Welcome to the 2018 Annual Medicaid Conference
Presented by the Division of Health Care Financing &
Policy (DHCFP)
in conjunction with
DXC Technology (Nevada Medicaid Fiscal Agent)
Welcome to Annual Medicaid Conference and Introductions by Ryan Hopkins

Presentation by Marta Jensen with the DHCFP (Medicaid Administrator)

Presentation by Cody Phinney with the DHCFP regarding Policy Updates

Presentation by Ryan Hopkins with DXC Technology

Break

Breakout Sessions:
  - Enrollment/Program Integrity: Presented by Tammy Moffitt with the DHCFP
  - Behavioral Health: Presented by Alexis Tucey with the DHCFP
  - LTSS/EVV: Presented by Kirsten Coulombe with the DHCFP
  - Claim Appeals/Prior Authorization Submission: Presented by Mackenzie Lord and Jeffrey Styer with DXC Technology
Marta Jensen

- 24 years experience with Department of Health and Human Services
  - Medicaid Administrator since August 2015
  - Deputy Administrator of Administrative Services at DPBH (2014-2015)
Cody Phinney

- 20 years experience with the State of Nevada
  - Medicaid Deputy Administrator
- Extensive background in Health and Human Services
Nevada MMIS Modernization

2018 Nevada Medicaid Conference
Nevada Medicaid Fiscal Agent

- DXC Technology is contracted with the Nevada Division of Health Care Financing and Policy (DHCFP) to be the fiscal agent for Nevada Medicaid
Objectives

As a result of this session, you will understand:

• What changed in Stages 1 & 2 of implementation of the new Medicaid Management Information System (MMIS)

• What featured changes will go live early 2019
  • Benefits to providers

• Implementation timeline
  • Training plan overview
  • Communications
# Team representing DXC Technology

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
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<tr>
<td>Beth Henry</td>
<td>Account Operations Executive</td>
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<tr>
<td>Ryan Hopkins</td>
<td>Provider Relations Manager</td>
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<tr>
<td>Tiffany Kavales</td>
<td>Training Implementation Manager</td>
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<td>Shaun Jackson</td>
<td>Provider Enrollment Manager</td>
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<td>Jennifer Shaffer</td>
<td>Claims Manager</td>
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<td>Sarah Ramirez</td>
<td>Healthcare Management Manager</td>
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<td>Tracy Wagner</td>
<td>Medical Management Operations Manager</td>
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Team representing DXC Technology, continued

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<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Mackenzie Lord</td>
<td>Provider Field Representative Team Lead</td>
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<tr>
<td>Alyssa Kee Chong</td>
<td>Provider Field Representative</td>
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<td>Cassandra White</td>
<td>Provider Field Representative</td>
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<td>Dena Brennan</td>
<td>Provider Field Representative</td>
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<td>Kevin Johnston</td>
<td>Provider Field Representative</td>
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<td>Stephanie Ferrell</td>
<td>Provider Field Representative</td>
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<tr>
<td>Jeff Styer</td>
<td>Account Trainer / Instructional Designer</td>
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What changes have happened?

Stage 1 *December 2016*
Provider Enrollment
- Online Provider Enrollment (OPE) available on Provider Web Portal/Electronic Verification System (EVS)
- Revalidation and provider changes using portal

Stage 2 *July 2017*
Provider Web Portal Upgrade
- Role-based security features
Prior Authorization (PA)
- Simplified, one-page Create Authorization process
- Enhanced process to create Prior Authorizations (PAs)
- Ability to upload and submit PA reconsideration requests
- Access to last member details
Featured Changes
What featured changes are happening?

- Paperless
- Electronic Data Interchange (EDI)
- Payerpath
- Claims
- Provider Enrollment
- Secure Correspondence
- Miscellaneous Information
Paperless Claims

- Goal is to have all claims submitted electronically or through the portal, eliminating paper claim submission at go-live and provide enhanced electronic options for other areas

- **Claims Benefits**
  - Improved claims processing time
  - Claim adjustments and voids will be submitted electronically or via the Provider Web Portal
  - Claim appeals will be submitted via secure correspondence on the Provider Web Portal
Future Paperless Plans

• In addition to claims, enhancements are coming to help reduce reliance on paper in other areas.

• **Provider Enrollment Updates**
  • Providers who have submitted enrollment and revalidations electronically prior to February 2019 will see pre-populated fields available on future submissions.
  • Providers who have not submitted electronic enrollment forms in the past will be required to submit information for all fields.

