Enrollment of Medicaid Managed Care and Children's Health Insurance Program Providers

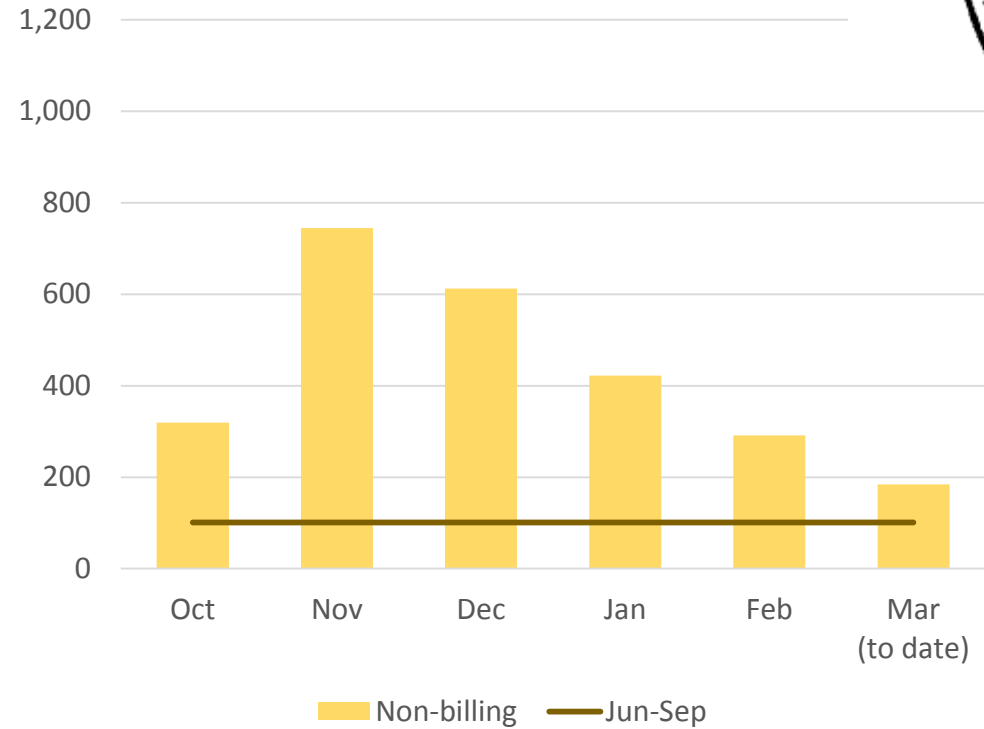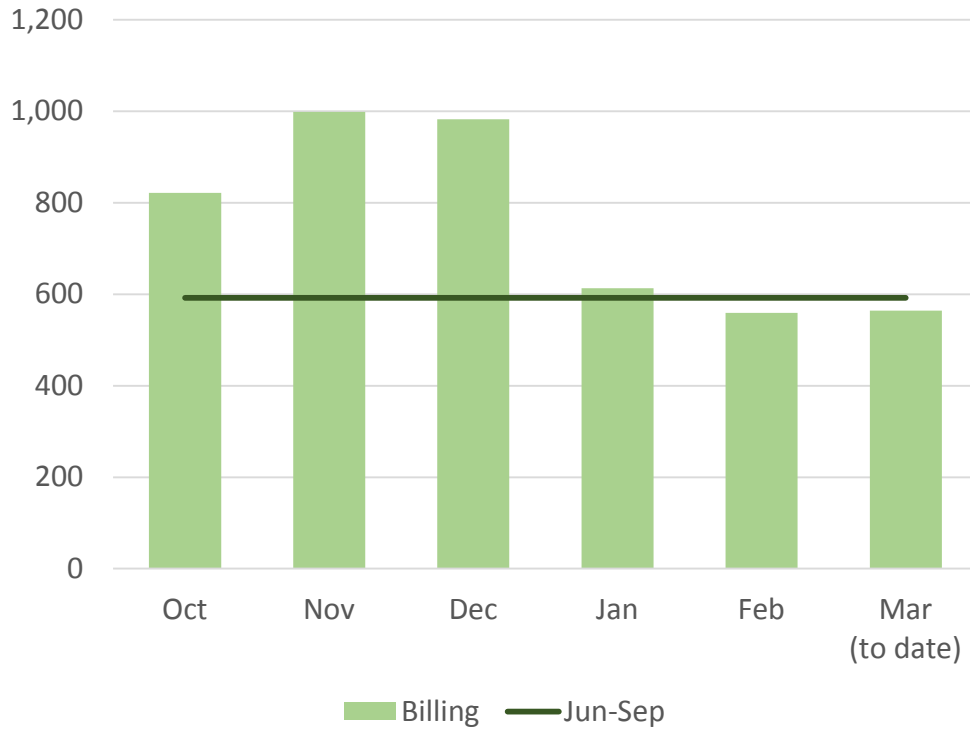Section 5005(b)(2)
21st Century Cures Act

