

# California Pacific Physicians Medical Group, Inc.

C/O HealthSmart Management Services Organization, Inc.

Mailing Address: P.O. Box 6300, Cypress, CA 90630-0063

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## Participation in Federal Programs Verification Requirement

### **Provider Requirements for New and Existing Provider Staff for Monthly Verifications and Attestation Submissions:**

Provider office(s) are required to conduct and review the Medi-Cal Suspended & Ineligible, Office of the Inspector General (OIG), and System for Award Management (SAM) list of Excluded Individuals and Entities (LEIE list) prior to the hiring, employing, or contracting of any new, temporary, volunteer employee(s), and/or consultants, and **monthly thereafter**, to ensure that none of these persons or entities are excluded or become excluded from participation in federal programs.

- ✓ Provider office(s) must provide evidence of new provider office staff are pre-screened prior to hire and monthly thereafter
- ✓ Providers are required to conduct monthly database searches for all provider office staff
- ✓ A signed monthly attestation (attached) is required to confirm that the search has been conducted and reviewed

The monthly attestation must be submitted to your contracted Independent Physician Associations (IPA) via fax (714) 947-8708 by the end of each month. Below are the required links for each of the verification websites and “How to Guide: Participation in Federal Program Verification” to assist in accessing, verifying, and obtaining the information.

#### **Medi-Cal Suspended & Ineligible List**

<https://files.medi-cal.ca.gov/pubsdoco/SandILanding.asp>

**HHS OIG (Inspector General's Office in the Federal Government)** dedicated to combating fraud, waste and abuse and to improving the efficiency of HHS programs.

<https://exclusions.oig.hhs.gov/>

**SAM (System for Award Management)** registration helps to streamline the acquisition of grant, loans, contracts and intergovernmental transactions. According to the General Services Administration (GSA), the federal government plans on integrating ten (10) different federal procurement systems and the Catalog of Federal Domestic Assistance into a single, streamlined system that uses the Integrated Award Environment (IAE).

<https://sam.gov/SAM/pages/public/searchRecords/advancedPIRSearch.jsf>

# Participation in Federal Programs Verification Requirement

## How to Guide: Participation in Federal Programs Verification

### Medi-Cal Suspended & Ineligible List

1. Access the Medi-Cal Suspended & Ineligible list via the link below:

<https://files.medi-cal.ca.gov/pubsdoco/SandILanding.asp>

The screenshot shows the Medi-Cal website interface. At the top, there is a navigation menu with links for Home, Transactions, Publications, Education, Programs, References, and Contact Medi-Cal. Below the menu, there is a search bar and a list of references. The main content area is titled 'Suspended and Ineligible Provider List' and contains text explaining the suspension process and a list of references. A red arrow points to the 'Download the S&I List' link.

2. [Click] on the MEDI-CAL SUSPENDED AND INELIGIBLE PROVIDER LIST.
4. An Excel Spreadsheet will populate. PLEASE DO NOT print this file as it is very large and will slow down your computer system.
5. [Search] the list by FULL LEGAL NAMES OF YOUR EMPLOYEES/CONTRACTORS and any other name employee may use.
6. The attached attestation form will need to be completed accordingly and provided back to your contracted IPA(s).
7. A copy of your attestations should be kept for your records and be readily available, if requested by the IPA or Health Plan.
8. Please fax the attestation to (714) 947-8708.

