

Brian Sandoval
Governor



Marta Jensen
Administrator
Division of Health Care Financing and
Policy

Provider Enrollment/Program Integrity

- First step in preventing fraud, waste, and abuse
- Ensures quality people are providing services to vulnerable populations
- Ensures the right type and number of providers are available to serve the Medicaid population
- Improves the integrity of the program



Provider Enrollment Program Integrity Activities

- Provider enrollment
- Contract suspensions and terminations
- Affordable Care Act (ACA) Initiatives and Enhanced Screenings:
 - Ownership and disclosure
 - Ordering, prescribing, or referring (OPR)
 - Federal database checks and reporting
 - Assigned risk levels – Elevated risk level
 - On-site visits
 - Revalidation
 - Fingerprint criminal background check (FCBC)
 - Termination and denial of enrollment



Ownership and Disclosure

- Person or corporation having a 5 percent direct or indirect ownership or controlling interest in a disclosing entity.
- Officers or directors of a disclosing entity formed as a corporation or partner (if formed as a partnership)
- Need to disclose identifying information: SSN or Tax ID, DOB, Name and address, relationships, the same information for managing employees
- Criminal convictions



Ordering, Prescribing and Referring (OPR)

- OPR's must be enrolled in Medicaid
- If submitting claims – fully enrolled
- If ordering, prescribing or referring only – OPR enrolled
- The OPR's NPI is required on the servicing provider's claims

- Consequences: If the OPR only provider doesn't enroll then the billing provider's claims won't be paid



Federal Database Checks and Reporting

- Social Security Death Master File (SSDMF)
- National Plan & Provider Enumeration System (NPPES)
- List of Excluded Individuals/Entities (LEIE) through the Office of Inspector General (OIG)
- System Awards Management (SAM) aka Excluded Parties List System (EPLS)
- Any other state database to verify license information



Assigned Risk Levels

- Limited Categorical Risk
 - Requires provider to meet federal and state requirements for the provider type
 - License verification
 - Conduct data base checks to ensure the provider meets enrollment criteria for their provider type
- Moderate Categorical Risk
 - Perform “limited” screening requirements
 - Conduct on-site visit
- High Categorical Risk
 - Conduct “limited” and “moderate” screening requirements
 - Conduct fingerprint based criminal background check



Elevated Risk

- Under certain circumstances the provider's screening category must be elevated to the "high" risk category.
- Payment suspension based on credible allegation of fraud, waste or abuse. Risk level remains "high" for 10 years beyond the date of payment suspension
- The provider has been excluded by the Office of Inspector General or another state's Medicaid program
- The agency or CMS in the previous 6 months lifted a temporary moratorium for a provider type
- Provider has an existing overpayment of \$1500* or greater
 - Is more than 30 days old
 - Has not been repaid
 - Is not currently being appealed
 - Is not part of an approved repayment plan for the entire overpayment
 - *The \$1500 threshold is an aggregate of all outstanding debts and interest



On-site Visits

- Conducted for “moderate” and “high” categorical risk providers
- Conducted at initial enrollment, re-enrollment and revalidation
- Unannounced
- Must terminate or deny enrollment if the provider fails to permit access to a location



Provider Revalidation

- Mandated to verify information on file for all existing Medicaid providers
- All enrolled providers must revalidate or will be terminated for non-compliance
- DMEPOS suppliers must be revalidated every 3 years
- All other providers must be revalidated every 5 years
- Fiscal agent notifies providers of their revalidation timeframes



Fingerprint Criminal Background Check

- On July 1, 2017, the DHCFP implemented the fingerprinting requirement.
- High risk providers are required to be fingerprinted at initial enrollment, re-enrollment and revalidation of enrollment.
- Providers are notified during the time of enrollment whether they are required to complete a FCBC.



Termination and Denial of Enrollment

- States must terminate or deny provider enrollment if:
 - Non cooperation with screenings
 - Failed to submit requested information
 - Convicted of criminal offenses related to a federal or state health care program in the last 10 years.
 - Terminated or denied enrollment in another state
 - Failed to submit to a fingerprint background check
- States can terminate or deny enrollment if:
 - Doesn't meet the conditions of participation in the Nevada Medicaid program
 - Falsified information on the enrollment application and documents
 - The state cannot verify the providers identity



Managed Care Final Rule

- Became effective May 6, 2016
- All Managed Care network providers must be enrolled in Fee for Service Medicaid
 - Ensures all applicable ACA screenings are completed prior to enrolling in an MCO network
 - Network providers are not required to see FFS recipients



QUESTIONS?



