Becoming a Medicaid to Schools Enrolled Provider

Program Integrity Requirements
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DEFINITIONS

• **LEA**- Local Education Agency A local education agency refers to a school district, an entity which operates local public primary and secondary schools.

MMIS- Medicaid Management Information Systems

Re-validation- Federally required every 5 years to complete a re-enrollment application **Provider**- Medicaid enrolled entity that will be submitting claims for medical covered services

Trading Partner- a third party entity that enters into a business relationship with the Medicaid provider to complete transactions, must be enrolled with MMIS, and have completed authorizations from each provider entity to act of their behalf.

LEIE- list of excluded/individual or entities which is a database on the Officer of Inspector General website as a searchable database.

School/Provider Enrollment

- In order to bill for Medicaid covered services, schools need to complete a group application, signed provider participation agreement and application signature page. At the completion of the process, a unique Medicaid Identification number is sent to the provider which is 7 digits.
- An 11 digit National provider Identification number (NPI) is required and a taxonomy that identifies the services is required on the application or re-validation.
- All employed school professionals who provide the covered Medicaid service, need to be enrolled in Medicaid and affiliated to the school enrollment as a non-billing individual. This includes PT,OT, APRN, or MD.
- All enrolling providers will undergo a federally mandated comprehensive screening before their application is approved and the state will complete monthly screening of the school and affiliated professionals.
- The schools must keep copies of the appropriate service provider qualifications (copy of licensure or documentation of credentials) on file and for non-enrolled staff to screen monthly on the LEIE/OIG exclusion site for any sanctions/exclusions.
- Completed applications should list the Managing employee for the school usually the Superintendent, and delegate authorized users that can access the MMIS if needed with changes.
- All providers will be required to revalidate every five years by completing a new application and submit signature pages and the state will complete a full screening as part of the revalidation process.

NPI and Taxonomy

- 251300000X The current taxonomy in the enrollment record in MMIS
- Local Education Agency (LEA) healthcare taxonomy code **251300000X**
- https://npidb.org/taxonomy/
- 1760604078 NPI
- Website to check number is https://npiregistry.cms.hhs.gov/

Name	Value							
NPI	1760604078							
Enumeration Date	2007-05-03							
NPI Type	2- Organization							
Status	Active							
Authorized Official Information	Name: MR. MICHAEL HOPKINS Title: SUPERINTENDENT OF SCHOOLS Phone: 603-332-3678							
Mailing Address	150 WAKEFIELD STREET SUITE 8 ROCHESTER, NH 03867-1348 United States Phone: 603-332-3678 Fax: 603-335-7367 View Map ន្ទ							
Primary Practice Address	150 WAKEFIELD STREET SUITE 8 ROCHESTER, NH 03867-1348 United States Phone: 603-332-3678 Fax: 603-335-7367 View Map &							
Health Information Exchange	Endpoint Type	Endpoint	Endpoint Descript	on	Use	Content Type	Affiliation	Endpoint Location
Other Identifiers	Issuer			Sta	ate		Number	
	MEDICAID			NH	NH 5000			004163
Taxonomy	Primary Taxonomy		Selected Taxonomy					License Number
	Yes 251300000X - Local Ed			ucation Agency (LEA)				

Trading Partner Enrollment

- There are three ways to submit claims for payment:
 - a. The school may submit claims directly to the MMIS system portal and with this option a training session with Conduent staff is available to review the submission of claims data directly into the portal under your current Medicaid provider number.
 - b. The school may utilize a software system to submit their billing which requires a trading partner application be completed for that entity. This is termed a "self" trading partner application and another provider ID number is issued.
 - c. If one school will be billing for other districts, a trading partner application is submitted with a billing agent agreement for each location, a 835 application remittance advice if the school wants an 835, and a list all affiliations in the application using the Medicaid provider ID numbers of the schools.
 - d. If the school will be using a third party billing agent, a trading partner application needs to completed by the entity, a billing agent agreement for each school, a signor agreement and billing agent authorization for each affiliated school. The application needs to list all service locations by Medicaid ID number.
- 835 or the Electronic Remittance Advice (ERA) is the electronic transaction that provides claim payment information.
- If the school determines not to continue with the trading partner, a letter from managing employee(superintendent) of the school needs to be sent to MMIS(Conduent) informing of the change.

