



Department of
**HEALTH &
HUMAN SERVICES**

Division of
Medicaid
Services

To: NH Medicaid Enrolled Providers
From: NH Division of Medicaid Services
Date: October 15, 2026

Subject: Monthly Screening Requirements for Federal Exclusion Lists

The Medicaid Program Integrity Unit monitors provider compliance with the requirement to regularly check the Federal Exclusion Database by the Office Inspector General.

In accordance with 42 CFR 445.436 and the Centers for Medicare & Medicaid Service (CMS) State Medicaid Director Letter dated January 16, 2009, State Medicaid Agencies must ensure that no providers of Medicaid Services have employees, contractors, and/or board members who are listed on the Federal Exclusion Database. Providers must check this database at certain times: upon hiring a new employee, prior to executing a contract with a provider, or prior to confirming a new board member to the organization. In addition, providers are required to conduct monthly exclusion screenings of all active employees and contractors in accordance with the terms of the Provider Participation Agreement:

I acknowledge that I have an obligation to monthly screen all employees and contractors (utilizing the List of Excluded Individuals/Entities-LEIE-website at <http://www.oig.hhs.gov/fraud/exclusions.asp> and/or any other exclusion lists or instructions provided by NH Medicaid Program) to determine whether any of them have been excluded from participation in Federal health care programs, to report to Medicaid any exclusion information discovered, and I am required to comply with these obligations as a condition of enrollment. I understand that I must search the HHS-OIG website monthly to capture exclusions and reinstatements that have occurred since the last search and that I can search the website by the names of any individual or entity.

Providers can access the searchable database and downloadable format at:
<http://oig.hhs.gov/exclusions/index.asp>.

Providers must keep documentation that they have conducted these regular checks, as the Bureau of Program Integrity will ask for proof of compliance with this requirement.

Providers are encouraged to review their current screening procedures to ensure that monthly screenings are completed, results are documented, and any identified exclusions are reported to New Hampshire Medicaid as required.

If you have questions regarding this notice, please contact Karen Carleton at the Bureau of Program Integrity:

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Thank you,

NH Medicaid Provider Relations