

(b) Notice of action on request for reinstatement. (1) If the State agency approves the request for reinstatement, it must give written notice to the excluded party, and to all others who were informed of the exclusion in accordance with §1002.212, specifying the date on which Medicaid program participation may resume.

(2) If the State agency does not approve the request for reinstatement, it will notify the excluded party of its decision. Any appeal of a denial of reinstatement will be in accordance with State procedures and need not be subject to administrative or judicial review, unless required by State law.

#### Subpart D—Notification to OIG of State or Local Convictions of Crimes Against Medicaid

##### § 1002.230 Notification of State or local convictions of crimes against Medicaid.

(a) The State agency must notify the OIG whenever a State or local court has convicted an individual who is receiving reimbursement under Medicaid of a criminal offense related to participation in the delivery of health care items or services under the Medicaid program, except where the State Medicaid Fraud Control Unit (MFCU) has so notified the OIG.

(b) If the State agency was involved in the investigation or prosecution of the case, it must send notice within 15 days after the conviction.

(c) If the State agency was not so involved, it must give notice within 15 days after it learns of the conviction.

#### PART 1003—CIVIL MONEY PENALTIES, ASSESSMENTS AND EXCLUSIONS

Sec.

- 1003.100 Basis and purpose.
- 1003.101 Definitions.
- 1003.102 Basis for civil money penalties and assessments.
- 1003.103 Amount of penalty.
- 1003.104 Amount of assessment.
- 1003.105 Exclusion from participation in Medicare, Medicaid and other Federal health care programs.
- 1003.106 Determinations regarding the amount of the penalty and assessment.

- 1003.107 Determinations regarding exclusion.
- 1003.108 Penalty, assessment, and exclusion not exclusive.
- 1003.109 Notice of proposed determination.
- 1003.110 Failure to request a hearing.
- 1003.114 Collateral estoppel.
- 1003.126 Settlement.
- 1003.127 Judicial review.
- 1003.128 Collection of penalty and assessment.
- 1003.129 Notice to other agencies.
- 1003.132 Limitations.
- 1003.133 Statistical sampling.
- 1003.134 Effect of exclusion.
- 1003.135 Reinstatement.

AUTHORITY: 42 U.S.C. 1302, 1320-7, 1320a-7a, 1320a-7e, 1320b-10, 1395dd(d)(1), 1395mm, 1395nn(g), 1395ss(d), 1396b(m), 11131(c) and 11137(b)(2).

SOURCE: 51 FR 34777, Sept. 30, 1986, unless otherwise noted.

##### § 1003.100 Basis and purpose.

(a) *Basis.* This part implements sections 1128(c), 1128A, 1128E, 1140, 1876(i)(6), 1877(g), 1882(d) and 1903(m)(5) of the Social Security Act, and sections 421(c) and 427(b)(2) of Public Law 99-660 (42 U.S.C. 1320a-7, 1320a-7a, 1320a-7e, 1320a-7(c), 1320b(10), 1395mm, 1395ss(d), 1396(m), 11131(c) and 11137(b)(2)).

(b) *Purpose.* This part—

(1) Provides for the imposition of civil money penalties and, as applicable, assessments against persons who—

(i) Have submitted certain prohibited claims under the Medicare, Medicaid, or the Maternal and Child Health Services or Social Services Block Grant programs;

(ii) Seek payment in violation of the terms of an assignment agreement or a limitation on charges or payments under the Medicare program, or a requirement not to charge in excess of the amount permitted under the Medicaid program;

(iii) Give false or misleading information that might affect the decision to discharge a Medicare patient from the hospital;

(iv)(A) Fail to report information concerning medical malpractice payments or who improperly disclose, use or permit access to information reported under part B of title IV of Public Law 99-660, and regulations specified in 45 CFR part 60, or