Chapter 1 Getting started

The Nevada Medicaid and Nevada Check Up Health Care Online Provider Enrollment Portal allows providers, or their delegates, to enter all pertinent provider enrollment information using an online application. The online application captures key provider data such as contact information, provider type, specialties, and provider demographics such as names and locations.

The Online Provider Enrollment application allows you to navigate through each page of enrollment, from the contact information in the first page, to the final print preview and tracking number on the last page.

**System requirements**

To access the Nevada Medicaid and Nevada Check Up Health Care Online Provider Enrollment Portal, you must have internet access and a computer with a web browser (Internet Explorer 7.0 or higher or Firefox 3.0 or higher recommended).
1.1. Accessing the Nevada Medicaid and Nevada Check Up Health Care Online Provider Enrollment Portal

To access:

1. On the Nevada Medicaid and Nevada Check Up Health Care content website home page, www.medicaid.nv.gov, click the “Provider” tab, and select “Provider Enrollment.”

2. The Provider Enrollment page is displayed.

3. Click the “Online Provider Enrollment” link.

4. The Online Provider Enrollment Portal Home page opens as shown below.
5. Click “Provider Enrollment Application” to initiate a new provider enrollment application.

Provider Enrollment: Welcome page is displayed.

Welcome to the Online Provider Enrollment System

Thank you for your interest in the Nevada Medicaid and Nevada Check Up Program. To bill for services rendered to Nevada Medicaid recipients, you must enroll as a Nevada Medicaid Provider. DXC Technology is the current fiscal agent for the Nevada Medicaid and Nevada Check Up program. Meanwhile, DXC Technology is referred to as Nevada Medicaid.

All of the materials within this document must be completed and submitted to Nevada Medicaid for your request to be processed. A checklist of required documentation has been provided for your convenience. Please review the Provider Information Enrollment Roadmap for additional information.

Submission of incomplete materials will delay your request. In addition to required documentation, additional supporting documentation can be uploaded with your application if necessary. If your responses to any questions on this enrollment application did not fit into the field on the page, type the question and response and upload the documentation using Other as the attachment type on the Attachments page of this online application. All documents must be uploaded at the time of provider enrollment forms submission in order for your application to be considered complete. Please retain copies of your materials for your records. You will receive written notification upon approval or denial of your request.

Urgent/Emergency Enrollment

If you are requesting urgent/emergency enrollment as an individual provider and have a separate billing provider, they will need to enroll with Nevada Medicaid as a billing provider. Once they are enrolled, you will then need to be linked to the group for claims to process appropriately. The group can be a fully enrolled provider or an urgent/emergency provider.

If you are requesting urgent/emergency enrollment as a group provider, and have a separate servicing provider, they will need to enroll with Nevada Medicaid as individual provider and be linked to the group for claims to process. The individual can be a fully enrolled provider or an urgent/emergency provider.

You can verify if a provider is enrolled using the Provider Search tool at https://www.medicaid.nv.gov/napipients/YourName/Default.aspx

Once both the servicing and billing provider are enrolled you will need to submit the claim for payment. Billing instructions can be found on https://www.medicaid.nv.gov/providers/billinginfo.aspx.

If you have questions concerning enrollment, contact Provider Enrollment at (877) 638-3472 (select options for “Provider Enrollment”) between 8:00 a.m. and 5:00 p.m. PT Monday through Friday.

Please click the “Continue” to proceed.
6. Click “Resume Enrollment” to resume an existing enrollment application that has not been submitted.

Provider Enrollment: Resume Enrollment page is displayed.

Enter your assigned Tracking Number, Federal Tax Identification Number (TIN or EIN) or Social Security Number (SSN), and Password in order to resume your existing request.

**Note:** If both a FEIN and SSN were entered on your application, use the FEIN to locate your application.
7. Click “Enrollment Status” to check on the status of an application.

Provider Enrollment: Status page is displayed.

Enter your assigned Tracking Number and Federal Tax Identification Number (TIN or EIN) or SSN that was used on the provider application to verify the current status.

Note: If both a FEIN and SSN were entered on your application, use the FEIN to locate your application.

The following table shows the potential enrollment statuses:

<table>
<thead>
<tr>
<th>Enrollment Status as seen in OPE</th>
<th>Description of the Enrollment Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Application Pending Review</td>
<td>Application is waiting for finalization; no further action needed by provider.</td>
</tr>
<tr>
<td>Manual Review</td>
<td>Application is pended for additional manual review or research/question.</td>
</tr>
<tr>
<td>Denied</td>
<td>Application has been denied.</td>
</tr>
<tr>
<td>Enrollment Completed – Approved</td>
<td>Application is approved and enrollment is complete.</td>
</tr>
<tr>
<td>Incomplete</td>
<td>Provider is working to complete an application;</td>
</tr>
<tr>
<td>Enrollment Status as seen in OPE</td>
<td>Description of the Enrollment Status</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>--------------------------------------</td>
</tr>
<tr>
<td>Returned to Provider – Corrections Required</td>
<td>Application has missing or incomplete information and is being returned with a return letter. Provider can make corrections in the OPE tool and resubmit.</td>
</tr>
<tr>
<td>Pended for Outreach</td>
<td>Application is pended for outreach to the provider due to incomplete information or missing/corrected attachments.</td>
</tr>
<tr>
<td>Outreach Conducted – Corrections Required</td>
<td>Outreach has been performed and awaiting corrections discussed.</td>
</tr>
<tr>
<td>Under Review</td>
<td>Analyst is reviewing the Application Tracking Number (ATN) and a final decision has not been determined.</td>
</tr>
<tr>
<td>Pended to DHCFP for Review</td>
<td>Application is pended to DHCFP for review.</td>
</tr>
<tr>
<td>Pended to Rates for Review</td>
<td>Application is pended to DHCFP for rates.</td>
</tr>
<tr>
<td>Application Awaiting Finalization</td>
<td>Application is waiting for finalization after DHCFP Determination.</td>
</tr>
<tr>
<td>Pended to QA Team for Review</td>
<td>Application has been decisioned but has been routed to QA first.</td>
</tr>
<tr>
<td>QA Complete - Return to Analyst</td>
<td>Application has been reviewed by QA and needs to be completed by analysis.</td>
</tr>
<tr>
<td>Supervisor Review</td>
<td>Application is with a supervisor to review, before sending out the Return To Provider (RTP) letter.</td>
</tr>
<tr>
<td>Submitted</td>
<td>Application has been submitted and is available for analyst review.</td>
</tr>
<tr>
<td>Rejected by Reviewer</td>
<td>Rejected by Reviewer – Rejected by Nevada Medicaid as a duplicate request.</td>
</tr>
<tr>
<td>Awaiting Additional Authorizations</td>
<td>Application is awaiting additional authorization by Medical Management for Day Treatment Model or by Pharmacy team for out-of-state Pharmacy approval.</td>
</tr>
<tr>
<td>T – Expired Past 120 Days</td>
<td>ATN is expired; 120 days since the last activity by the provider.</td>
</tr>
</tbody>
</table>

