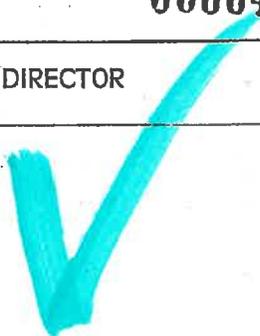


DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Roberts/FOIA</i>	DATE <i>7-23-13</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER 000043	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>cc: Coy</i>	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____
	<input checked="" type="checkbox"/> FOIA DATE DUE <i>8-7-13</i>
	<input type="checkbox"/> 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.			

Brenda James

From: Info Info
Sent: Tuesday, July 23, 2013 4:30 PM
To: Rick Hepfer
Cc: Brenda James
Subject: FW: FOIA Request

RECEIVED

JUL 23 2013

Department of Health & Human Services
OFFICE OF THE DIRECTOR

More on that FOIA

From: PsychSearch [<mailto:records@PsychSearch.net>]
Sent: Tuesday, July 23, 2013 10:17 AM
To: PsychSearch
Subject: RE: FOIA Request

Perhaps I will try another method of persuading your agency to comply with public record laws.

From: PsychSearch [<mailto:records@PsychSearch.net>]
Sent: Monday, July 22, 2013 4:22 PM
Subject: RE: FOIA Request

What is the ETA on this request for records?

From: PsychSearch [<mailto:records@PsychSearch.net>]
Sent: Thursday, July 18, 2013 9:26 AM
Subject: Re FOIA Request

P.S. Please provide a link where I can search for your Medicaid exclusions/terminations.

From: PsychSearch [<mailto:records@PsychSearch.net>]
Sent: Thursday, July 18, 2013 6:57 AM
Subject: FOIA Request

Dear Medicaid Director,

This is a request for a public record per State Law.

Please provide an electronic copy via of your response to U.S. Senator Grassley's letter of June 24, 2013 wherein he asked to be provided information on Medicaid terminations by July 15, 2013.

See sample of letter sent to each state here: <http://psychsearch.net/grassley-letter-to-medicaid-programs.pdf>

Sincerely,

Ken Kramer

Log # 43
✓



July 23, 2013

The Honorable Charles E. Grassley
Ranking Member
Committee on the Judiciary
United States Senate
Washington, DC 20510-6275

Dear Senator Grassley:

We appreciate the opportunity to describe the South Carolina Department of Health and Human Services' (SCDHHS) policies and procedures for terminating health care providers from the Medicaid program. While we have always had a process in place to exclude health care providers for Medicaid fraud, patient abuse, and other serious issues such as loss of medical licensure, we have instituted new policies for termination for cause in response to the Provider Enrollment and Screening requirements in the Affordable Care Act. Our policies align with the regulations in 42 CFR 455.400, and were effective December 1, 2012.

Our answers to your specific questions follow.

1. Please provide your definition of both (i) for cause and (ii) without cause termination.

Termination "for cause" means that SCDHHS has taken an action to revoke a provider's Medicaid billing privileges, the provider has exhausted all applicable appeal rights or the timeline for appeal has expired, and there is no expectation on the part of the provider or SCDHHS that the revocation is temporary.

"For cause" termination is initiated by SCDHHS, and this action can be appealed by the provider under South Carolina State Regulations, Chapter 126, Article 1, Subarticle 3. Once a provider is terminated for cause, he or she can apply to be reactivated in the Medicaid program, but the issues that led to the termination for cause will have to be resolved first before an application will be considered.

"Termination without cause" means that the provider's Medicaid ID number is placed in a status to show that they are currently not an active provider. This includes the ID numbers of providers who voluntarily withdraw from the Medicaid program, as well as provider numbers deactivated because the Medicaid account shows no billing or other activity over a specified period of time. Failure to timely report changes can result in a termination without cause. SCDHHS requires a provider to report any change in enrollment or contractual information (e.g., mailing or payment address, physical location, telephone number, specialty information, change in group affiliation, ownership, etc.) within thirty days of the change.

2. Please provide any factors you consider when determining without cause provider termination over for cause, including how much notice you give the provider.

Factors considered when determining without cause provider termination:

- Returned mail/Unable to locate provider at physical location address
- Telephone number disconnected
- License to practice or permit has expired (as opposed to suspended or revoked as part of board disciplinary action)
- Provider Deceased
- Provider moved out of state
- Non-compliance with policy
- Business location closed
- Inactivity – no Medicaid billing within the past year

In these cases, the provider is not given any notice of the termination, but the provider can re-enroll in Medicaid as long as the provider continues to meet SC Medicaid enrollment requirements.

Multiple factors can trigger a termination for cause. SCDHHS will terminate the enrollment of any provider where any person with a 5 percent or greater direct or indirect ownership interest in the provider did not submit timely and accurate information and cooperate with any screening methods required under 42 CFR Subpart E – Provider Screening and Enrollment. SCDHHS will also terminate the enrollment of any provider that was terminated on or after January 1, 2011, by Medicare or another State's Medicaid or Children's Health Insurance Program.