# Participation in Federal Programs Verification Requirement

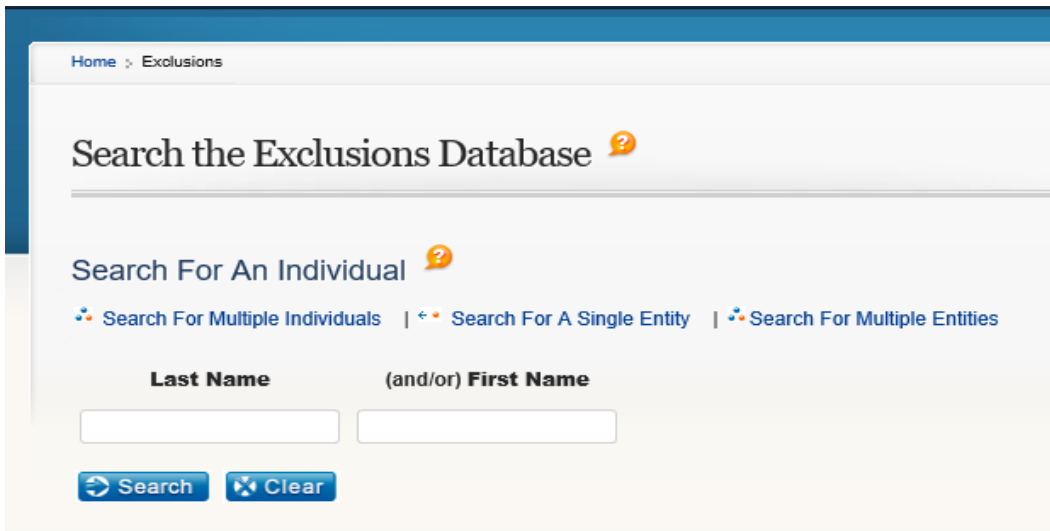
## HHS OIG (Inspector General's Office in the Federal Government)

1. Access the HHS OIG (Inspector General's Office in the Federal Government) database via the link below:

<https://exclusions.oig.hhs.gov/>

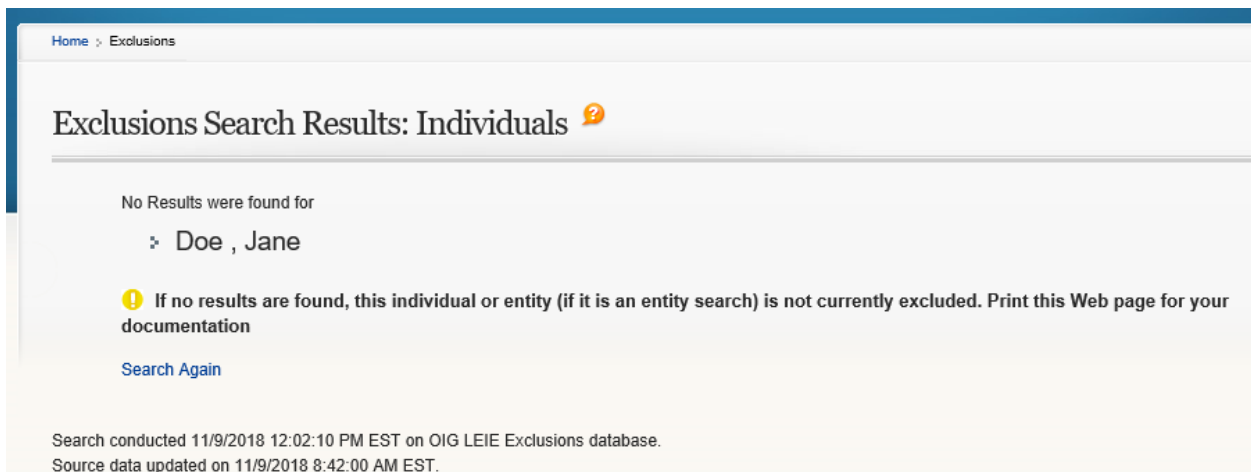
2. [Search] **FULL LEGAL NAMES OF YOUR EMPLOYEES/CONTRACTORS**

*\*Note, if employee and/or new hire go by another name, a search will need to be conducted using their alias or “aka”.*



The screenshot shows the search interface for the HHS OIG Exclusions Database. At the top, there is a breadcrumb trail: "Home > Exclusions". Below this is the main heading "Search the Exclusions Database" with a help icon. Underneath, there is a sub-heading "Search For An Individual" with another help icon. Three search options are listed: "Search For Multiple Individuals", "Search For A Single Entity", and "Search For Multiple Entities". Below these options are two input fields: "Last Name" and "(and/or) First Name". At the bottom of the search area are two buttons: "Search" and "Clear".

