



DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF INSPECTOR GENERAL

WASHINGTON, DC 20201



[REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]

Dear [REDACTED]:

[REDACTED]

Effective 20 days from the date of this letter, the Office of Inspector General (OIG) of the Department of Health and Human Services is excluding you from participation in all Federal health care programs, as defined in section 1128B(f) of the Social Security Act (Act), for the minimum statutory period of 5 years.

The OIG is imposing this exclusion under section 1128(a)(3) of the Act, due to your felony conviction (as defined in section 1128(i) of the Act) in the Court of Common Pleas, Mahoning County, Ohio, of a criminal offense related to fraud, theft, embezzlement, breach of fiduciary responsibility, or other financial misconduct, in connection with the delivery of a health care item or service, or with respect to any act or omission in a health care program (other than Medicare and a State health care program) operated by, or financed in whole or in part, by any Federal, State or local government agency. See 42 U.S.C. 1320a-7(a)(3), 42 C.F.R. 1001.101(c).

Important information about your exclusion and your appeal rights is enclosed. You should read these documents carefully and retain them for future reference.

Sincerely,

[REDACTED]

Enclosures

cc: [REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]



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Please read carefully and retain this important information about your exclusion.

You are excluded from participation in all Federal health care programs (FHCPs), as defined in section 1128B(f) of the Social Security Act (Act). See 42 U.S.C. § 1320a-7b(f); 42 C.F.R. § 1000.10. The Act defines a FHCP as any plan or program that provides health benefits, whether directly, through insurance, or otherwise, which is funded directly, in whole or in part, by the United States Government (except the Federal Employees Health Benefits Program). State health care programs are defined in section 1128(h) and include plans and programs under titles XIX, V, XX, and XXI.

The effect of your exclusion is that no payment may be made by any FHCP (including but not limited to Medicare, Medicaid, and TRICARE) for any items or services furnished, ordered, or prescribed by you, including services that do not directly involve patient care. You also are prohibited from submitting or causing claims to be submitted to FHCPs for items or services you furnish, order or prescribe. This prohibition applies regardless of whether you receive payment directly from any FHCP or whether payments are received by an employer.

A violation of your exclusion may subject you to criminal prosecution and/or the imposition of civil monetary penalties and the denial of your reinstatement to the programs. See 42 U.S.C. § 1320a-7a(1)(D); 42 U.S.C. § 1320a-7b(a)(3); 42 C.F.R. § 1001.3002(a)(2).

The Office of Inspector General (OIG) is required to notify all applicable State health care program agencies and state licensing agencies of your exclusion. Such agencies may impose additional sanctions under their own authorities. In addition, your exclusion will be posted on the OIG's List of Excluded Individuals/Entities, <https://exclusions.oig.hhs.gov/>.

This exclusion does not affect your rights or the rights of your family members to collect benefits to which you or they may be entitled as a beneficiary under any Federal program such as Medicare, Medicaid, or Social Security.

Reinstatement to FHCP participation is not automatic. You will not be reinstated at the conclusion of your period of exclusion unless you apply to the OIG and are granted reinstatement. A request for reinstatement may be submitted by email to exclusions@oig.hhs.gov or by fax to at (202) 691-2298. Upon receipt of the request, the OIG will notify you of the information and documentation required to reach a decision on your reinstatement. Obtaining a state license to provide health care or a provider number from a Medicare contractor, a State Medicaid agency, or other Federal health care program does not reinstate your eligibility to participate in FHCPs.

Additional information regarding the Exclusions Program, including the scope and effect of exclusion and the process for applying for reinstatement, is available on the OIG's website at <https://oig.hhs.gov>.



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HOW TO APPEAL YOUR EXCLUSION

You may appeal your exclusion and file a request for a hearing before an administrative law judge (ALJ) only on the issues of: (i) whether the Office of Inspector General (OIG) has a basis for the imposition of the sanction, and/or (ii) whether the length of exclusion is unreasonable. More information regarding exclusion appeals may be found at 42 C.F.R. Part 1005.

A request for hearing must be made in writing within 60 days of receiving the OIG's notice of exclusion. The date of receipt of the notice will be presumed to be five (5) days after the date of such notice unless there is a reasonable showing to the contrary. See 42 C.F.R. § 1005.2(c).

Your request for hearing must contain a statement as to the specific issues or findings of fact and conclusions of law with which you disagree, along with the basis for your contention that the specific issues or findings and conclusions are incorrect. See 42 C.F.R. § 1005.2(d).

Your request for a hearing should be filed with the Departmental Appeals Board through the Electronic Filing (E-Filing) System. Access to the E-Filing System and additional information regarding E-Filing instructions, procedures, and filing deadlines may be found at www.dab.efile.hhs.gov.

In the event you are unable to file a hearing request using the DAB E-Filing System, you may submit all of the required information by mail to:

Department of Health and Human Services
Departmental Appeals Board, MS 6132
Civil Remedies Division
330 Independence Avenue, SW
Cohen Building – Room G-644
Washington, D.C. 20201