

New Hampshire Medicaid to Schools Medicaid Enrollment Guide for Local Education Agencies (LEAs) and School- Based Providers



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Introduction

The purpose of this guide is to outline the enrollment steps that schools and school-based providers must take in order to bill Medicaid for school-based services. This guide assumes that there is already buy-in from both the superintendent and school board to begin billing Medicaid.

Section 1 will review the enrollment process for local education agencies (LEAs). It is a NH Medicaid requirement for local education agencies and/or school administrative units (SAUs) to enroll in NH Medicaid. LEAs and SAUs that are enrolled and have agreed to participate in NH Medicaid are referred to as “enrolled school providers”¹.

Section 2 will review the enrollment process for school-based providers. It is a NH Medicaid requirement for school-based ordering, rendering, and prescribing (ORP) providers to enroll in NH Medicaid. ORP providers include physicians, advanced practice registered nurses (APRNs), physician assistants, or other licensed practitioners practicing within their scope of board licensure. School-based providers that are enrolled and have agreed to participate in NH Medicaid are referred to as “enrolled school based providers”².

Section 3 will review the school-based provider revalidation process. Provider revalidation requires providers to confirm/update the information contained in their original Medicaid application. Revalidation is done every 5 years from date of enrollment.

More information about the Medicaid to Schools program can be found in the Medicaid to Schools administrative rule, N.H. Code Admin. R. He-W 589³.

Section 1: LEA Enrollment

Step 1: Apply for a National Provider Identification (NPI)

- Go to <https://nppes.cms.hhs.gov/#/> to apply for a NPI number.
- Instructions can be found here:
https://nppes.cms.hhs.gov/assets/How_to_apply_for_an_NPI_online.pdf
- You will first need to create a user account and then you'll be able to complete the application for an organizational NPI.

¹ [N.H. Code Admin. R. He-W 589.02 \(h\)](#)

² [N.H. Code Admin. R. He-W 589.02 \(h\)](#)

³ [N.H. Code Admin. R. He-W 589](#)

- You will need your superintendent's social security number for this application.

My superintendent does not want to provide a social security number with the Medicaid enrollment package. Are schools required to submit the superintendent's social security number on the provider application?

Yes, disclosure of a school superintendent's social security number is required for enrolling in the Medicaid program because superintendents fall under the definition of a 'managing employee', which is a type of employee that federal law mandatorily requires social security number submission as part of Medicaid enrollment.

Federal law states that "the Medicaid agency must require that disclosing entities, fiscal agents, and managed care entities provide the following disclosures: The name, address, date of birth, and Social Security Number of any managing employee of the disclosing entity (or fiscal agent or managed care entity)." 42 CFR 455.104. A 'managing employee' is defined as "a general manager, business manager, administrator, director, or other individual who exercises operational or managerial control over, or who directly or indirectly conducts the day-to-day operation of an institution, organization, or agency." 42 CFR 455.101 The superintendent of a school district certainly falls into the definition of an administrator of an entity (school provider) that receives Medicaid funds.

The Department will collaborate with the NH School Administrators Association, the NH Association of School Principals, and the NH Department of Education to help support the understanding of this requirement to provide a superintendent's social security number as part of Medicaid enrollment.

Source: SFY 2020-06; January 2020; Billing and policy guidance document, also available in the [Medicaid to Schools Technical Assistance Guide](#) Version 1.2, page 64, question #2

Step 2: Enroll in Medicaid

- Submit enrollment application on the Medicaid Management Information System (MMIS) portal. This portal is managed by Conduent, a vendor for NH Medicaid. Schools should apply as a Group Provider.
 - [Instructions](#)
 - [Medicaid presentation on enrollment](#)
 - Documentation needed to apply
 - Provider Participation Agreement (PPA; rev March 2020) signed and dated
 - Signature Page signed and dated
 - Copy of NPI Verification Page
 - Signed W9 with Tax ID/FEIN
 - IRS Tax ID/FEIN verification – ex: correspondence with IRS seal on it ([NH Medicaid Documents to Upload with Application](#))
 - Completed applications should list the managing employee for the school (superintendent) and delegate authorized users that can access the MMIS if needed with changes. A 'managing employee' is defined as "a general manager, business manager, administrator, director, or other individual who exercises operational or managerial control over, or who directly or indirectly conducts the day-to-day operation of an institution,

organization, or agency.”⁴ The superintendent of a school district certainly falls into the definition of an administrator of an entity (school provider) that receives Medicaid funds. ([TA Guide](#) page 66).