Online Provider Enrollment

Attention

You are now leaving the Nevada Medicaid portal web site. The link

[Proceed](#)

[Cancel](#)



Nevada Department of Health and Human Services
Division of Health Care Financing and Policy Provider Portal



[Contact Us](#)
[Frequently Asked Questions](#)

Provider Enrollment

[Provider Enrollment](#) > Provider Enrollment Application Saturday 08/18/2018 10:23 AM PST

Provider Enrollment: Welcome

Welcome	Welcome to the Online Provider Enrollment System
Request Information	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. Hereafter, DXC Technology is referred to as Nevada Medicaid.
Specialties	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 Booklet for additional information.
Addresses	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.
Provider Identification	
Other Information	
Ownership & Disclosure	
Agreement	
Attachments	
Summary	

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
<https://www.medicaid.nv.gov/hcp/provider/Resources/SearchProviders/tabid/220/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.

[Continue](#) [Cancel](#)

R4.2 © 2018 DXC Technology Company. All rights reserved | [Nevada Online Privacy Policy](#)



Provider Enrollment Page

Secure | https://www.medicaid.nv.gov/providers/enroll.aspx



Nevada Department of Health and Human Services
Division of Health Care Financing and Policy Provider Portal

Contact Us DHCFF Home

Search

Providers EVS Pharmacy Prior Authorization Quick Links Calendar

Announcements Latest News

[Web Announcement 1666](#)
Update Regarding the Reprocessing of Claims for Ocular Services Codes Including V2020 (Vision Services, Frames)

[Web Announcement 1665](#)
Attention Provider Type 74 (Nurse Midwife): Procedure Codes Updated and Claims Reprocessed

[Web Announcement 1664](#)
Nevada Medicaid Reimburses for Laboratory Lead Testing and Screenings

[Web Announcement 1663](#)
Behavioral Health Therapy Claim Limits

[Web Announcement 1662](#)
Update Regarding Claims for the New 2018 Codes

[View All Web Announcements](#)

Featured Links

[Authorization Criteria](#)

[DHCFF Home](#)

[EDI Enrollment Forms and Information](#)

[EVS User Manual](#)

[Online Provider Enrollment](#)

[Provider Login \(EVS\)](#)

[Prior Authorization](#)

[Search Fee Schedule](#)

[Search Providers](#)

Provider Enrollment

Provider Enrollment Online Application

Effective December 1, 2015, the web-based [Online Provider Enrollment Portal](#) is available for providers to complete new enrollment in Nevada Medicaid, revalidation and provider changes.

Thank you for your interest in the Nevada Medicaid and Nevada Check Up Program. This page contains all of the information and forms you will need to become a Nevada Medicaid provider. If you have any questions, please contact the Provider Enrollment Unit at (877) 638-3472 from 8a.m. to 5p.m. Monday through Friday.

Effective 12/1/2015, access [Online Provider Enrollment](#) for individual, group or OPR enrollments.

Provider Documentation Reminders: (See [Web Announcement 1125](#) for reminders that will assist providers in adhering to the documentation responsibilities required of each Nevada Medicaid/Nevada Check Up provider.)

All enrollment documents including attachments require an original signature from the provider or an authorized representative (use dark blue or black ink).

Required Enrollment Documents

- **Provider Enrollment Information Booklet:** All providers will need the information contained in this booklet, which includes common enrollment questions and information about out-of-state providers and provider groups.
- **Enrollment Checklists:** Copies of certain documents must be included with your Provider Enrollment Packet (e.g., copy of professional certification, proof of insurance, background check). The [Enrollment Checklists](#) show required documentation for each provider type.
- **Business Associate Addendum (NMH-3820):** This document must be signed and submitted with your Provider Enrollment/Re-Enrollment Packet if it is listed on the Provider Enrollment Checklist for your Provider Type and when requested by the Division of Health Care Financing and Policy (DHCFF) or Nevada Medicaid.
- **Advance Directives Compliance Self-Evaluation & Certification (NMH-3827):** This form must be completed and submitted to DHCFF if it is listed on the Provider Enrollment checklist for your Provider Type.
- **Civil Rights Compliance Self-Evaluation & Certification (NMH-3828):** This form must be completed and submitted to DHCFF if it is listed on the Provider Enrollment checklist for your Provider Type.

