How to Start Billing Medicaid for School Health Services (SHS) Onboarding Guide

Onboarding Overview (see additional pages for more details on each step):

NPI
- Step 1: Obtain an National Provider Identifier (NPI) number for your school district

DHCFP
- Step 2: Send an e-mail to the Division of Health Care Financing and Policy (DHCFP) to let us know your school district is interested in billing

Online Enrollment
- Step 3: Complete online enrollment into the Online Portal at www.medicaid.nv.gov

Billing
- Step 4: Decide if you will have a billing agent (Trading Partner) or bill independently

Projections
- Step 5: Provide cost projections for Intergovernmental Contract

NV Pro
- Step 6: Register in NevadaEpro

Training
- Step 7: Train staff

Approval
- Step 8: Wait for DHCFP approval to start billing

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## Before You Start - An Overview of Billing Nevada Medicaid for SHS

Local Education Agencies (LEAs) and State Education Agencies (SEAs) can bill Medicaid for all services listed in the Medicaid Services Manual (MSM) Chapter 2800 School Health Services (SHS). To be eligible to bill these services, LEAs/SEAs must enroll with Medicaid as a Provider Type (PT) 60 and have a contract with the DHCFP to bill for school service (s). This onboarding guide will walk you through the steps in that process, but there are a few things you should know about Medicaid billing before you start the steps to enrollment.

LEAs/SEAs bill Medicaid by a different fiscal model than other providers. The model that LEAs/SEAS use is called Intergovernmental Transfers (IGTs). IGTs are a transfer of funds from a governmental entity (e.g., county, city, or another state agency) to the state Medicaid agency.

The federal government, the Centers for Medicare and Medicaid Services (CMS), pays between 50-83% of all costs incurred by states for covered services on behalf of Medicaid beneficiaries. This is referred to as the federal share or the Federal Medical Assistance Percentage (FMAP). The FMAP is computed from a formula that takes into account the average per capita income for each state relative to the national average. The current FMAP for Nevada can be found at www.kff.org/medicaid/state-indicator/federal-matching-rate-and-multiplier/. The difference between the total costs incurred and the federal share is referred to as the state share. States may use state general revenue, local contributions, and provider taxes to comprise the state share.

In the IGT process, LEAs/SEAs transfer the state share of billed claims to Medicaid/DHCFP so that the DHCFP can collect the federal share from CMS. All the funds (both state and federal) are then transferred back to the LEA/SEA. See the diagram on the next page. Since IGTs require LEAs/SEAs to advance the state share, it is important that the LEA's/SEA's administrative and fiscal staff are involved in the discussions on deciding to bill Medicaid early in the process.
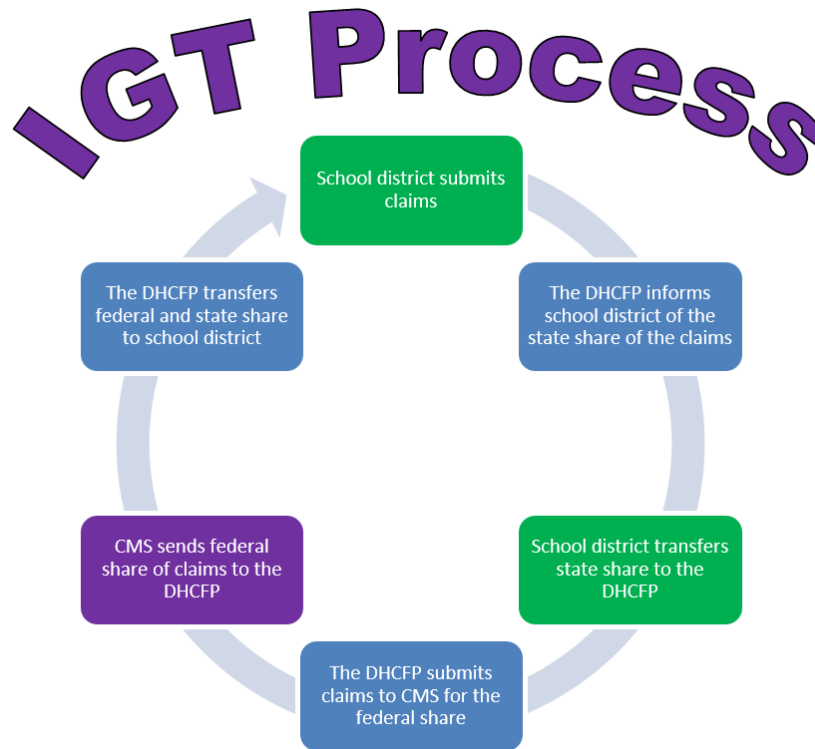
Another difference in LEAs/SEAs billing Medicaid is that SHS PT 60 are a Managed Care Organization (MCO) carve out. All SHS are billed as Fee-for-Service (FFS) Medicaid. This is a much easier process for schools as it has the following advantages:

