Risk levels assigned for enrolling and re-validating Medicaid providers based on 42 CFR § 455.450

Limited Risk (Federal database checks)

Physician (MD) Osteopath (DO) **Crossover Only Provider** Chiropractor Podiatrist Nutritionist/Dietician Hospitals **Psychiatric Residential Treatment Facility Hospital Swing Bed** Expanded Services/School Health Related School Based Screener RN School Telepresenter Intermediate Care Facility IID Pharmacy **Pharmacist-Disease Management** Dentist Audiologist Hearing Aid Dealer Optometrist **Optical Dispensary Rural Health Clinic** Federally Qualified Health Center Ordering, Referring, Prescribing provider (ORP) **Kidney Dialysis Facility**

Moderate Risk (Federal database checks/site visits)

Independent Lab Independent Diagnostic Testing Facility Ambulance Private Duty Nursing Agency State Board of Health Certified Registered Nurse Anesthetist (CRNA) Nurse Midwife Nurse Practitioner **Physician Assistant** Prescribed Pediatric Extended Care Center **Occupational Therapist** Speech Language Pathologist **Ambulatory Surgical Center Birthing Center** Respite Care, Institutional Licensed Certified Social Worker (LCSW) Psychologist MYPAC Licensed Professional Counselor (LPC) Board Certified Behavior Analyst (BCBA) Licensed Marriage & Family Therapist (LMFT) Nursing Facilities Physician Clinic/Group Dental Clinic/Group Hearing Clinic/Group **Optometric Clinic/Group** Pharmacy-Disease Mgt. Group Nurse Clinic/Group

Physical Therapist Comprehensive Outpatient Rehab Facility Assisted Living Therapy Clinic/Group

High Risk (Federal database checks/site visit/fingerprinting & criminal background checks)

Durable Medical Equipment Home Health Agency Hospice Case Management Personal Care Services Respite Care, In Home Adult Day Care Home Delivered Meals Personal Care Attendant Habilitation Multiple Services (HCBS) Community Mental Health Center Private Mental Health Center IDD Community Support Program Mental Health Clinic/Group

NOTE: Pursuant to 42 CFR § 455.450(e), particular providers will automatically be "bumped up" to the high risk category due to payment suspension based on credible allegation of fraud, waste or abuse; existing Medicaid overpayment at the time of enrollment or revalidation; excluded by the OIG or another state's Medicaid program within the previous 10 years and/or lifting of a temporary moratorium within the state or by CMS within the previous 6 months. (Updated 09/14/2020)