

School-Based Health Center (SBHC) Process For Becoming a Credentialed Medicaid Provider Quick Reference Guide

Step 1: Contact Office of School & Adolescent Health (OSAH)

The SBHC coordinator or sponsor contacts the OSAH to inform them of their interest in becoming a Medicaid provider and to establish a relationship. The OSAH website is <http://www.nmschoolhealth.org>. You can access their contact information from their website. You will be directed to the following websites: <http://www.hsd.state.nm.us/mad/HSchoolHealthDetail.html> and <http://www.NMASBHC.org> where you will find the following documents you will need to begin the process of being a certified Medicaid provider:

- SBHC Manual
- Document Checklist
- Site Review Checklist
- How to Become a Medicaid Provider Guide
- SBHC Standards and Benchmarks

Step 2: Conducting an Internal Assessment

Does your SBHC:

- Meet all OSAH SBHC Standards and Benchmarks?
- Have a training plan in place that addresses issues such as billing, coding and documentation?
- Have a policy about treating students regardless of ability to pay?
- Understand minor consent and confidentiality laws?
- Have the ability to file a HIPAA-compliant claim form?
- Meet the requirements on the Medicaid Site Readiness Review and Documentation checklists?

**YES? Proceed
to Step 3**

**NO? Or Not
Sure?**

Contact the MAD SHO nurse for assistance. It is important that you have frequent contact with the OSAH contract monitor and/or the MAD SHO nurse consultant during this time. They are available to assist you in preparing your site and staff for the mandatory site review. If necessary, they may suggest a mock site review visit to help prepare your site.

Step 3: SBHC sends 2-Letters of Interest

The SBHC will create a packet that includes the following items:

- 1) 2-Letters of interest. One letter should be signed by the school district superintendent, school board president, or school principal and should describe the SBHC formal sponsorship; provide reassurance that the SBHC will meet Medicaid requirements; and explain its interest in working collaboratively with the Medicaid program and its partners. The second letter should address the support of the community and may be from the school district Health Advisory Council, the local Community Health Council, a local Mental Health Agency, a local private medical office or agency that is supportive of the SBHC.
- 2) Contact information for the SBHC coordinator or other key staff assigned to work on Medicaid billing issues.

Send the original letters to:

Manager, HSD/MAD School Health Office

P.O. Box 2348

Santa Fe, New Mexico 87504-2348

with a copy to:

Director, DOH Office of School and Adolescent Health

300 San Mateo NE, Suite 902

Albuquerque, New Mexico 87108

Step 4: Site Visit

The Medicaid SHO nurse consultant will confirm receipt of the Letters of Interest information and in cooperation with the SBHC coordinator and the OSAH staff, schedule a site visit. **NOTE: ALL SBHC STAFF, INCLUDING ALL PROVIDERS, MUST BE PRESENT FOR THE EXIT INTERVIEW FOLLOWING THE SITE VISIT. SITE APPROVAL WILL NOT BE GRANTED IF ALL PROVIDERS ARE NOT IN ATTENDANCE.** Therefore, it is very important for the coordinator to take into account providers and other staff members other obligations when scheduling the site review.

Medicaid SHO and OSAH staff will conduct the site visit following the Site Review Checklist, Documentation Checklist and the OSAH Standards and Benchmarks. The clinic may be open during the site review but should be closed during the exit interview to assure all staff is available to discuss the findings and to make a plan to correct any identified deficiencies. The site review takes approximately 2-3 hours.

Step 4: Site Visit Continued

PASS?

The review checklists are finalized by the SHO within seven working days in collaboration with the review team, and forwarded electronically to the SHO Manager. During the seven day period following the on-site visit, the reviewer(s) will provide technical assistance to the SBHC coordinator to ensure that any areas of non-compliance are corrected.

Proceed to Step 5

If the SBHC does not pass the review, The SHO will notify the SBHC via email within 10 working days of the on-site review. If the SBHC is able to make corrections and show proof of those corrections within 15 days of the site visit, the SBHC will be approved. A copy of the notification will be sent via email to OSAH.

