

**BAY-ARENAC BEHAVIORAL HEALTH AUTHORITY
POLICIES AND PROCEDURES MANUAL**

Chapter: 13	Corporate Compliance		
Section: 2	Administrative & Operational Practices		
Topic: 11	Prohibited Affiliations and Backgrounds		
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Policy

Bay-Arenac Behavioral Health Authority (BABHA) will not knowingly have a relationship with an individual or entity that is excluded from participation in federal or state health care programs, or debarred, suspended, or otherwise excluded from participating in procurement activities under the Federal Acquisition Regulation or from participating in non-procurement activities under regulations issued under Executive Order No. 12549, or the Affiliate of such an individual or organization. BABHA will comply with requirements to obtain, maintain, disclose, and report required information about ownership and control interests, business transactions, and criminal convictions.

Purpose

This policy and procedure defines a process to ensure BABHA does not enter into: an employment arrangement or contract; a term of appointment; a service contract, service agreement, business agreement, purchase order, lease, or a consulting agreement, for the provision of items and services that are significant and material to its contract(s) with Medicare and Medicaid payers with an individual or entity that is suspended by or excluded from participation in, or under sanction by, any Federal or State health care program, or debarred from participating in any Federal Executive Branch procurement or non-procurement program.

Education Applies to:

- All BABHA Staff
- Selected BABHA Staff, as follows:
- All Contracted Providers: Policy Only Policy and Procedure
- Selected Contracted Providers, as follows:
 - Policy Only Policy and Procedure
- Other: Board Members, Consultants, Vendors/Suppliers Policy Only Policy and Procedure

Definitions

Affiliate: As defined in Federal Acquisition Regulations, business concerns, organizations, or individuals are Affiliates of each other if, directly or indirectly, (1) either one controls or has the power to control the other, or (2) a third-party control or has the power to control both. Indicia of

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control include, but are not limited to, interlocking management or ownership, identity of interest among family members, shared facilities and equipment, common use of employees, or a business entity organized following the debarment, suspension, or proposed debarment of a contractor which has the same or similar management, ownership, or principal employees as the contractor that was debarred, suspended, or proposed for debarment.

Board of Directors: A group of individuals who are selected or elected to establish corporate management related policies and to make decisions on major company issues, per the MDHHS Medicaid Provider Manual.

Corporation: As described in the Medicare Program Integrity Manual, a corporation is an entity that is separate and distinct from its owners (i.e., stockholders or shareholders); articles of incorporation must be filed with the State in which the business will incorporate; key elements include the presence of a governing body (i.e., a Board of Directors);

- Per the Medicare Program Integrity Manual, a Professional Corporation (PC) is organized for the sole purpose of rendering professional services (such as medical or legal), and all shareholders must be licensed to render such services.
- As described in the Medicare Program Integrity Manual, Partnerships and Sole Proprietorships are not corporations.
- Individual practitioners, groups of practitioners practicing at the same location without a Partnership and Government-Owned Entities are not corporations.

Debarment: Per the Federal Acquisition Regulations, debarred individuals or entities are deemed ineligible for participation in federal government procurement and non-procurement programs, including federal assistance programs due to a conviction or civil judgment for: commission of a fraud or criminal offense in connection with obtaining, attempting to obtain or performing a public contract or subcontract; violation of Federal or State antitrust statutes; commission of embezzlement, theft, forgery, or bribery; falsification or destruction of records; making false statements; tax evasion; receiving stolen property; or commission of any other offense indicating a lack of business integrity or business honesty that seriously and directly affects the present responsibility of a government contractor or sub-contractor.

Disclosing Entity: Per CMS toolkits for 42 CFR 455.101 and 104, a corporation or Partnership where there are owners, officers, partners or Managing Employees who run the company; does not include Individual Practitioners; does not include practitioners practicing at the same location without a Partnership who are directly enrolled in the Medicaid Program.

