Introduction to Becoming a Nevada Medicaid Provider

NEVADA MEDICAID





- How to Enroll as a Nevada Medicaid Provider
- Provider Training
- Division of Health Care Financing and Policy (DHCFP)
- Contact Information



National Provider Identifier (NPI)

https://nppes.cms.hhs.gov/NPPES/Welcome.do

INPPES

Help

National Provider Identifier

News & Announcements

This is VDC PROD Environment as of September 1, 2014.

The Administrative Simplification provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) mandated the adoption of standard unique identifiers for health care providers and health plans. The purpose of these provisions is to improve the efficiency and effectiveness of the electronic transmission of health information. The Centers for Medicare & Medicaid Services (CMS) has developed the National Plan and Provider Enumeration System (NPPES) to assign these unique identifiers.

How to apply for an NPI

Individual Providers:

Healthcare Provider Organizations:

As an Individual Provider, you may only have a single NPI, which will be associated with your unique, individual information. Once you login to NPPES, you will Healthcare be able to complete your NPI application.

1. Create a Login through the Identity & Access Management System (I&A).

2. Login to NPPES with your I&A Username and password.

3. Complete the NPI application. Estimated time to complete the NPI application form is 20 minutes.

Healthcare Organizations are currently required to have a separate Username and password for each NPI associated with the organization

1. Create an NPPES ONLY Username and password for the NPI you are applying for.

2. Complete the NPI application. Estimated time to complete the NPI application form is 20 minutes

DIFFERENT LOOK, SAME INFORMATION:	If you have accessed NPPES before, your existing account information has not changed.
Manage or Apply for your personal NPI Record	Manage or Apply for NPI Records for an Organization
An NPI assigned to you, an Individual who renders health care services.	NPI associated with your Healthcare Organization
User ID:	User ID:
	HEDICAL CENTER - HEAT
Password:	Password:
Login	Login
orgot User ID or Password?	Forgot Password?
lew Individual Provider in need of an NPI or have never accessed NPPES to view/update your NPI record? Create a Login.	Create Login for NPPES Only and Apply for an NPI for a Healthcare Organization.
Ianage your Individual Provider Login Account Information.	()) If you need to access PECOS or HITECH on behalf of your Healthcare Organization, you must Create a Login in the Identity & Access System (I&A).
	Un you need to access r 2005 or nin con on denan or your nearingate organization, you must create a Login in the identity & Access System (6A).
	If you are an Organizational Provider with an NPI, and you would like to create a Login to access NPPES only, please click here.

Search the NPI Registry

The NPI Registry enables you to search for a provider's NPPES information. All information produced by the NPI Registry is provided in accordance with the NPPES Data Dissemination Notice. Information in the NPI Registry is updated daily. You may run simple queries to retrieve this read-only data. For example, users may search for a provider by the NPI or Legal Business Name. There is no charge to use the NPI Registry.



Taxonomy Code

http://www.wpc-edi.com/reference/



Reference

Code Lists and X12 Registry

Code Lists

ASC X12 assists several organizations in the maintenance and distribution of code lists external to the X12 family of standards. The lists are maintained by the Centers for Medicare and Medicaid Services (CMS), The National Uniform Claim Committee (NUCC), and committees that meet during standing X12 meetings.

Health Care Code Lists

- > Claim Adjustment Reason Codes (CARC)
- > Remittance Advice Remark Codes (RARC)
- > Claim Status Category Codes
- > Claim Status Codes
- > Health Care Service Type Codes
- > Health Care Services Decision Reason Codes

> Health Care Provider Taxonomy Code Set

- > Provider Characteristics Codes
- Insurance Business Process Application Error Codes



