

United States Department of Health and Human Services

**DEPARTMENTAL APPEALS BOARD**

Civil Remedies Division

In the Case of:	)	
	)	
_____	)	Date:
	)	
Petitioner,	)	
	)	Docket No. C-____ - _____
- v. -	)	
	)	
The Inspector General.	)	
	)	
_____	)	

**INFORMAL BRIEF OF PETITIONER**

The Inspector General (I.G.) argues that you may be excluded from participating in Medicare, Medicaid, and other federally-funded health care programs, because your license to provide health care was revoked, suspended, or otherwise lost for a reason described at section 1128(b)(4) of the Social Security Act. The length of the exclusion is for a period of time that is not less than the period when your license is revoked, suspended, or otherwise lost.

The issue in this case is whether the I.G. is authorized to exclude you.

**I. Was your license revoked, suspended, or otherwise lost, or did you surrender your license, under the circumstances that are described at section 1128(b)(4)?**

\_\_\_\_\_ Yes \_\_\_\_\_ No

A. Do you agree that your license to provide health care was revoked, suspended, or otherwise lost as a consequence of action taken by a State licensing authority?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If you **disagree**, explain why you disagree. State which exhibits support your argument and explain why they do.

B. Do you agree that your license to provide health care was revoked, suspended, or otherwise lost for reasons bearing on your professional competence, professional performance, or financial integrity?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If you **disagree**, explain why you disagree. State which exhibits support your argument and explain why they do.

C. **(Answer the following question only if your license to provide health care was lost, suspended, or otherwise revoked based on an agreement reached between you and a State licensing authority).** Do you agree that you surrendered your license to provide health care while a State formal disciplinary proceeding was pending against you and the proceeding concerned your professional competence, professional performance, or financial integrity?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If you **disagree**, explain why you disagree. State which exhibits support your argument and explain why they do.



**III. Do you have any other arguments you wish to make?** If so, please state them here. State which exhibits support your argument(s) and explain why they do.

\_\_\_\_\_  
Petitioner or Petitioner's Representative

Date: \_\_\_\_\_