10A NCAC 22N .0202 DISCLOSURE OF OWNERSHIP

Providers who undergo a change in ownership as defined in G.S. 108C-10 shall comply with the following disclosure conditions:

- (1) when applying to participate in the North Carolina Medicaid program, the provider shall supply the legal name and social security number of each individual who is an owner;
- (2) an enrolled provider shall notify the Division in writing of a change in the legal name of any owner. The notification shall be received within 30 calendar days of the effective date of any change;
- (3) an enrolled provider shall notify the Division in writing if a new owner joins the provider. The notification shall include the new owner's legal name and social security number. The notification shall be received within 30 calendar days of the effective date of any change; and
- (4) an enrolled provider shall notify the Division in writing if an owner withdraws his ownership interest in the provider. The notification shall include the name of the departing owner and shall be received within 30 calendar days of the effective date of any change.

History Note: Authority G.S. 108A-54; 108C-10; 143B-139.1; 42 C.F.R. 455.104; 42 C.F.R. 455.106;

Eff. July 1, 2004;

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