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Engagement: Per 42 CFR 455.101, an employment arrangement or contract; a term of appointment; a service contract, service agreement, purchase order, lease, or a consulting agreement with BABHA, for the provision of items and services that are significant and material to BABHA's obligations under its contract(s) with the Michigan Department of Health and Human Services (MDHHS) and the Pre-Paid Inpatient Health Plan (PIHP).

Excluded: Per the MDHHS/PIHP Master Contract, excluded individuals or entities have been denied participation, but not reinstated, in the Medicare, Medicaid, or any other Federal health care programs. Bases for exclusion include convictions for program-related fraud and patient abuse, licensing board actions and default on Health Education Assistance loans.

Government-Owned Entities: As described in the Medicare Program Integrity Manual, a government-owned entity exists when a particular government body (e.g., Federal, State, city or county agency) will be legally and financially responsible for Medicare payments received; Government-Owned Entities do not have owners, corporate officers or directors, but do have Managing Employees.

Licensed Independent Practitioner and Individual Practitioner: For purposes of this policy and procedure, the BABHA term ‘Licensed Independent Practitioner’ or LIP means the same as an Individual Practitioner as referenced in the CMS Medicaid Program Integrity Toolkit for 42 CFR 455.104, meaning a licensed practitioner directly providing services and responsible for their own business.

Managing Employee: As defined in 42 CFR 455.101, a general manager, business manager, administrator, director, or other individual who exercises operational or managerial control over, or who directly or indirectly conducts the day-to-day operation of an institution, organization, or agency, either under contract or through some other arrangement, whether or not the individual is a W-2 employee.

- As described in the Medicare Program Integrity Manual, Government-Owned Entities have Managing Employees.
- Per the MI Business Corporation Act (Act 284 of 1972) section 450.1285(1), a professional corporate (i.e., a PC) cannot provide services except through its officers, employees and agents who are licensed to provide the services; the Act indicates the term employees does not include secretaries, bookkeepers, technicians or assistants.

Non-Profit Organization: As described in the Medicare Program Integrity Manual, an entity can acquire non-profit status by obtaining a 501(c)(3) certification from the IRS (meaning it is tax-exempt) or by acquiring such status from the State in which it is located (in Michigan a non-profit is

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a Corporation formed under PA 162 of 1982); the organization does not have owners and all profits are put back into the entity to promote its goals, which are usually political, social, religious, or charitable in nature.

Ownership or Control Interest: As defined in 42 CFR 455.101, is an individual or Corporation that has:

- An ownership interest totaling 5 percent or more in the Disclosing Entity.
- An indirect ownership interest equal to 5 percent or more in the Disclosing Entity.
- A combination of direct and indirect ownership interests equals to 5 percent or more in the Disclosing Entity.
- Owns an interest of 5 percent or more in any mortgage, deed of trust, note, or other obligation secured by the Disclosing Entity if that interest equals at least 5 percent of the value of the property or assets.
- Is an officer or director of the Disclosing Entity if organized as a corporation; or
- Is a partner in a Provider entity that is organized as a Partnership.

As described in the CMS Medicaid Program Integrity Toolkit for 42 CFR 455.104, Individual Practitioners and groups of Individual Practitioners practicing at the same location do not have owners or control interests. As described in the Medicare Program Integrity Manual, Non-Profit Organizations do not have owners. As described in the Medicare Program Integrity Manual, the owner/shareholders of a professional corporation are the licensed professionals rendering the services.

Partnership: As described in the Medicare Program Integrity Manual, a Partnership is an association of two or more persons/entities who carry on a business for profit; each partner in a Partnership is an owner; unlike a Corporation, a Partnership is not a separate and distinct entity from its partners/owners; the partners are the Partnership; in a general Partnership, each partner has the right to participate in running the business's day-to-day operations; in a limited Partnership the general partner(s) runs the business and the limited partner(s) cannot participate in the management of the business.