Online Provider Enrollment User Manual

- Chapter 1: Getting Started
- Chapter 2: Initial Enrollment Application
- Chapter 3: Revalidation and Updates

Initial Enrollment Documents

Notifications

2018 Nevada Medicaid Conference Scheduled [See [Web Announcement 1650](#)]

Urgent: The issue causing the delay in the adjudication of claims for physician-administered drugs has been resolved. Claims submitted July 2, 2018, forward will adjudicate correctly. The adjudication of the pending claims will appear on remittance advices dated July 20, 2018, and/or July 27, 2018.

Status of Behavioral Health Outpatient Treatment Claims for Psychiatric Visits That Denied In Error [See [Web Announcement 1647](#)]

Preparations Continue for the Medicaid Management Information System Modernization Project – Trading Partner Enrollment and Certification (Testing) [See [Web Announcement 1655](#)]

Attention All Providers and Electronic Billing Trading Partners: Medicaid Management Information System Enhancements Will Improve Claims and Enrollment Processes. [See [Web Announcement 1559](#)]

Provider Links

[Billing Information](#)

[E-Prescribing](#)

[Forms](#)

[Provider Enrollment](#)

[Provider Newsletters](#)

[Provider Training](#)

Scheduled Site Maintenance

During the scheduled site maintenance



Online Provider Enrollment



Nevada Department of Health and Human Services
Division of Health Care Financing and Policy Provider Portal



[Contact Us](#)
[Frequently Asked Questions](#)

Provider Enrollment

Provider Enrollment Saturday 08/18/2018 10:14 AM PST

Provider Enrollment

[Provider Enrollment Application](#)
Initiate 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](#)



R4.2 © 2018 DXC Technology Company. All rights reserved | [Nevada Online Privacy Policy](#)



Online Provider Enrollment



Nevada Department of Health and Human Services
Division of Health Care Financing and Policy Provider Portal



[Contact Us](#)
[Frequently Asked Questions](#)

Provider Enrollment

[Provider Enrollment](#) > Provider Enrollment Application Saturday 08/18/2018 10:23 AM PST

Provider Enrollment: Welcome ?

Welcome	Welcome to the Online Provider Enrollment System
Request Information	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. Hereafter, DXC Technology is referred to as Nevada Medicaid.
Specialties	
Addresses	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 Booklet for additional information.
Provider Identification	
Other 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.
Ownership & Disclosure	
Agreement	
Attachments	
Summary	Urgent/Emergency Enrollment <p>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.</p> <p>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.</p> <p>You can verify if a provider is enrolled using the Provider Search tool https://www.medicaid.nv.gov/hcp/provider/Resources/SearchProviders/tabid/220/Default.aspx</p> <p>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.</p> <p>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.</p> <p>Please click the "Continue" to proceed.</p>

[Continue](#) [Cancel](#)

R4.2 © 2018 DXC Technology Company. All rights reserved | [Nevada Online Privacy Policy](#)



Online Provider Enrollment

Provider Enrollment

[Provider Enrollment](#) > Enrollment Request Information Saturday 08/18/2018 10:26 AM PST

Provider Enrollment: Request Information ?

[Welcome](#)
Request Information
Specialties
Addresses
Provider Identification
Other Information
Ownership & Disclosure
Agreement
Attachments
Summary

Complete the fields on each screen and select the Continue button to move forward to each page. All mandatory data is required to "Finish Later". The contact person will potentially be contacted to answer any questions regarding the information provided in this request.
* Indicates a required field.

Initial Enrollment Information

*Enrollment Type

Ownership change

Electronic Health Records (EHR)

*Provider Type

*Requested Enrollment Effective Date

Group Association

To become affiliated or remain with an existing Medicaid Provider Group, enter the Group's NPI and the date to begin the affiliation. Otherwise, leave this field blank. **This is required for provider types 14 and 82.**

Would You Like to be Linked to a Group? Yes No

Provider Information

A Federal Tax Identification Number, also known as an Employer Identification Number (EIN), is used to identify a business entity.

Federal Tax ID

*SSN
SSN is a required field.

*Are you currently enrolled as a Provider? Yes No

*Were you previously enrolled as a Provider? Yes No

Contact Information

This contact information is required for correspondence regarding the associated application. Provide the appropriate contact person and information who can assist with the request.

*Last Name
Last Name is a required field.

*First Name
First Name is a required field.

