August 10, 2012

Dear Medicaid and/or CHIP Provider,

This is a reminder of the Federal requirement regarding excluded providers, which helps to protect the Medicaid and Kid Care CHIP (Children's Health Insurance Program) from fraud and abuse, a concern for all of us.

The Health and Human Services Office of the Inspector General (HHS-OIG) excludes individuals and entities from participation in Medicare, Medicaid, CHIP, and all Federal healthcare programs based on the authority contained in various sections of the Social Security Act, including sections 1128, 1128A and 1156.

When the HHS-OIG has excluded a provider, Medicaid and CHIP are generally prohibited from paying for any items or services furnished, ordered, or prescribed by excluded individuals or entities. This includes payment for administrative and management services not directly related to patient care, such as salaries and fringe benefits. Other examples include but are not limited to services performed by nurses, technicians, administrative staff, ambulance drivers, dispatchers, delivery drivers, social workers, billing agents, accountants, utilization reviewers, contractors, manufacturers and suppliers.

The Centers for Medicare and Medicaid (CMS) will provide no funding to States for any amount expended for items or services furnished under the plan by an individual or entity while being excluded from participation. Any such payments constitute an overpayment and are subject to recoupment.

Providers participating in these Federal programs are obligated to screen all employees and contractors to determine whether any of them have been excluded. This screening should take place upon hiring of a new staff person and monthly thereafter on all staff to check for any new additions to the exclusion list. If any exclusionary information is discovered it should be reported to Medicaid and/or Blue Cross Blue Shield immediately.

The following website provides current information on excluded parties: http://www.oig.hhs.gov/fraud/exclusions.asp. You may search by name and verify the match by social security number or tax identification number. There is also a downloadable database that can be maintained by the provider. This option does not have the social security number or tax identification number match.

The State of Wyoming also has a list that is available on the Wyoming Department of Health website that can be accessed to determine providers that have been terminated or excluded in the State of Wyoming. The HHS/OIG list still needs to be screened for exclusions in other states. The website for the Wyoming terminated or excluded provider list is http://www.health.wyo.gov/healthcarefin/equalitycare/index.html

Report any exclusionary information for Medicaid to:

Xerox Provider Relations (formerly ACS)

1-800-251-1268
P.O. Box 667
Cheyenne, WY 82003

Report any exclusionary information for Kid Care CHIP (Children's Health Insurance Program) to:

BCBS
Attn: Morris McGaugh
PO Box 2266
Cheyenne, WY 82003
1-800-209-9720

I know you share the Wyoming Department of Health's commitment to preventing fraud and abuse in our programs and we continue to appreciate the services you provide to our clients. If you have any questions regarding this letter, please contact Christine Bates at 307-777-3594 or Susie Scott with Kid Care CHIP at 307-777-6228.

Sincerely,

Teri Green
State Medicaid Agent/Senior Administrator
Division of Healthcare Financing, Medicaid
Department of Health