

Purpose

This document is to assist carceral facilities in determining if they need to enroll in Medicaid and what Medicaid enrollment options best fit the facility's service delivery model.

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Step 1: Determine Who is Providing Care

Who is providing care to individuals in the facility determines the Medicaid enrollment type the facility will need to complete, if any. Facilities may operationalize multiple different models and should consider the Medicaid enrollment needed for each (outlined in **Figure 2**).

There are three major models for who is providing care in a facility:

Facility Provider

Facility employs providers directly. The facility providers provide Reentry services.

The facility bills Medicaid on their behalf.

Contracted Healthcare Provider

Facility contracts with a Healthcare Vendor. The Healthcare Vendor employs the providers providing the Reentry services. In this model, the facility *or* the Healthcare Vendor may decide to bill Medicaid for services.

Community Provider

Facility partners with
Community Providers. The
Community Providers provide
the Reentry services. The
Community Providers are not
employed by the facility. The
Community Providers bill
Medicaid directly.

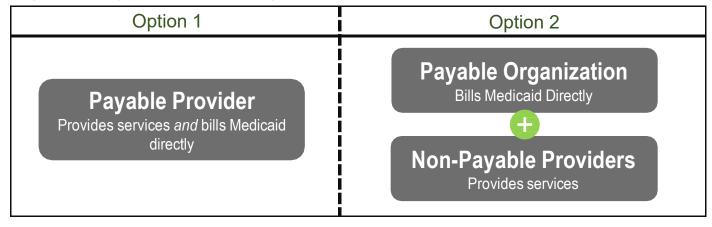
Step 2: Determine Who is Billing Medicaid

There are two Medicaid Enrollment options that are determined by who will be providing care and who will be doing billing - **Figure 1** below.

- Option 1: Payable Provider provides the services and bills Medicaid directly.
- Option 2: Payable Organizations bill Medicaid directly on behalf of employed or contracted Non-Payable Providers who deliver services.

Use **Figure 2** on the next page to determine payable vs non-payable enrollment types based on who is providing care (Step 1) and who is billing Medicaid (Step 2).

Figure 1: Payable and Non-Payable Medicaid Enrollment



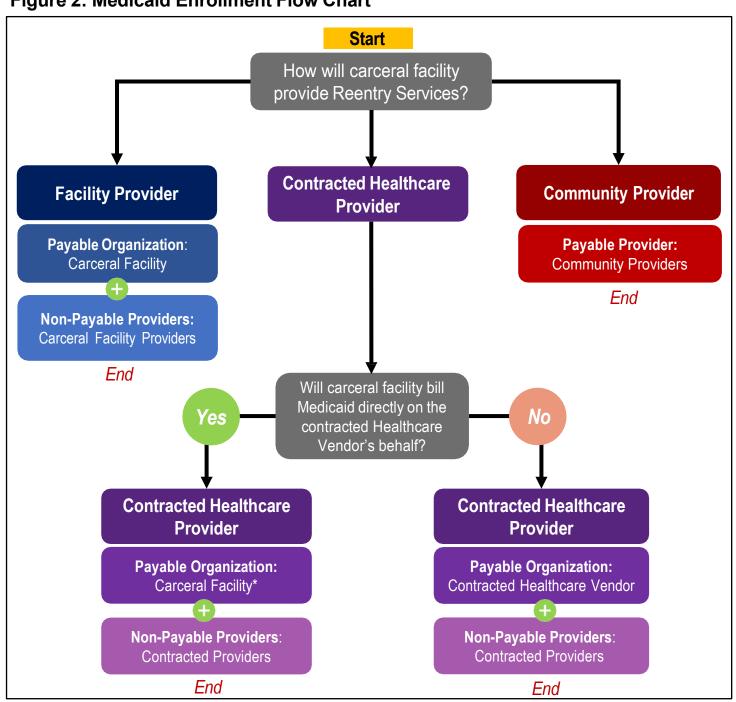


Step 3: Determine What Type of Medicaid Enrollment is Needed

The figure below demonstrates the appropriate Medicaid enrollment based on who is providing care (Step 1) and who is billing Medicaid (Step 2). If the facility uses a combination of different models, they should consider the Medicaid enrollment required for each. The scenarios on the left require the facility to enroll in Medicaid, the scenarios on the right do not require the facility to enroll in Medicaid.

