



Exclusion, Debarment, and Medi-Cal Sanction Checks

- **What are Exclusion, Debarment, and Medi-Cal Sanction (EDM) checks?**

EDM checks reference a process required of HHSA providers to ensure compliance with federal and State requirements and HHSA policy. Neither providers, nor any of their workforce members, can be actively listed on the General Services Administration Excluded Parties Listing, the Office of Inspector General List of Excluded Individuals/Entities, or the California Department of Health Care Services List of Suspended or Ineligible Providers. More information, including links to these lists, can be found [here](#).

- **Where can I find the contractual requirements related to EDM checks?**

EDM requirements are typically included in the contract template, section 8.16.

- **On whom are providers required to perform EDM checks?**

EDM checks should be run on any and all workforce members, i.e., individuals who work on the contract in any capacity, including paid staff, unpaid workers, and/or subcontractors or consultants. Workforce members include individuals with budgeted position in a contract and those paid via indirect funds or overhead. Workforce members include individuals with access to identifying information on HHSA clients, even if the individual isn't paid through the contract.

- **Must providers run all three (Exclusion, Debarment, and Medi-Cal Sanction) checks for all HHSA contracts?**

Generally, HHSA providers will be expected to run all three checks. There are, however, exceptions for certain types of services and for contracts whose funding source may only require some but not all of the checks. Providers should consult with their COR on available options for waivers for some or all checks.

- **How do providers perform the checks? What about subcontractors and consultants?**

Providers may satisfy EDM requirements in a variety of ways. Providers may check each workforce member's name against each of the three databases manually or use a third-party software to check all three databases simultaneously. Providers may also hire a third party to run the checks. Likewise, providers have the flexibility to either run EDM checks on their subcontractors/consultants or to pass down the EDM requirements for subcontractors/consultants to do themselves. Regardless of how a provider chooses to complete EDM checks, it is the responsibility of the provider to ensure EDM checks are performed on all workforce members, thoroughly and timely.

- **How often do EDM checks need to be run?**

Because the EDM lists are updated monthly, providers should perform EDM checks monthly, specifically at the same time each month. This will ensure providers are checking against an updated list.

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- **Does HHSA offer any training on how to run EDM checks?**

Yes, the Business Assurance and Compliance (BAC) can provide training on how to run EDM searches manually.

- **Does HHSA recommend any third-party software or vendor who performs EDM checks?**

HHSA does not have a specific software or entity that it recommends. Providers should perform due diligence before selecting a third-party software or vendor.

- **What happens if an individual shows up on one or more EDM lists?**

An active 'hit' on any of the lists disqualifies individuals from performing any work on HHSA contracts, even if that work is unpaid. Providers should let their Contracting Officer's Representative (COR) know immediately if a workforce member has an active 'hit.' Having a 'hit' may require self-disclosure to the federal and/or State government and repayment of funds received, depending on the timing of the exclusion. Therefore, it is important for providers to confirm the identity of any workforce members who appear on the list, since many individuals share the same name. Providers should also ensure the exclusion, debarment, or suspension is active versus resolved.

- **What kind of documentation will likely satisfy an HHSA audit of EDM checks?**

The type of documentation required by HHSA during an audit may vary. For most routine audits, the COR team will solicit information about the provider's process and ask to see the provider's EDM check policy. COR teams may also verify EDM checks were run on a random sampling of individuals. EDM documentation should generally include: who was searched; date searched; databases searched; results of search; name of staff conducting the search; and name of staff reviewing the search. Non-routine audits may involve other questions/review. HHSA does not require that providers keep screen shots of each individual searched, but if that is how providers document their searches, then COR teams will likely need to review these documents.

Don't see your question answered above? Have additional questions? Your COR team is your primary resource for any questions related to your HHSA contract. For questions related to this FAQ, please contact HHSA Business Assurance and Compliance (BAC) by email at Compliance.HHSA@SDCounty.ca.gov or by phone (619) 237-8571.