Decision-making
- Compliance verification

4. Action By

The Action By field identifies the entity responsible for initiating the adverse action.

This may include:

- Medicare (CMS)
- State Medicaid Agencies (e.g., New Mexico)

Additionally, this field may display a status label indicating the outcome of the action, such as:

- **Upheld** – The action has been confirmed and remains valid
- **Overtured** – The action has been reversed

This field helps users understand:

- Who initiated the action
- The current standing or outcome of the decision

5. Action Date

The Action Date field provides critical timeline information related to the adverse action.

This may include one or more of the following:

a. Termination Effective Date / Revocation Effective Date

- Indicates when the action officially took effect

- Used to determine:
 - When the provider became ineligible
 - Compliance enforcement timelines

b. Reinstatement Date

- Displays the date the provider was reinstated, if applicable
- Indicates that the provider has been:
 - Re-approved for participation
 - Restored after a previous termination or revocation

c. Enrollment Bar Expiration Date (if applicable)

- Indicates when a provider's re-enrollment restriction ends
- Helps determine eligibility for future participation

6. Actions

The Actions column provides available options for interacting with the record.

Available Actions:

- View Details
 - Opens the full record view, including:
 - i. Detailed provider information
 - ii. Full termination/revocation data
 - iii. Supporting documentation
- Dropdown Menu
 - May include additional actions to either 'Report Termination' or 'Mark Not In My SMA' depending on user role and permissions

This field enables users to drill down into detailed records and take appropriate action.

Appendix 2: Terminations to Review Table Description Overview

Overview

The Terminations to Review table displays termination records that have been returned to the State Medicaid Agency (SMA) for further action. These records may have been returned due to missing information, validation issues, or changes in status identified by CMS or the DEX system. Users are expected to review, update, and resubmit these records to CMS after addressing the identified issues.

Field Descriptions

1. Returned By

The Returned By field identifies the entity that returned the termination record for further action.

a. CMS

- Indicates that the termination was returned by the Centers for Medicare & Medicaid Services (CMS)
- Typically occurs when:
 - Additional clarification or documentation is required
 - The submission does not meet CMS review standards
- Users should:
 - Review CMS feedback (often in *Additional Comments*)
 - Update the record accordingly before resubmission

b. DEX

- Indicates that the termination was returned by the DEX system
- Typically occurs due to:
 - Status changes impacting the original termination

This distinction helps users understand whether the issue is policy-related (CMS) or system-related (DEX).

2. Status

The Status field describes the current state of the returned termination.

- Example: More Information Needed
 - Indicates that the record requires additional details or corrections
 - Prevents the record from progressing until resolved

This field guides users on what action is required before resubmission.

3. Provider

The Provider field displays identifying information for the affected provider.

This includes:

- Provider Name (e.g., Al Jones, Jon Jones)
- NPI (if available)
- SSN or EIN/TIN (masked format)

This field ensures that users can accurately identify and validate the correct provider record.

4. Termination Reason

The Termination Reason field explains the basis for the termination.

- Examples include:
 - *Failure to submit fingerprints*
 - *Criminal conviction*

This helps users:

- Understand the original justification
- Determine if updates or corrections are needed

5. Action By

The Action By field identifies the entity that originally initiated the termination.

- Typically displays the State Medicaid Agency (e.g., Iowa)
- May also include a status label, such as:
 - Reinstated – Indicates the provider has been reinstated after termination

Helps users understand:

- Who initiated the action
- Whether the action has changed status

6. Action Date

The Action Date field provides key timeline details related to the termination.

This may include:

a. Termination Effective Date

- Indicates when the termination officially took effect
- Used for:
 - Compliance tracking
 - Determining when services should cease

b. Reinstatement Date

- Displays if and when the provider was reinstated
- Example: Indefinite may indicate no reinstatement date is currently set

Not all records will include a reinstatement date.

7. Actions

The Actions column provides options for interacting with the record.

Available Action:

- View Termination
 - Opens the full termination record
 - Allows users to:
 - i. Review detailed information
 - ii. View CMS comments or system messages
 - iii. Make updates and corrections
 - iv. Resubmit the termination to CMS

This is the primary point for resolving returned records.

User Workflow

When interacting with the Terminations to Review table, users should:

1. Identify who returned the record (CMS or DEX)
2. Review the Status to understand required actions
3. Select View Termination
4. Review comments and supporting information
5. Update the record as needed
6. Resubmit the termination to CMS