Unless SCDHHS determines that termination is not in the best interest of the State Medicaid program, SCDHHS will terminate a provider's enrollment for any of the following reasons:

- * Any person with a 5 percent or greater direct or indirect ownership interest in the provider has been convicted of a criminal offense related to that person's involvement in Medicare, Medicaid, or title XXI program in the last 10 years.
- The provider or a person with an ownership or control interest or who is an agent or managing employee of the provider fails to submit timely or accurate information and/or does not cooperate with any screening methods required by SCDHHS.
- The provider fails to permit access to provider locations for any site visit under 42 CFR §455.432.
- The provider fails to provide access to Medicaid patient records.
- Any person with a 5 percent or greater direct or indirect ownership interest in the provider fails to submit sets of fingerprints in the form and manner required by SCDHHS within 30 days of a CMS or SCDHHS request.
- It is determined that the provider has falsified any information provided on the application.
- The identity of any provider/applicant cannot be verified.
- The provider fails to comply with the terms of the enrollment agreement.
- The provider fails to comply with the terms of contract with SCDHHS.
- The provider has not repaid an outstanding debt or recoupment identified through a program integrity review.
- The provider's license to practice has been suspended and/or revoked by the respective board for disciplinary reasons, or there are restrictions placed on his or her license that make the provider unsuitable for providing care to Medicaid patients.

- The provider has been terminated by a Medicaid Managed Care Organization for reasons due to fraud or quality of care.
- The provider allows a non-enrolled rendering provider to use an enrolled provider's number, except where otherwise allowed by policy.
- The provider continues to bill Medicaid after the suspension or revocation of their medical license.
- The provider is under a State and/or Federal exclusion.
- The provider has falsified medical records to support the services billed to Medicaid.
- The provider is sanctioned under State regulation 126-403.

In cases of termination for cause, the provider is given 30 days' notice of the action, during which time the provider can file an appeal. In regards to physicians, the primary reason for a termination for cause has been the suspension of the physician's medical license (see the cases described in response to question 4.)

3. Is termination from Medicare a factor in your termination considerations?

Yes - SCDHHS will terminate the enrollment of any provider that was terminated on or after January 1, 2011, by Medicare. Upon application for enrollment, SCDHHS will check PECOS, Medicare's on-line provider management system, for the Medicare status of a provider. However, termination from Medicare is not a factor in our determination of whether the termination from Medicaid is for cause or without cause.

4. Please provide the ten (10) most recent physicians, including their Medicare provider numbers, who were terminated for cause, as well as the allegations against and detailed reasoning for their termination.

SCDHHS has taken action to terminate for cause five physicians since December 1, 2012. Most of the terminations were for license suspensions related to misuse of controlled substances and prescribing privileges. Prior to December 2012, SCDHHS would *exclude* physicians who lost their license to practice or who failed to repay an overpayment identified through a Program Integrity review. "Exclusion" means that items and services furnished, ordered or prescribed by a specified individual or entity will not be reimbursed under Medicare, Medicaid, and all other Federal healthcare programs until the individual or entity is reinstated by the United States Department of Health and Human Services, Office of Inspector General (OIG). The OIG is responsible for excluding health care providers for reasons such as a fraud conviction, patient abuse, or other crimes. SCDHHS also has the authority to exclude a provider from participation in the Medicaid program. However, termination for cause provides a more appropriate tool to ensure that certain providers are no longer in a position to bill the Medicaid program. Since May 23, 2008, Medicare has required that the NPI be used in place of all provider legacy numbers.

A. Daniel Henry Jebens, DO

License No.: 583
NPI: 1821124934

Reason for Termination for Cause action – The physician's medical license was temporarily suspended by the SC Board of Medical Examiners on 12/19/2012, according to information received from the Board. A final order is not yet available. The SCDHHS termination action is based on the physician's temporary suspension by the Medical Board.

B. Michael Lloyd Hughes, M.D.

License No: 23667

NPI: 1497731442

Reason for Termination for Cause action – The physician’s medical license was temporarily suspended by the SC Board of Medical Examiners on 12/21/2012. The Board outlined findings of fact related to the physician’s suspension in a final order dated 6/14/2012, which is posted on the Board’s website. The physician applied for interim reinstatement of his license to practice medicine and his license was reinstated by order dated 5/2/2013.

This physician’s termination for cause action is based on his medical license suspension, his termination by a Managed Care Organization, and the findings of fact listed in the Final Order.

C. John Nichols Burling, M.D.

SC License No.: 30355

GA License No: 043175-Inactive

NPI: 1649292079

Reason for Termination for Cause action – The physician’s medical license was temporarily suspended by the SC Board of Medical Examiners on 12/19/2012, according to information received from the Board. A final order is not yet available. The physician’s termination for cause action is based on the Medical Board’s suspension of his medical license and the allegations outlined in the temporary suspension order.

