

Insights

Public Notice Regarding Medicare Provider Agreement Terminations

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As part of the August 14, 2017 Inpatient Prospective Payment System ("IPPS") Final Rule^[1], the Centers for Medicare and Medicaid ("CMS") revised the public notice requirements for Medicare provider agreement terminations.

Previously, a Rural Health Clinic ("RHC"), Federally Qualified Health Center ("FQHC"), Ambulatory Surgical Center ("ASC"), or Organ Procurement Organization ("OPO"), that voluntarily terminated its provider agreement, was required to give public notice via newspaper. (See 42 CFR 405.2404, 405.2442, 416.35, 486.312). However, effective October 1, 2017, a RHC, FQHC, ASC, or OPO that voluntarily terminates its provider agreement can give notice via website, electronically, etc., instead of via newspaper.

In the commentary to the Final Rule, CMS noted that this change was to align with the termination notices CMS currently has set forth for all other providers and suppliers and that CMS is allowing for flexibility for the CMS Regional Offices and the providers or suppliers to post public notices through a manner in which the maximum number of community individuals and beneficiaries would be informed. This may include, but is not limited to, state website postings, facility websites, or local news and social media channels. It also would not preclude publication in local newspapers.

Regarding involuntary terminations, CMS will also no longer be required to notify the public via newspaper. Rather, CMS will notify the public using the CMS S&C website, which will be linked from Medicare.gov.

See also the Survey and Certification Letter CMS published shortly after the Final Rule.^[2]

For questions regarding Medicare provider agreement terminations please contact Meghan M. Linvill McNab.

[1] <https://www.gpo.gov/fdsys/pkg/FR-2017-08-14/pdf/2017-16434.pdf>

[2] <http://hr.cch.com/hld/Survey-and-Cert-Letter-17-42TerminationNotices.pdf>