Nevada Medicaid Provider Website https://www.medicaid.nv.gov/Home.aspx

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Nevada Department of Health and Human Services Division of Health Care Financing and Policy Provider Portal							
Preferred Drug List Announcements [🗈 <u>Review</u>]							
Home Providers EVS Pharmacy Prior Authorization Quick Links Contact Us							
Urgent Notification URGENT: Claim Form Field Instructions for Entering NPI of Ordering, Prescribing or Referring Provider <u>(Web Announcement 830)</u> Notification Providers Invited to Complete Second Quarter 2015 Nevada Medicaid Provider Training Survey <u>(Web Announcement 925)</u>							
Latest News							
URGENT: Attention All Providers: Requirements on When to Use the National Provider Identifier (NPI) of an Ordering, Prescribing or Referring (OPR) Provider on Claims [🖄 Web							
Attention Applied Behavior Analysis Providers: Training Sessions Scheduled for Providers Interested in Enrolling as a Nevada Medicaid ABA Provider [豫 Web Announcement 916]							
Nevada Medicaid and Nevada Check Up News (First Quarter 2015 Provider Newsletter) [🖏 Read]							
Provider Web Portal Quick Reference Guide (Updated April 16, 2012) [% <u>Review</u>]							
Web Announcements View Ali							
WEB ANNOUNCEMENT 930							
Coming Soon: Secure Submission of Forms Using the Provider Web Portal							
HP Enterprise Services (HPES) is currently updating the Nevada Medicaid forms that are available online on the Providers Forms webpage at https://www.medicaid.nv.gov/providers/forms/forms/forms.aspx . These forms will be updated to a format that will allow the forms to be completed, downloaded and saved electronically. Most of the forms will be able to be submitted securely to HPES using the Provider Web Portal instead of printing and faxing. Future web announcements on this website will notify providers of the implementation date for this enhancement, which forms are affected and instructions for submitting the forms online.							

WEB ANNOUNCEMENT 929

Attention Provider Types 10 and 46: Update Regarding the All-Inclusive Reimbursement for BAHA, Cochlear, VNS, and Baclofen Pump

Please disregard Web Announcements 399 and 557. This web announcement contains updated information.

Nevada Medicaid has established an all-inclusive reimbursement rate for provider types (PT) 10 (Outpatient Surgery-Hospital Based) and 46 (Free-Standing Ambulatory Surgical Centers) for the Bone-Anchored Hearing Aid (BAHA), Cochlear, Vagus Nerve Stimulator (VNS), and Baclofen Pump surgical implant services. The established all-inclusive facility reimbursement rate includes the Healthcare Common Procedure Coding System (HCPCS) device, and all associated services for the Ambulatory Surgical Centers (ASC) payment group for the Current Procedural Terminology (CPT) surgical procedure.

To receive the all-inclusive reimbursement rate for the surgical implant procedures listed below, the facility is required to obtain a prior authorization (PA) from Medicaid's QIO-like vendor (HP Enterprise Services), and for PT 10 only, a letter of agreement (LOA) from the Division of Health Care Financing and Policy (DHCPP). The PA will identify the CPT code authorized. The LOA will be issued by DHCPP, and will identify the following: provider name and National Provider Identifier (NPI); recipient name and Medicaid identification number; and the established all-inclusive facility reimbursement rate for the procedure. Medicaid will not provide an LOA unti/unless a PA has been issued to the facility by HP Enterprise Services.

In order for claims for these services to adjudicate and reimburse correctly, follow the instructions below according to the type of facility:



Provider Enrollment Documents

https://www.medicaid.nv.gov/providers/enroll.aspx

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A	nnounceme	nts/Ne	ewslette	rs Billing	Information Elect	ronic Claims/E	DI E-Prescribing	Forms	NDC	Provider Enrollment	Provider Training	

Urgent Notification

URGENT: Claim Form Field Instructions for Entering NPI of Ordering, Prescribing or Referring Provider[Web Announcement 830]

Notification

Providers Invited to Complete Second Quarter 2015 Nevada Medicaid Provider Training Survey[Web Announcement 925]

Provider Enrollment

New Requirements for Provider Re-enrollment

Beginning June 1, 2012, providers are required to re-enroll in Nevada Medicaid and Nevada Check Up once every 36 months. Providers who do not re-enroll within 60 days of the date on their notification will have their provider contract terminated. Please see Web Announcement 510.

Get Adobe: Reader:

You will need Adobe® Reader to view any printable PDF document(s). Click the button to the left to download a free copy of Adobe® Reader.