3. The attestation will need to be completed accordingly and provided back to your contracted IPA(s).  
EXMAPLE:



The screenshot shows the search results page for the HHS OIG Exclusions Database. At the top, there is a breadcrumb trail: "Home > Exclusions". Below this is the main heading "Exclusions Search Results: Individuals" with a help icon. Underneath, there is a message: "No Results were found for". Below this message is a list of results: "Doe , Jane". Below the list of results is a warning icon and a message: "If no results are found, this individual or entity (if it is an entity search) is not currently excluded. Print this Web page for your documentation". Below the warning message is a button: "Search Again". At the bottom of the page, there is a footer: "Search conducted 11/9/2018 12:02:10 PM EST on OIG LEIE Exclusions database. Source data updated on 11/9/2018 8:42:00 AM EST."

# Participation in Federal Programs Verification Requirement

4. A copy of your attestations should be kept for your records and be readily available, if requested by the IPA or Health Plan.
5. Please fax the attestation to (714) 947-8708.

## System for Award Management (SAM)

1. Access the HHS OIG (Inspector General's Office in the Federal Government) database via the link below to the Advances Search-Exclusion:

<https://sam.gov/SAM/pages/public/searchRecords/advancedPIRSearch.jsf>

View assistance for SAM.gov

**SAM**  
SYSTEM FOR AWARD MANAGEMENT

A NEW WAY TO SIGN IN - If you already have a SAM account, use your SAM email for login.gov. **Log In**  
Login.gov FAQs

HOME SEARCH RECORDS DATA ACCESS CHECK STATUS ABOUT HELP

ALERT - There may be a delay in data updates between the Small Business Administration (SBA) and SAM. If you notice any issues with your entity's SBA status or trouble on the SBA Supplemental page, please contact the Federal Service Desk.  
ALERT - June 11, 2018: Entities registering in SAM must submit a [notarized letter](#) appointing their authorized Entity Administrator. Read our [updated FAQs](#) to learn more about changes to the notarized letter review process and other system improvements.

### Advanced Search - Exclusion

Structure your search for exclusion records in SAM using one of three approaches. Select a radio button corresponding to the category header that best describes how you want to search. The accordion will expand to show you the search criteria. You can only use one approach at a time.

**Search Tips:**

- If you want to search using a date range, use the Single Search approach.
- If you are trying to search for more than one excluded party at a time, you can search for up to six names using the Multiple Names approach.
- If you choose the SSN/TIN approach, you must enter search criteria in both the Name and SSN/TIN fields.
- If you choose the SSN/TIN approach, the name and SSN or TIN you enter must match exactly what is contained on an exclusion record for the result to be returned.
- Search terms are defined in the SAM User Guide Glossary.

Single Search

Multiple Names

All Name   
All Name   
All Name   
All Name   
All Name   
All Name

Exclusion Status  Selecting "All" displays both Active and Inactive Exclusions.

**SEARCH** **CLEAR** You may only perform a search with the criteria contained in one accordion.

SSN/TIN Search

2. [Type] **FULL LEGAL NAMES OF YOUR EMPLOYEES/CONTRACTORS** 'Name' field.
3. [Click] the 'Search' button.

