

Necessary Action

APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1.			
2.			
3.			
4.			

The subject was previously excluded from the Medicare, Medicaid, and all Federal health care programs.

The exclusion has been withdrawn retroactive to the date upon which it originally became effective. The subject is eligible to receive reimbursement as a provider of services covered under the title XX program. However, if you have imposed a sanction under your own authorities independent from our exclusion action, reimbursement by your programs is not mandatory.

If you have any questions about this reinstatement, please contact Joann Francis, Investigations Analyst, Exclusions Staff, Office of Inspector General, Suite 210, 7175 Security Boulevard, Baltimore, MD 21244. Ms. Francis may be reached at (410) 281-3069.

Sincerely,

A handwritten signature in black ink that reads "Maureen R. Byer". The signature is written in a cursive style with a large, prominent "M" at the beginning.

Maureen R. Byer
Director
Exclusions Staff
Office of Investigations

The subject was previously excluded from the Medicare, Medicaid, and all Federal health care programs.

The exclusion has been withdrawn retroactive to the date upon which it originally became effective. The subject is eligible to receive reimbursement as a provider of services covered under the title XIX program. However, if you have imposed a sanction under your own authorities independent from our exclusion action, reimbursement by your programs is not mandatory.

If you have any questions about this reinstatement, please contact Joann Francis, Investigations Analyst, Exclusions Staff, Office of Inspector General, Suite 210, 7175 Security Boulevard, Baltimore, MD 21244. Ms. Francis may be reached at (410) 281-3069.

Sincerely,

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Maureen R. Byer
Director
Exclusions Staff
Office of Investigations