

Operational Guideline – Provider Enrollment

1	Initial contact	<p>Person contacts DHHS DDD Technical Assistance and expresses interest in becoming a certified provider. Minimally, name & email are obtained from prospective provider.</p> <ul style="list-style-type: none"> • Email is sent thanking person for interest in becoming a certified provider. “AA Prospective provider initial info email” PDF is attached. Attachment #1 • Initial email is saved here: J:\DDD\4.1 Technical Assistance\Prospective Providers in Active Agencies or Active Individuals. A folder is created at this location with the person’s name or agency name. <p>New item is created on SharePoint Initial Application Tracking. Sections to be completed: Title, Year, Applicant, Applicant Type, Contact, Initial Contact Date, Initial Information Sent. <i>Whenever SharePoint is updated DD staff should indicate in Comments: date, change(s) made, and name.</i></p> <p>Location of SharePoint Initial Application Tracking database: http://dhhsemployees/sites/DD/QI/Lists/CBS%20%20Title%20404%20Initial%20Application%20Tracking/Summary%20View.aspx</p>
2	Letter of intent	<p>Interested parties/prospective providers are required to complete and submit a letter of intent to the Division. The letter of intent must include:</p> <ol style="list-style-type: none"> 1) The type of service(s), as outlined in Title 404 NAC §4-002.01, that the prospective provider proposes to provide 2) The location(s) of the service(s). This can be the city/town; it does not have to be a specific address. 3) The prospective provider needs to detail their qualifications to be a certified provider, including education, experience, or other relevant points. <p>The letter of intent needs to be submitted, either a hard copy or electronic copy, to the Program Manager of the Technical Assistance Team (TA) within the Division for Developmental Disabilities (Division). TA Program Manager will review the letter of intent within ten (10) business days after receipt.</p> <ol style="list-style-type: none"> 1. The letter of intent, regardless of whether it is accepted or not, will be saved to the folder created in step one. 2. Electronic copies will be saved using the following naming standard: “letter of intent date received” ex: “letter of intent 12-29-2015” 3. Hard copies of letters of intent will be scanned and then saved to the location in step one. The hard copy will be saved until the certification process is complete. 4. A database entry will be created in SharePoint with the date the letter of intent was received and accepted.

		<ol style="list-style-type: none"> 5. The reviewer will ensure that the minimum requirements stated above are present. If one or more of the requirements are not present, the TA Program Manager will contact the prospective provider via email and tell the prospective provider exactly what is needed in order for the letter of intent to be accepted. Ex: "The letter of intent does not include the location (city/town) where you intend to conduct business." 6. The reviewer will email the prospective provider in writing of the decision to accept/not accept the letter of intent. The prospective provider is allowed as many attempts as necessary to submit an acceptable letter of intent, and the TA Program Manager will provide feedback to the prospective provider on each submission that is not acceptable. 7. This process will repeat until the letter of intent is accepted. If at any time the prospective provider feels they would like to appeal the decision to not accept a version of their letter of intent, they will be notified that they can contact the Deputy Director of DDD by phone or email to discuss their concerns. 8. Once the letter of intent is accepted, the TA Program Manager will email the prospective provider and inform them of such. An attachment will also be provided that will inform the prospective provider of the next step(s): attend orientation and begin working on becoming a Medicaid provider. Attachment #2 9. SharePoint sections: Letter of intent received
3	Orientation	<ol style="list-style-type: none"> 1. The prospective provider is next required to attend an orientation. The TA Program Manager will collect the names and phone/email information of each person from the prospective agency who plans to attend orientation. This information is requested in the email sent to the prospective provider upon acceptance of the letter of intent. The attendees are then entered into a database that tracks attendance: J:\DDD\4.1 Technical Assistance\Prospective Providers\PROVIDER ORIENTATION\2016 Orientations 2. Items saved to J drive folder: LOI, PDFs of all email communications. 3. SharePoint sections: Orientation Sent Date. 4. Orientation sign in sheet is developed based on list of those planning on attending. TA Program Manager will do this immediately prior to orientation being held to ensure most accurate list. Attendees will be reminded frequently during orientation to sign in. After orientation is held, signature sheets will be scanned and saved here - J:\DDD\4.1 Technical Assistance\Prospective Providers\PROVIDER ORIENTATION\2016 Orientations 5. Orientation is held quarterly, typically March/June/September/December each year. A meeting room is needed that has a projector and connections for a laptop (Powerpoint slides). The Administration Building is typically utilized. The Powerpoint presentation is located here - J:\DDD\4.1 Technical Assistance\Prospective Providers\PROVIDER ORIENTATION and is named, "REV 8 2015 Prospective and new provider orientation" 6. Orientation is organized into 3 sections: Prospective Provider Process, Contracting, and Certification. The TA Program Manager will present topics 1 and 3, and the Contracts Coordinator will present topic #2.