Significant Business Transaction: Per 42 CFR 455.101, any business transaction or series of transactions that, during any one fiscal year, exceed the lesser of \$25,000 and 5% of a provider's total operating expenses.

Sole Proprietorship: As described in the Medicare Program Integrity Manual, a business is a Sole Proprietorship if: it files a Schedule C (1040) with the IRS (this form reports the business's profits/

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losses), one person owns all the business’s assets, and it is not incorporated; a Sole Proprietorship may still have employees.

Subcontractor: An individual or entity with whom an employment contract; service contract, service agreement, business agreement, purchase order, lease, or a consulting agreement has been established.

Procedure

- 1) **Level of Risk**: Individuals and entities will be prioritized by the level of risk of exclusion/debarment:
 - a) The high-risk group will include those providing services:
 - i) Directly related to BABH’s fulfillment of its obligations to provide behavioral health services through its contracts with its regional and state payers.
 - ii) Where the individual or entity has access to consumers and/or their records.
 - b) The moderate-risk group will include those providing services:
 - i) Indirectly related to BABH’s fulfillment of its behavioral health service obligations.
 - ii) Where the individual or entity may have access to consumers and/or their record.
 - iii) Which is a local or state-wide organization/company. Local entities are at higher risk for changes in owners and entity names in order to avoid exclusion/ debarment.
 - c) The low-risk group will include those providing services:
 - i) Not material to BABH’s fulfillment of its behavioral health service obligations.
 - ii) Where the individual or entity does not have access to consumers and/or their records.
 - iii) Low risk entities may be local, state-wide, multi-state and/or national entity. Multi-state/national entities have been assessed as being lower risk for changes in ownership and entity name in order to avoid exclusion/debarment.
 - d) The attachment to this procedure Table of Vendor Types provides more detail regarding these risk groups.

- 2) **Disclosures**:
 - a) High Risk: Prior to entering into an engagement with a high-risk individual or entity, BABHA will require the applying individual/organization to disclose in writing:
 - b) Whether the applicant is currently or has previously been excluded or suspended from participation in, or sanctioned by, any Federal or State health care program, pursuant to 42 CFR Part 1001.

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- c) Whether the applicant has been debarred from any procurement or non-procurement activities under applicable Federal Acquisition Regulations or pursuant to Executive Order No. 12549 (and 12689).
- d) Whether the applicant is an Affiliate of an individual or entity, and or has a controlling interest in an entity that has been so excluded, suspended, debarred, or sanctioned, per required by 42 CFR 438.610.
- e) Whether the applicant has been convicted of a criminal offense related to that individual's involvement in any program under Medicare, Medicaid, or the Title XX (Social Security Block Grant) services programs since the inception of these programs, even if not currently excluded by any federal or state program, per 42 CFR 455.106.
- f) Per 45 CFR Part 76, whether the applicant:
 - i) Has within a three-year period preceding their engagement by BABHA been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state or local) transaction or contract under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statement or receiving stolen property, or is presently indicted or otherwise criminally or civilly charged by a government entity (federal, state or local) with commission of any of these offenses.
 - ii) Has within a three-year period preceding their engagement with BABHA had one or more public transactions (federal, state or local) terminated for cause or default.
- g) Per 42 CFR 455.104-106, BABHA will also require Disclosing Entities to disclose:
 - i) Individuals who are on the Board of Directors of a provider entity.
 - ii) Any Managing Employees of the Disclosing Entity.
 - iii) If a Disclosing Entity is a corporation (including a Professional Corporation), or a Partnership:
 - (1) Any person or Corporation with an Ownership or Control Interest in the Disclosing Entity, and whether they are related as a spouse, parent, child or sibling.
 - (2) Any subcontractor in which the Disclosing Entity has an Ownership or Control Interest, and whether they are related as a spouse, parent, child or sibling.