If the SBHC is not able to make all corrections within 15 days, the SHO Manager will notify the SBHC via letter to submit a Corrective Action Plan (CAP). The CAP must be returned to the SHO within 15 days from the date of the letter. The CAP must include the date(s) that the finding(s) will be corrected. The SHO will forward the CAP to OSAH, and if the site review is a re-credentialing review, the MCOs and SE electronically. SHO and OSAH staff will conduct a follow up on-site visit as needed to ensure that the CAP has been completed.

If the finding(s) cannot be corrected within 30 days of the CAP, if the SBHC is currently billing Medicaid, it must cease billing Medicaid until all deficiencies are corrected. Depending on the compliance issues, the SBHC's credentialed status with the MCOs and SE may be terminated by the secretaries of HSD and DOH.

Credentialing/Re-Credentialing for SBHCs Operating in Temporary Site.

The same process as above will be used with the exception that physical limits of the temporary site will be taken into consideration. However, the site will be expected to adhere to the checklists to the best of its ability. Upon approval, the SBHC operating in a temporary site will be provisionally credentialed until housed in its permanent location. When the SBHC moves to its permanent site, another credentialing site visit will be conducted.

Step 5: Approval Letter from Medicaid SHO

The SHO Manager will send the SBHC coordinator an approval letter along with copies of the completed site review checklist and documentation checklist. If required, a copy of the CAP signed off by the SHO Manager will also be included. The letter contains the SBHC's unique ID number assigned by the SHO which is used to identify the SBHC in the Medicaid system and may be required by the MCO's on your billing claim. It also includes names and contact information for the MCO's and SE so that you may begin the process of contracting with them.

A copy of this letter and checklists must accompany all Medicaid, MCO and SE applications so it is imperative that you safeguard this letter and checklists.

The SBHC must contact each MCO and the SE listed in the letter to initiate the contracting process and provider credentialing process in order to begin billing Medicaid Managed Care.

Step 6: National Provider Identifier (NPI) and Taxonomy Code

Every health care provider and every SBHC is required to have a separate National Provider Identifier (NPI). The National Plan/Provider Enumeration System (NPPES) collects provider/clinic information and assigns the NPI. Go to the following website: <https://nppes.cms.hhs.gov/> where you will be directed to apply for an NPI. You will receive an e-mail within 15 minutes of your application being finalized.

Taxonomy Codes

The NPI application asks for Provider Taxonomies. You can find the appropriate taxonomy code by going to www.wpc-edi.com/reference

SBHCs that mark government entities on their MAD 335 should use taxonomy code **261QS1000X**. SBHC sponsored by FQHCs use **261QF0400X**; those sponsored by a University use **261Q51000X**.

CONTACT INFORMATION

NPI Enumerator

P.O. Box 6059

Fargo, ND 58108-6059

E-mail: customerservice@npienumerator.com

<https://nppes.cms.hhs.gov/>

1-800-465-3203 (toll free)

1800-692-2326(NPI TTY)

Step 7: Obtaining a Medicaid Number

EACH INDIVIDUAL SBHC AND ALL INDIVIDUAL PROVIDERS MUST HAVE A MEDICAID NUMBER IN ORDER TO BILL MEDICAID, WHICH INCLUDES THE MCOs AND THE SE.

The MAD 335 Provider Participation Agreement (PPA) is the application required for the SBHC's physical site to obtain a Medicaid number; the MAD 312 Provider Participation Agreement is the application form for the individual provider. The MAD 335 and MAD 312 application instructions list a number of additional documents that must accompany an application to be considered complete. Be sure to include a copy of the approval letter from the MAD SHO with your application. **The SBHC provider type is 321.** If you need assistance completing the MAD 335 or MAD 312 contact the MAD SHO nurse consultant.