		<ol style="list-style-type: none"> 7. TA Program Manager will update the SharePoint sections for each attendee to indicate they attended. 8. A standard email, located here - J:\DDD\4.1 Technical Assistance\Prospective Providers\1 B Post-letter of intent information will be sent to each prospective agency representative, with the following attachments: Application, Service Plans to be approved for contracting, Policy and Procedure Worksheet. Attachments 3, 4, 5, 6 9. SharePoint sections: Attended Orientation, Application Sent Date. Comments section should include names of those who signed in at Orientation.
4	Medicaid Provider	<ol style="list-style-type: none"> 1. TA Program Manager refers Prospective Provider to Contract Coordinator to create a NFOCUS referral in DecisionPoint OR Prospective Provider contacts Contract Coordinator with questions about becoming a Medicaid Provider. The Medicaid enrollment referral process and web portal is new as of 12/1/2015 and the process is still being revised at the time of this drafted guideline. 2. The Medicaid Provider screening and enrollment web portal information is e-mailed to prospective provider using the document located at: J:\DDD\1.5 Central Office.Contracts\PSE Maximus Project\Referral Documents\PSE Implementation Overview. This document was created by Medicaid and gives basic information. 3. Prospective Provider is advised via the same e-mail to subscribe to the Medicaid and Long Term Division provider webpage at: http://dhhs.ne.gov/medicaid/Pages/med_provhome.aspx. Contract Coordinator informs provider at this time that it is the provider's responsibility to keep up-to-date on all Medicaid Provider bulletins as required by Medicaid regulations. 4. In this same e-mail Contract Coordinator requests Provider's identifying information, including First and Last Name or Group/Entity Name, Tax ID (EIN or SSN), Email address and zip code plus four digit extension for the DecisionPoint referral. 5. Contract Coordinator creates the NFOCUS referral on DecisionPoint and notes the referral number for further reference. Instructions to complete a referral are located at: \\Bf223d01\223_dd_share\developmental_disabilities\DDD\1.5 Central Office.Contracts\PSE Maximus Project\Referral Documents\NE PSE-WI-RD Referral New Provider-v1.pdf. A UserID and Password must be acquired for DecisionPoint via request to Medicaid Program Integrity staff. Referral number is located in an Excel document on the J drive at: J:\DDD\1.5 Central Office.Contracts\PSE Maximus Project\Referral Documents\Maximus Provider Enrollment tracking. The document includes the name of the provider, the date of the referral and the referral number. If the provider calls back with questions, the referral can be accessed using the referral number. This referral process is new and additional steps may be added as the process evolves.