*Telephone Number Telephone Number Extension
Telephone Number



Online Provider Enrollment



Nevada Department of Health and Human Services
Division of Health Care Financing and Policy Provider Portal



[Contact Us](#)
[Frequently Asked Questions](#)

Provider Enrollment

[Provider Enrollment](#) > Enrollment Credentials Saturday 08/18/2018 10:46 AM PST

Provider Enrollment: Credentials ?

You will need to create a password to continue your application at a later date. Your password must be at least 8 and no more than 20 alphanumeric characters. Once submitted, your password must be kept for future reference. If forgotten, the password cannot be reset and your application information will be lost. You will need to begin a new application process.

Enter your password in the fields as indicated and click the Submit button. **A tracking number will be provided.** This tracking number and your accompanying password can be used to access your enrollment application.

* Indicates a required field.

Employer Identification Number (EIN) or Social Security Number (SSN)

*Password

*Confirm Password

R4.2 © 2018 DXC Technology Company. All rights reserved | [Nevada Online Privacy Policy](#)



Online Provider Enrollment



Nevada Department of Health and Human Services
Division of Health Care Financing and Policy Provider Portal



[Contact Us](#)
[Frequently Asked Questions](#)

Provider Enrollment

[Provider Enrollment](#) > [Enrollment Credentials](#) > Enrollment Tracking Information Saturday 08/18/2018 10:50 AM PST

[Print Preview](#)

Provider Enrollment: Tracking Information ?

Your enrollment application has been saved.

Your enrollment application has been assigned the following **tracking number: 100178.**

This tracking number must be kept for future reference. Your assigned tracking number, unique password, and tax identification number are all required for future access to your enrollment application. If any of these elements are lost or forgotten, you will be unable to access your enrollment application.

A confirmation email has also been sent to the following contact person's email, designated in the enrollment application: shaunj@dx.com.

[Continue](#)

R4.2 © 2018 DXC Technology Company. All rights reserved | [Nevada Online Privacy Policy](#)



Online Provider Enrollment

Provider Enrollment: 5

- [Welcome](#)
- [Request Information](#)
- [Specialties](#)
- [Addresses](#)
- [Provider Identification](#)
- [EFT Enrollment](#)
- [Other Information](#)
- [Ownership & Disclosure](#)
- [Agreement](#)
- [Attachments](#)
- ▶ Summary**

No

Terms of Agreement

Provider Name Conference test
Street test
 Reno
 Nevada, 89509

Employer Identification Number (EIN) or Social Security Number (SSN)
 NPI

Contact Name conference test
Contact Email

Provider Binder

I certify, under penalty of perjury, that the information and statements on this request and on any accompanying documents are accurate and true. I understand that the filing of materially incomplete or false information with this request is sufficient cause for denial of enrollment or termination from the Nevada Medicaid and Nevada Check Up Programs.

I understand that should I be enrolled as a provider of services under Nevada Medicaid and Nevada Check Up Programs, it is my responsibility to notify the Nevada Medicaid and Nevada Check Up Programs fiscal agent of any change to the information on this application including but not limited to address, group affiliation, change of ownership, or tax identification number.

Supporting Documentation

Submit all of the required documentation and forms to continue the enrollment process.

- A checklist of required documentation can be found [here](#).

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. All documents must be uploaded at the time of provider enrollment forms submission in order for your application to be considered complete. To upload the appropriate documents, follow the instructions under **Attachments** below.

Note: There is a maximum of 15 MBs of information when uploading attachments by **File Transfer**.

Attachments			
#	Transmission Method	File	Attachment Type
1	FT-File Transfer	Test.pdf (27K)	Voided Check or Bank letter for EFT, if applicable

Instructions for Summary Page

If changes are required when viewing the Summary page, please select the appropriate link in the Table of Contents panel, navigate back to that page, and make changes. Note that if the Enrollment Type or Provider Type fields are modified on the Request Information page, that you will be required to navigate through the enrollment application wizard again and update all fields that are contingent upon these two fields.

Once you have reviewed the contents of this application, print a copy of this summary for your records, then select 'Confirm' to submit the enrollment for processing.

Print Preview
Save As PDF
Confirm
Finish Later
Cancel



Online Provider Enrollment



Nevada Department of Health and Human Services
Division of Health Care Financing and Policy Provider Portal



[Contact Us](#)
[Frequently Asked Questions](#)

Provider Enrollment

[Provider Enrollment](#) > Enrollment Tracking Information Saturday 08/18/2018 11:00 AM PST

[Print Preview](#)

Provider Enrollment: Tracking Information ?

