
SECTION 6: OWNERSHIP INTEREST AND/OR MANAGING CONTROL INFORMATION (INDIVIDUALS)

NOTE: Only report individuals in this section. Organizations must be reported in section 5.

NOTE: A supplier MUST have at least ONE organizational or individual owner, ONE managing employee and ONE Authorized Official. In addition, all Authorized Officials and/or Delegated Officials must complete this section, as well as the individuals listed below.

The following individuals must be reported in section 6A:

- All persons who have a 5 percent or greater direct or indirect ownership interest in the supplier (For more information on “direct” and “indirect” owners, go to www.cms.hhs.gov/MedicareProviderSupEnroll.);
- If (and only if) the supplier is a corporation (whether for-profit or non-profit), all officers and directors of the supplier;
- All managing employees of the supplier;
- All individuals with a partnership interest in the supplier, regardless of the percentage of ownership the partner has; and
- Authorized and delegated officials. All Authorized Officials must identify one other relationship of 5% or greater direct/indirect owner, Partner or Director/Officer. All Delegated Officials must identify one other relationship but can select managing employee as other relationship. **NOTE:** If you need additional information regarding who to report, please refer to section 15 of this application.

Example: A supplier is 100 percent owned by Company C, which itself is 100 percent owned by Individual D. Assume that Company C is reported in section 5A as an owner of the supplier. Assume further that Individual D, as an indirect owner of the supplier, is reported in section 6A. Based on this example, the supplier would check the “5 percent or Greater Direct/Indirect Owner” box in section 6A.

NOTE: All partners within a partnership must be reported on this application. This applies to both “General” and “Limited” partnerships. For instance, if a limited partnership has several limited partners and each of them only has a 1 percent interest in the supplier, each limited partner must be reported on this application, even though each owns less than 5 percent. The 5 percent threshold primarily applies to corporations and other organizations that are not partnerships.

Non-Profit, Charitable or Religious Organizations: If you are a non-profit charitable or religious organization that has no organizational or individual owners (only board members, directors or managers), you should complete this section and submit a 501(c)(3) document verifying non-profit status with your application.

For purposes of this application, the terms “officer,” “director,” and “managing employee” are defined as follows:

- **Officer** is any person whose position is listed as being that of an officer in the supplier’s “articles of incorporation” or “corporate bylaws,” or anyone who is appointed by the board of directors as an officer in accordance with the supplier’s corporate bylaws.
- **Director** is a member of the supplier’s “board of directors.” It does not necessarily include a person who may have the word “director” in his/her job title (e.g., departmental director, director of operations). Moreover, where a supplier has a governing body that does not use the term “board of directors,” the members of that governing body will still be considered “directors.” Thus, if the supplier has a governing body titled “board of trustees” (as opposed to “board of directors”), the individual trustees are considered “directors” for Medicare enrollment purposes.
- **Managing Employee** means a general manager, business manager, administrator, director, or other individual who exercises operational or managerial control over, or who directly or indirectly conducts, the day-to-day operations of the supplier, either under contract or through some other arrangement, regardless of whether the individual is a W-2 employee of the supplier.

NOTE: If a governmental or tribal organization will be legally and financially responsible for Medicare payments received (per the instructions for Governmental/Tribal Organizations in section 5), the supplier is only required to report its managing employees in section 6. Owners, partners, officers, and directors do not need to be reported, except those who are listed as authorized or delegated officials on this application.

Any information on final adverse actions that have been imposed against the individuals reported in section 6A must be furnished. If there is more than one individual, copy and complete this section for each individual.

**SECTION 6: OWNERSHIP INTEREST AND/OR MANAGING CONTROL INFORMATION
(INDIVIDUALS) (Continued)**

A. INDIVIDUALS WITH OWNERSHIP INTEREST AND/OR MANAGING CONTROL—IDENTIFICATION INFORMATION

If you are changing information about your current ownership interest and/or managing control information for this individual, check the applicable box, furnish the effective date, and complete the appropriate fields in this section.

Change **Add** **Remove** **Effective Date (mm/dd/yyyy):** _____

The name, date of birth, and social security number of each person listed in this section must coincide with the individual's information as listed with the Social Security Administration. IRS issues Individual Tax Identification Numbers (ITINs) to foreign nationals and others who have federal tax reporting or filing requirements and are not eligible to obtain a Social Security Number (SSN) from the Social Security Administration (SSA). Please report your ITIN in this section, if applicable.

First Name	Middle Initial	Last Name	Jr., Sr., M.D., etc.
Title			Date of Birth (mm/dd/yyyy)
Social Security Number (SSN) or Individual Tax Identification Number (ITIN)			

What is the above individual's relationship with the supplier in section 2A1?

- | | |
|---|---|
| <input type="checkbox"/> 5 Percent or Greater Direct/Indirect Owner | <input type="checkbox"/> Director/Officer |
| <input type="checkbox"/> Authorized Official | <input type="checkbox"/> Contracted Managing Employee |
| <input type="checkbox"/> Delegated Official | <input type="checkbox"/> W-2 Managing Employee |
| <input type="checkbox"/> Partner | |

What is the effective date this owner acquired ownership of the supplier identified in section 2A1 of this application? (mm/dd/yyyy) _____

What is the effective date this individual acquired managing control of the supplier identified in section 2A1 of this application? (mm/dd/yyyy) _____

NOTE: Furnish both dates if applicable.

SECTION 6: OWNERSHIP INTEREST AND/OR MANAGING CONTROL INFORMATION (INDIVIDUALS) *(Continued)*

B. FINAL ADVERSE LEGAL ACTION HISTORY

Complete this section for the individual reported in section 6A above. If you need additional information regarding what to report, please refer to section 3 of this application.

NOTE: If reporting more than one individual, copy and complete sections 6A and 6B for each individual reported.

1. Has the individual in section 6A above, under any current or former name or business identity, ever had a final adverse legal action listed in section 3 of this application imposed against him/her?

- YES** – continue below **NO** – skip to section 8

2. If yes, report each final adverse legal action, when it occurred, and the federal or state agency or the court/administrative body that imposed the action.

NOTE: To satisfy the reporting requirement, section 6B2 must be filled out in its entirety, and all applicable attachments must be included.

FINAL ADVERSE LEGAL ACTION	DATE	ACTION TAKEN BY

SECTION 7: THIS SECTION INTENTIONALLY LEFT BLANK