March 21, 2018

- Enrollments
- Enrollment Resources
- Contract Amendments
- Terminations
- MCO Survey
- Health Data NY Watch List
- Questions

Enrollments

Average Number of New Applications Received Weekly

Billing chart (left):

Month	Value
Oct	820
Nov	1,000
Dec	980
Jan	610
Feb	560
Mar (to date)	565

Jun-Sep line ≈ 590

Non-billing chart (right):

Month	Value
Oct	320
Nov	745
Dec	615
Jan	420
Feb	290
Mar (to date)	185

Jun-Sep line ≈ 105

Billing — Jun-Sep

Non-billing — Jun-Sep

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Enrollment Resources

- The Medicaid fee-for-service (FFS) enrolled provider data set is public on Health Data NY and can be found at:

  https://health.data.ny.gov/Health/Medicaid-Fee-for-Service-Provider-Listing/keti-qx5t

- The *Medicaid FFS Pending Provider Listing,* containing information about providers that have submitted applications for enrollment is available at:

  https://www.emedny.org/info/ProviderEnrollment/ManagedCareNetwork/index.aspx

- The above lists are also sent electronically to MCOs on a semimonthly basis

- Practitioners can verify if they are enrolled by using the enrolled practitioners search function found https://www.emedny.org/info/opra.aspx

- Business, Group Practice and Institutional providers can verify their enrollment by calling CSRA's eMedNY Call Center at (800) 343-9000

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MCO-Provider Contract Amendment

- Pursuant to a 21st Century Cures Act Section 5005, no later than 7/1/2018, MCOs must amend contracts with providers to include a provision that requires providers to enroll with the State's Medicaid program. If, however, the providers fail to enroll, such providers shall be terminated from participating as a provider in any network of the MCO that serves individuals eligible to receive Medicaid and CHP.

- The Department suggests that this amendment can be done via notice as a unilateral amendment because the Standard Clauses include a provision that requires all parties to comply with all applicable Federal and State laws, rules and regulations.

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Notice of Amendment

- The notice of amendment should include an opt out provision allowing the provider who does not want to be bound by this provision an opportunity to terminate the contract.

  - If provider chooses to opt out, the provider is terminating the contract. Therefore, no further notice of termination or hearing rights need be provided by the MCO to the provider.

  - For this type of termination, no transitional care is required. However, providers who choose to opt out should follow the applicable licensure laws regarding the transfer of patient care to another provider.

Amendment Language

- The Department suggests the following amendment language:

    - *The provider furnishing items and services to, or ordering, prescribing, referring, or certifying eligibility for, services for individuals eligible to receive Medicaid and CHP agrees to enroll in the NYS Medicaid Program by completing and filing the designated enrollment application and providing the required information necessary for enrollment.   In the event a provider is terminated from, not accepted to, or fails to submit a designated enrollment application to, the NYS Medicaid Program, provider shall be terminated from participating as a provider in any network of the MCO that serves individuals eligible to receive Medicaid or CHP.*

- If a provider did not exercise the right to opt out and, therefore, accepted the amendment but the provider failed to enroll in the NYS Medicaid program subsequent to 7/1/2018 contract amendment deadline, MCOs shall initiate termination. MCOs shall send a notice of termination to such non-enrolled providers pursuant to the requirements of PHL 4406-d (2). Transitional care required in PHL 4403 (6) (e) (1) will apply.

