



Program Integrity Updates

March 22 & 23, 2023



Health & Human Services

Housekeeping

A few things to keep in mind

- Please use the message function to put in questions and comments
- Both the slide show and any Q&A will be saved to our new website - [ND Health and Human Services | Health and Human Services North Dakota](#)
- If you think of questions after the update, please email the audit inbox at auditresponse@nd.gov
- No specific cases or situations will be addressed in the provider update

Qualified Service Provider (QSP)

What is a QSP?

- Individuals or agencies providing home and community based services.
- Independent contractors.
- Must meet certain competency standards required to provide services to eligible clients.
- Agency QSPs must have a minimum of two employees providing services.



Services Provided

This graph includes response of 52 QSP agencies to a Survey Report.

For more information on this survey, visit:

ND QSP Survey Report:
<https://www.ndqsphub.org/resources/other>

Service	Number of Respondents Providing Service
Homemaker service	35
Personal care service – SPED (15 min)	35
Non-medical transportation – escort	25
Companionship services	24
Non-medical transportation – local and out of town	22
Respite care	21
Personal care service – MSP (15 min)	16
Chore – labor (includes snow removal)	13
Extended personal care	13
Supervision	13
Extended personal care – nurse	10
Nurse education care	9
Personal care service – SPED (Daily)	7
Non-medical transportation – carrier bus, taxi	5
Community supports service	4
Adult residential service	3
Family personal care	3
Personal care service – MSP (Daily)	3
Residential habilitation	3
Transitional living	3
Adult day care	2
Family home care	2
Personal care – assisted living – SPED	2
Supported employment	2
Emergency response system	1
Home delivered meals	1
Respite care – institutional	1
Other	7

Noridian

Standard Processing Times

(As of 3/1/23)

Submissions are initially reviewed within 10 days and approved within 15 days once Noridian receives a full, complete application packet.

Processing delays occur when incomplete information is submitted to Noridian for processing.

EVV / Therap – Electronic Visit Verification

- System uses a phone, tablet, or laptop to record start and stop times.
- Verifies service was provided at an authorized service location.
- Required by the law.
- Used for billing and payment of services.
- Not all services require use of EVV system.

- The Department contracts with Therap to provide the EVV system and is available to QSP agencies free of charge (if the service is required to use it).
- You may choose a different EVV provider but are responsible for setup and any fees associated with usage.

EVV Systems Must Verify:

- Type of service performed
- Individual receiving the service
- Date of service
- Location of service delivery
- Individual providing the service
- Time the service begins and ends

How to Enroll

Enrollment information, handbooks & forms:

<https://www.hhs.nd.gov/human-services/providers/adults-and-aging/qualified-service>

Submit enrollment information to:

Email: QSPEnrollment@noridian.com

Fax: 701-277-6635

Phone: 701-277-6933 (*Voicemail only*)

Noridian Healthcare Solutions

Attn: ND Medicaid Provider Enrollment QSP

PO Box 6055

Fargo, ND 58108-6055



Resource center for agency & individual QSPs

- Support
- Education tools
- Training opportunities
- One-on-one enrollment support

Website <https://www.ndqsphub.org>

Email info@ndqsphub.org

Phone 701-777-3432

Facebook <https://www.facebook.com/NDQSPHub/>

Fraud, Waste & Abuse

Exclusion Statute 42 U.S.C § 1320a-7

The Office of Inspector General (OIG) is legally required to exclude individuals and entities from participation in all Federal health care programs convicted of the following types of criminal offenses:

- 1) Medicare or Medicaid fraud, as well as any other offenses related to the delivery of items or services under Medicare or Medicaid
- 2) Patient abuse or neglect
- 3) Felony convictions for other health care related fraud, theft, or other financial misconduct
- 4) Felony convictions for unlawful manufacture, distribution, prescription, or dispensing of controlled substances

Exclusion Statute 42 U.S.C § 1320a-7

OIG also has discretion to exclude individuals and entities on several other grounds including:

- Misdemeanor convictions related to health care fraud other than Medicare or Medicaid fraud or misdemeanor convictions in connection with the unlawful manufacture, distribution, prescription, or dispensing of controlled substances
- Suspension, revocation, or surrender of a license to provide health care for reason bearing on professional competence, professional performance, or financial integrity
- Provision of unnecessary or substandard services
- Submission of false or fraudulent claims to a Federal health care program
- Engaging in unlawful kickback arrangements
- Defaulting on health education loans or scholarship obligations

Exclusion Statute 42 U.S.C § 1320a-7

If you are excluded by OIG from participation in the Federal health care programs, then Medicare, Medicaid, and other Federal health care programs, such as TRICARE and the Veterans Health Administration, will not pay for items or services that you furnish, order, or prescribe.

Excluded physicians may not bill directly for treating Medicare and Medicaid patients, nor may their services be billed indirectly through an employer or a group practice.

Exclusion Statute 42 U.S.C § 1320a-7

You are responsible for ensuring that you do not employ or contract with excluded individuals or entities. This responsibility requires screening all current and prospective employees and contractors against OIG's List of Excluded Individuals and Entities (LEIE).