• **Prior Authorization**
  • All prior authorization will be required to be entered through the Provider Web Portal.
  • Providers will be allowed to make updates to denied requests.
Electronic Data Interchange (EDI)

Benefits:

- Using new technology to convert data to a structure that is still compliant with EDI standards
- New Inbound and Outbound Companion Guides for Trading Partners and Managed Care Organizations (MCOs)
- New Business Partner Agreement documents for enrollment/certification will be executed with each Trading Partner via the Provider Web Portal
TRADING PARTNERS TO DO:

Enroll and become certified for EDI via the portal

Submit test files for each of their transaction types in order to certify as a submitter with the new MMIS
Payerpath

- Nevada Medicaid will NO LONGER provide free electronic claim submissions through Allscripts-Payerpath for Medicaid providers; however, DXC will offer Direct Data Entry (DDE) via the Provider Web Portal
- Providers will continue to have the option of submitting electronic claims through an APPROVED Nevada Medicaid Trading Partner
  - Allscripts-Payerpath will continue to be an approved Trading Partner with Nevada Medicaid
Claims

- Benefits:
  - Direct online claim submission through Provider Web Portal via Direct Data Entry (DDE)
Claims, continued

- Benefits: Ability to upload claim attachments via the Provider Web Portal
Claims, continued

- Benefits: Providers will have the ability to submit voids and adjustments via the Provider Web Portal.
Claims, continued

• Benefits:
  • Ability to research claims to identify adjudication status in almost real time
  • Expedited payment by eliminating mail time and scanning of paper claims
  • New procedures for Physician-Administered Drug (PAD) claim submissions
  • Third Party Liability (TPL), Medicare and EDI submissions enhancements
  • Modified processes for special handling, such as Provider Payment Directive, Letter of Agreement and Timely Filing
  • Provider Claim Appeals will be submitted electronically through secure correspondence on the Provider Web Portal
  • Enforced requirements/standard billing per the National Uniform Billing Committee
PROVIDERS TO DO:

Enroll in Electronic Funds Transfer (EFT) to receive payment – Paper checks are going away

Submit claims electronically – paper claims WILL NOT be accepted
Provider Enrollment

• Benefits:
  • New urgent/emergency group enrollment
  • New urgent/emergency individual enrollment
  • Ability to re-access a submitted enrollment application to make corrections and resubmit
  • Automatic creation of providers upon application approval
  • Revalidation will pull existing provider data – no re-entry of data by provider if submitted electronically prior to February 2019

• Things to Consider:
  • Providers enrolled with an Atypical Provider Identifier (API) will need to enroll with a National Provider Identifier (NPI)
  • New providers looking to enroll with Nevada Medicaid will be required to obtain an NPI
Correspondence

• Benefits:
  • Access to correspondence online including Prior Authorization (PA) letters, Provider Enrollment letters and Revalidation notices
  • Secure Correspondence allows providers to send and receive messages with the Provider Help Desk
Miscellaneous Information

• New Modernization Page
  – Access the Provider Web Portal to review all details related to the new MMIS
• Access may be in the homepage scrolling banner, Featured Links and/or Provider Links sections
• More information will be provided once the page is designed
CODE FREEZE

August 1, 2018 – Modifications to claims processing code/policy of the legacy/current Nevada MMIS will cease in preparation for the implementation

Exception – Federally mandated modifications to claims processing will continue to be updated in the legacy/current Nevada MMIS
DXC Email Has Changed

DXC has changed their email addresses from hpe.com to dxc.com

Please make this change when emailing DXC
Provider Web Portal:

Existing providers and delegates logging into the Portal after January 25 will be instructed to create a new password
Provider Training and Communication
Implementation Timeline
Training Process

• Delivery Methods
  • Live training (MOST BENEFICIAL)
  • Webinars
  • Computer Based Training (CBT)

Trading Partners will also receive training on changes that impact them
Why attend training?

- Learn enhanced claim processes by submitting electronically
- Ensure tasks are completed correctly the first time
- Receive expedited payment
- Prevent downtime and administrative challenges

Remind Trading Partners to attend training, so they can receive the same benefits
Communications

• Methods
  • Web announcements at www.medicaid.nv.gov
  • Email notifications
  • Remittance Advice (RA) messages

• Content
  • Information about changes, training schedules, actions that need to be taken, etc.

• Communications began March 2018 and will continue through March 2019

Trading Partners will also receive communications specific to the changes that impact them
Communications

- DON’T FORGET–
  - Review web announcements to get updates
  - View the Provider Links section to get access to training, newsletters, and billing information
Thank you!
Break Time

Please review the information below as to the location of each breakout session.

- Behavioral Health: Presented by Alexis Tucey with the DHCFP (Salon A & B)
- Enrollment/Program Integrity: Presented by Tammy Moffitt with the DHCFP (Salon C)
- LTSS/EVV: Presented by Kirsten Coulombe with the DHCFP (Salon D)
- Claim Appeals/Prior Authorization Submission: Presented by Mackenzie Lord and Jeffrey Styer with DXC Technology (Salon E)