

Enrollment Termination Frequently Asked Questions (FAQs)

1. Why was I terminated as a Nevada Medicaid provider?

You may have been terminated because you did not meet your revalidation date. In accordance with the Affordable Care Act, State Medicaid agencies must revalidate all provider types at least every five years with the discretion to revalidate providers on a more frequent basis. Nevada Medicaid has elected to require Durable Medical Equipment, Prosthetics, Orthotics and Disposable Medical Supplies (DMEPOS) providers to revalidate every three years.

2. Why was I terminated prior to the CMS deadline of September 24, 2016?

To ensure the CMS deadline was met, a date of September 19, 2016, was established for the termination of providers who have not revalidated.

3. Will I still have access to the Electronic Verification System (EVS)?

You will not retain access to the Provider Web Portal / EVS system. You will need to submit an initial provider enrollment application to regain access.

4. Will I still have access to the Automated Response System (ARS)?

You will not retain access to the Automated Response System. You will need to submit an initial provider enrollment application to regain access.

5. Will I still have access to Payerpath to submit my claims?

You will retain access to Payerpath and commercial clearinghouse claims submission.

6. How do I obtain a Prior Authorization for a recipient needing services?

You will need to complete the initial provider enrollment application. Once enrolled you can submit prior authorizations via the Provider Web Portal / EVS. Standard prior authorization guidelines will be followed.

7. How do I Re-enroll once I've been terminated?

You may re-enroll and choose a back date to reduce any lapse of Nevada Medicaid enrollment. To do so please visit <u>www.medicaid.nv.gov</u>; under "Providers" choose "Provider Enrollment" and then choose "Online Provider Enrollment." We recommend you review the Provider Enrollment Information Booklet and the Checklist prior to completing an initial application. These documents have instructions to help you complete the initial application and minimize the likelihood of having the application returned for correction.



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8. Will my claims deny if they are submitted after termination?

Any claim submitted with a date of service (DOS) after Medicaid enrollment is terminated will be denied. You will need to enroll to get paid for services rendered after the termination date. You may submit claims for DOS prior to termination of Medicaid enrollment.

9. Will I be able to get paid for claims prior to termination?

You may submit claims for DOS prior to termination of Medicaid enrollment following the Nevada Medicaid Billing Manual and Billing Guidelines.