



STATE OF HAWAII
DEPARTMENT OF HUMAN SERVICES
Med-QUEST Division
Health Coverage Management Branch
P. O. Box 700190
Kapolei, Hawaii 96709-0190

July 29, 2004

MEMORANDUM

ACS M04-09

TO: Medicaid Fee-For-Service Providers

FROM: Steven S. Kawada, Med-QUEST Division Assistant Administrator

SUBJECT: EXCLUSION FROM ALL FEDERAL HEALTH CARE PROGRAMS

This is to notify you that the following providers has been excluded from participation in the Medicare, Medicaid, and all Federal health care programs. This action is effective as of the date indicated next to the respective provider. Copies of the Office of Inspector General (DHHS) letters of notification are attached for your reference.

<u>Provider</u>	<u>Date of Exclusion</u>
Remedios Sabado, Certified Nurse Aide	July 20, 2004
Warren B. Johnson Jr., Therapeutic Aide	July 20, 2004
Melvin P. Ho, Instructor's Assistant	July 20, 2004
Lizastarlene Mays-Cargo, Instructor at a Facility for Retarded Persons	July 20, 2004

Please review your provider networks to ensure that the appropriate action is taken consistent with your Plans internal criteria.

If you have any questions regarding this matter, please call Mr. Clinton Yamasaki at 692-8090.

Attachment