You may download both applications at

<https://hsd.state.nm.us/mad/PErollmentPolicy>

Mail the completed agreement along with all of the required documents to:

XEROX New Mexico Medicaid Project
PO Box 27460
Albuquerque, NM 87125-7460

XEROX is the fiscal agent for the State. XEROX screens the initial application for correct and complete input before forwarding it on to the Medical Assistance Division for approval. A correct and complete application will speed up the process. Missing documentation or incomplete information on the provider participation agreement will lead to delays. This process may take 6-8 weeks after XEROX receives a complete, correct application so submit the application as soon as a provider has been hired and you have an NPI.

Successfully completing this process will enroll the SBHC and the provider as a Medicaid FFS Provider.

Step 8: MCO/SE Contracts/Credentialing

New Mexico Medicaid contracts with four MCOs and one state-wide behavioral health entity to provide services to Medicaid recipients. Sponsors, SBHCs and individual providers must be associated with each individual MCO and SE in order to be reimbursed for services provided. Sponsors must sign a contract with each MCO and SE. SBHCs are credentialed with the MCO and SE when they are listed in the sponsor contract. Providers must be credentialed with each MCO/SE. The approval letter sent to the SBHC sponsor/coordinator following successfully passing the site review contains a contact name and contact information for each of the MCOs and SE. Contact each MCO and the SE for requirements and forms.

SBHCs providing dental services must contact the individual MCO dental department

Step 8: MCO/SE Contracts/Credentialing, cont'd.

BCBSNM: 1-866-689-1523
Lovelace: 1-888-232-2750
Molina: 1-800-580-2811
Presbyterian: 1-888-977-2333

If you are a SBHC funded by HIS, BIA, or a 638 facility, please contact the MAD School Health Office for information about becoming a Medicaid SALUD provider.

Step 9: Affiliating Providers with the MCO/SE

If the provider is already credentialed with the MCO through another entity, write a letter on SBHC letterhead requesting the provider be affiliated with the SBHC. Include the provider full name as listed on their professional licensure, their NPI and their Medicaid number. Both the provider and the sponsor/coordinator must sign the letter.

If the provider is not credentialed with the MCO, they must complete a MAD 335 and list all of the SBHCs where they will be providing services.

Dental providers must contact DentaQuest using the information above.

Step 10: Submitting Claims

Once the SBHC has successfully completed steps 1-9, they may submit claims for students enrolled in Medicaid. Training for fee-for-service Medicaid is available through XEROX at <https://nmmedicaid.acs-inc.com>. Training can be requested from the MCO/SE for managed care and behavioral health claims by contacting the primary MCO/SE representative listed on your approval letter. In addition you may download the provider training manuals for each MCO at their web sites:

BlueCross/Blue ShieldNM Salud: www.bcbsnm.com
Lovelace Community Health Plan: www.lovelace.com
Molina Health Care: www.molinahealthcare.com
Presbyterian Salud: www.phs.org
Optum: www.optum.com

Step 11: Recredentialing

SBHC's are re-credentialed every 3 years. The process is the same as for the original site review. A site review may be scheduled early if the SBHC moves to a new site or compliance issues have been reported. The SHO nurse consultant will notify the SBHC coordinator that a site review is needed and will work with the coordinator to schedule a date for the review. Remember, **ALL SBHC STAFF, INCLUDING ALL PROVIDERS, MUST BE PRESENT FOR THE EXIT INTERVIEW FOLLOWING THE SITE VISIT. SITE APPROVAL WILL NOT BE GRANTED IF ALL PROVIDERS ARE NOT IN ATTENDANCE.**

Step 12: Change in SBHC Personnel

SBHC's must report changes in personnel to the Medicaid SHO, OSAH and the MCOs and SE. Use the SBHC Profile Worksheet on the Medicaid SHO website: <http://www.hsd.state.nm.us/mad/HSchoolHealthDetail.html> to notify of any change in SBHC personnel. When hiring a new provider already credentialed with the MCO/SE include a letter of affiliation on SBHC letterhead with the form associating the new provider with the clinic. Include the providers name, licensure, Medicaid number, and NPI. Both the provider and coordinator/sponsor must sign the letter.