If you employ or contract with an excluded individual or entity and payment is made from federal funds for items or services that person or entity furnishes, whether directly or indirectly, you may be subject to a civil monetary penalty and/or an obligation to repay any amounts related to the services of the excluded individual or entity. Additional information and access to the LEIE can be found here: <https://oig.hhs.gov/exclusions>

Provider Enrollment

ND Medicaid Provider Information

<https://www.hhs.nd.gov/healthcare-coverage/medicaid/provider>



Provider Updates



Enrollment Information



Policies and Guidelines



Education and Training



Reporting Fraud and Abuse

Sign Up for our Medicaid Newsletter

To sign up for updates or to access your subscriber preferences, please enter your contact information below.

* Email Address

Submit



Provider Updates

MMIS Provider Contact Information

North Dakota Provider Enrollment captures contact information in the North Dakota MMIS web portal. Staff are able to include names for a variety of contact categories within your organization. If you would like to make an update to your provider profile with any names in your facility who would be the most appropriate person for these categories, please have your organization administrator send an email to NDMedicaidEnrollment@noridian.com or fax to 701-433-5956, Attention: ND Medicaid Provider Enrollment.

Posted 2-13-2023

Noridian is currently reviewing the following submission dates as of Monday, January 23 for workloads:

- Individual Application - 2/2/2023
- Group Application - 1/2/2023
- Individual Reactivation - 1/31/2023
- Group Reactivation - 1/24/2023
- Individual Revalidation - 2/1/2023
- Group Revalidation - 2/6/2023
- Affiliation - 1/28/2023
- EFT - 2/6/2023
- Taxonomy Update - 2/1/2023
- Termination Request - 2/3/2023

Any submissions on or before these submission dates can expect either an email or phone call for corrections needed or an emailed approval letter within the next 5 business days.



Provider Updates (cont.)

Be sure to keep contacts updated in group applications. There are 16 Position Descriptions to choose from.

Noridian is looking into setting up a way so that providers receive an automated response when they submit application documentation to know that it reached Noridian. Noridian is in the early stages of this new process.

Provider enrollment is a two-step process:

- Step 1: Complete the online enrollment application:
<https://mmis.nd.gov/portals/wps/portal/ProviderEnrollment>
- Step 2: Complete, sign and submit required checklist and all listed documentation from the checklist as needed to process the online enrollment application submitted:

<https://www.hhs.nd.gov/healthcare-coverage/medicaid/provider/enrollment-information>



Enrollment Information

Use the following resources to submit both the online and documentation portions of your application. The documentation portion cannot be attached to the online application, so you must submit them to Noridian by email.

Individual Enrollment Information	+
Group Enrollment Information	+
Learn More on Revalidation	+
Learn More on Taxonomy Codes	+
Search Enrolled Providers	+



Enrollment Information (cont.)

Options for Submitting Provider Enrollment Documentation

For those providers that wish to send the required documentation via email, you must request access to a secure link by sending an email to NDMedicaidEnrollment@noridian.com. An email will be sent back to you with a link to a secure site to send your documents to the enrollment application.

Mail:

Noridian Healthcare Solutions

Attn: ND Medicaid Provider Enrollment

PO Box 6055

Fargo, ND 58108-6055

Phone: [\(701\) 277-6999](tel:(701)277-6999)

Email:

NDMedicaidEnrollment@noridian.com

Fax: [\(701\) 433-5956](tel:(701)433-5956)

(option may be going away shortly)

Surveillance, Utilization and Review Section (SURS)



Health & Human Services

General Information for Providers Manual

January 2023 Summary of Changes

The January 2023 ND Medicaid provider manual updates contain various changes to chapters/sections listed below. While providers should review chapters that are specific to their specialty, all enrolled Medicaid providers are responsible to understand and comply with program requirements contained in generic chapters such as provider enrollment, provider information, Medicaid eligibility of a member, noncovered Medicaid services and primary care case management.

General Information for Providers Manual

January 2023 Summary of Changes

1. Provider Enrollment	11. Immunizations
2. Provider Information	12. Medicaid Services Billed by Schools
3. Ambulatory Surgical Center Services	13. Local Public Health Units
4. Breast Cancer and Cervical Cancer Detection	14. Medicaid Eligibility of Member
5. Chiropractic Services	15. Out of State Services
6. Coordinated Services Program	16. Pharmacy
7. Dental Services	17. Physical Therapy
8. Durable Medical Equipment	18. Physician Service
9. Family Planning Services	19. Primary Care Case Management
10. Gender Affirming Care	20. Timely Filing of Claims

Medicaid Renewals - Stay Covered ND

Starting April 1, 2023, North Dakota will begin regular Medicaid renewals for people whose coverage was temporarily extended due to the COVID-19 public health emergency to make sure they still qualify.

Providers can go to <https://www.hhs.nd.gov/staycoverednd> for more information.

The state has 14 months to initiate and complete all renewals (April 2023 - May 2024). Member renewals will be spread over that timeframe, according to the month that their renewal is coming due.

