

## **CMS Authority to Terminate Medicare and Medicaid Participation**

1. Noncompliance with Conditions of Participation (CoPs), Conditions for Coverage, or Requirements for SNFs - The RO is delegated authority to terminate Medicare participation of all providers and suppliers because of noncompliance with the applicable regulatory requirements, or Conditions of Participation (CoPs) or Conditions for Coverage (CfCs).
2. Violations of Provider Agreements, Quality Improvement Organization (QIO) Sanctions, or Program Abuse - The Secretary's authority to terminate provider agreements is delegated to the Associate Regional Administrator and may be redelegated to the Branch Chief, but other components may also be authorized to find that termination is in order. Accordingly, the RO handles terminations on grounds other than noncompliance with the CoPs in accordance with Section §3032 of the State Operations Manual.
3. "Look Behind" Cancellation of Medicaid Intermediate Care Facility/Mentally Retarded (ICF/MR) Agreements - The ROs are authorized to cancel the approval of an ICF/MR to participate in the Medicaid program when the ICF/MR fails to comply substantially with regulatory CoPs. (See §1910(b) of the Social Security Act.)
4. Termination of Nursing Facility (NF) Medicaid Agreements - The ROs are, under certain circumstances, authorized to terminate a NF's participation in the Medicaid program. (See §1919(h) of the Social Security Act and Chapter 7 of the State Operations Manual)