Provider Enrollment and Revalidation

The Front Line of Program Integrity
What is Provider Enrollment?

- The process of enrolling providers in the Medicaid program to provide services to Medicaid recipients
- Prevent Fraud, Waste and Abuse
- Application and contract required for:
  - Initial Enrollment
  - Revalidation
  - Re–enrollment
  - Change of Ownership
  - Ordering, Prescribing and Referring (OPR)
REVALIDATION

- Affordable Care Act mandate under 42CFR 455.414
- The process where enrolled Medicaid providers revalidate their existing enrollment information
- Providers will be terminated for non-compliance
- All DMEPOS suppliers must be revalidated every 3 years
- All other providers must be revalidated every 5 years
Revalidation Notification

- Nevada Medicaid will notify the provider to take this action:
  - 60 day letter
  - 30 day letter
  - email

- Currently working on posting the provider list with revalidation due dates

- Provider is not compliant with revalidation until their application is approved

- Do not delay
How to Revalidate

Web Based On-Line Enrollment

Benefits:
- Accurate and legible application
- Expedites the enrollment process
- Moving to a paperless environment

Access the enrollment portal at:
www.medicaid.nv.gov/providers/enroll.aspx
MCO FINAL RULE

- Final rule published on May 6, 2016 under 42CFR 438.602(b)
- Upon enrollment and revalidation
- Requires enhanced screenings for providers enrolled in the managed care network
- Deadline is January 1, 2018
Contact Information

- Diane Smith, Chief, Provider Enrollment
  - dlsmith@dhcfp.nv.gov
  - (775) 684–3709

- Provider Enrollment
  - Phone: 775–684–3701

- Website
  - www.dhcfp.nv.gov