



February 15, 2012

Announcement 450

New Requirements for Provider Re-Enrollment

Beginning June 1, 2012, providers will be required to re-enroll in Nevada Medicaid and Nevada Check Up once every 36 months. Providers are invited to attend a Division of Health Care Financing and Policy (DHCFP) Public Workshop scheduled for March 2, 2012, to obtain details and to comment on the new requirement.

Please review the DHCFP's [Public Notices](#) webpage for the times, locations and Agenda for the Public Workshop.

The re-enrollment process will be performed in phases starting June 1, 2012, so that not all providers have to re-enroll at the same time. A re-enrollment letter will be sent to providers 60 days prior to the provider's enrollment end date. Providers will receive a reminder letter 20 days before their enrollment deadline. Please be sure your address information on file with HP Enterprise Services is current so that your notification is mailed to the correct address. Use the Provider Information Change Form ([FA-33](#)) to report changes.

When you receive the letter, please re-enroll by completing the [Provider Enrollment Application and Contract](#) and [Enrollment Checklist](#) required for your provider type. Be sure to check the re-enrollment checkbox at the top of the application.

Providers who do not re-enroll once every 36 months will have their provider contract terminated. The result of the termination is that no payment will be made to the provider for dates of service after the effective date of the termination.

Please review the [Provider Re-Enrollment Frequently Asked Questions \(FAQs\)](#) on the Provider Enrollment webpage for additional information.