

MEDICAID SERVICES MANUAL  
TRANSMITTAL LETTER

December 8, 2016

TO: CUSTODIANS OF MEDICAID SERVICES MANUAL  
FROM: LYNNE FOSTER, CHIEF OF DIVISION COMPLIANCE  
SUBJECT: MEDICAID SERVICES MANUAL CHANGES  
CHAPTER 100 – MEDICAID PROGRAM

**BACKGROUND AND EXPLANATION**

Revisions to Medicaid Services Manual (MSM) Chapter 100 – Medicaid Program are being proposed for provisional licensure as allowed by state board requirements for specialty.

Throughout the chapter, grammar, punctuation, and capitalization changes were made, duplications removed, acronyms used and standardized, and language reworded for clarity. Renumbering and re-arranging of sections was necessary.

Entities Financially Affected: All Nevada Medicaid Provider Types.

Financial Impact on Local Government: None.

These changes are effective December 9, 2016.

**MATERIAL TRANSMITTED**

CL 30354  
Chapter 100 – Medicaid Program

**MATERIAL SUPERSEDED**

MTL 19/15  
Chapter 100 – Medicaid Program

<b>Manual Section</b>	<b>Section Title</b>	<b>Background and Explanation of Policy Changes, Clarifications and Updates</b>
<b>102.5</b>	<b>DISPOSITION OF CONTRACT FOR NEW PROVIDERS</b>	The Division of Health Care Financing and Policy (DHCFP) is proposing clarifying language in MSM Chapter 100 for provisional licensure to allow for provisional license based on state board requirements of the specific specialties within the scope of practice. Provisional licensure will apply only to licensed level professionals. Credentialed and paraprofessional level providers do not meet the requirement for provisional licensure.

<b>DRAFT</b>	<b>MTL-19/15CL</b>
DIVISION OF HEALTH CARE FINANCING AND POLICY	Section: 102
MEDICAID SERVICES MANUAL	Subject: PROVIDER ENROLLMENT

Once agency program staff has completed an evaluation of the provider, enrollment will be granted or denied. Providers will be notified via US mail of the determination.

102.5 DISPOSITION OF CONTRACT FOR NEW PROVIDERS

The fiscal agent will review the completed provider application, copies of required licenses, registrations, certificates, etc., to determine if the applicant meets all of the conditions of participation as stated in the Nevada MSM for the specified provider type and Nevada MSM Chapter 100 all inclusive.

Provisional licensure will be allowed based on Nevada State Board requirements of the specific specialties within the scope of practice for licensed professionals. Provisional licensure will apply only to licensed level professionals. Credentialed and paraprofessional level providers do not meet the requirement for provisional licensure.

102.5A CERTIFICATION STATEMENT

The following reminder to providers of Medicaid regulations appears on the endorsement side of every Medicaid payment:

1. “I understand in endorsing or depositing this check that payment will be from federal and state funds and that any falsification, or concealment of a material fact, may be prosecuted under federal and state laws.”
2. “I agree to accept Medicaid payments as payment in full for services rendered and under no condition, except for lawful patient liability, contact the patient or members of the patient’s family for additional sums.”
3. “I acknowledge that I have examined the remittance advice that accompanied this check and that the items covered represent amounts due to me and that the services listed thereon have been rendered by me.”
4. By signing the enrollment application, the provider attests to the following:
  - a. That payment will be from federal and state funds and that any falsification, or concealment of a material fact, may be prosecuted under federal and state laws; and
  - b. With regard to submission of claims for payment:
    1. I certify that all information is true, accurate and complete; and
    2. With regard to remittance and receipt of payment whether by check or electronic transmission.