D. Richard A. Hardoin

License No: F2276

NPI: 1518923440

This physician’s termination “for cause” was initiated and then resolved during the appeal period.

Reason for Termination for Cause action – The physician did not reimburse the Medicaid program for an overpayment of \$27,208.14 established from a Program Integrity review. He had ceased billing SC Medicaid and was located out-of-state.

When the physician received notice of the pending termination for cause, he paid the identified overpayments owed to the Medicaid program. Since the repayment took place during the 30-day window for the appeal, SCDHHS rescinded the termination action.

E. David Lee Smith, MD

License No: 20668

NPI: 1710999750

Reason for Termination for Cause action – Dr. Smith voluntarily surrendered his medical license to the SC Board of Medical Examiners on 1/16/2013, due to pending criminal charges.

5. Please provide the ten (10) most recent physicians, including their Medicare provider numbers, who were terminated without cause, as well as the allegations against and detailed reasoning for their termination. Please exclude those physicians who were terminated without cause due to inactivity within the program.

<u>Provider Type</u>	<u>Provider Name</u>	<u>NPI</u>	<u>Term Date</u>	<u>Reason for Termination</u>
Physician	John A. Rider	1073585204	4/3/2013	Unable to Locate Provider
Physician	Kinchen Ballentine	1710046644	3/22/2013	Moved Out-of-State
Physician	Lollice B. Courtney	1174581987	1/12/2013	Deceased
Physician	Ahraya Tocharoen	1518936707	9/5/2012	Deceased
Physician	James R. Pruitt	1043274202	2/8/2011	License Expired
Physician	Hollis P. Snead Jr.	1104908102	2/16/2012	NPI Deactivated
Physician	Dennis M. Kilgore DO	1740387711	2/16/2012	NPI Deactivated
Physician	Nicholas R. Loon	1225120090	6/15/2011	NPI Deactivated
Physician	Donald G. Gallup	1659326890	1/8/2011	Deceased
Physician	Roland L Skinner Jr.	1245212356	3/24/2011	Deceased

6. Does the Medicaid program reimburse for prescriptions that are issued by a provider that has been terminated?

SCDHHS rejects claims for payment for prescriptions written by providers who have been *excluded* from Medicaid by the OIG and/or SCDHHS. Currently, SCDHHS does not have a process in place to block payment for prescriptions issued by a *terminated* provider, but development of this process is underway as part of an agency improvement project that will be implemented by the end of the year.

Currently, if a provider has a valid NPI, the only control in place to block their prescriptions would be if the provider was on our state excluded provider list, which is maintained on the SCDHHS website, or on the federal excluded provider list maintained by the OIG (the LEIE). But as noted, SCDHHS is implementing system changes to only pay claims if the prescriber is an enrolled Medicaid provider. At that time, we would deny claims for anyone who is not an SC Medicaid provider, and therefore this would block payment for prescriptions from any terminated physician.

The Honorable Charles E. Grassley
July 23, 2013
Page 6

7. Once you have terminated a provider from Medicaid, do you notify the Centers for Medicare and Medicaid Services (“CMS”)?

SCDHHS recently obtained the ability to report the names of providers terminated “for cause” with other states via a CMS supported web-based portal referred to as MC SIS. SCDHHS will report termination for cause actions to the MC SIS in order to assist other States with protecting themselves from providers who pose an increased risk to government health care programs. SCDHHS will also notify the OIG of any terminations for cause. These notifications will occur after a provider’s termination for cause is final, i.e., after the 30-day appeal process is over and no appeal has been filed, or an appeal has been filed and the decision to terminate upheld.

As of this date, since the provider terminations listed in question 4 are still within the 30-day appeal time frame, SCDHHS has not reported any terminated for cause providers to the MC SIS.

Again, thank you for this opportunity to provide information about the South Carolina Medicaid program. We truly appreciate your efforts toward strengthening the integrity of Medicaid and ensuring robust oversight of this vital program.

Sincerely,



Anthony E. Keck
Director

Log # 43



July 25, 2013

Mr. Ken Kramer
PsychSearch
Via E-mail: records@psychsearch.net

Dear Mr. Kramer:

This is in response to your request for information from the South Carolina Department of Health and Human Services (DHHS) pursuant to the South Carolina Freedom of Information Act (FOIA) dated July 18, 2013 and received by DHHS on July 18, 2013.

Pursuant to your request, please find attached a copy of DHHS's response to Senator Grassley's letter of June 24, 2013. Also pursuant to your request the following is a link for South Carolina Medicaid exclusions: <https://www.scdhhs.gov/site-page/medicaid-fraud-costs-taxpayers-millions>. Please note that DHHS includes Medicaid exclusions on the website but not terminations.

Thank you for your request. If you have any questions, feel free to contact me at (803) 898-0062.

Sincerely,



Constance D. Holloway
Assistant General Counsel

CDH

cc: Brenda James

Enclosures