New Provider Introduction to the Rhode Island Medicaid Program
Contents

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Using the EOHHS Website
EOHHS Website…Your Information Gateway

Bookmark this webpage: www.eohhs.ri.gov

Most provider resources are available on the Providers and Partners tab. Click on the tab to see a drop down list of available resources.
Providers And Partners Tab

Clicking on this tab will display a drop down list of resources.
The left side of the General Information page lists clickable links to various resources. Most of these resources can also be accessed from the Providers and Partners drop down list.
General Information Page

The right side of the General Information page gives access to two additional links:

- **Provider Directories** – Click on your provider type to connect to your Provider Representative and access additional resources.

- **Provider Representatives** – Scroll through the list of Provider Representatives to locate the appropriate person for your provider type.
Provider Updates

To receive the Provider Update by email, send a request to deborah.meiklejohn@hpe.com. Please include the primary type of services you provide. In addition to the Provider Update, you will also receive updates related to the services you provide.

- April 2017
- March 2017
- February 2017
- January 2017
- December 2016
- November 2016
- October 2016
- September 2016
- August 2016

The monthly Provider Update contains news and information for providers. It is the way that providers learn about new initiatives and changes in RI Medicaid.

Providers may subscribe to the Provider Update to receive it in their Inbox as soon as it is published.
Provider Manuals and Guidelines

- This page contains links for Provider Reference Manuals for Medicaid providers.
- Click on the **Medicaid Provider Manual** link in blue.
Medicaid Provider Manual

This page contains a General Guidelines Manual with information applicable for all provider types.

There is also an alphabetical listing of the specific manuals for each provider type.

Click on the links to access the Reference Manual that you would like to view.
From this page, providers can access a schedule of training events and the E-Learning Center.

Additional trainings are being added to this page to support providers.
Forms andApplications

Forms and applications are found by clicking the plus sign (+) next to the appropriate topic. This will access the drop down list.

If you know the name of the form, you can also locate it through the A-Z list on this page.
Billing and Claims

This page contains important information for billing and claims, including:

- Recipient Eligibility Verification
- Third Party Insurance
- Prior Authorization
- Submission of Claims
- Payment Processing Schedule
Healthcare Portal
The Healthcare Portal provides access to information needed to conduct business with RI Medicaid, including:

- Enrollment as a Medicaid Provider
- Eligibility verification
- Claim searches
- Remittance Advice
- Prior Authorization
- and many other business functions

You may log in to the Healthcare Portal to access information 24 hours per day, 7 days per week.
Provider Enrollment

To enroll as a Medicaid provider, you must complete the online application in the Healthcare Portal.

Click on Provider Enrollment to complete online application.
Enrolling as a Trading Partner

After enrolling as a Medicaid provider, providers must enroll as a Trading Partner to conduct business electronically with RI Medicaid. Billing agents must also enroll as a Trading Partner.

• Enrollment as a Trading Partner is done electronically within the Healthcare Portal.
• To access the Healthcare Portal, go to www.riproviderportal.org
• A step by step user guide for Trading Partner enrollment can be accessed from the tabs on the bottom of the page.
• To complete the on-line Trading Partner application, click the enrollment link, shown with the orange arrow.
Registering to Use the Healthcare Portal

Once a Trading Partner ID is obtained, you must register in the Healthcare Portal before you can access information.

- Return to the home page of the Healthcare Portal.
- Select the “Register Now” link and follow the instructions.
- On the bottom of the Healthcare Portal Resource page, you will find a user guide to help you through the registration process. Print this guide to help you enroll.

http://www.eohhs.ri.gov/Portals/0/Uploads/Documents/HCP_Registering_to_use.pdf
Log In to the Healthcare Portal…….

After registering, you will be able to log in to the portal and select the function you need from a list of Business Actions.

Some actions are across the orange tool bar, and some are in a list on the right.
Eligibility Search

For an eligibility search, select the NPI, provider type, and taxonomy. Then select the billing provider.

Enter the recipient's ID number and from/to dates of service and click search.
Eligibility Response

The eligibility response will show the benefits for the recipient.

Selecting the plus sign in each section will expand that section to display more information.
Claim Status Search

To search for the status of a claim, select the NPI, provider type, taxonomy, and billing provider.

Then enter the ICN OR the recipient ID and the service from/to dates and select search.
To search for the status of a Prior Authorization, complete the top section and search for provider name.

Be sure to select if you are the requesting or supplying provider.

Then complete as many fields as possible to narrow the search, but the minimum information is Provider information and Recipient ID number.
### Locating Remittance Advice

Retrieve the last four Remittance Advice Reports by selecting the appropriate NPI, Provider Type and Taxonomy code.

After clicking search, click the circular button next to the correct billing name. In this example, there is only one choice.
Locating Remittance Advice

Only the four most recent will be accessible – download and save or print promptly. Once a new one is added, the oldest will no longer be available.
For a Remittance Advice Payment Account Inquiry, select the NPI, Provider Type and Taxonomy and hit search.

Then enter the start and end dates of your search.

Information is blocked for privacy.
Basic Information for Providers
Billing Rhode Island Medicaid Program

Electronic billing is always the preferred method of claim submission. When necessary, RI Medicaid does accept UB-04, CMS-1500, and the ADA 2012 standardized claim forms. Medicaid also utilizes its proprietary Waiver/Rehab claim form.