		<p>6. The work instruction for new Provider screening and enrollment is located at: J:\DDD\1.5 Central Office.Contracts\PSE Maximus Project\Referral Documents\NE PSE-WI-RD Referral New Provider-v1.pdf</p> <p>7. Maximus then takes over and contacts the provider for further information and to fill out the application to become a Medicaid provider. Maximus contact information is found in the PSE Implementation Overview document mentioned in #2 above.</p>
5	Application and Policies and Procedures	<p>Prospective provider sends in a copy of their application, “Service Plans to be approved” form, and their policies and procedures (P&P). These can be submitted either hard copy or electronically (preferred).</p> <ul style="list-style-type: none"> • If submitted hard copy, the P&P has to be tabbed for easier reference to compare with the rules and regulations. • If submitted electronically, a completed copy of the “P&P Worksheet” needs to be submitted for reference. • TA Program Manager checks application to ensure all sections are completed, including Medicaid Provider Number; governing board or advisory committee meets requirements; and types of services match letter of intent. <ul style="list-style-type: none"> ○ If any of these not met, TA Program Manager emails prospective provider with what is needed prior to P&P review. Email may be based on text found in “P&P received templates.” TA Program Manager should attach PDF “Mason Clarification re governing boards and advisory committees” if applicable. Attachment 7 • TA Program Manager also completes preliminary review of P&P to ensure prospective provider has completed P&P Review Worksheet and all pertinent chapters are addressed based on the services to be offered. <ul style="list-style-type: none"> ○ If either of these are not met, TA Program Manager emails prospective provider with what is needed prior to full P&P review. Email may be based on text found in “P&P requires tabulation template.” Attachment 8 • SharePoint Sections to fill in: Application received date; P&P received date; Comments regarding status of these items. • TA Manager reviews resubmissions if required and the above process is repeated until everything is submitted and complete. • TA Program Manager assigns a reviewer to complete full review of P&P. The current available reviewers are the TA Program Manager, Technical Assistance Program Specialist, and the Contracts Coordinator. These three will rotate P&P reviews to ensure equal responsibility unless workload requires a change in order. The TA Program Manager will ultimately determine who reviews the P&P.

- Use the “Policy and Procedure Review Process for Prospective Providers” handout for reference.
- **Attachment 9**
- A cursory review will be completed.
 - If the P&P generally reiterates the rules and regulations, the reviewer will contact the prospective provider to inform them of this, give them examples as needed and request that they resubmit their P&P once reiterations have been changed to actual policy and/or procedures.
 - If the application doesn’t include all required information, the reviewer will contact the prospective provider to inform them of this and request a resubmission.
- Once the above has been corrected, the reviewer completes full review of P&P using “Title 404 NAC Policy and Procedure Review Worksheet.” **Attachment 10**
 - Emphasis of attention is on health and safety, habilitation, and rights protections.
 - Reviewer will save all reviewed documents into the prospective agency’s folder on the J drive.
- Once the P&P has been completely reviewed, one of two options below will be completed:
 - If the P&P does not meet all requirements of the rules and regulations, the reviewer sends an email to the prospective provider. This email may be based on “P&P quote Regs template,” “P&P reviewed and need work template,” or “Application requires revision – quotes regulations template.” **Attachments 11, 12, 13**
 - The above process will then repeat until the P&P is complete and meets all requirements.
 - If the P&P meets all requirements of the rules and regulations, the reviewer will:
 - Draft an acceptance letter to the prospective provider using the “P&P complete and ready for contracting” template. This letter is signed by the Deputy Director, and the Contract Coordinator is cc’d. **Attachment 14**
 - The letter is sent to the prospective provider using certified mail. The Program Assistant will be responsible for mailing this letter. A copy of the letter will be sent via email to the prospective provider by the reviewer.
 - If P&P was submitted in hard copy format, application and P&P are moved to the shelves with the other approved agencies
 - Email from reviewer to Contracts Coordinator confirming that the prospective agency has met all requirements to this point and is ready for the contracting stage
- Reviewer will enter information into the following applicable SharePoint sections: Application Received Date, P&P Received Date, First P&P Review Date, Second P&P Review Date, Third P&P Review Date, Accepted/Denied, Final Status Date, Referred to Contracts Date (as applicable). Applicant Type should be changed to Current Provisional if Referred to Contracts. Comments (documenting each step completed)

