



Department of Health

KATHY HOCHUL
Governor

JAMES V. McDONALD, M.D., M.P.H.
Commissioner

JOHANNE E. MORNE, M.S.
Executive Deputy Commissioner

John Doe
55 Main Street
Huntington, NY 11721

Date: 9/1/2024
Provider ID: 123456

SECOND AND FINAL NOTICE **Mandatory Medicaid Revalidation**

Dear Provider:

The Affordable Care Act and federal regulation (42 CFR Part 455.414) requires state Medicaid agencies to revalidate the enrollment of all providers on a periodic basis. **Enrollment for the above Medicaid Provider ID, and all categories of service actively enrolled under that Provider ID, must now be revalidated.** To submit your revalidation, please visit <https://www.emedny.org/info/ProviderEnrollment/index.aspx>. A complete enrollment form (with the revalidation box checked), ALL required documentation, and the application fee (if applicable) must be mailed to the address on page 2 of the enrollment form **within 45 days** of the date of this letter. **To avoid your revalidation being rejected or delayed, please read all instructions to ensure a complete revalidation package is submitted.**

Failure to successfully submit the required revalidation package as requested will result in termination of the Provider ID listed above. You will be ineligible to receive reimbursement for services provided to all Medicaid fee-for-service, Medicaid Managed Care (MMC) and Children's Health Insurance Program (CHIP) beneficiaries, including services that were ordered, referred, prescribed, or attended. You will also be precluded from participating in all MMC and CHIP networks, per Section 5005(b)(2) of the 21st Century Cures Act and Section 1932(d) of the Social Security Act.

If you have questions about completing the revalidation process, please contact the eMedNY Call Center at (800) 343-9000. We look forward to your continued participation in the New York State Medicaid Program.

Sincerely,

Sarah J. Atkinson
Director, Bureau of Provider Enrollment
Division of Health Plan Contracting and Oversight
Office of Health Insurance Programs