Your enrollment application has been submitted.

Your enrollment application has been assigned the following **tracking number: 100178**.

This tracking number must be kept for future reference. Your assigned tracking number, unique password, and tax identification number are all required for future access to your enrollment application. If any of these elements are lost or forgotten, you will be unable to access your enrollment application.

A confirmation email has also been sent to the following contact person's email, designated in the enrollment application: shaunj@dxc.com.

[Exit](#)

R4.2 © 2018 DXC Technology Company. All rights reserved | [Nevada Online Privacy Policy](#)



Online Provider Enrollment



Nevada Department of Health and Human Services
Division of Health Care Financing and Policy Provider Portal



[Contact Us](#)
[Frequently Asked Questions](#)

Provider Enrollment

Provider Enrollment Saturday 08/18/2018 10:14 AM PST

Provider Enrollment

[Provider Enrollment Application](#)
Initiate 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](#)



R4.2 © 2018 DXC Technology Company. All rights reserved | [Nevada Online Privacy Policy](#)



Online Provider Enrollment

Provider Enrollment - Status

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. For any further inquiries, please contact the Provider Enrollment Unit at (877) 638-3472 from 8 a.m. to 5 p.m. PT Monday through Friday.

* Indicates a required field.

*Tracking Number

*Employer Identification Number (EIN) or Social Security Number (SSN)

*Password

[Search](#) [Cancel](#)

Provider Enrollment - Summary

Here is the most current information regarding your provider enrollment application. For any further inquiries, contact the Provider Enrollment Unit at (877) 638-3472 from 8 a.m. to 5 p.m. PT Monday through Friday.

Tracking Number	
Date Submitted	
Status	Submitted
Status Date	03/14/2018

[Reset](#)



Online Provider Enrollment



Nevada Department of Health and Human Services
Division of Health Care Financing and Policy Provider Portal



[Contact Us](#)
[Frequently Asked Questions](#)

Provider Enrollment

Provider Enrollment Saturday 08/18/2018 10:14 AM PST

Provider Enrollment

[Provider Enrollment Application](#)
Initiate 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](#)



R4.2 © 2018 DXC Technology Company. All rights reserved | [Nevada Online Privacy Policy](#)



Online Provider Enrollment



Nevada Department of Health and Human Services

Division of Health Care Financing and Policy Provider Portal



[Contact Us](#)
[Frequently Asked Questions](#)

Provider Enrollment

[Provider Enrollment](#) > Enrollment Status

Saturday 08/18/2018 11:04 AM PST

Provider Enrollment - Status



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. For any further inquiries, please contact the Provider Enrollment Unit at (877) 638-3472 from 8 a.m. to 5 p.m. PT Monday through Friday.

* Indicates a required field.

*Tracking Number

*Employer Identification Number (EIN) or Social Security Number (SSN)

*Password

[Search](#)

[Cancel](#)

Provider Enrollment - Summary

Here is the most current information regarding your provider enrollment application. For any further inquiries, contact the Provider Enrollment Unit at (877) 638-3472 from 8 a.m. to 5 p.m. PT Monday through Friday.

Tracking Number 100178
Date Submitted 08/18/2018
Status Submitted
Status Date 08/18/2018

R4.2

© 2018 DXC Technology Company. All rights reserved | [Nevada Online Privacy Policy](#)



Electronic Verification System (EVS)

Nevada Department of Health and Human Services
Division of Health Care Financing and Policy Provider Portal

Contact Us DHCFP Home

Search

Providers EVS Pharmacy Prior Authorization Quick Links Calendar

User Manual

Provider Login (EVS)

Announcements

[Web Announcement 1665](#)
Update Regarding Claims for Ocular Services Codes Including V2020 (Vision Services, Frames)

[Web Announcement 1665](#)
Attention Provider Type 74 (Nurse Midwife): Procedure Codes Updated and Claims Reprocessed

[Web Announcement 1664](#)
Nevada Medicaid Reimburses for Laboratory Lead Testing and Screenings

[Web Announcement 1663](#)
Behavioral Health Therapy Claim Limits

[Web Announcement 1662](#)
Update Regarding Claims for the New 2018 Codes

[View All Web Announcements](#)

Featured Links

[Authorization Criteria](#)

[DHCFP Home](#)

[EDI Enrollment Forms and Information](#)

[EVS User Manual](#)

[Online Provider Enrollment](#)

[Provider Login \(EVS\)](#)

[Prior Authorization](#)

[Search Fee Schedule](#)

[Search Providers](#)

Welcome

Register to Attend the
2018 Nevada Medicaid Conference

– Reno: Wednesday, August 22

– Las Vegas: Friday, September 14

Nevada Medicaid

Welcome to the Nevada Medicaid and Nevada Check Up Provider Web Portal. Through this easy-to-use internet portal, healthcare providers have access to useful information and tools regarding provider enrollment and revalidation, recipient eligibility, verification, prior authorization, billing instructions, pharmacy news and training opportunities. The notifications and web announcements keep providers updated on enhancements to the online tools, as well as updates and reminders on policy changes and billing procedures.