Thank you for your interest in the Nevada Medicaid and Nevada Check Up Program. This page contains all of the information and forms you will need to become a Nevada Medicaid provider. If you have any questions, please contact the Provider Enrollment Unit at (877) 638-3472 from 8a.m. to 5p.m. Monday through Friday.

All enrollment documents including attachments require an original signature from the provider or an authorized representative (use dark blue or black ink).

Changes to Provider Information

Changes to any information presented on your enrollment documents must be reported to HP Enterprise Services within five business days.

- To report a change in business ownership, resubmit a completed Provider Enrollment Application.
- · For all other changes, the Provider Information Change Form (FA-33) may be used.

Mailing Address

Mail completed enrollment forms and required documentation to HP Enterprise Services, Provider Enrollment Unit, P.O. Box 30042, Reno, NV 89520-3042

Required Enrollment Documents

- <u>Provider Enrollment Information Booklet</u>: All providers will need the information contained in this booklet, which includes common enrollment questions and information about out-of-state providers and provider groups.
- Enrollment Checklists: Copies of certain documents must be included with your Provider Enrollment Packet (e.g., copy of professional certification, proof of insurance, background check). The Enrollment Checklists show required documentation for each provider type.
- <u>Business Associate Addendum (NMH-3820)</u>: This document must be signed and submitted with your Provider Enrollment/Re-Enrollment Packet if it is listed on the Provider Enrollment Checklist for your Provider Type and when requested by the Division of Health Care Financing and Policy (DHCFP) or HP Enterprise Services (HPES).



Recommended Enrollment Documents

Enrolled providers may submit electronic Nevada Medicaid and Nevada Check Up claims free of charge through Allscripts Payerpath.

Simply complete the Service Center Authorization form (FA-37) and the Payerpath Enrollment form (FA-39) located on the Provider Enrollment webpage and mail in with your completed Provider Enrollment Application.







Provider Enrollment Summary

- 1. Review the Provider Enrollment Information Booklet
- 2. Choose your provider type and primary specialty (if applicable) from the Provider Enrollment Information Booklet
- 3. Review the Enrollment Checklist for your provider type
- 4. Complete the appropriate Provider Enrollment Application Packet and attach all required documents
- 5. Complete applicable Recommended Enrollment Documents
- 6. Mail or email the completed Provider Enrollment Packet to HP Enterprise Services (HPES)



Managed Care Organizations (MCOs)

- The State of Nevada Managed Care Program requires the mandatory enrollment in an MCO of some recipients found eligible for Medicaid or Nevada Check Up.
- Providers must enroll with Fee For Service Medicaid prior to enrolling with the Managed Care plans.



Future Provider Training Modules



HP Enterprise Services • Nevada Medicaid Applied Behavioral Analysis Provider Training Modules

Nevada Medicaid 101 and Provider Enrollment Training Reno: June 5, 2015 Las Vegas: June 26, 2015 Provider Enrollment Training Virtual Room: July 29, 2015

New Provider Training Reno: August 24, 2015 Las Vegas: September 21, 2015 Virtual Room: August 30, 2015

Prior Authorization Submission Training September 2015 - Dates to be Announced

PayerPath Claim Form Submission Training October 2015 - Dates to be Announced Paper Claim Form Submision Training October 2015 - Dates to be Announced

Additional information and training module dates will be posted as they become available at www.medicaid.nv.gov. Please direct inquiries to the HP Enterprise Services Field Representatives at nevadaprovidertraining@hp.com



Nevada Provider Training

https://www.medicaid.nv.gov/providers/training/training.aspx



Contact the Provider Training Unit

Provider Services Field Representative Team Territories: Please refer to the attached document to determine which Field Representative is assigned to assist you with inquiries.

HP Enterprise Services (HPES) and the Division of Health Care Financing and Policy (DHCFP)/Nevada Medicaid are committed to helping providers understand billing policy and successful claim submission. With these priorities in mind, we offer opportunities to increase your knowledge throughout the year in a variety of locations, formats and times, including lunch and learn sessions held during lunch hours to minimize time needed to be away from regular business hours. Instructor-led virtual training is also a great opportunity when travel is not possible, or when multiple staff from an office plan to attend.

