



April 23, 2026

*Administrator*  
Washington, DC 20201

The Honorable Phil Scott  
Governor of the State of Vermont  
109 State St.  
Montpelier, VT 05609

Dear Governor Scott:

I write to request that your Medicaid program undertake a swift revalidation of Medicaid providers of services at high risk of waste, fraud, abuse, and corruption as part of each state's program integrity obligations under federal law.

At the same time, your Medicaid leaders are being asked to provide a broader strategy on provider revalidations within 30 days. You should not, however, view that strategy as a substitute for a swift review and revalidation of high-risk providers. We are requesting that you notify us of whether you intend to carry out such a swift revalidation, along with a proposed timetable, within 10 business days of receipt of this letter. Please be advised that failure to do so will be considered as we evaluate the likelihood of fraud in each state moving forward.

Corrupt individuals and organizations masquerading as health care providers are defrauding Medicaid, and American taxpayers, of billions of dollars each year, placing valuable resources out of reach for those the program was intended to serve: low-income senior citizens, children, and disabled individuals. Classes of providers with less rigorous enrollment and billing requirements (e.g. providers without National Provider Identifiers) are most vulnerable to fraud, presenting an opportunity to scope quick and decisive action towards areas of highest risk.

It is urgent that action be taken immediately to address the rapid increase in fraud, waste, abuse, and corruption in Medicaid and to bar fraudulent actors from further abusing the program. While the factors contributing to fraud are multi-faceted and require a comprehensive approach to address, a revalidation process for high-risk providers will immediately deter criminal actors from continuing their fraud schemes as the federal and state governments closely review and scrutinize the qualifications of providers to suspend or terminate clearly abusive actors from the program. States have the ability to designate which providers are high-risk. However, CMS expects that your definition include any provider without a National Provider Identifier. My agency stands ready to provide any necessary technical assistance.

Ensuring that taxpayer funding is used in the Medicaid program to benefit only America's most vulnerable will require a coordinated effort by State and Federal governments to put an end to brazen fraud schemes that steal taxpayer dollars from programs intended to help the most vulnerable Americans. I look forward to partnering with you to fight the War on Fraud. Together, we can make Medicaid stronger and more effective for the millions of Americans it serves.

Sincerely,

A handwritten signature in blue ink, appearing to read "DR" followed by a stylized flourish.

Dr. Mehmet Oz