Note: If a third-party administrator or someone else prepares and submits claims on the facility's behalf, the facility still enrolls as the Payable Organization (see <u>Common Scenarios Explained Section</u>).

Figure 2: Medicaid Enrollment Flow Chart



^{*}Carceral facilities that decide to bill on behalf of contracted organizations are encouraged to contact OHA Provider Services as that configuration is more complex and requires additional steps.



Step 4: Identify Required Forms

Listed and linked below are the forms required to enroll in Medicaid as a Payable Organization and a Non-Payable Provider. If facilities partner with only Payable Providers, they do not need to enroll in Medicaid.

Medicaid Enrollment	Required Forms
Payable Organization	OHA 3972, OHA 3974, OHA 3975
Non-Payable Provider	OHP 3113, OHA 3975

Step 5: Prepare to Complete Medicaid Enrollment Forms

Medicaid enrollment applicants will need the following information ready:

- Provider NPI or Organization NPI (National Provider Identifier)
 - If the provider or organization does not have an NPI, complete this prior to completing the Medicaid Enrollment forms and reference the NPPES website for step-by-step instructions.
 - Contact OHP.CarceralPrograms@oha.Oregon.gov for assistance.
- Provider License information (also needed to apply for NPI)
- Organization Tax ID
- Reference the <u>Enrollable Provider Types and Specialties excel sheet</u> available on the <u>OHP</u>
 <u>Provider Enrollment Website</u> to determine the Provider Type Codes that will be entered on
 Payable Organization and Non-Payable Provider forms.
 - Please use Provider Type 09 for Payable Organization forms and contact Provider Enrollment <u>Provider.Enrollment@odhsoha.Oregon.gov</u> for additional questions and technical assistance.
- Reference the <u>Step-by-Step Guide</u> for completing the online Medicaid Enrollment submission
 on the <u>OHP Provider Enrollment Website</u> the guide points out which sections can be skipped or
 disregarded and highlights steps specific to organizations and individual providers.

Facilities and providers only need to enroll to bill Fee-for-Service, commonly referred to as 'Open Card' for Reentry services. Facilities and providers <u>do not</u> need to credential with CCOs for the Reentry benefit.



Step 6: Submit Medicaid Enrollment Forms

When possible, submission should be completed through the Online Web Portal.

- Step-by-Step Guide for online submission.
- **Note:** Forms identified in Step 3 will need to be completed, saved as one of the allowable formats (PDF, TXT, or TIFF), and submitted as attachments with the electronic submission.

If needed, OHA can accept forms via fax.

- Fax your application to 503-378-3074. OHA can only accept requests that are under an <u>EDMS</u> (<u>Electronic Document Management System</u>) coversheet with the "Provider Enrollment" box marked at the top of the coversheet.
- If you fax without an EDMS coversheet, or the "Provider Enrollment" box is unchecked on the coversheet, Provider Enrollment will not receive those requests. **To ensure receipt of faxed requests, contact Provider Enrollment at least 48 hours after faxing.**
 - Provider Enrollment Phone: 800-336-6016
 - Provider Enrollment Email: Provider.Enrollment@dhsoha.Oregon.gov

For additional information and resources visit the OHP Provider Enrollment Website.

Step 7: After Submitting Medicaid Enrollment Forms

- Applicants will receive an Application Tracking Number (ATN) that can be used to check enrollment status on the online <u>Enrollment Tracking Portal</u>.
- OHA will review, validate licensing and certification, and enroll the provider unless additional information is needed.
- Once enrolled, the provider or organization will receive a Welcome Letter.



