United States Department of Health and Human Services

DEPARTMENTAL APPEALS BOARD

Civil Remedies Division

| In the Case of: |) | | | |
|--|--|--|--|--|
| |) Date: | | | |
| Petitioner, |) | | | |
| - V |) Docket No. C- | - | | |
| - v. - |) | | | |
| The Inspector General. |) | | | |
| | | | | |
| INFORMA | L BRIEF OF PETITIONER | | | |
| Medicare, Medicaid, and other fe years, because you wer at section 1128(a)(1) of the Socia | des that he must exclude you from derally-funded health care prograte convicted of a criminal offense of Security Act and because there is no that the I.G. determined to impose | ms for at least that is described is evidence that | | |
| The issues in this case are whether | er: | | | |
| 1. The I.G. is required to | exclude you; and | | | |
| 2. The length of the exclu reasonable. | sion that the I.G. determined to in | npose is | | |
| I. Were you convicted of a crim | ninal offense? | | | |
| Yes No | | | | |
| Do you agree that you were convicted of a criminal offense? Yes Yes | | | | |

| - | _ | explain why xplain why th | • | State which ex | khibits support y | our |
|---|--------------|------------------------------|----------------|----------------|--|-----------|
| | | | | | | |
| II. | Were you c | onvicted of a | an offense for | which exclusi | on is required? | |
| | _ Yes | _ No | | | | |
| the o | _ | n item or ser | • | • | onviction related te health care (a | |
| Do | you disagree | with the I.G | 3.'s argument? | Yes | No | |
| - | _ | explain why xplain why th | • | State which e | xhibits support | your |
| | | | | | | |
| III. Is the length of your exclusion unreasonable? The I.G. argues that there is evidence relating to certain aggravating factors that he says supports the length of the exclusion.A. Do you disagree with the I.G.'s identification of aggravating factors | | | | | | |
| | - | _ | Yes N | | ı di aggravatınş | g iactors |

If you **disagree**, state which of the aggravating factors cited by the I.G. you believe are not present. Explain why you disagree. State which exhibits support your argument(s) and explain why they do.

B. If you agree that there is/are an aggravating factor or factors present in your case but believe that the exclusion is nonetheless not justified by the presence of that factor or factors, explain your reasons for your argument. State which exhibits support your arguments and explain why they do.

C. Do you believe that a mitigating factor or factors exist(s) that support(s) reducing the length of your exclusion (before answering this question, read the list of potentially mitigating factors that is set forth at 42 C.F.R. § 1001.102(c))?

Yes No

If you believe that a mitigating factor or factors exist(s), state what it is/they are and explain why the presence of the factor or factors should support reducing the length of your exclusion. State which exhibits support your argument(s) and explain why they do.

| IV. Do you believe that an in-person hearing is necessary to decide your case? | | | | |
|--|--|--|--|--|
| Yes No | | | | |
| Do you have any testimony that you wish to offer at an in-person hearing? | | | | |
| Yes No | | | | |
| If you have testimony that you wish to offer, provide the following: | | | | |
| 1. The name of each witness whose testimony you want to offer. | | | | |
| 2. A description of each witness' proposed testimony and an explanation of why you believe that the testimony relates to any of the arguments you want to offer in connection with items I, II, and III. | | | | |
| 3. An explanation of why the proposed testimony does not duplicate something that is already stated in an exhibit. | | | | |

| • | have any other argume State which exhibits sup | • | |
|---|---|-----------------------------|---------------------|
| | – P | etitioner or Petitioner's R | — Cepresentative |
| | D | Pate: | |