Training is free of charge and we encourage the attendance of billing staff, billing agencies, direct practitioners/health care providers, office managers, admitting and front-desk staff, etc.

Provider training workshop schedules will be posted quarterly in a Web Announcement and on this webpage. Registration is required to attend the scheduled workshops. To register, simply select the 2015 Provider Training Registration Website link below, select the workshop of your choice, complete the required information and submit.

If you have difficulty registering, please send an email to our Provider Services Field Representative Team at <u>NevadaProviderTraining@hp.com</u>. Please include your name, contact information, and the workshop you are attempting to register to attend. A Field Representative will contact you to assist with the registration process.

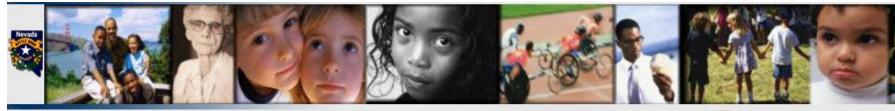
In addition to the training workshops scheduled throughout the year, Provider Services Field Representatives are available in your area to assist when you have questions, concerns or additional training needs. As a reminder, the Annual Medicaid Conference is not a venue to discuss specific billing issues as they may include sensitive and confidential information. Please do not hesitate to reach out to your Field Representative as the need arises. If you are unsure who your representative is, please select the <u>Provider Services Field Representative Team Territories</u> link and review <u>Web Announcement 719</u> for additional details.

Training Module Callevist Date Title January 2015 © 2015 Provider Training Registration Website Jan. 15, 2015 © First Quarter 2015 Provider Workshops April 9, 2015 © Second Quarter 2015 Provider Workshops May 15, 2015 © Attention Applied Behavior Analysis Providers: Training Sessions Scheduled in Elko and Winnemucca June 10, 2015 © June Provider Training Sessions Scheduled in Elko and Winnemucca Date Title



HP Confidential - Introduction to Becoming a Nevada Medicaid Provider

Division of Health Care Financing and Policy <u>https://dhcfp.nv.gov/index.htm</u>



Nevada Department of Health and Human Services Division of Health Care Financing and Policy

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Division of Health Care Financing and Policy (DHCFP)

The Division of Health Care Financing and Policy (DHCFP) works in partnership with the Centers for Medicare & Medicaid Services to assist in providing quality medical care for eligible individuals and families with low incomes and limited resources. The medical programs are known as Medicaid and Nevada Check Up.

Nevada Department of Health and Human Services

Medicaid

Provides health care coverage for many people including low income families with children whose family income is at or below 133% percent of poverty. Supplemental Security Income (SSI) recipients, certain Medicare beneficiaries, and recipients of adoption assistance, foster care and some children aging out of foster care. The DHCFP also operates five Home or Community-Based Services waivers offered to certain persons throughout the state. The Division of Welfare and Supportive Services (DWSS) determines eligibility for the Medicaid program. Information regarding eligibility is available on line at https://dwss.nv.gov/

Nevada Check Up

Provides health care benefits to uninsured children from low-income families who are not eligible for Medicaid but whose family income is at or below 200% of the Federal Poverty Level. Information regarding the Nevada Check Up program is available at www.nevadacheckup.nv.gov or by calling toll free at 1-877-543-7669.

Services for both Medicaid and Nevada Check Up are provided through a combination of traditional fee-for-service provider networks and managed care.

Report Provider Identified Overpayment

Apply for Medical Assistance Programs

Report Medicaid Fraud!

Press Releases from the Office of the Attorney General

EHR Provider Incentive Payment Program

Hours of operation:

Monday - Friday 8am - 5pm

Para asistencia de Eligibilidad de Medicaid, por favor contacte las oficinas de Welfare en Carson City al (775) 684-0800 o las Vegas al (702) 486-5000. Para asistencia de aseguranza de salud para niños (Check Up), por favor contacte al 1 (877) 543-7669.



Division of Health Care Financing and Policy Index https://dhcfp.nv.gov/index.htm

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HP Enterprise Services (HPES) Contact Information

Customer Service Center General information Phone: (877) 638-3472

Nevada Provider Training Email: <u>NevadaProviderTraining@hp.com</u>