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- (3) Any Other Disclosing Entity in which the Disclosing Entity has an Ownership or Control Interest, and whether they are related as a spouse, parent, child or sibling.
- iv) If any of the persons or entities named in this section have been excluded, sanctioned, suspended, debarred or convicted as described in this procedure.
- h) BABHA will also include the following language in its agreements for Individual Practitioners and Disclosing Entities to require agreement to furnish information related to business transactions, and to provide notice of the consequences for failure to disclose, in accordance with 42 CFR 455.105:
 - i) The ownership of any subcontractor with whom the provider has had business transactions totaling more than \$25,000 during the 12-month period ending on the date of the request.
 - ii) Any significant business transactions between the provider and any wholly owned supplier, or between the provider and any subcontractor, during the 5-year period ending on the date of the request.
- i) BABH is prohibited by federal law from contracting with providers for purposes of making Medicaid payments for services rendered if the provider has an address outside of the United States.
- j) BABHA will comply with requests from MDHHS or the PIHP for submission of information regarding business transactions and ownership and control interests.
- k) BABHA will request disclosure at the time of initiation and renewal of an engagement, and will include language in agreements, disclosures and attestations requiring disclosure during the term of engagement as follows:
 - i) For individuals, within 10 business days of discovery (to allow BABHA to report within 15 business days as required by MSHN policy):
 - (1) Any proposed or actual suspension, exclusion, or sanction from any health care program funded in whole or in part by the Federal or State government (including Medicare and Medicaid).
 - (2) Debarment from procurement activities under applicable Federal Acquisition Regulations, or non-procurement activities under the regulations issued pursuant to Executive Order No. 12549 (and 12689).

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- (3) A health care related or criminal conviction that may lead to such suspension, exclusion, sanction or debarment.
- ii) For Disclosing Entities:
 - (1) When changes in Managing Employees occur.
 - (2) For a Disclosing Entity, which is a corporation (including a Professional Corporation), or a Partnership, within 35 days after a change in Provider ownership or control takes place as required by 42 CFR 455.104.
- iii) Within thirty-five (35) days of a written request by BABHA, or its Medicaid payers, as required by 42 CFR 455.105.
- 1) All disclosures will include the names, addresses, titles, dates of birth and last four digits of the Social Security Numbers for individuals and the tax identification number of a corporation or Partnership. BABHA will request the remaining Social Security Number digits for verification purposes if a match is found on exclusion/debarment databases using the last four digits.
 - i) In the case of a Disclosing Entity which is a corporation (including a Professional Corporation), or a Partnership, the information must include as applicable and relevant to the engagement with BABHA (per CMS Toolkits):
 - (1) Corporate headquarters.
 - (2) Primary business address.
 - (3) All businesses in the state of Michigan.
 - (4) All P.O. Box addresses used for payment and correspondence.
- m) Disclosure will be accomplished as follows:
 - i) Contracted clinical service providers of BABHA will be required to complete a Disclosure form upon entering into a contractual agreement with BABHA and upon each renewal (see attachment Exhibit C Disclosures).
 - ii) Members of the BABHA Board of Directors and the CEO will sign an Attestation at the start of their term of appointment and at least upon each re-appointment (see attachment Board of Directors and Chief Executive Officer Attestation).
 - iii) Employees (including temporary staff) of BABHA will be required to sign an Attestation at the start of their employment (see attachment New Employee Attestation).
- n) Disclosures will be directed to:

