



Comprehensive Regulations to Uncover Suspicious Healthcare (CRUSH) CMS Request for Information (RFI)

Agency & Purpose:

The Centers for Medicare & Medicaid Services (CMS) published a Request for Information (RFI) seeking public input on potential regulatory and programmatic reforms designed to strengthen the agency's ability to detect, prevent, and respond to fraud, waste, abuse, and inefficiencies across Medicare, Medicaid, the Children's Health Insurance Program (CHIP), and the Health Insurance Marketplace. CMS refers to this effort as the Comprehensive Regulations to Uncover Suspicious Healthcare (CRUSH) initiative.

Background & Context:

The CRUSH RFI is part of a broader CMS strategy to enhance program integrity and reduce improper payments. The RFI does not propose specific regulatory changes; rather, it seeks stakeholder feedback to inform potential future rulemaking. The comment period closes March 30, 2026.

Key Areas for Stakeholder Feedback:

1. Modifications to Program Integrity Requirements:

CMS seeks recommendations on strengthening existing authorities related to provider enrollment screening, revocations, pre-payment claim edits, payment suspensions, audits, investigations, re-enrollment bars, and data analytics. CMS is particularly interested in tools that would allow earlier identification and removal of bad actors from federal health care programs.

2. Enhanced Identity Proofing and Ownership Transparency:

CMS requests input on whether to expand fingerprinting, background checks, and identity verification requirements. The agency also seeks comment on whether citizenship or legal permanent residency requirements should apply to individuals with significant ownership interests in Medicare-enrolled entities.

3. Expansion of Enforcement Tools and Regulatory Authorities:

CMS is considering whether it should have clearer authority to direct Medicare Advantage (MA) organizations and Part D sponsors to suspend payments in circumstances similar to fee-for-service Medicare authorities. CMS also seeks recommendations on analytic methodologies and data sources that could improve proactive fraud detection.

4. Transparency and Information Sharing:

CMS requests feedback on how to improve transparency regarding enforcement actions and program

integrity activities, including whether additional public reporting could strengthen oversight and deterrence.

Scope & Limitations:

This RFI is informational only and does not constitute a proposed rule. CMS is not committing to any specific regulatory changes. Comments submitted may be used for planning and future rulemaking purposes.

Significance:

The CRUSH RFI signals CMS's intent to pursue comprehensive, data-driven reforms to federal health care program integrity regulations. The breadth of issues raised suggests that future rulemaking could significantly affect provider enrollment requirements, ownership disclosure standards, managed care oversight, and payment suspension authorities across Medicare, Medicaid, CHIP, and Marketplace programs.