

## Chapter PW-MA 24

## MEDICAID PROVIDER CERTIFICATION

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**PW-MA 24.01 Purpose.** These rules, adopted pursuant to section 49.45 (10) Wis. Stats. regulate the requirements for certification and general conduct of providers in the Medical Assistance Program.

**History:** Cr. Register, June, 1977, No. 258, eff. 7-1-77.

**PW-MA 24.02 Definitions.** (1) **PERSON.** "Person" means a natural person, business association of any form or other legal entity.

(2) **RECIPIENT.** "Recipient" means a natural person who is entitled to receive benefits under the Medical Assistance Program.

(3) **SERVICE.** "Service" means any action, thing or combination of the two provided for care under the Medical Assistance Program.

(4) **MEDICAL ASSISTANCE PROGRAM.** "Medical Assistance Program" means the program administered by the department under Title XIX of the Federal Social Security Act.

(5) **DEPARTMENT.** "Department" means the department of health and social services.

(6) **PROVIDER.** "Provider" means a person who has been certified by the department to provide services to recipients and receive reimbursement under the Medical Assistance Program.

(7) **PROVIDER AGREEMENT.** "Provider agreement" means the contract between a provider and the department which sets forth conditions of participation and reimbursement.

(8) **CONTROLLING INTEREST.** "Controlling interest" means a position or relationship of such power, whether created by employment, ownership, appointment or otherwise, as would permit the holder of such interest to control or strongly influence management of a person to holders financial benefit.

**History:** Cr. Register, June, 1977, No. 258, eff. 7-1-77.

**PW-MA 24.03 Expiration of previous certification.** The previous certification of any person as a provider prior to the effective date of these rules shall expire one year after the effective date of these rules or on such earlier date as the department may, with reasonable notice to affected providers, specify according to a schedule of certification established by the department.

**History:** Cr. Register, June, 1977, No. 258, eff. 7-1-77.

**PW-MA 24.04 Certification.** A person may be certified as a provider of specified services for a reasonable period of time as specified by the department if:

(1) The person truthfully affirms in writing that, with respect to each service for which certification is sought, the person and each person employed by the person for the purpose of providing the service holds all licenses or similar entitlements required by federal or state law, rule, or regulation for the provision of the service, as specified in writing by the department.

(2) The person truthfully affirms in writing that neither it, nor any person in whom it has a controlling interest, nor any person having a controlling interest in it has, during the preceding 5 years, been convicted of a crime related to, or terminated from federal or state assisted medical programs.

(3) The person furnishes to the department in writing the names and addresses of all vendors of drugs, medical supplies or transportation, or providers in which it has a controlling interest and all persons who have a controlling interest in it.

(4) The person has executed a provider agreement with the department or its agent.

**History:** Cr. Register, June, 1977, No. 258, eff. 7-1-77.

**PW-MA 24.05 Decertification or suspension.** (1) All proceedings set out herein shall comply with chapter 227 Wis. Stats.

(2) A provider's certification may be suspended, provided it has received notice of the suspension and a summary of the basis for the suspension, and provided notice is also given to its resident recipients whose benefits may be jeopardized as a result of the suspension, but without a prior hearing whenever the department determines that:

(a) Any of the provider's licenses or similar entitlements as set out according to PW-MA 24.04 (1) have been revoked or suspended or have expired; or

(b) The health or safety of a recipient is in imminent danger because of the knowing failure of the provider to comply with this rule or any other applicable state or federal law or regulation.

(3) Within 5 days, excluding weekends, after receipt of notice of suspension under PW-MA 24.05 (2), any provider or resident entitled to notice may demand and shall be entitled to an immediate hearing and decision on the suspension.

(4) A provider's certification may be terminated, provided it and any of its resident recipients whose benefits may be jeopardized by the proposed termination are given notice of the proposed termination, the provider is also given a summary of the basis of the proposed termination, and all parties noticed are given an opportunity for a hearing to respond to the findings contained in the summary within 10 days and before the termination shall become effective. Failure to demand such hearing in writing within 20 days of the time the required notice, correctly addressed, is placed in the United States mail shall constitute waiver of the right to such hearing. Termination of certification shall be based on the following grounds:

(a) Any of the provider's licenses or similar entitlements as set out according to PW-MA 24.04 (1) have been revoked or suspended or have expired.

(b) Provider knowingly performed a service after any of its licenses or similar entitlements as set out according to PW-MA 24.04 (1) had been revoked or suspended or had expired.

(c) Provider, by its failure to abide by applicable state or federal statute, rule or regulation, has endangered the health or safety of a recipient.

(d) Provider has been convicted of federal or state criminal statute violations for conduct performed under the Medical Assistance Program.

(e) Provider has, by its repeated, knowing failure to abide by federal or state statute, rule or regulation related to provision of services, demonstrated a high probability that it will fail to conform to such statute, rule or regulation in the future.

(f) Provider has failed to abide by the Federal Civil Rights Act of 1964 in providing services.

(g) Provider has referred a recipient to a vendor of drugs or medical supplies, or other provider without disclosing at least once to recipient any controlling interest provider has in such vendor or other provider.

(h) Provider has knowingly furnished to the department or its agent, a false claim or false statement intended to induce payment for a service not rendered, or intended to induce payment at a rate provider knows or should know is not authorized by law, rule or its provider agreement.

(i) Provider has knowingly furnished to the department or its agent a false figure relating to costs, expenditures, or usual and customary charges which false figure provider knows or should know may be utilized in setting rate of reimbursement.

(j) Provider, knowingly, in connection with the Medical Assistance Program solicited, gave or received a kick-back for referral of a recipient, or which caused or would cause a false claim for reimbursement to be filed with the department or its agent.

(k) Provider has failed to pay or repay according to such reasonable schedule over a reasonable period of time as established by the department, funds found to be owed the department by final and unappealed judicial or departmental determination.

(l) Provider has failed to maintain or required to be maintained, such records as are necessary to fully describe the nature and extent of services rendered for which it has filed for reimbursement, or failed to disclose such records to the department upon request.

(m) Provider has knowingly and without legal basis interfered with investigations or audits conducted by authorized agents of the department.

(n) Provider submitted or caused to be submitted, under this rule, false statements which it knew or should have known to be false.

(o) Provider has violated any other special requirements imposed under PW-MA 24.04 or 24.06.

(p) Provider has knowingly violated the terms of its provider agreement.

**History:** Cr. Register, June, 1977, No. 258, eff. 7-1-77.

**PW-MA 24.06 Notification and assistance for resident recipients.** (1) The department may require the provider to give such notice to the recipients as required of the department in sections PW-MA 24.05 (2) and 24.05 (4) of this rule, and provider shall comply on such schedule as specified by the department.

(2) When, pursuant to sections PW-MA 24.05 (2) and 24.05 (4) of this rule, the department initiates proceedings for suspension or termination of a provider who provides care to resident recipients in a nursing home, hospital or other institution setting, and when such action may result in jeopardy to the payment of benefits for the resident recipients, the department may demand, and provider shall immediately provide, a list of its resident recipients who participate in the Medical Assistance Program.

(3) The department shall make every reasonable effort to offer resident recipients relocation assistance in the event that departmental actions under PW-MA 24.05 (2) or 24.05 (4) of this rule result in the cessation of benefit payments at their present facility.

**History:** Cr. Register, June, 1977, No. 258, eff. 7-1-77.