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- i) The Director of Human Resources for new employees.
 - ii) The Corporate Compliance Officer (CCO) for the Board of Directors and CEO.
 - iii) The Contract Administrator (as designee of the Chief Financial Officer) for contracted clinical service providers.
 - iv) The Finance Assistant (as designee of the Chief Financial Officer) for consultants, vendors and suppliers.
- o) BABH will consider the submission of a disclosure as adequate compliance with the request and will assume the submitter has been truthful in their response. BABH will follow-up with the submitter if a disclosure is unclear but will not assume responsibility for verifying the truthfulness of the disclosure through primary source verification or other means. BABH will assume no enforcement burden. If it comes to BABH's attention that a submitter has falsified information on their disclosure, the issue will be reported to the MIOHSIG through MSHN for follow-up as appropriate.
- 3) **Moderate Risk:** For moderate risk individuals/entities BABHA will not require a disclosure statement or attestation but will perform exclusion/debarment checks.
- 4) **Low Risk:** For low-risk individuals/entities BABHA BABH will not require a disclosure statement or attestation but will perform exclusion and debarment checks if the dollar value of their engagement with BABHA is significant.
- 5) **Exclusion and Debarment Checks:** Checks will be completed by BABHA at the time of initial engagement, renewal of engagement and on a monthly basis for ongoing engagements.
- a) BABHA's Human Resources department will ensure the following individuals are checked: members of the BABHA Board of Directors; the BABHA CEO; and BABHA Employees (including individual practitioners on employment contracts).
 - b) BABHA's Finance Department will ensure the following persons and organizations are checked:
 - i) For high-risk individuals/entities: the name of the individual practitioner(s) or owner of a sole proprietorship(s); and for Disclosing Entities: the name of the entity itself, its executive director or officer, members of a Board of Directors (if any), any Managing Employees, and any prescribers serving BABHA populations. For a Disclosing Entity which is also a corporation (including a Professional Corporation), or a Partnership, the name of any individuals or (the executive director or officer of) Corporations with Ownership or Control Interests.

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- ii) For moderate-risk individuals/entities: the name of the entity itself; and the person who is committing to the engagement with BABHA (i.e., the owner, executive director, CEO or managing employee).
 - iii) For low-risk individuals/entities, if the entity is providing services “significant” to BABH’s obligations under its contract for behavioral health services and if an entity is a local or statewide entity, just the name of the entity itself. Multi-state and national entities will not receive exclusion/debarment checks due to the low risk of exclusion/debarment.
- c) Confirmation of identity and exclusion/debarment status are to be checked via the following databases,
- i) As required by 42 CFR 455.436:
 - (1) The Social Security Administration (SSA) Death Master File (<https://www.ssdmf.com>) to ensure the person is not deceased, if SSA permits file access and fees are not cost prohibitive.
 - (2) The Centers for Medicare and Medicaid Services (CMS) National Plan and Provider Enumeration System (NPPES) (<https://nppes.cms.hhs.gov/>) to verify national provider numbers (NPI’s), if not already verified via Medicare or Medicaid provider enrollment records.
 - ii) As required by 42 CFR 455.436 and 48 CFR 9.4:
 - (1) The US Department of Health and Human Services (HHS) Office of Inspector General’s (OIG’s) List of Excluded Individuals/Entities (LEIE) (<https://exclusions.oig.hhs.gov>) to ensure there is no exclusion from Medicare or other federal health care programs.
 - iii) As required by the MDHHS/PIHP Master Contract:
 - (1) The General Services Administration’s (GSA’s) exclusion list on the System for Award Management (www.SAM.gov) (which encompasses the discontinued CMS Excluded Parties List System or EPLS) to ensure there is no debarment from federal procurement such as healthcare related grants.
 - iv) As required by the Michigan Medical Manual, General Information for Providers:

