

# Massachusetts Health Care Training Forum

July 2012



# Agenda

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- I. Introduction**
- II. Application Fee**
- III. Site Visits**
- IV. Revalidation**

# Medicaid Program Integrity Provisions

2010/2011

- 6401 - Enhanced provider screening and enrollment requirements.
  - Final Rule published on 2/2/11, **subregulatory guidance sent to states on 12/23/11**
  - Providers divided into three categories. Limited risk, moderate risk and high risk.
  - Limited risk screening – verify provider complies with applicable federal and state requirements, verify licenses, and conduct database checks [**we currently do these activities**]
  - Moderate risk screening – limited risk activities and unannounced site visits [**goal is to begin site visits in the fall of 2012**]
  - High risk screening – limited and moderate risk activities and criminal background checks and fingerprinting (last two on hold until CMS releases guidance)

# Medicaid Program Integrity Provisions

## Limited Risk Providers

- Providers or suppliers that are publicly traded on the NYSE or NASDAQ
- Physician or non-physician practitioners and medical groups or clinics
- Ambulatory surgical centers
- End-stage renal disease facilities
- Federally qualified health centers
- Histocompatibility laboratories
- Hospitals, including critical access hospitals
- Indian Health Service facilities
- Mammography screening centers
- Organ procurement organizations
- Mass immunization roster billers
- Portable x-ray supplier
- Religious non-medical health care institutions
- Rural health clinics, radiation therapy centers
- Public or government owned or affiliated ambulance services suppliers
- Skilled nursing facilities

## Moderate Risk Providers \*

- Community mental health centers
- Comprehensive outpatient rehabilitation facilities
- Hospice organizations
- Independent diagnostic testing facilities
- Independent clinical laboratories
- Nongovernment owned or affiliated ambulance services suppliers.
- Currently enrolled (revalidating) home health agencies.
- Currently enrolled (re-validating) suppliers of DMEPOS.

\* All providers or supplies that are publicly traded on the NYSE or NASDAQ are considered “limited” risk.

## High Risk Providers

- Prospective (newly enrolling) home health agencies and suppliers of DMEPOS. (Except that any such provider or supplier that is publicly traded on the NYSE or NASDAQ is considered “limited” risk.)
- “Limited” and “moderate” risk providers are adjusted to “high” risk based on specific criteria, such as, for 6 months after CMS lifts a temporary moratorium on enrolling a particular type of provider

## Provider Screening Requirements, continued

- All referring and ordering providers must be Medicaid providers and NPI must be included on all claims [potential legislative change in response to this requirement]
- Providers must be revalidated every 5 years [goal is to begin revalidation in the fall of 2012]
- Must collect DOB and SSN from all persons with an ownership or control interest [we are currently collecting this information]

# Medicaid Program Integrity Provisions

## 6402 – General Program Integrity provisions

- Overpayment requirements - provider must generally return overpayment within 60 days and report reason [Provider Bulletin and Form are posted to the MH website]
- NPI must be included on all enrollment applications and claims (only those who qualify for NPI) [Provider agreements have been updated to reflect this requirement]
- Providers may be excluded for false statement; payments must generally be suspended pending fraud investigation [Proposed state regulations were posted on March 30]



- Section 6401(a) of the ACA (42 CFR, Part 455, 460) requires applicants for enrollment into Medicaid program to pay an application fee
  - Unless paid to Medicare or another state Medicaid program
- The application fee is required for all new enrollment and all re-enrollments with the exception of individual physicians and non-physician practitioners
- The application fee for CY 2012 is \$523
- The application fee must be collected and deposited or a hardship exception approved prior to processing of an application
- Providers should refer to [www.mass.gov/masshealth](http://www.mass.gov/masshealth) for additional information and links to the payments site

# ACA Application Fee Updates

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- MassHealth will collect the application fee using an automated web-based payment tool via credit card or direct debit to a bank account
  - To pay the application fee go to the following [www.paybill.com/MassHealthApplicationFeeBillPay](http://www.paybill.com/MassHealthApplicationFeeBillPay)
  - Checks will not be accepted
- MassHealth Hardship Exception Request form
  - The hardship exception has criteria justification that must be included with the request
  - The hardship exceptions must receive executive approval
- Applications cannot be processed until the fee is paid, the hardship exception is approved or the attestation is validated from another state

# ACA Revalidation Updates

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**455.414** Revalidation of enrollment requires The State Medicaid agency to revalidate the enrollment of all providers regardless of provider type at least every 5 years

- Revalidation timeframe is between 2011 and 2016
- MassHealth is still working to determine the approach for revalidation (provider type or enrollment date or both)
- Extensive education, communication & outreach will target providers and associations
- Revalidation will begin this fall through the provider portal
- Failure to revalidate could affect the status of your relationship with MassHealth

# ACA Revalidation Updates

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- Provider preparation is key
  - Providers must make certain their information is up to date to ensure they receive notifications, address and contact information
  - Providers must make certain that they have information available to complete revalidation
    - Validate address, licensure, Federally Required Disclosure information
  - Providers must make certain that they have access to the Provider Online Service Center (POSC)

## and Answers