Thank you for your participation in Nevada Medicaid and Nevada Check Up.

Notifications

2018 Nevada Medicaid Conference Scheduled [See [Web Announcement 1650](#)]

Urgent: The issue causing the delay in the adjudication of claims for physician-administered drugs has been resolved. Claims submitted July 2, 2018, forward will adjudicate correctly. The adjudication of the pending claims will appear on remittance advices dated July 20, 2018, and/or July 27, 2018.

Status of Behavioral Health Outpatient Treatment Claims for Psychiatric Visits That Denied In Error [See [Web Announcement 1647](#)]

Preparations Continue for the Medicaid Management Information System Modernization Project – Trading Partner Enrollment and Certification (Testing) [See [Web Announcement 1655](#)]

Attention All Providers and Electronic Billing Trading Partners: Medicaid Management Information System Enhancements Will Improve Claims and Enrollment Processes. [See [Web Announcement 1559](#)]

Provider Links

[Billing Information](#)

[E-Prescribing](#)

[Forms](#)

[Provider Enrollment](#)

[Provider Newsletters](#)

[Provider Training](#)



Electronic Verification System (EVS)

 **Nevada Department of Health and Human Services**
Division of Health Care Financing and Policy Provider Portal

[Contact Us](#) | [Login](#)

Home

Home Saturday 08/18/2018 11:17 AM PST

Login

*User ID

[Log In](#)

[Forgot User ID?](#)
[Register Now](#)

[Where do I enter my password?](#)

Web Announcements

[Web Announcement 1666](#)
Update Regarding the Reprocessing of Claims for Ocular Services Codes Including V2020 (Vision Services, Frames)

[Web Announcement 1665](#)
Attention Provider Type 74 (Nurse Midwife): Procedure Codes Updated and Claims Reprocessed

[Web Announcement 1664](#)
Nevada Medicaid Reimburses for Laboratory Lead Testing and Screenings

[Web Announcement 1663](#)
Behavioral Health Therapy Claim Limits

[Web Announcement 1662](#)
Update Regarding Claims for the New 2018 Codes

[View More Web Announcements](#)

Featured Links

[Authorization Criteria](#)
[DHCFP Home](#)
[EDI Enrollment Forms and Information](#)
[EVS User Manual](#)
[Search Fee Schedule](#)
[Search Providers](#)

Broadcast Messages

Notification
The Division of Health Care Financing and Policy (DHCFP) will implement a new, modernized Medicaid Management Information System (MMIS) by early 2019. The changes will improve electronic claims submission and enhance electronic options for users to alleviate the need for paper communications. See Web Announcement 1559 at www.medicaid.nv.gov.

What can you do in the Provider Portal
Through this secure and easy to use internet portal, healthcare providers can inquire on the status of their claims and payments, inquire on a patient's eligibility, process prior authorization requests and access Remittance Advices. In addition, healthcare providers can use this site for further access to contact information for services provided under the Nevada Medicaid program.



Website Requirements

Prior Authorization Quick Reference Guide [\[Review\]](#)
Provider Web Portal Quick Reference Guide [\[Review\]](#)

Current Procedural Terminology (CPT) and Current Dental Terminology (CDT) codes, descriptions and data are copyrighted by the American Medical Association (AMA) and the American Dental Association (ADA), respectively, all rights reserved. AMA and ADA assume no liability for data contained or not contained on this website and on documents posted herein.

CPT is a registered trademark ® of the AMA. CDT is a registered trademark ® of the ADA. Applicable FARS/DFARS apply.