Requirements for Enrolling Order, Referring or Prescribing Providers (ORP)

- Code of Federal Regulations 455:401(b) states that Medicaid agencies must require all ordering, or referring physicians or other professionals providing services under the state plan or under a waiver of the plan to be enrolled as participating providers.
- The Affordable Care Act requires ordering, referring, and prescribing providers to enroll only to meet new ACA program integrity requirements designed to ensure all orders, prescriptions or referrals for items or services for Medicaid beneficiaries originate from appropriately licensed practitioners who have not been excluded from Medicare or Medicaid.
- If a provider does not currently participate with NH Medicaid but may order, refer, or prescribe to Medicaid members, they must now be enrolled to ensure that the billing provider will be paid for service.
- As a billing provider, the NPI of the ORP must be included on all claims when billing for service.
- As of September 1, 2019, a shortened application is available to providers to enroll for ORP if not currently enrolled, and during the phase-in period claims will not deny.
- To be covered by Medicaid, an order prescribing the covered service is generally needed from a Physician, APRN, or physician assistant or other licensed practitioner practicing within their scope of board licensure. All children should have a primary care provider and this provider will need to be Medicaid enrolled to order services.

Requirements for the Enrolled School Provider

- Federally mandated screening of NPI verification, LEIE/OIG, licensure or certifications are done by the state at time of enrollment, during revalidation and every month at the state level of enrolled providers.
- The schools are responsible to screen employees that are providing Medicaid medical services that they employ or contract with to provide services. (ie: BCBA individuals that are not enrolled in Medicaid)
- Schools responsibility to validate that all ORP providers are Medicaid enrolled with provider number and NPI to ensure they are screened by State.

Federal Screening Requirements

- All providers are required to take the following steps to ensure Federal and State program integrity screening:
 - Performing/rendering provider. The provider actually performing the service
 - If the school will be using school employee professionals to provide the covered Medicaid service, all screenings will be responsibility of the school for licensure or certification and OIG screenings.
 - If the school is contracting with an individual to provide the covered Medicaid services, all screenings will be responsibility of the school for licensure or certification and OIG screenings.
 - If the school contracts with outside professional groups to perform the services, the group entity is responsible for completing the screenings required of the furnishing/rendering provider and informing the school of any changes. Schools are responsible to ensure the contracted group is performing the required screening.
 - Schools are required to perform screenings upon hire or entering into a contract and every month there after until the school no long employs or contracts with the person.
 - Schools are required to search the employee or contractor name on the HHS-OIG list of excluded Individuals and entities(LEIE) website monthly to validate their eligibility for Federal programs.

If the school finds a sanctioned provider then they need to discontinue using this provider for Medicaid services. Immediately report to NH Medicaid any exclusion information discovered. This information should be sent in writing and should include the individual or business name, provider identification number, and what, if any, action has been taken to date. This should be sent to DHHS-Program Integrity, 129 Pleasant St. Thayer Building, Concord, NH 03301 or programintegrity@dhhs.nh.gov

What Happens after Enrollment for Billing Process

- Local education agencies may be reimbursed by NH Medicaid for health services provided by the school employed providers or the school contracted employees who provide medically necessary healthcare services for Medicaid enrolled children services.
- The school should ensure that the appropriate services are added under their assigned National Provider Identifier(NPI). (nursing, therapies, behavioral health are some examples)
- Validate that all ordering providers have a Medicaid provider ID and NPI and start adding this
 information to the claim for services. Claims will not be denied currently for this information
 missing but DHHS is in the process of implementing these edits.
- Responsible for keeping information current in the MMIS, submitting change forms when staff change or superintendent, monitoring the 835 for claims submitted and what was paid or not, and maintaining staff files at school with current information and monthly LEIE screenings.