

ENROLLMENT & CREDENTIALING

GLEN BEUSSINK

GBEUSSINK@MWHC.NET

573.335.4544, EXT 105 OR DIRECT 573.803.5208



MIDWEST
HEALTH CARE, INC.

NATIONAL PROVIDER IDENTIFIER NATIONAL PLAN & PROVIDER ENUMERATION SYSTEM

- Overview of NPPES website to get your NPI, <https://nppes.cms.hhs.gov/#/>
- Office Manager or Administrators should create an Information and Access (I&A) Account – Information & Access Account for themselves.
- Then you will add your organization as an employer to request to be a Staff End User
- Contact the Enumerator to approve your Staff End User request by calling the Enumerator 800-465-3203
- Once you have created your I & A Account then you can log in & go to Step 2 which is link yourself to your Organization



MIDWEST
HEALTH CARE, INC.

NPPES WEBSITE

- Why can't I use my Type 2 (clinic) NPI user name & password to log into the NPPES to access my NPI. (Type 1 is the provider)
 - You must create an account in I & A – Identity & Access first.
 - If you are an employee/owner of the Provider Organization you can submit an employer request.
 - If you request to be a Authorized Official, you must submit the required paper work to EUS for approval – IRS Letter, Copy of Drivers License
 - If you request to be a Delegated Official, you can either have an existing Authorized Official approve your request, or you can submit the required paper work to External User Service (EUS) for approval – IRS Letter, Copy of Drivers License
 - Once I & A – Identity & Access get's approval from your employer then you can log into NPPES & manage the Type 2 (Clinic) NPI
 - You must pick your lead taxonomy codes and secondary code:



MIDWEST
HEALTH CARE, INC.

INSURANCE COMPANIES REQUESTING UPDATES EVERY QUARTER

- CMS has mandated insurance companies verify that all providers are still employed & working at your practice locations & tax id.
- Since this mandate from CMS insurance companies are now sending out notices to the practices to verify practice information & provider information every quarter.
- **Example** – Humana will fax or email a Quarterly Provider Update is Due – with a link to www.betterdoctor.com/validate
- They will give you a code to enter – you are to enter that code & verify that your practice information is correct.



MIDWEST
HEALTH CARE, INC.

MO MANAGED CARE WRAP AROUND PAYMENTS – INDEPENDENT RURAL HEALTH CLINICS

- Each time a clinic receives a new rate letter they are required to send to IRU.Clinic@dss.mo.gov
- The only visits you will count to the wrap around program is Mo Healthnet is T1015
- Mo Healthnet will multiply the number of visits by 10% of your Rate that is posted on the website – <http://dss.mo.gov/mhd/providers/index.htm>
- This is the amount that Mo Healthnet will reimburse the Independent Rural Health Clinic
- These reports are due to the State on a Quarterly basis on the 1st of the Month – January, April, July & September. (they will be required to complete the cost reporting)
- The health plans have a contract with Mo Healthnet stating they will pay 90% of the Independent Rural Health Clinic rate that is posted on the above website.
- Hospital will be paid 90% of **charges**, they will not settle a CR without these reports.
- **It is up to the Rural Health Clinic to make sure they are receiving the 90%** of their rate. If the Health Plans do not comply you can contact Mo Healthnet at 573-526-4274.



MIDWEST
HEALTH CARE, INC.

MO MEDICAID MANAGED CARE

- If you are a new provider to the RHC program, you will need to move patients to a location that has Medicaid Manage Care Contract or credential as soon as possible.
- The Plans are not playing nice in the sandbox and there could be substantial loss of REVENUE during the process.
- The Medicaid plans are not always “back dating” RHC payments and timely filing is a factor.
- Contact the plans CFO and request a waiver, prior to credentialing and get your waiver in writing.
- Or tell the plan and the patients, you won't see the patients.



MIDWEST
HEALTH CARE, INC.

REVALIDATION

Medicare is requiring revalidation every 5 years and they will send notice to the last known person on the enrollment.

Keep your updates on all enrollment every year.

(Submitted no more than 60 days in advance)

(The MAC will send this information via e mail or mail, 2-3 months in advance of the deadline)

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/Revalidations.html>

MO Medicaid is also revalidating every 5 years.

Both will stop payments

See SE 1130 for fees to be paid in advance for some applications, currently
2018 \$569.00



MIDWEST
HEALTH CARE, INC.

MEDICARE AND PECOS

PECOS – Provider Enrollment and Chain/Ownership System

- Electronic Medicare Enrollment
- Delegated Official
- End User accounts, must be approved by the delegated official
- Typically the CEO or CFO are the delegated official, know who this is.
- Typically all documents like, bank letters, CLIA, stationary can be attached and forwarded, Keep these up to date and in a file ready to go.
- Insist on credentialing and information on hire of all new employees, too many times the credentialing start after the start date and you will lose REVENUE for lack of credentialing



MIDWEST
HEALTH CARE, INC.

MEDICARE AND PECOS

PECOS – Timeliness of application (45 days, paper 60)

CHOW- Within 30 day of the date of transfer

Change of Information, within 60 days of the changes, any changes

New 855A 60 prior

New 855 B 60 prior & tips

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/Downloads/Enrollmenttips.pdf>



MIDWEST
HEALTH CARE, INC.

MEDICARE TIPS AND TRICKS

Great resource from the National Provider Enrollment Conference, April 2018

https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/Downloads/National_Provider_Enrollment_Conference_Clinic_Group_Practices.pdf

providerenrollment@cms.hhs.gov

https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/Downloads/National_Provider_Enrollment_Conference_Certified_Providers_and_Suppliers.pdf



MIDWEST
HEALTH CARE, INC.

MEDICARE TIPS AND TRICKS

Training tool for all Credentialing and Enrollment staff

https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/Downloads/855A_EnrollmentandPolicy_Overview.pdf

https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/Downloads/National_Provider_Enrollment_Conference_MedicareandMedicaid_Provider_Enrollment.pdf



MIDWEST
HEALTH CARE, INC.

CONTACT INFORMATION

In addition to Glen Beussink, additional information is provided by:

Amelia (Amy) Ledbetter

Midwest Health Care, Inc.

aledbetter@mwhc.net

573-335-4715



MIDWEST
HEALTH CARE, INC.