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- (1) The MDHHS List of Sanctioned Providers (http://www.michigan.gov/mdhhs/0,5885,7-339-71551_2945_42542_42543_42546_42551-16459,00.html) to ensure there is no exclusion from Medicaid and other state programs.
- d) Any potential matches of an individual or entity against one of the government databases as identified by the BABHA Human Resources or Finance Departments will be addressed as follows:
- i) The remaining digits of the social security number will be requested to confirm the match.
 - ii) Any confirmed matches will be immediately disclosed as described in 6) a-d) above, as well as to the Chief Executive Officer and Corporate Compliance Officer, if not already notified.
- 6) **Criminal Backgrounds:** Criminal backgrounds are to be checked as required by federal and state regulations to ensure that the individual, or in the case of an entity, and any individuals or entities with a beneficial Ownership or Control Interest in such an entity or any entities in which the Disclosing Entity has such ownership or interests, have not been charged with or convicted of a criminal offense relating to Medicare, Medicaid, or other Federal or State health care program, since the inception of these programs, or any other crime involving the delivery of a health care item or service.
- a) The MDHHS Medicaid Manual outlines state provider fitness criteria which excludes providers with certain criminal backgrounds. A list of relevant crimes is located at: Michigan Medicaid Manual/General Information for Providers/Denial of Enrollment, Termination and Suspension.
 - b) See attachment: BABHA Excluded Conviction Worksheet.
- 7) **Other Required Background Checks:**
- a) Additional checks are required by state and/or federal law, including Child Care (MDHHS Central Registry) background checks and Recipient Rights checks.
 - b) See related form: BABHA Background Checks Grid
- 8) **Documentation:** Copies or other primary source material will be retained as appropriate as proofs of completion of the aforementioned required database and background checks.

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- 9) **Contracted Service Providers:** BABHA will require, and verify through audit, that contracted clinical service providers, excluding solo practitioners (i.e., LIP's), comply with this policy and procedure by:
- a) Having processes in place to ensure they do not knowingly have any of the following relationships with an individual who is excluded from participation in Federal or state health care programs and/or suspended or debarred from Federal procurement:
 - i) Excluded and/or debarred individuals are not a director or Managing Employee.
 - ii) Excluded and/or debarred individuals do not have an employment, consulting, vendor/supplier or other arrangement with provider for the provision of items or services that are significant and material to their agreement with BABHA.
 - b) Having processes to perform the aforementioned checks of the required databases at the time of engagement and monthly thereafter for the persons and organizations cited in 8) a) above.
 - c) Perform the aforementioned criminal and other required background checks and maintain documentation as proofs as described. These records will be reviewed during site reviews by BABHA.
- 10) **Findings from Checks:** Any confirmed excluded criminal offense or exclusion/sanction from a Federal or State health care program will be addressed as follows:
- a) BABHA will not enter a relationship with an individual or entity that discloses or is found to be debarred, suspended, or otherwise excluded from participating in procurement activities under the Federal Acquisition Regulation or from participating in non-procurement activities under regulations issued under Executive Order No. 12549 (and 12689), or has been convicted of a health care related or criminal crime that may lead to such suspension, exclusion, sanction or debarment.
 - b) When BABHA becomes aware that an individual or entity with whom it already has a relationship, or any individual with a beneficial ownership of five (5) percent or more of such individuals and entities, has been proposed to be or has become excluded, suspended, debarred or sanctioned during the period of their engagement with BABHA, or has been convicted of a health care related or criminal crime that may lead to such suspension, exclusion, sanction or debarment, BABHA will take action as follows:
 - i) Any BABHA employee who engages in the prohibited conduct addressed in this policy and procedure may be subject to disciplinary action up to and including possible

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discharge (based upon the severity of the incident(s)), in accordance with BABHA human resources policies and procedures.

- ii) A contracted service provider who engages in the prohibited conduct addressed in this policy and procedure may be subject to adverse contract action up to and including possible contract termination (based upon the severity of the incident(s)), in accordance with BABHA contract management policies and procedures.
- c) BABHA will disclose to the regional Pre-Paid Inpatient Health Plan (MSHN) and MDHHS the name(s) of any person with a confirmed match from checks of exclusion and debarment databases, or administrative actions by BABHA that could lead to exclusion, debarment or suspension of individuals and entities engaged with BABHA. The report to MSHN will be made within 15 business days of the discovery of the disqualification as required by MSHN policy and procedure.
- d) Further disclosure for professionals who are licensed or registered by the State of Michigan may include the MI Office of Licensing and Regulatory Affairs (LARA).