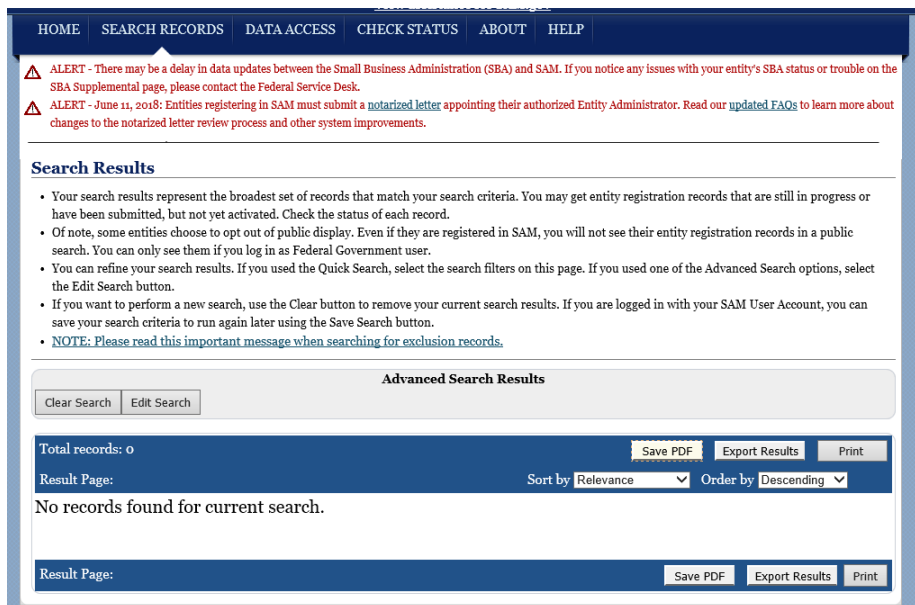
## Exclusion Search Tips

- There may be instances when a Firm or Individual has the same name, or a similar name, as your search criteria but is actually a different party. Read the entire record to understand why the entity was excluded and what effect this exclusion has on your decision.

# Participation in Federal Programs Verification Requirement

- To verify a potential match or obtain additional information, contact the federal agency that created the exclusion record. Contact information for the designated Agency Point of Contact (POC) is linked to the Excluding Agency name within the record. You can also navigate to the Agency Exclusion POC page within SAM Help under Exclusions Information.
- SAM does not have DUNA number or CAGE code identifiers for all Firm exclusions records. Therefore, a search by one of these fields alone may not be sufficient. Conduct an additional Name search if no results are found by the entity identifier.
- If you search only on a particular classification type (e.g. Firm), you are potentially excluding exclusion records created under a different classification.

4. Search Results will display on the bottom of the screen:



5. A copy of your attestations should be kept for your records and be readily available, if requested by the IPA or Health Plan.
6. Please fax the attestation to (714) 947-8708.

**Please contact Provider Relations should you have any questions at 714-947-8600.**

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**OIG/SAM/Medi-Cal Exclusions Screening Attestation**

As a first-tier, downstream or related entity that participates in one or more governmental funded health care program, the organization identified in the signature block below attests to the following.

- That we review the Office of the Inspector General (OIG) and General Services Administration System for Award Management (SAM) exclusion lists and Medi-Cal Suspended and Ineligible Provider List upon initial hire/contract and monthly thereafter to ensure that any new employee, manager or downstream entity is not included in any such list.
- If an employee, manager or downstream entity is on such lists, the organization will terminate such person or entity and notify PMD or PMG of the person or entity's identity.
- Your organization will retain and furnish confirmation upon request documentation that your organization reviews the OIG/GSA exclusion lists upon initial hire/contract and monthly thereafter.
- Database (site listed below) verification is a mandatory **monthly requirement** and **must be completed on or before the end of each month**. Please attest below and fax completed attestation to (714) 947-8708.

The How To: Participation in Federal Programs Verification and Attestation can be found on our website at [www.healthsmartmso.com](http://www.healthsmartmso.com).

Please be advised that pursuant to the terms of your agreement with California Pacific Physicians Medical Group, Inc., California Pacific Physicians Medical Group, Inc. or an affiliated entity, you are required to comply with all applicable federal, state, and municipal rules and regulations and that this request is directly related to such provision. Please also be advised that such screenings are required under the contract between California Pacific Physicians Medical Group, Inc., or an affiliated entity, on the one hand, and the health plan, on the other hand.

**To assist you with the implementation of your OIG/GSA Exclusion process, we are providing links to the relevant exclusions lists to comply with the regulations:**

- Medi-Cal Suspended & Ineligible List- <https://files.medi-cal.ca.gov/pubsdoco/SandILanding.asp>
- HHS OIG (Inspector General’s Office in the Federal Government)- <https://exclusions.oig.hhs.gov/>
- System for Award Management (SAM)- <https://sam.gov/SAM/pages/public/searchRecords/advancedPIRSearch.jsf>

Please note that these three lists do not necessarily overlap and all three lists must be checked as to each employee, manager or downstream entity. For example, an employee could be listed on the Medi-Cal exclusion list but not listed on the OIG and/or SAM exclusion lists.

Print Name:	Name of Organization:	
Signature:	Date Signed:	National Provider ID (NPI):

*\*As a reminder, a **monthly** attestation for must be conducted and submitted. Please Fax Attestation to (714) 947-8708*

We thank you for your continued support and providing quality care to the members.

**California Pacific Physicians Medical Group, Inc.**