



**CABINET FOR HEALTH AND FAMILY SERVICES
DEPARTMENT FOR MEDICAID SERVICES**

Steven L. Beshear
Governor

Division of Program Integrity
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Janie Miller
Secretary

Elizabeth A. Johnson
Commissioner

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Dear Kentucky Medicaid Provider:

On January 16, 2009 the Centers for Medicare and Medicaid Services issued a letter to state Medicaid Directors to reiterate a long standing policy. The letter clarifies the federal statutory and regulatory prohibitions regarding providers who have been excluded from participation in Federal health care programs.

When a provider is excluded CMS generally prohibits paying for any items or services furnished, ordered, or prescribed by the excluded individuals or entities. This prohibition extends to any items or services reimbursable by a Medicaid program to include:

Items or services provided to a Medicaid member by an excluded individual who works for an entity that has a contractual agreement with, and is paid by, a Medicaid program.

Items or equipment sold by an excluded manufacturer or supplier, used in the care or treatment of members and reimbursed, directly or indirectly, by a Medicaid program.

This letter serves as a reminder to providers that you are obligated to screen all employees and contractors to determine if they have been excluded. You may search the HHS-OIG website by the names of any individual or entity and should do so monthly. The excluded providers list can be found at <http://www.oig.hhs.gov/fraud/exclusions.asp>.

The CMS letter can be read in its entirety on the DMS website. If you have any questions regarding excluded providers you may contact the Division of Program Integrity at 502-564-5472. Thank you in advance for your cooperation.

Sincerely,


Elizabeth A. Johnson
Commissioner

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