11) Overpayment

- a) Federal financial participation (i.e., the federal portion of Medicaid dollars or Medicare funds) is not available in payments made to a Disclosing Entity that fails to control Ownership or Control Interests as required by 42 CFR 455.
- b) Any payments made in violation of this policy and procedure will be treated as a false or improper claim by BABHA and will be addressed as outlined in policy and procedure C13-S02-T16 False Claims and the BABHA Provider Services Boilerplate contract.

Attachments

- Exhibit C Disclosures
- Matrix of Provider and Supplier Business Structures
- Prohibited Affiliations Attestation
- Table of Vendor Types
- BABHA Excluded Conviction Worksheet
- BABHA Background Checks Grid

Related Forms

N/A

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Related Materials

- Medicare Program Integrity Manual, Chapter 15 Medicare Enrollment, 15.2 Provider and Supplier Business Structures
- Michigan Medicaid Provider Manual: General Information for Providers, Sections 2 – Provider Enrollment and 6 Denial of Enrollment, Termination and Suspension
- MDHHS/PIHP Master Contract
- Mid-State Health Network Policy and Procedure: Disqualified Providers
- BABHA Provider Services Boilerplate contract
- CMS Medicaid Program Integrity Toolkits: 42 CFR 455.104 Disclosures of Ownership and Control; 42 CFR 455.105 Disclosures of Business Transactions; 42 CFR 455.106 Disclosures of Health Care-Related Criminal Convictions; and 42 CFR 455.436 Federal Database Checks
- US Dep’t of Health and Human Services; Office of Inspector General; Special Advisory Bulletin on the Effect of Exclusion from Participation in Federal Health Care Programs; 2013
- State of Michigan; Dep’t of Licensing and Regulatory Affairs; Corporations, Securities and Commercial Licensing Bureau; Entrepreneur’s Guide

References/Legal Authority

- 2 CFR 180.220 Guide to Government Debarment, Suspension and Non-Procurement
- 2 CFR 3000 Non-Procurement Debarment and Suspension
- 42 CFR § 438.610 Prohibited Affiliations (Managed Care Rules)
- 42 CFR § 455 Medicaid Program Integrity
- 42 CFR § 1001.1001 Program Integrity – Medicare and State Health Care Programs
- 45 CFR § 76 Government-Wide Debarment and Suspension; Non-Procurement
- 48 CFR 2.101 Federal Acquisition Regulations Definitions
- 48 CFR 9.4 Debarment, Suspension and Ineligibility
- Executive Order No. 12549 (51 FR 6370) Debarment and Suspension
- Executive Order No. 12689 (54 FR 34131) Debarment and Suspension
- 42 USC 1320a-7a Exclusion of Certain Individuals and Entities From participation in Medicare and State Health Care Programs

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SUBMISSION FORM				
AUTHOR/ REVIEWER	APPROVING BODY/ COMMITTEE/ SUPERVISOR	APPROVAL/ REVIEW DATE	ACTION (Deletion, New, No Changes, Replacement or Revision)	REASON FOR ACTION If replacement, list policy to be replaced
M. Bartlett	Corporate Compliance Committee	4/23/2008	Revision	Added language based on the Federal Acquisition Regulations
J. Pinter	Corporate Compliance Committee	7/9/2010	Revision	Revision of entire policy statement/procedure changes
M. Wolber	J. Pinter Corporate Compliance Officer	12/13/2013	Revision	Reviewed, change in reporting system and job title
J. Pinter, Corp Comp Committee	Strategic Leadership Team	08/01/17	Revision	Added attachment regarding business structures; combined the attestations; clarified business transactions
J. Pinter, Corp Comp Committee	Strategic Leadership Team	05/21/19	Revision	Remove references to vendor attestation based on legal consult; add attachment <u>Table of Vendor Types</u>
J. Pinter	Corporate Compliance Committee	09/21/21	Revision	Revised to align with changes to MDHHS Medicaid Manual: Provider Enrollment; added Board of Directors per federal law change; verified all laws; added criminal & other background checks
K. Amon	Corporate Compliance Committee	1/30/25	No Changes	Reviewed.