

205.8477 Disclosure requirements for Medicaid providers, fiscal agents, and managed care entities -- Disclosure requirements for owners and investors of health facilities and health services -- When disclosure must be provided.

- (1) Each Medicaid provider, other than an individual practitioner or group of practitioners, fiscal agent that processes or pays vendor claims on behalf of the Medicaid agency, and managed care entity shall file a disclosure with the Cabinet for Health and Family Services in accordance with 42 C.F.R. sec. 455.104.
- (2) Each owner of or direct financial investor in any health facility or health service which dispenses or supplies drugs, medicines, medical devices, or durable medical equipment to a patient shall file a disclosure with the Cabinet for Health and Family Services of the names and addresses of any immediate family member who is authorized under state law to prescribe drugs or medicines or medical devices or equipment.
- (3) Each provider shall, as a condition of participation in the Medical Assistance Program, file a disclosure with the Cabinet for Health and Family Services in accordance with 42 C.F.R. sec. 455.105 relating to business transactions and in accordance with 42 C.F.R. sec. 455.106 relating to information on persons convicted of crimes.
- (4) Disclosures required under this statute shall be provided at any of the following times or as otherwise provided by law:
 - (a) Upon submitting a provider application;
 - (b) Upon executing a provider agreement;
 - (c) Upon request of the Cabinet for Health and Family Services during a provider's revalidation of enrollment;
 - (d) Within thirty-five (35) days after any change in ownership of a health facility or health service, fiscal agent, or managed care entity;
 - (e) Upon the submission of a proposal in accordance with the state's procurement process by a fiscal agent or by a managed care entity;
 - (f) Upon execution, renewal, or extension of a contract by the state with a fiscal agent or a managed care entity; or
 - (g) Upon written request within thirty-five (35) days by the Cabinet for Health and Family Services.

Effective: June 24, 2015

History: Amended 2015 Ky. Acts ch. 80, sec. 1, effective June 24, 2015. -- Amended 2005 Ky. Acts ch. 99, sec. 285, effective June 20, 2005. -- Amended 1998 Ky. Acts ch. 426, sec. 232, effective July 15, 1998. -- Created 1994 Ky. Acts ch. 96, sec. 14, effective July 15, 1994; and ch. 316, sec. 14, effective July 15, 1994.