Step 3: Decide who will be billing on your LEA’s behalf

- Before deciding how you will bill, it is important to understand some key definitions and requirements. Here are some provided by NH Medicaid ([Medicaid presentation on enrollment](#))
 - A **trading partner** is any entity or software that is exchanging data electronically with NH Medicaid.
 - **Self-billing** means the LEA is submitting their own claims directly to Medicaid through the MMIS portal.
 - If the LEA is self-billing, a training session with the MMIS vendor (Conduent) is available.
 - If the LEA is using a software system to send claims to MMIS, it will need to submit a [trading partner application](#) for that entity (termed a “self” trading partner application).
 - **Group billing** means that the LEA is billing with other LEAs within a SAU.
 - To bill in this format, a LEA will need: a [group provider application](#), a [trading partner application](#), billing agent agreement with each school, list of affiliations with Medicaid Provider ID numbers of all schools, and [835 applications](#) (optional). The 835 or the Electronic Remittance Advice (ERA) is the electronic transaction that provides claim payment information.
 - **Third Party Billing** means that the LEA pays a company to submit claims and bill on their behalf. Typically, these company are paid 4-11% of their Medicaid revenue. To bill in this format, the LEA will need: a [trading partner application](#), billing agent agreement, sign or agreement, and billing agent authorization for each school. Application needs to list all services sites by Medicaid ID number.

Things to consider when deciding how to bill

- Input from stakeholders, including other LEAs and third party billers you may be partnering with
- Staff time
- Budget
- Staff capacity

⁴ [42 CFR 455.101](#)

Section 2: School-Based Provider Enrollment

LEA Responsibilities

- Determine which of your providers need to be enrolled in Medicaid and confirm their enrollment. Sources: ([Medicaid presentation on enrollment](#), [TA Guide](#) page 60, School/Provider Enrollment)
- To be covered by Medicaid, an order prescribing the covered service is needed from a physician, advanced practice registered nurse, physician assistant, or other licensed practitioner practicing within their scope of board licensure.
- MMIS users can look up a provider's enrollment status in MMIS using [these instructions](#).
- The schools must keep copies of the appropriate service provider qualifications (copy of licensure or documentation of credentials) on file and for non-enrolled staff to screen monthly on the List of Excluded Individuals and Entities (LEIE)/Office of Inspector General (OIG) exclusion site for any sanctions/exclusions.

Ordering, Referring, or Prescribing Providers' Responsibilities

- All ordering, referring, or prescribing providers must be enrolled in NH Medicaid and all claims billed for services that were either ordered, referred, or prescribed by a particular provider must use their NPI.
- All enrolling providers will undergo a federally mandated comprehensive screening before their application is approved, and the state will complete monthly screening of the school and affiliated professionals.

Section 3: Provider Revalidation

- Provider revalidation requires providers to confirm/update the information contained in their original Medicaid application. Revalidation is done every 5 years from date of enrollment. Revalidation must be completed to ensure that a provider remains enrolled with the Medicaid program. Revalidation must be completed for both the group enrollment and for each individual provider enrollment. Providers will be notified that they must complete revalidation in advance of the date their revalidation is due with notifications at 60 and 30 days prior to the end date for the revalidation due. Once the due date has expired, providers will be notified that their enrollment will be terminated and includes language informing providers to their right to an appeal of the termination decision. Notice will be sent to any Managed Care Organizations (MCOs) that the provider is enrolled with as well. Providers terminated for failing to revalidate will need to complete a new enrollment application. Notices will go to the provider address on file in the MMIS. ([General Billing Manual](#), 4.46, page 11)

- The provider revalidation application is available exclusively online in the provider's MMIS portal account. When it is time to revalidate your enrollment as a provider, you will receive a revalidation notification letter in the mail. Providers will log in to the NH MMIS provider portal and click the revalidation link. The system will guide you through the revalidation process. ([NH Medicaid Provider Relations page](#))
- Federally mandated screening of NPI verification, LEIE/OIG, licensure, or certifications are done by the state at time of enrollment, during revalidation and every month at the state level of enrolled licensed providers.
- For questions about a specific revalidation, please contact Conduent using [this guide](#) for reference.
- For other FAQs regarding revalidation please see the [NH Medicaid Provider Relations page](#) (scroll to bottom).

Is there a way to send Conduent a list of providers to have validated as active NH Medicaid in one form, rather than having to look up each provider individually in the provider search? Some schools have several physicians they need to verify are enrolled to make sure they can order school services.

Yes, the schools can send a list to Conduent and Conduent will send the list back indicating if the provider is active or not with NH Medicaid. Conduent cannot give Medicaid provider IDs or any other provider information. The list must be in excel and must include provider name and NPI. If you have a NH Medicaid ID, then please add that to the excel list. NH Medicaid ID is not required for the look up. Please e-mail the spreadsheet to NHproviderrelations@conduent.com. Ensure you state that this is for a Medicaid to School provider. Conduent will return the list noting if the person is currently active with NH Medicaid.

Source: [Medicaid to Schools Technical Assistance Guide](#) Version 1.2, page 66, question #9)