



# State of New Jersey

CALENDAR YEAR 2023

DOCUMENT SUBMISSION REQUIREMENTS

SECTION 6032 OF THE FEDERAL DEFICIT REDUCTION ACT OF 2005,

42 U.S.C. §1396a(a)(68)

**Your entity is required to submit documentation substantiating its Section 6032 Policies for this calendar year.** Documentation may be submitted via hard copy, electronic mail attachment or provision of a link to an external website where the policies may be accessed publicly. If the policies appear on an internal website (intranet), you must submit a hard copy or an electronic copy of your entity's policies and computer screen shots that verify that the policies appear on an intranet site.

## Section 6032 Policies

Please submit copies of the entity's Section 6032 Policies, including:

- Detailed information regarding the role of the federal and state statutes outlined in **Question 1a of the certification form** to prevent and deter fraud, waste and abuse, including penalties and whistleblower protections;
- The entity's own policies and procedures for detecting and preventing fraud, waste and abuse;
- The entity's reporting methods for fraud, waste and abuse, including alternative reporting through New Jersey's Medicaid Fraud Division and Insurance Fraud Prosecutor; and
- The entity's monthly background check policies in accordance with New Jersey Division of Medical Assistance and Health Services Newsletter Volume 33, Number 02 (NEW), as outlined in **Question 1c of the certification form**.

## Employee Handbook (if applicable)

If an employee handbook exists, please submit copies, highlighting the following sections:

- Detailed information regarding the role of the federal and state statutes outlined in **Question 1a of the certification form** to prevent and deter fraud, waste and abuse, including penalties and whistleblower protections;
- Employee's rights to whistleblower protections;
- The entity's own policies and procedures for detecting and preventing fraud, waste and abuse; and
- The entity's reporting methods for fraud, waste and abuse, including alternative reporting through New Jersey's Medicaid Fraud Division and Insurance Fraud Prosecutor.

## Evidence of Occurrence and Distribution

Please submit evidence of the following (a sample is sufficient, including a sample signed acknowledgement or screen shot of the information on the company intranet):

- Monthly background checks are occurring, including a list of databases that are being checked;
- The entity's Section 6032 policies have been disseminated to employees;
- The entity's employees have been educated regarding its Section 6032 Policies;
- The entity's Employee Handbook, if applicable, has been distributed to employees;
- Contractors and their employees are required to comply with the entity's Section 6032 Policies;
- The entity's Section 6032 policies have been disseminated to contractors; and
- The entity's contractors have been educated regarding its Section 6032 Policies.



State of New Jersey  
Department of Human Services  
Division of Medical Assistance & Health Services

# NEWSLETTER

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Volume 33 No. 02

January 2023

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**TO:** All Providers - **For Action**  
Managed Care Organizations (MCOs) – **For Action**

**SUBJECT:** Excluded, Unlicensed or Uncertified Individuals or Entities

***This Newsletter Updates Newsletter Volume 26, Number 14, dated September 2016***

**PURPOSE:** To remind providers and MCOs of their responsibility to determine if an individual or entity that they employ or contract with is excluded, unlicensed or uncertified.

**BACKGROUND:** Providers and MCOs are responsible for ensuring that any payments received from the State of New Jersey are not for items or services that are directly or indirectly furnished, ordered, directed, managed or prescribed in whole or in part by an excluded, unlicensed or uncertified individual or entity. Excluded individuals or entities are those identified by the State or federal government as not being allowed to participate in State or federally-funded health benefit programs, such as Medicaid, NJ FamilyCare, or Pharmaceutical Assistance to the Aged and Disabled (PAAD).

**ACTION:** Providers and MCOs are required to verify that any current or prospective employees (regular or temporary), contractors or subcontractors, who directly or indirectly will be furnishing, ordering, directing, managing or prescribing items or services in whole or in part are not excluded, unlicensed or uncertified by searching the following databases on a monthly basis:

- State of New Jersey debarment list (mandatory): [https://nj.gov/comptroller/doc/nj\\_debarment\\_list.pdf](https://nj.gov/comptroller/doc/nj_debarment_list.pdf)
- Federal exclusions database (mandatory): <https://exclusions.oig.hhs.gov/>
- N.J. Treasurer's exclusions database (mandatory): <http://www.state.nj.us/treasury/revenue/debarment/debsearch.shtml>
- N.J. Division of Consumer Affairs licensure databases, including all licensed healthcare professionals (mandatory, if applicable): <http://www.njconsumeraffairs.gov/Pages/verification.aspx>

- N.J. Department of Health licensure and certification database, including: Nursing Home Administrators, Certified Assisted Living Administrators, Certified Nurse Aides/Personal Care Assistants, and Certified Medication Aides (mandatory, if applicable): <https://njna.psiexams.com/>.
- Federal exclusions and licensure database (optional and fee-based): <https://www.npdb.hrsa.gov/hcorg/pds.jsp>. Please note that only certain providertypes may access this database. See [www.npdb.hrsa.gov/hcorg/register.jsp](http://www.npdb.hrsa.gov/hcorg/register.jsp) formore information.

Background checks utilizing these databases shall be included in a provider's or MCO's written policies and procedures for preventing and detecting fraud, waste and abuse. The aforementioned requirements shall be mandatory for compliance with Section 6032 of the Federal Deficit Reduction Act, 42 U.S.C. §1396a(a)(68). The State reserves the right either to deny, void or to seek recovery for any services that are directly or indirectly furnished, ordered, directed, managed or prescribed in whole or in part by an excluded, unlicensed or uncertified individual or entity. Further, interest and civil penalties may be assessed in any such recovery. Finally, providers and MCOs discovering any excluded, unlicensed or uncertified individual or entity employed by, or contracting with the provider or MCO must send written notification to the Office of the State Comptroller, Medicaid Fraud Division, P.O. Box 025, Trenton, NJ 08625-0025.

Additionally, if any provider or person discovers fraud and/or abuse occurring in any State or federally-funded health benefit program, they should report it to the Office of State Comptroller, Medicaid Fraud Division hotline at 1-888-937-2835 or web site at <https://www.nj.gov/comptroller/about/work/medicaid/complaint.shtml>.

If you have any questions concerning this Newsletter, please call the Recovery and Exclusions Supervisor, Office of the State Comptroller, Medicaid Fraud Division at 609-826-4856.

**RETAIN THIS NEWSLETTER FOR FUTURE REFERENCE**