Common Scenarios Explained

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Scenario	Medicaid Enrollment Type	Key Takeaways	
An individual provider (i.e., case manager) is employed by a carceral facility and delivers care for a Medicaid member within that facility. The facility submits a request for reimbursement to Medicaid.	Payable Organization + Non-Payable Provider	The facility is a Payable Organization and bills on behalf of their employed Non-Payable provider – in this example, the case manager. Note: a Non-Payable provider will always need a Payable Organization to bill on their behalf.	
A carceral facility uses both employed providers and community providers for service delivery.	Facility Provider Payable Organization + Non-Payable Provider Community Provider Payable Provider	The facility is a Payable Organization and bills on behalf of their employed Non-Payable providers. The community providers are Payable Providers and bill Medicaid directly for the services they provide. Note: This is an example of a combination of multiple Medicaid Enrollment Types.	
A contracted Healthcare Vendor employs providers who deliver services within a carceral facility. The vendor submits their own request for reimbursement to Medicaid through a third-party billing administrator.	Payable Organization + Non-payable Provider	The Healthcare Vendor is the Payable Organization, and the vendor providers are Non-Payable providers. Even with the vendor using a third-party for preparing and submitting claims, the Healthcare Vendor is still the Payable Organization. Note: in this scenario, the carceral facility is not involved in billing and does not need to enroll in Medicaid.	
An independent provider (i.e., psychiatrist) may work at a local Community Health Center and provide care to a Medicaid member within the facility but is not employed by that facility. After delivering care, the provider submits a request for reimbursement to Medicaid directly.	Payable Provider	This is an example of a Community Provider Model where the provider is not employed by the facility and bills Medicaid directly. Note: In this scenario, the carceral facility is not involved in billing and does not need to enroll in Medicaid.	



Appendix

Resources found on the OHP Provider Enrollment Website

Link: https://www.oregon.gov/oha/hsd/ohp/pages/provider-enroll.aspx

- Online tool to check if a provider is already enrolled in OHP
- Step-by-Step Provider Enrollment Submission Guide
- Enrollable Provider Types and Specialties Excel Spreadsheet that lists Provider Type Codes and Specialty Type Codes
- Form Library, including:
 - Form 3113
 - Form 3972
 - Form 3974
 - Form 3975
 - EDMS Fax Cover Sheet
- Online Provider Enrollment Submission portal
- Online Enrollment Tracking portal to track Medicaid Enrollment submission status by ATN

Reentry Health Care Website

Link: https://www.oregon.gov/oha/HSD/Medicaid-Policy/Pages/Reentry-Info.aspx

Glossary

ATN – Application Tracking Number

Issued after completing the Medicaid Enrollment submission online to track application status.

CCO – Coordinated Care Organization

The health plans that manage and coordinate OHP member's care across the state.

FFS - Fee-for-Service

· Often referred to as 'Open Card'

NPI – National Provider Identifier

• Unique 10-digit numeric identifier issued by the Centers for Medicare and Medicaid Services (CMS) to identify providers and organizations delivering and billing for health care services.

OHP - Oregon Health Plan

- Oregon's Medicaid plan, Medicaid providers are often referred to as "OHP Providers".
- The Reentry Health Care benefit is a program within OHP.

Who to Contact

If you have provider or billing questions not answered in this document, please reference our 'Billing for Reentry Health Care Services Guide' and consult the relevant resources listed below.

Contact Provider Enrollment for questions or support on the provider enrollment process. Provider Enrollment can assist with filling out the Medicaid Enrollment forms, confirming provider type to select on Medicaid Enrollment forms, assistance with submission, and general questions.

• Phone: 800-336-6016

- Email: Provider.Enrollment@dhsoha.Oregon.gov
- For additional resources and the most up-to-date information please visit OHA's website on OHP
 Provider Enrollment.

Contact Provider Services for information and assistance with complex billing needs. Provider Services can assist facilities that decide to bill services on behalf of a contracted Healthcare Vendor - an option that may require additional steps to configure.

• Phone: 800-336-6016

• Email: <u>DMAP.ProviderServices@odhsoha.oregon.gov</u>

To request technical assistance or more information about the Reentry Health Care Program please email OHP.CarceralPrograms@oha.Oregon.gov

For more information on the Reentry Health Care Program please visit the OHA webpage: Reentry Health Care

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact Chelsea Egbert at chelsea.egbert@oha.oregon.gov or 503-945-5772 (voice and text). We accept all relay calls.

