

North Dakota MMIS Web Portal Provider Enrollment Frequently Asked Questions (FAQ)

Provider Enrollment

What is the North Dakota MMIS Web Portal?

The North Dakota Department of Human Services (DHS) is about to transition from its legacy Medicaid Management Information System (MMIS) to a new web-based application. The new system is called the ND MMIS Web Portal.

Can DHS transfer existing provider information into the new system?

No, provider enrollment is necessary to collect additional data elements required by the new MMIS and to ensure the North Dakota Medicaid provider records are up to date and in compliance with current state and federal regulations. The enrollment process also serves to introduce providers to new system features and benefits and enables them to establish their preferred account settings for the new claims processing environment.

Which providers must enroll?

All providers who are currently enrolled in the North Dakota Medicaid program and who want to continue participation in the program must enroll

I have just recently enrolled in the North Dakota Medicaid program. Do I have to complete a new application?

Yes. Once new applicants are enrolled in the North Dakota Medicaid program, they will also need to complete the enrollment process in order to continue participation in the program after the transition to the new MMIS.

I have been using a clearinghouse to submit my claims. Does the clearinghouse need to enroll also?

Yes, this applies to trading partners, as well as healthcare providers. Any currently enrolled billing agent, clearinghouse, or other trading partner that intends to continue processing North Dakota Medicaid transactions after DHS transitions to the new MMIS must complete a new application.

How long do providers have to complete the enrollment process?

Providers will have approximately six months prior to the transition to the new MMIS enroll. Providers are encouraged to begin the enrollment process as soon as possible to avoid the possibility of encountering unanticipated issues that prevent completion of enrollment prior to the MMIS transition date.

Are the enrollment requirements different from the process previously used to enroll?

Yes, the new enrollment requirements are somewhat different from enrollment requirements today. The application format has changed and some data requirements are new.

Who should I contact if I have questions about the provider enrollment process or my enrollment application?

Contact the Provider Enrollment Unit at (800) 755-2604 during business office hours from Monday to Friday 8 am – 5 pm

Enrollment Application

How do I access the new applications, forms, and instructions?

Forms and instructions are available at <http://www.nd.gov/dhs/info/mmis.html> Applications can also be requested by contacting the Provider Enrollment Unit.

Which application should I complete?

Providers should use the primary application that corresponds to their business model as follows:

1. Individual Provider Enrollment Application - for individual providers who do not have an Employer ID Number (EIN) and use a social security number (SSN) for tax reporting.
2. Group Provider Enrollment Application – for a corporation, a partnership, or another group-type business entity or sole proprietorship who uses an Employer Identification Number for tax reporting.
3. Trading Partner Application – used by entities that process EDI transactions on behalf of an enrolled healthcare provider.

In addition to the primary application:

1. Individual Additional Service Location form - for individual providers that perform services in more than one location. A separate form is required for each additional location.
2. Group Additional Service Location form - for group providers that perform services in more than one location. A separate form is required for each additional location.

What information will I need in order to complete the enrollment applications?

Providers need to have the following information in order to submit their enrollment application:

1. Identifying information and numbers: Business name and address, EIN, NPI, previous Medicaid IDs, taxonomy, as applicable.
2. Provider type(s): A designation describing the type of provider delivering the service to North Dakota Medicaid members.
3. Provider locations and contact information: Street addresses, contact names and numbers, and related information for service, mailing, and billing locations used by the provider.
4. License and credential verifications: Type of license/certification, licensing and/or certifying agency, number, and effective dates. A paper copy of the issued license or certification is also required.

5. Ownership information: Current and historical details on all owners, family members, managing directing employees, and/or subcontractors having a 5% or greater ownership interest in the provider applicant.
6. Exclusions and Sanctions information: Current and historical details of any imposed or pending occurrences of adverse legal actions taken against the applicant by any state/federal board or court due to violation of federal program regulations.
7. Affiliations: Names and NPIs of other Medicaid enrolled providers who perform services on behalf of the applicant and/or who bill for services on behalf of the applicant.
8. Billing and Payment information: Instructions for the appropriate setup of claims payment and reporting parameters including:
 - EDI: Applicants who choose to submit or receive electronic transactions must provide specifications regarding methods and transactions that will be involved.
 - Third Party Billing: Applicants, who want to use the services of a billing agent or clearinghouse to process claims, must identify the authorized entity.
 - EFT: Applicants who utilize Electronic Funds Transfer must provide data related to the designated financial institution and bank accounts.
 - Remittance Advices: Applicants must specify the desired delivery method for receipt of detailed claims remittance advice reports.
9. Authorized signatures: Original signatures on paper documents must be provided in order to validate the application.
10. North Dakota MMIS Web Portal Registration: Contact information and preferred user ID for secure access to the features and functionality of the ND MMIS Web Portal.

What are the minimum documents required that must be submitted to complete my application?