If circumstance requires the need for paper claim submission, please mail your claims to:

/DXC Technology

/PO Box 2010

/Warwick, RI 02887-2010

Access the EOHHS website “Forms and Applications” section to print the Waiver/Rehab claim form and for claim instructions for all claim types.
### Paper Claims vs. Electronic Claims

<table>
<thead>
<tr>
<th><strong>Electronic Claims</strong></th>
<th><strong>Paper Claims</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Cost savings</td>
<td>• Higher costs (postage, forms)</td>
</tr>
<tr>
<td>• Faster turnaround time</td>
<td>• Longer reimbursement wait time</td>
</tr>
<tr>
<td>• Free software</td>
<td>• Requires original signature</td>
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<tr>
<td>• No original signature required</td>
<td>• Slower turnaround time due to manual data entry</td>
</tr>
<tr>
<td>• Quicker connections</td>
<td></td>
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<tr>
<td>• Quicker reimbursement (usually next scheduled financial cycle.)</td>
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</table>

For additional information about electronic claim submission and our free software, please visit the EOHHS website, click on the Providers and Partners tab, then Billing and Claims. On the right side of the page, select the Provider Electronic Solutions (PES) Software Link. You may also contact the Electronic Data Interchange Coordinator via email at mary-jane.nardone@dxc.com.
Timely Filing

Important Timely Filing Information
In order for a claim to be processed for adjudication, the Medicaid claim must:
• Be received within 12 months of the date of service (DOS) for services, or
• If the claim is over a year old, then within 90 days of the date of denial.

Any claim that does not meet these criteria will be denied for timely filing.

Adjustments to a paid claim, with a DOS over a year old, will be accepted up to 90 days from the remittance advice date for the original claim payment.
Timely Filing – Third Party Payer

Claims over a year old, that involve a third party payer must be submitted:
Within 90 days from the Explanation of Benefits (EOB) date from the other payer. The other insurance actual Explanation of Benefits must be attached to the claim.

Any claim with a DOS over 1 year old, received with a third party payer EOB date greater than the 90 days will be denied for timely filing.
Timely Filing – Exception

The criteria for overriding the 12 month timely filing limit are:
• Retroactive recipient or provider eligibility (within 90 days of claim submission),
• Previous denial (other than timely filing, within 90 days of claim submission)

Provider computer printouts are not considered acceptable proof of timely filing.

Claims submitted for the DOS over 1 year must be submitted on paper to the appropriate Provider Representative and must include the necessary documentation.
Each provider type is assigned a Provider Representative to assist with any extraordinary claim issues, unique policy questions, general provider education or to navigate the Medicaid Program.

A listing of Provider Representative is found on the EOHHS website by clicking Providers and Partners. From the General Information page, click on Provider Representatives on the right.
<table>
<thead>
<tr>
<th>Provider Representative</th>
<th>Contact Information</th>
<th>Focus Area</th>
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<tbody>
<tr>
<td>Sandra Bates</td>
<td><a href="mailto:sandra.bates@dx.com">sandra.bates@dx.com</a> 401-784-8022</td>
<td>Ambulance, Dental Services, Dialysis Center, Federally Qualified Health Centers, Free Standing Ambulatory Surgical Centers, Independent Labs, Indian Health Services, Lifespan Hospitals and Physician Groups, Vision, Podiatry, Chiropractor, Certified Nurse Anesthetists</td>
</tr>
<tr>
<td>Marlene Lamoureux</td>
<td><a href="mailto:marlene.lamoureux@dx.com">marlene.lamoureux@dx.com</a> 401-784-3805</td>
<td>Durable Medical Equipment, Eleanor Slater Hospital, Home Health, Hospice, ICF-MR, Personal Care Aide/Assistant, Nursing Homes, Out of State Hospitals and Physician Groups, Independent Hospitals and Physician Groups, Audiologist, Nutrition</td>
</tr>
<tr>
<td>Karen Murphy</td>
<td><a href="mailto:karen.murphy3@dx.com">karen.murphy3@dx.com</a> 401-784-8004</td>
<td>Adult Day Care, Assisted Living, Care New England Hospitals and Physician Groups, Physicians M-Z, Physician's Assistant, Case Manager/Social Worker, Cedar, Children's Services, Community Mental Health Centers, DCYF, Early Intervention, Free Standing Psychiatric Hospital, Lead Center, LEA, Licensed Therapist, MH Rehab, MR/DD, Other Therapies, Psychologist, Substance Abuse Rehab, Waiver Group Homes</td>
</tr>
<tr>
<td>Amanda Fish</td>
<td><a href="mailto:afish4@dx.com">afish4@dx.com</a> 401-784-8017</td>
<td>PACE, Physical Therapy</td>
</tr>
<tr>
<td>Ann Bennett</td>
<td><a href="mailto:ann.bennett2@dx.com">ann.bennett2@dx.com</a> 401-784-3840</td>
<td>Pharmacy</td>
</tr>
<tr>
<td>Mary-Jane Nardone</td>
<td><a href="mailto:mary-jane.nardone@dx.com">mary-jane.nardone@dx.com</a> 401-784-8014</td>
<td>EDI Coordinator</td>
</tr>
<tr>
<td>Michael Campbell</td>
<td><a href="mailto:michael.campbell@dx.com">michael.campbell@dx.com</a> 401-784-8027</td>
<td>Training and Documentation Specialist</td>
</tr>
<tr>
<td>Name</td>
<td>Email</td>
<td>Phone</td>
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<tr>
<td>Kelly Leighton</td>
<td><a href="mailto:kelly.leighton@dxc.com">kelly.leighton@dxc.com</a></td>
<td>401-784-8013</td>
</tr>
<tr>
<td>Dorothy Pizzarelli</td>
<td><a href="mailto:dorothy.pizzarelli@dxc.com">dorothy.pizzarelli@dxc.com</a></td>
<td>401-784-8012</td>
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<tr>
<td>Customer Service</td>
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<td>Help Desk</td>
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<td></td>
<td>401-784-8100 or</td>
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<td>Toll Free 1-800-964-6211</td>
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Thank you