Individual Provider Notification Instructions
Stop Work Notice

Use this notice to inform IPs:
• Of the action the department is planning to take or has taken to deny or terminate their payment or contract;
• Not to work on or after the effective date on their notice.

Date of Notice: This is the date the Stop Work Notice is mailed. The Date of Notice can only be the same as the Effective Date when denying a contract / payment or when immediate notice is required.

Effective Date: This is the date the action is in effect. The IP will no longer be paid on or after the effective date.

Adequate Notice: Except in cases where immediate notice is required, provide the IP with adequate notice before taking the action. This means the IP should receive the notice prior to the effective date. Allow enough time for mail delivery, at least three business days, before terminating the payment or contract.

Other: “Other” may be used only when one of the specific reasons already listed on the form are not applicable. The reason must be supported in WAC as a valid reason to deny or terminate payment/contract. Some examples include, but are not limited to:
• IP is denied a contract because he/she is under the age of 18;
• IP is denied a contract because he/she does not have valid picture ID or a valid Social Security Card;
• IP’s payment is terminated because he/she marries his/her client;
• IP is denied a contract or payment / contract is terminated because he/she had a license, certification, Medicaid or Medicare provider agreement, or a contract for the care of children or vulnerable adults denied, suspended, revoked, not renewed, or terminated, for noncompliance with state and/or federal regulations;

Training / Certification:
Do not use this form to inform IPs about:
• Termination of payment or contract related to training and certification. Use the IP Planned Action Notice.

Work Week Limits:
Do not use this form to inform IPs about:
• Termination of payment or contract related to work week limits. Use DSHS form 15-483.