Mandatory requirements for enrollment include:

- A valid and complete enrollment application (*hard copy or electronic*)
- A Medicaid Provider Participation Agreement (*hard copy or electronic*)
- An IRS W-9 Form (*hard copy only*)
- Paper copies of all active licenses or certifications from the designated credentialing entity (State Boards, Medicare, CLIA, DEA, etc.) as applicable

What additional documents may be required to complete my application?

Additional hard copy documentation may also be required, based on the applicant's provider type. These include:

- Additional Service Location Form (Individual or Group) for each distinct location
- Paper copy of IRS tax exempt determination letter or a copy of the applicant's most recent submission of IRS Form 990 for a non-profit entity
- Rate Letter/Cost Report

Why is a W-9 form required as part of the enrollment application?

The W-9 is required for IRS reporting. Social security and federal tax identification numbers must be verified in order for DHS to comply with income reporting requirements. This form is also used to verify the tax status of certain organizations.

Enrollment Process

How do I submit my application and additional enrollment documents?

DHS strongly recommends completing the application via the ND MMIS Web Portal and submitting it electronically by selecting the “confirm submit” button on the “Submit Application Step 2” page of the application. Additional hard copy documentation must be mailed to:

North Dakota Department of Human Services
Provider Enrollment
600 E. Boulevard Avenue Dept. 325
Bismarck, ND 58505-0250

Can I fax my provider enrollment application?

No, applications cannot be faxed. Applications must contain original signatures.

What happens if I submit an incomplete application?

If the enrollment application is incomplete, DHS will send the applicant a letter explaining what information is missing or incomplete with instructions as required. Some missing information may be requested by telephone (e.g. missing zip code).

How can I check the status of my submitted application?

An Application Tracking Number (ATN) is assigned to each application as part of the electronic submission. Use the ATN to view the application status on the Provider Enrollment page of the ND MMIS Web Portal.

How long will it take to receive a decision on my enrollment application?

The enrollment process should be completed within four to six weeks after receipt of a complete application. Any omission or missing information will cause a delay in this time period. Applications submitted via the ND MMIS Web Portal are processed faster due to lack of delivery time and immediate notification of missing information. During the first 5 to 6 months of re-enrollment, the receipt of a complete application will be delayed.

System Features and Requirements

What are the Internet Browser requirements for using the ND MMIS Web Portal?

- Internet Explorer 7.0 or higher
- Firefox 3.6 or higher

What are the benefits of using the ND MMIS Web Portal to complete and submit my application?

The benefits to using the ND MMIS Web Portal to complete and submit an enrollment application include real time edit checking of your application as it is being completed and faster submission.

What are the benefits of using the new Electronic Funds Transfer capability? Must I participate?

Providers are encouraged, but not required, to use EFT to increase security and expedite receipt of their payments as direct deposits into their bank accounts.

Trading Partner Enrollment

What is meant by trading partner enrollment?

Enrollment is the first phase for transitioning to the ND MMIS Web Portal, focused on currently enrolled providers and trading partners that are actively participating in the North Dakota Medicaid program. It includes a new online enrollment application and review process and the assignment of new Trading Partner IDs for all approved trading partners.

How can I check the status of my submitted application?

An Application Tracking Number (ATN) is assigned to each application as part of the electronic submission. Use the ATN to view the application status on the Provider Enrollment page of the ND MMIS Web Portal.

I am a provider who wants to submit claims electronically through EDI (Electronic Data Interchange) and I am filling out a paper application. What do I need to do?

Providers who want to submit claims electronically using software from a vendor must read and agree to all terms and conditions stated in the EDI Trading Partner Agreement. Once the application has been submitted and approved, a Trading Partner Welcome Letter will be sent along with the provider Welcome Letter. After testing your transactions for EDI compatibility, you will be able to perform claim submission and other electronic transactions.

I am a provider who wants to submit claims electronically through EDI and I am filling out an application online. What do I need to do?

Providers who want to submit claims electronically using software from a vendor must read and agree to all terms and conditions stated in the EDI Trading Partner Agreement on the "Submit Application Step 1" page of the application, and check the Electronic Signature checkbox for the Trading Partner Agreement on the "Submit Application Step 2" page of the application. Once the application has been submitted and approved, a Trading Partner Welcome Letter will be sent along with the provider Welcome Letter. After testing your transactions for EDI compatibility, you will be able to perform claim submission and other electronic transactions.

I am a billing agent or clearinghouse and I want to make sure I can continue to submit transactions for my providers. What do I need to do?

Billing agents or clearinghouses who want to submit transactions electronically using HIPAA compliant software, must fill out the online trading partner application. Once the application is

submitted and approved, a Trading Partner Welcome Letter will be sent. After testing your transactions for EDI compatibility, you will be able to perform claim submission and other electronic transactions.

How do I know which trading partner classification to indicate on my application?

The classification is based on the submission type/status from this list:

- Billing agent
- Other payer
- Carrier
- Clearinghouse
- Provider/self
- Switch vendor