Payment Error Rate Measurement

- 1 submission error:** No submissions sent into PERM
- 3 errors:** No plan of care submitted upon request when policy states that a care plan is to be reviewed and updated every six months.
- 1 error:** Pharmacy provider did not submit proof of counseling per North Dakota State Board of Pharmacy. 43-15-31.2
- 1 error:** Plan of care nor progress notes were neither dated or signed
- 1 unbundling error:** Based on coding guidelines the provider billed items separately that were to be billed inclusively
- 1 policy violation error:** No physician certification on file per Medicaid requirements
- 3 errors:** Documentation the omitted signature.
- 1 error:** Documentation the omitted signature followed by a submission with a signature that was improperly authenticated.

Payment Error Rate Measurement

- On Tuesday, November 15, CMS published national-level Medicaid and CHIP improper payment rates in the HHS Agency Financial Report
- RY 2022 Medicaid and CHIP error rate notifications
- RY 2022 Medicaid and CHIP cycle summary reports
- RY 2022 corrective action plans were submitted to CMS on Monday, February 13, 2023

Payment Error Rate Measurement

- PERM findings result in follow up audits
- The audits are based on PERM findings but are conducted by ND Medicaid
- The goal of PERM and the follow-up audits are to confirm compliance with ND Medicaid policy
- ND Medicaid conducts the PERM based follow-up audits and these audits can expand to include more dates of service if documentation does not support charges billed.

NDHHS Website – www.hhs.nd.gov

The screenshot shows the North Dakota MMIS Web Portal interface. At the top left is the state seal. The main title is "North Dakota MMIS Web Portal". Below the title is a navigation bar with "Home", "Member", "Provider", and "Claims" buttons. A "Quick Links" dropdown menu is open, listing various services. A red circle highlights this menu. To the right is a "Provider Message Center" with a "Status" dropdown and a list of message items, each with an envelope icon. Below the Quick Links is a "News" section with a snippet of text.

North Dakota MMIS Web Portal

Home Member Provider Claims

Quick Links Print | - □

- Trading Partner Enrollment
- Provider Manuals
- Provider Inquiry/Update Request
- Provider Training Registration
- Provider FAQ
- Provider Resources
- Messages & Announcements
- EFT Enrollment
- ERA Enrollment

Provider Message Center

Status ▾

News

Governor's Task Force on Access to Affordable Health Insurance.

ND MMIS has established a

Provider Communications

- Provider/stakeholder email list
<http://www.nd.gov/dhs/services/medicalserv/medicaid/provider.html> (very top of the page).
- Provider update page
- [Medicaid Provider Updates | Health and Human Services North Dakota](#)
- MMIS provider message center: Once you have logged in to MMIS you should see your messages pop up. The messages might be an update, a revalidation that is due, etc. Please make sure to read the messages.
- Please encourage your partners and contacts to subscribe to our emails and view provider news and information and MMIS messages for updates.

Current Audits

- Duplicate Vaccine Claims
- Optical
- Chiropractic
- DME
- Date of Death
- Dental
- Mental Health
- Dermatology

Contact Information



Program Integrity Team Contact Information

Dawn Mock – Medicaid Program Integrity Administrator

Phone: (701) 328 – 1895 Email: dmock@nd.gov

Steven McNichols – Medicaid Audit Coordinator

Phone: (701) 328 – 4831 Email: smcnichols@nd.gov

Denise Martino - Fraud Waste & Abuse/Managed Care Oversight Administrator

Phone: (701) 328 – 4024 Email: dmmartino@nd.gov

Sarah Schaaf – QSP Administrator

Phone: (701) 328 – 4682 Email: slschaaf@nd.gov

Program Integrity Team Contact Information (cont.)

Gale Schuchard – Compliance Technician

Phone: (701) 328 – 2334 Email: gjschuchard@nd.gov

Missy Rosales – SURS Analyst

Phone: (701) 328 – 3507 Email: melrosales@nd.gov

Brenda Elwood – QSP Analyst

Phone: (701) 328 – 8760 Email: belwood@nd.gov

Program Integrity Contact Information – Fraud, Waste and Abuse

General fraud email: medicaidfraud@nd.gov

Phone number: 1-701-328-4024 OR 1-800-755-2604 – select option 3 to report Medicaid fraud

Suspected fraud form (SFN 20) submission link:

<https://apps.nd.gov/itd/recmgmt/rm/stFrm/eforms/Doc/sfn00020.pdf>

Program Integrity Contact Information – Provider Enrollment

General provider enrollment email: NDMedicaidEnrollment@Noridian.com

Program Integrity Contact Information – Provider Audit

General audit email: auditresponse@nd.gov

Program Integrity Contact Information – Qualified Service Provider

General QSP email: QSPEnrollment@noridian.com

Phone number: 701-277-6933

Suspected fraud form (SFN 20) submission link:

<https://apps.nd.gov/itd/recmgmt/rm/stFrm/eforms/Doc/sfn00020.pdf>

Closing

Future Dates

2023 dates

- June 28 from 1:30 to 2:30
- June 29 from 8:30 to 9:30
- October 25 from 1:30 to 2:30
- October 26 from 8:30 to 9:30

As we close...

- Electronic Visit Verification (EVV)
- Questions
- Comments
- Ideas for potential future topics