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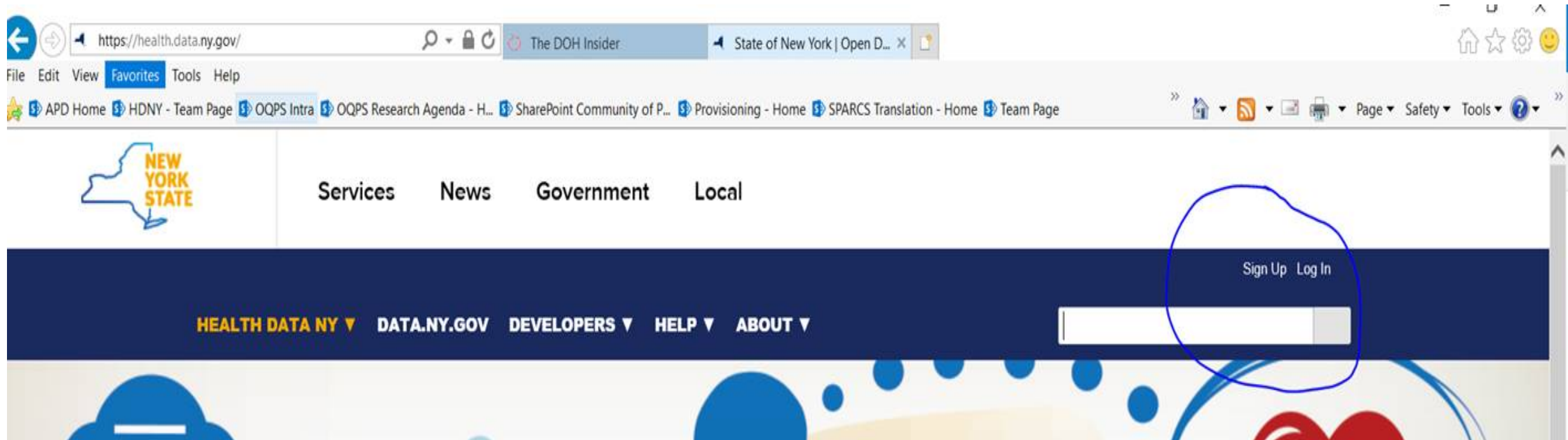
Terminations

- At this time, MCOs **should not be initiating terminations** due to failure to enroll in NYS Medicaid.

- It is imperative that MCO's enrollment status is current

- MCOs should continue to follow the steps below:
  - ✓ Send out provider contract amendment
  - ✓ Check enrollment and pending enrollment data to track compliance
  - ✓ Continue to identify and reach out to providers who have not complied
  - ✓ Complete and return DOH survey of providers not currently enrolled
  - ✓ Await further guidance and recommendations from the Department regarding additional compliance measures MCOs may utilize prior to termination

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MCO Survey Completion: Deadline March 29, 2018

- On March 15th, a survey was distributed to obtain an understanding and estimate of those enrollable Category of Service(COS) providers/facilities within your network that are not displayed on either the list of active Medicaid FFS providers or the list of pending provider applications. _Only providers/facilities in an enrollable COS should be listed_.

Last Name	First Name	Middle Initial*	NPI*	MMIS*	FEIN*	Service Address	City	State	County	PNDS Specialty Code*

Note: * - where available

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Health Data NY Watch List

MCOs can be added to the watch list and receive email confirmation when a file has been updated.

You will need to create an account on HDNY by clicking on the "sign up" button in the top right of any page (or just make sure they are signed in if they already have an account). on the Health Data NY site

Health Data NY Watch List (cont'd)

After creating an account, you can navigate to the landing page of any dataset they would like to follow and click on the "Watch this Dataset" button which will send an email to their associated email whenever a change is made to the dataset.

Are there any questions?

- FAQs are available, along with other resources, at:
  https://www.emedny.org/info/ProviderEnrollment/ManagedCareNetwork/index.aspx

 Or contact us:

- Mainstream, HARP and HIV-SNP: for general managed care questions, the MCO Outreach Survey, and the active list of Medicaid FFS providers, email the Bureau of Managed Care Fiscal Oversight at bmcfhelp@health.ny.gov

- Managed Long Term Care: for general managed care questions, email MLTC.Compliance.Reporting@health.ny.gov

- For general provider enrollment questions, email the Bureau of Provider Enrollment at providerenrollment@health.ny.gov

- eMedNY Call Center: (800) 343-9000

- To subscribe to the Pharmacy Policy listserv, e-mail RPhContact-L@listserv.health.state.ny.us