- You only need to enroll with Nevada Medicaid, not each MCO
- Only one set of rules/processes to follow
- You don't need to identify what type of Medicaid a student has, just that they have Medicaid

Step 1: Obtaining a National Provider Identifier (NPI)

The NPI is a 10-digit numeric identifier that must be used on claims forms submitted to Medicaid by individual and organization health care providers who meet the definition of a "covered entity" under the Health Insurance Portability and Accountability Act (HIPAA). LEAs/SEAs who are billing for medical services meet the definition of a "covered entity." The LEA/SEA does not need to obtain a NPI for each medical professional providing services, but a NPI for the LEA/SEA that the medical professionals will be billed under. As such, LEAs/SEAs will enroll as Entity Type 2: Organization Health Care Providers.

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There are three ways to apply for a NPI:

Option 1: Apply through a web-based application process. Visit the National Plan and Provider Enumeration System (NPPES) at https://nppes.cms.hhs.gov/NPPES/Welcome.do on the CMS website.

Option 2: Complete, sign, and mail a paper application to the NPI Enumerator address listed on the Form CMS-10114. A copy of the application Form CMS-10114, "NPI Application/Update Form" can be obtained at https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/Downloads/CMS10114.pdf on the CMS website. You can also request a hard copy application by calling 1-800-465-3203 or TTY 1-800-692-2326, or sending an email to customerservice@npienumerator.com.

Option 3: Give permission to an Electronic File Interchange Organization (EFIO) to submit application data through bulk enumeration process. For more information on this option refer to https://www.cms.gov/Regulations-and-Guidance/Administrative-Simplification/NationalProvidentStand/apply.html.

For additional information please see the *NPI Application/Update Form CMS-10114* and the *NPI What You Need To Know* guide that will be included as attachments to this guide.

Step 2: Contacting the DHCFP

Even if you believe that the DHCFP is aware of your interest in billing Medicaid, it is important to keep the DHCFP up to date on your LEA's/SEA's status as it moves through the process of onboarding. This can be done simply by e-mailing the schoolhealthservices@dhcfp.nv.gov. Remember the more you communicate with the DHCFP the more the DHCFP can assist you with the process and help you overcome any roadblocks you may experience. Additionally, the DHCFP has steps that need to be completed by the DHCFP prior to a new LEA/SEA being able to bill. The earlier that the DHCFP is able to start working on these steps the less likely the process will be delayed.

The DHCFP recommends that LEA/SEA reach out to other LEAs/SEAs that are already billing to learn what additional (not Medicaid required) steps are needed to be ready to bill. The DHCFP is able to provide contact information or coordinate meetings with billing LEAs/SEAs.

*Steps 1 and 2 must be completed to move to Step 3

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Step 3: Complete Online Enrollment

- Once you have a NPI you can enroll as a provider on the Nevada Medicaid Online Portal. The website for the Online Portal is https://www.medicaid.nv.gov/hcp42/provider/Home/tabid/477/Default.aspx. LEAs/SEAs districts register as a PT 60-SHS.
- The Nevada Medicaid website has many resources to help you through the process. The *Provider Enrollment Information Booklet* https://www.medicaid.nv.gov/Downloads/provider/NV_Provider_Enrollment_Information_Booklet.pdf provides an overview of the process.
- *Provider Enrollment Checklist for Provider Type 60* https://www.medicaid.nv.gov/Downloads/provider/NV_EnrollmentChecklist_PT60.pdf provides a list of the information you will need to complete the enrollment process.
- The Nevada Medicaid website also has specific guides to walk you through the screens of the online enrollment, which can be found at https://www.medicaid.nv.gov/providers/enroll.aspx under Online Provider Enrollment User Manual.

