79aa

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: **DELAWARE**

4.46 Provider Screening and Enrollment

Citation The State Medicaid agency gives the following assurances: 1902(a)(77) 1902(a)(39) of of the Act adds 1902(kk): P.L. 111-148 and P.L. 111-152 42 CFR 455 PROVIDER SCREENING Subpart E X Assures that the State Medicaid agency complies with the process for screening providers under section 1902(a)(39), 1902(a)(77) and 1902(kk) of the Act. ENROLLMENT AND SCREENING OF PROVIDERS 42 CFR 455.410 X Assures enrolled providers will be screened in accordance with 42 CFR 455,400 et seq. X Assures that the State Medicaid agency requires all ordering or referring physicians or other professionals, who are not enrolled in Medicare, to be enrolled under the State plan or under a waiver of the Plan as participating providers. VERIFICATION OF PROVIDER LICENSES 42 CFR 455.412 X Assures that the State Medicaid agency has a method for verifying providers licensed by a State and that such providers' licenses have not expired or have no current limitations at the time of enrollment or recertification. REVALIDATION OF ENROLLMENT 42 CFR 455,414 X Assures that providers will be revalidated regardless of provider type at least every 5 years.

TN No. SPA #12-006

Supersedes TN No. NEW

Approval Date JUN 0 7 2012

Effective Date April 1, 2012

79ab

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: **DELAWARE**

4.46 Provider Screening and Enrollment Continued

42 CFR 455.416

TERMINATION OR DENIAL OF ENROLLMENT

X Assures that the State Medicaid agency will comply with 1902(a)(39) of the Act and with the requirements outlined in 42 CFR 455.416 for all terminations or denials

of provider enrollment.

42 CFR 455.420 REACTIVATION OF PROVIDER ENROLLMENT

X Assures that any reactivation of a provider will

include re-screening and payment of application fees as

required by 42 CFR 455.460.

42 CFR 455.422 APPEAL RIGHTS

X Assures that all terminated providers and providers denied enrollment as a result of the requirements of 42 CFR 455.416 will have appeal rights available under procedures established by State law or regulation.

42 CFR 455.432 SITE VISITS

X Assures that pre-enrollment and post enrollment site visits of providers who are in "moderate" or "high risk"

categories will occur.

42 CFR 455,434 CRIMINAL BACKGROUND CHECKS

X Assures that providers as a condition of enrollment will be required to consent to criminal background checks including fingerprints if required to do so under State law or by the level of screening based on risk of fraud, waste or

abuse for that category of provider.

TN No. SPA #12-006

Supersedes TN No. NEW

Approval Date JUN 0 7 2012

Effective Date April 1, 2012

79ac

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: **DELAWARE**

4.46 Provider Screening and Enrollment Continued

42 CFR 455.436

FEDERAL DATABASE CHECKS

X Assures that the State Medicaid agency will perform Federal database checks on all providers or any person with an ownership or controlling interest or who is an agent or managing employee of the provider.

42 CFR 455,440

NATIONAL PROVIDER IDENTIFIER

X Assures that the State Medicaid agency requires the National Provider Identifier of any ordering or referring physician or other professional to be specified on any claim for payment that is based on an order or referral of the

physician or other professional.

42 CFR 455.450

SCREENING LEVELS FOR MEDICAID PROVIDERS X Assures that the State Medicaid agency complies with 1902(a)(77) and 1902(kk) of the Act and with the requirements outlined in 42 CFR 455.450 for screening levels based upon the categorical risk level determined for

a provider.

42 CFR 455.470

TEMPORARY MORATORIUM ON ENROLLMENT OF **NEW PROVIDERS OR SUPPLIERS**

X Assures that the State Medicaid agency complies with any temporary moratorium on the enrollment of new providers or provider types imposed by the Secretary under section 1866(j)(7) and 1902(kk)(4) of the Act, subject to any determination by the State and written notice to the Secretary that such a temporary moratorium would not adversely impact beneficiaries' access to medical assistance.

TN No. SPA #12-006

Supersedes TN No. NEW

Approval Date JUN 0 7 2012

Effective Date April 1, 2012