		<ul style="list-style-type: none"> • Items saved to J drive folder: Application, P&P (if submitted electronically), P&P review on worksheet, PDFs of all email communications. • The reviewer will move the prospective provider’s J drive folder from “Prospective Providers/Active Agencies” to “Prospective Providers/Passed to Contracts.”
6	Provider Contracting	<ul style="list-style-type: none"> • Contract Coordinator contacts prospective provider via email approximately a week after letter goes out from Deputy Director. The e-mail includes Instructions to begin services including: <ul style="list-style-type: none"> ○ A request that the provider fill out W-9/ACH for E-1 system at: http://das.nebraska.gov/accounting/forms/ACH_W9_Fillable.pdf <ul style="list-style-type: none"> ▪ Contract Coordinator will use form to acquire an address book number for provider using E-1 system. Must have security to use E-1 and have E-1 training ○ Inform provider of Therap contacts and training materials found at www.therapservices.net <ul style="list-style-type: none"> ▪ Contract Coordinator contacts Therap representatives to inform them of new provider on the same day the e-mail is sent to the provider. At the present time the contact is Sazzad.rafiq@Therapservices.net and calvin.Christensen@therapservices.net. Contacts may also be found at http://www.therapservices.net/nebraska/ ▪ Inform provider of Insurance required per contract. Insurance must be in place by the date of contract and start of services. Insurance requirements are included in the General Services Contract and are listed in the e-mail for the provider. ○ Attach the End User Agreement and contacts for criminal background check vendor Accurate Background ○ If not already a Medicaid provider, must become one at this time (see instructions for referring providers to Maximus above) • When Medicaid enrollment is confirmed, the Contract Coordinator notifies Service Coordination Administrator, Service Coordination Supervisors and Staff Assistant II (Lelia Razey) via e-mail that a new provider is available for referrals in Therap. Indicate name of provider contact, address, phone number, e-mail address, type of services allowed and geographic location of services to be provided • Provider is added to the DHHS DD Contract Providers and Directors mail list to receive e-mails from Division and partners – Contract Coordinator sends request via System Administrator to DHHS Help Desk (current contact at HELP Desk is Kristin Kleve) • Contract is in place on the date the first individual choses provider and has service authorization with new provider – Contract Coordinator is notified by Service Coordination that the service authorization has been created.

		<ul style="list-style-type: none"> • Load contract into E-1 system as a draft exempt service requisition. Use of E-1 must have security clearance and training by the Nebraska Department of Administrative Services. • Send provider completed contract for signature, Attachment A (Billing guidelines) and Attachment B (services to be provided). • After provider signs the contract, Contract Coordinator gives contract to Administrative Assistant for the Director of the Division of Developmental Disabilities and Administrative Assistant for DHHS CEO to sign. Current Administrative Assistants are Tyla Watson for Courtney Miller, Director, and Bonnie Engel for Courtney Phillips, CEO. • Send provider completed (signed) contract • Upload signed contract to E1 to complete as a contract. E1 security clearance and training by the Nebraska Department of Administrative Services is required for this step. • Signed contract is also located in Sharepoint at Community Based Services>Contracts and in the J drive at: DDD\1.5 Central Office Contracts\Contracts-General Services and then by GSC FY (appropriate year)\Contracts.pdf • New provider is sent link to private Provider Page of DD website for resources and training materials: http://dhhs.ne.gov/developmental_disabilities/Pages/developmental_disabilities_forms.aspx • Contract Coordinator will notify TA Program Manager and Public Health Survey Manager of completion of the contract via email, in order to start the six month provisional certification on that date. • Inform Kate Bolz, Director of NASP, via e-mail of new provider • The P&P in the agency folder in "Passed to Contracts" will be moved by the Contract Coordinator to "4.2/Provider Policies and Procedures" and the Contract Coordinator will create a new folder with the agency's name. • E-mail correspondence between provider and Contract Coordinator is saved as .pdf documents in the provider's folder at: J:\DDD\1.5 Central Office.Contracts\Contracts - General Services\New Provider files since 7.1.10