Step 4: Billing Agents/Independent Billing (aka Trading Partner)

LEAs/SEAs may choose to submit their own claims or to contract with a billing agent/trading partner. A billing agent/trading partner is an entity that offers claims submission services for providers. There are billing agents/trading partners that specialize specifically in school medical billing. MSM Chapter 100, Section 105 provides the DHCFP's policy on billing agents - http://dhcfp.nv.gov/Resources/AdminSupport/Manuals/MSM/C100/Chapter100/. There are pros and cons to outsourcing your medical billing to a billing agent/trading partner, as such each LEA/SEA must decide what will work best for them.

Currently, all enrolled LEAs are using billing agents/trading partners. There are two different companies operating in Nevada with the school districts:

Frontline - www.frontlineeducation.com, and
Public Consulting Group (PCG) - www.publicconsultinggroup.com.

This does not mean that other companies could not be used. LEAs/SEAs can bill independently or choose any billing agent.

Step 5: Cost Projections/Contract

The LEA/SEA will need to provide the DHCFP with a four-year cost projection for the DHCFP to start the intergovernmental contract. The cost projection will be developed taking into consideration two main factors including:

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- How many students are receiving medical services from the LEA/SEA,
- and
- What percentage of students in the LEA/SEA are Medicaid beneficiaries?

LEAs/SEAs should create their projections based on their highest estimate of what might be billed as there are added steps that need to occur if the contract is not made with enough budget authority (money) and claims billed to Medicaid exceed the contract amount. If the LEA/SEA has chosen to use a billing agent, they might be able to assist in creating the projections.

Once the DHCFP has received projections from the LEA/SEA, the DHCFP and the LEA/SEA will work collaboratively to draft the intergovernmental contract. The DHCFP will send the contract over to the LEA/SEA to sign (please see example contract included with this guide). Once the LEA/SEA sends over the signed contract, the DHCFP will route it for the remaining signatures. This process can take several months as it needs to go to the State Board of Examiners (BOE) meeting and several other locations for budget authority and approval.

Step 6: Register in Nevada EPro

This is the newest step in the process. Each LEA/SEA will need to register in the State of Nevada's electronic procurement system known as NevadaEPro. To register go to https://nevadaepro.com and click the blue register button. It will ask some questions that do not apply to LEAs/SEAs, if it is not a mandatory question you can leave it blank if it does not apply. If you need assistance with the registration process you can e-mail nevadaepro@admin.nv.gov or contact the Purchasing Division at (775) 684-0170.

Step 7: Training

It will be important to understand what services are covered by Nevada Medicaid and what services are not covered. This information can be found in the MSM Chapter 2800 SHS. To find the most current version of the SHS policy go to http://dhcfp.nv.gov/Resources/AdminSupport/Manuals/MSM/MSMHome/ and select the link for 2800 School Health Services.

Once you understand the policy the *Provider Type 60 Billing Guide* which can be found at https://www.medicaid.nv.gov/Downloads/provider/NV_BillingGuidelines_PT60.pdf will help you prepare your staff to start billing for allowable services. The guide includes a lot of information including, billing codes, modifiers, unit specifications, and service limitations.

SHS are an MCO carve out, which means that LEAs/SEAs bill FFS for all services provided. Those services are paid at the community rates. These rates can be found at http://dhcfp.nv.gov/Resources/Rates/FeeSchedules/ under Provider Type 60 School Based.

Step 8: Approval to Start Billing

The final step is very important. You must wait for official word from the DHCFP that you are ready to start billing. If you start billing prior to the DHCFP's approval, it could cause system issues with your claims and make the process much lengthier.

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Acronyms:

BOE	Board of Examiners
CMS	Centers for Medicare and Medicaid Services
DHCFP	Division of Health Care Financing and Policy
EFIO	Electronic File Interchange Organization
FFS	Fee-for-Service
FMAP	Federal Medical Assistance Percentage
HIPAA	Health Insurance Portability and Accountability Act
IGT	Intergovernmental Transfers
MCO	Managed Care Organization
MSM	Medicaid Services Manual
NPI	National Provider Identifier
NPPES	National Plan and Provider Enumeration System
PCG	Public Consulting Group
PT	Provider Type
SHS	School Health Services

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