Electronic Verification System (EVS)



Nevada Department of Health and Human Services
Division of Health Care Financing and Policy Provider Portal

[Contact Us](#) | [Logout](#)

My Home | [Eligibility](#) | [Claims](#) | [Care Management](#) | [File Exchange](#) | [Resources](#)

My Home Saturday 08/18/2018 11:20 AM PST

Provider

Name
Provider ID
Location ID

[My Profile](#)
[Manage Accounts](#)

Broadcast Messages

Hours of Availability
The Nevada Provider Web Portal is unavailable between midnight and 12:25 AM PST Monday-Saturday and between 8 PM and 12:25 AM PST on Sunday.

Welcome Health Care Professional!



We are committed to make it easier for physicians and other providers to perform their business. In addition to providing the ability to verify member eligibility and search for claims, payment information, and access Remittance Advices, our secure site provides access to eligibility, answers to frequently asked questions, and the ability to process authorizations.

Prior Authorization Quick Reference Guide [\[Review\]](#)
Provider Web Portal Quick Reference Guide [\[Review\]](#)

Provider Services

- [Member Focused Viewing](#)
- [Search Payment History](#)
- [Revalidate-Update Provider](#)
- [PASRR](#)
- [EHR Incentive Program](#)
- [EPSDT](#)
- [Presumptive Eligibility](#)

[Contact Us](#)

[Secure Correspondence](#)

All Claim Inquiries should be submitted to the following Address:
Nevada Medicaid Administration
P.O.Box 30042
Reno, NV 89520-3042

Current Procedural Terminology (CPT) and Current Dental Terminology (CDT) codes, descriptions and data are copyrighted by the American Medical Association (AMA) and the American Dental Association (ADA), respectively, all rights reserved. AMA and ADA assume no liability for data contained or not contained on this website and on documents posted herein.

CPT is a registered trademark ® of the AMA. CDT is a registered trademark ® of the ADA. Applicable FARS/DFARS apply.

R5.0 - © 2018 DXC Technology Company. All rights reserved.

The Nevada Division of Health Care Financing adheres to all applicable privacy policies and standards, including HIPAA rules and regulations, regarding protected health information. Click here to see the State of [Nevada Online Privacy Policy](#)



Electronic Verification System (EVS)



Nevada Department of Health and Human Services
Division of Health Care Financing and Policy Provider Portal

[Contact Us](#) | [Logout](#)

My Home | [Eligibility](#) | [Claims](#) | [Care Management](#) | [File Exchange](#) | [Resources](#)

[My Home](#) > Revalidate-Update Provider Saturday 08/18/2018 11:32 AM PST

Provider Locations ?

Duplicate providers may appear in the results since a unique row is created for each specialty. Total Records: 1

Provider Name	Provider Type	Address	City	State	Zip Code	Action
	DME, Disposable, Prosthetics			NEVADA		Revalidate Provider OR Update Provider

Current Procedural Terminology (CPT) and Current Dental Terminology (CDT) codes, descriptions and data are copyrighted by the American Medical Association (AMA) and the American Dental Association (ADA), respectively, all rights reserved. AMA and ADA assume no liability for data contained or not contained on this website and on documents posted herein.

CPT is a registered trademark ® of the AMA. CDT is a registered trademark ® of the ADA. Applicable FARS/DFARS apply.

R5.0 - © 2018 DXC Technology Company. All rights reserved.

The Nevada Division of Health Care Financing adheres to all applicable privacy policies and standards, including HIPAA rules and regulations, regarding protected health information. Click here to see the State of [Nevada Online Privacy Policy](#)



Online Provider Enrollment

Attention

You are now leaving the Nevada Medicaid portal web site. The link

[Proceed](#)

[Cancel](#)



Nevada Department of Health and Human Services
Division of Health Care Financing and Policy Provider Portal



[Contact Us](#)
[Frequently Asked Questions](#)

Provider Enrollment

[Provider Enrollment](#) > Provider Enrollment Application Saturday 08/18/2018 10:23 AM PST

Provider Enrollment: Welcome

Welcome	Welcome to the Online Provider Enrollment System
Request Information	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. Hereafter, DXC Technology is referred to as Nevada Medicaid.
Specialties	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 Booklet for additional information.
Addresses	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.
Provider Identification	
Other Information	
Ownership & Disclosure	
Agreement	
Attachments	
Summary	

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
<https://www.medicaid.nv.gov/hcp/provider/Resources/SearchProviders/tabid/220/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.

[Continue](#) [Cancel](#)

R4.2 © 2018 DXC Technology Company. All rights reserved | [Nevada Online Privacy Policy](#)



QUESTIONS?