### 1.2. Navigation

A table of contents appears at all times during the enrollment process to show your current location in the enrollment process.

As you navigate through each page of the enrollment application, all previous pages in the application are displayed in the table of contents as a link. You can navigate back to that link to apply changes, if needed. You cannot navigate forward within the table of contents, beyond the current page in which you are working. You can navigate back to a previous page, apply updates,
and then return to the current page by using the table of contents.

You can enter a partial application and resume the enrollment process at a later time by clicking the “Finish Later” button on any page once you have entered the required information on the Request Information page.

You can cancel the provider enrollment process at any time by clicking the “Cancel” button; however, data that has been entered will be lost and you will be navigated out of the provider enrollment application.

1.3. Welcome

1. Gather the required information listed on the Welcome page.

2. Click “Continue” or press the “Enter” key to begin the enrollment application. The Request Information page appears.
Click the Continue button after all of the required information has been entered on the Request Information page. After clicking the Continue button, the Credentials page will be displayed to create a password for this application. Make sure that you remember your password; if your password is forgotten it cannot be reset and your application information will be lost. You will need to begin a new application.
3. Click “Submit.”

4. The Tracking Information page is displayed with your tracking number. A confirmation email is also sent to the contact person’s email that was designated on the Request Information page.
Confirmation Email:

From: Division of Health Care Financing and Policy Provider Portal
To: Test User
Subject: Provider Enrollment Application

Thank you for your interest in Nevada Medicaid Program. Your Nevada Medicaid Program tracking number is 3243. This tracking number must be kept for future reference. The tracking number, unique password, and Federal Tax ID or SSN are all required for future access to your enrollment application. You will not be able to retrieve your enrollment application without all of the required information. Remember to return to the Provider Portal at https://www.medicaid.nv.gov/hcp42/provider/Home/tabid/477/Default.aspx to complete your enrollment application.

5. Click the Continue button to return to the application.
1.4. Finish Later

You can enter a partial application and resume the enrollment process at a later time by clicking the “Finish Later” button on any page once you have entered the required information on the Request Information page.

1. Click “Finish Later” and the Save Incomplete Application pop up message is displayed.

2. The application is saved and you are directed back to the Provider Enrollment home page.

Provider enrollment applications that have been started and assigned an Application Tracking Number (ATN) will expire after 120 days of inactivity. ATNs are considered inactive when the last save date is greater than 120 days from the current date. Once an ATN is expired, a new provider enrollment application will be required to complete the provider enrollment process.

1.5. Resetting a “Submitted” application to make changes

Once an OPE application is submitted, changes can be made using the reset functionality as long as the application is still in Submitted status.
Steps to reset OPE application:

1. On the Online Provider Enrollment Portal Home page, click “Enrollment Status.”

2. Enter your assigned Tracking Number, Federal Tax Identification Number (TIN or EIN) or Social Security Number (SSN), and Password then click the “Search” button. **Note:** If both a FEIN and SSN were entered on your application, use the FEIN to locate your application.

3. Click the “Reset” button.
4. This will reset the application and the status changes to Incomplete. A confirmation message will also appear indicating that the reset was successful and you can resume the application.

5. Go back to the Online Provider Enrollment Portal Home page and click “Resume Enrollment” to resume the enrollment application and make the necessary changes.

6. The Provider Enrollment: Resume Enrollment page is displayed.
7. Enter your assigned Tracking Number, Federal Tax Identification Number (TIN or EIN) or Social Security Number (SSN), and Password in order to resume your application. 

**Note:** If both a FEIN and SSN were entered on your application, use the FEIN to locate your application.

1.6. **Contact Us**

The Online Provider Enrollment home page has a link to the Contact Us page.

When you click on the link it will take you to the Contact Us page that contains the Provider Enrollment Mailing address, Phone Number and Fax Number.
1.7. FAQs
The Online Provider Enrollment home page has a link to Frequently Asked Questions regarding the online provider enrollment application. You can click this link to see a list of frequently asked questions and answers.

1.8. Other links
The Other links section contains links to:
- Division of Health Care Financing and Policy
- Provider Enrollment Information Booklet
- Enrollment Checklists
Provider Enrollment

Provider Enrollment Application
Create a new provider enrollment application.

Resume Enrollment
Resume an existing enrollment application that has not been submitted.

Enrollment Status
Check the current status of an enrollment application.

Other Links
- Division of Health Care Financing and Policy
- Provider Enrollment Information Booklet
- Enrollment Checklist