

# Bulletin

# Michigan Department of Community Health

**Bulletin Number:** MSA 06-03

**Distribution:** All Providers

**Issued:** January 2006

**Subject:** Sanctioned Providers (Monthly Update)

Effective: As Indicated

Programs Affected: Medicaid, Children's Special Health Care Services, MOMS, ABW

Attached is the January 2006 update to the Sanctioned Provider List issued October 2005 as Bulletin MSA 05-46.

### NOTES:

- A complete list of Centers for Medicare and Medicaid Services (CMS) sanctioned providers is available on their website at <a href="http://exclusions.oig.hhs.gov">http://exclusions.oig.hhs.gov</a>.
- A complete list of sanctioned providers is available on the Michigan Department of Community
  Health website at <a href="https://www.michigan.gov/mdch">www.michigan.gov/mdch</a>, click on Providers, click on Information for Medicaid
  Providers, click on List of Sanctioned Providers.

## **Manual Maintenance**

Retain this bulletin for future reference.

### **Questions**

Any questions regarding this bulletin should be directed to: Provider Inquiry, Michigan Department of Community Health, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mail at <a href="mailto:ProviderSupport@michigan.gov">ProviderSupport@michigan.gov</a>. When you submit an e-mail, be sure to include your name, affiliation, and a phone number so you may be contacted if necessary. Providers may phone toll-free 1-800-292-2550.

**Approved** 

Paul Reinhart, Director

Medical Services Administration

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MEDICAID I.D. NO. EFFECTIVE DATE OF PROVIDER SANCTION

12-20-05

EFFECTIVE DATE OF NON-COVERAGE OF REFERRALS

12-20-05

SANCTIONING AUTHORITY

**CMS** 

HILDEBRANDT, HENRY MARK, M.D.

5333 MCAULEY DR., R6106, YPSILANTI

1500 E. MEDICAL CENTER DR., ANN ARBOR

1075623 1268540

5333 MCAULEY DR., R1104, YPSILANTI

4546613

**MEDICAP PHARMACY** 

01-20-06 01-20-06 CMS

9300 BURNING TREE DR., GRAND BLANC 2358566 2918 N. SAGINAW ST., FLINT 3507147 2918 N. SAGINAW ST., FLINT 3507165



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MEDICAID I.D. NO. EFFECTIVE DATE OF PROVIDER REINSTATEMENT EFFECTIVE DATE OF NON-COVERAGE OF REFERRALS REINSTATING AUTHORITY

**REINSTATEMENTS** 

BERRY, NABIL, D.D.S., P.C. 12-09-05 CMS

WRIGHT, SHEILA A., D.P.M. 11-16-05 CMS