Brian Sandoval
Governor



Marta Jensen
Administrator
Division of Health Care Financing and
Policy

DHCFP – PROGRAM INTEGRITY

Surveillance and Utilization Review (SUR) Unit



SURVEILLANCE AND UTILIZATION REVIEW (SUR) UNIT

WE IDENTIFY, RECOVER AND PREVENT FRAUD, WASTE, ABUSE, AND IMPROPER PAYMENTS IN NEVADA MEDICAID SYSTEM.

- We refer all credible allegations of fraud to the Medicaid Fraud Control Unit (MFCU).



SURVEILLANCE AND UTILIZATION REVIEW (SUR) UNIT

- **WASTE** - unnecessary or inefficient services, possibly including the following
 - Prescribing a wheelchair to a recipient who is ambulatory
 - Scheduling ongoing therapy sessions when progress is unattainable
 - Duplicating diagnostic testing unsupported by physician orders



SURVEILLANCE AND UTILIZATION REVIEW (SUR) UNIT

- **ABUSE** - failure to bill according to policy guidelines, possibly including instances of
 - Submitting claims that do not accurately reflect the services provided
 - Submitting claims that do not adhere to policy, professional standards, or coding guidelines found in ICD-10, CPT, HCPCS Level II



SURVEILLANCE AND UTILIZATION REVIEW (SUR) UNIT

IMPROPER PAYMENTS

In addition to looking for [fraud, waste and abuse](#), we look for improper payments. [Improper payments](#) include overpayments due to errors in provider billing or payer claim processing.



SURVEILLANCE AND UTILIZATION REVIEW (SUR) UNIT

EXAMPLES OF CASE REFERRAL SOURCES

- Complaints / Referrals (including provider self-referrals)
- Onsite Visits
- Verification of Service Letters
 - ✓ Fiscal Agent sends 500 per month to recipients, similar to EOB
 - ✓ SUR sends on an ad hoc basis to recipients and service providers
- Data Mining and Analysis of Paid Claims
- Information Shared by other States and CMS



SURVEILLANCE AND UTILIZATION REVIEW (SUR) UNIT

EXAMPLES OF CORRESPONDING ACTIONS

- Educate on policy violations
- Request a provider conduct self-audit
- Recoup overpayments of paid claims
- Request suspension of payments
- Request termination of provider contract/exclusion



SURVEILLANCE AND UTILIZATION REVIEW (SUR) UNIT

With so many insurance payers, it is easy for good providers to overlook or misunderstand billing details. This could lead to unintentional errors.

What can you do to minimize improper billing and overpayments?

Some things to focus on



SURVEILLANCE AND UTILIZATION REVIEW (SUR) UNIT

- Know Medicaid Services Manual Policy

dhcfp.nv.gov/Resources/AdminSupport/Manuals/MSM/MSMHome/

- ✓ All providers

Chapter 100	Medicaid Program
Chapter 3100	Hearings
Chapter 3300	Program Integrity
Addendum	Definitions

- ✓ Specific Provider Types

All other Chapters 200 - 3900



SURVEILLANCE AND UTILIZATION REVIEW (SUR) UNIT

- Access the Provider Portal – often! Resources include items below:

www.medicaid.nv.gov/home.aspx

- ✓ Billing Information Broken down by Provider Type
- ✓ Web Announcements Breaking news and important information
- ✓ Application and Forms Prior authorization, provider contract, appeals, provider information changes and much more



SURVEILLANCE AND UTILIZATION REVIEW (SUR) UNIT

➤ Understand and comply with:

- ✓ Medical Coding Rules Including ICD-10, CPT, HCPCS Level II
- ✓ Service Documentation Requirements Guidelines can vary by service, provider type
- ✓ Prior Authorization Limits Guidelines will vary by service, provider type



SURVEILLANCE AND UTILIZATION REVIEW (SUR) UNIT

➤ Bring your billing questions to:

✓ Nevada Medicaid Fiscal Agent

877-638-3472, Option 2

➤ If further clarification is needed:

✓ DHCFP Provider Type Policy Specialist

775-684-3676, Option 0



SURVEILLANCE AND UTILIZATION REVIEW (SUR) UNIT

- Report provider fraud, waste, abuse, and improper payments

- ✓ **NPI** (Nevada Program Integrity) 775-687-8405

- ✓ **Online Form**

dhcftp.nv.gov/Resources/PI/ContactSURSUnit/



SURVEILLANCE AND UTILIZATION REVIEW (SUR) UNIT

QUESTIONS?