

Medicaid Provider Enrollment Process

Overview

In response to a request by a state, NASUAD sent to all states a mini-survey asking for information about the enrollment of Medicaid providers of home and community based services (HCBS). The survey included the following questions:

- What agency or agencies manage Medicaid provider enrollment administrative functions?
- How often are providers allowed to enroll?
- Are there differences between “agency-based” and “consumer-directed” HCBS?

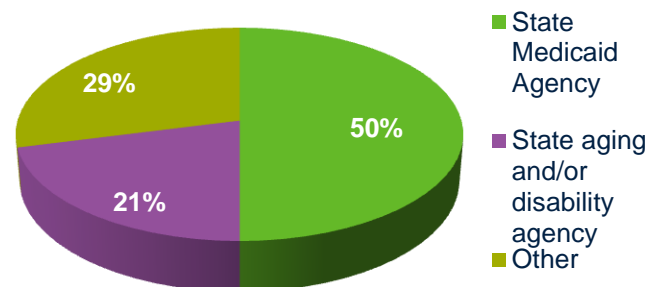
Of the 24 states responding:

- In three-quarters of the states, the Medicaid agency oversees the provider enrollment process either directly or through contracts.
- In more than four out of five states and for most HCBS providers, the Medicaid provider enrollment process is an ongoing process.
- Three-quarters of the states indicated that there are no differences in the Medicaid enrollment process between “agency-based” and “consumer-directed” services.

Who Manages Medicaid Enrollment?

Twelve states (50 percent) reported that the Medicaid agency manages the provider enrollment process. Five states (21 percent) indicated that the state aging and/or disability agency manages the process.

Among the seven states (29 percent) responding that some other entity manages the process, six said their Medicaid agency handles enrollment through contracts and one said area agencies on aging manage the process. Thus, in 18 of the states (75 percent), the Medicaid agency manages Medicaid provider enrollment either directly or through a contract.

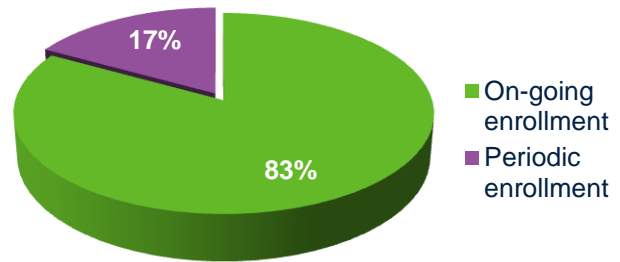


How Often Are Providers Allowed to Enroll?

Twenty (83 percent) of the responding states allow HCBS providers to enroll on an ongoing basis.

Only four states reported that there is periodic enrollment:

- In one state enrollment is once a year.
- In another state enrollment is quarterly.
- The third state has both ongoing and periodic enrollment, but ongoing enrollment is allowed for most providers. In that state, home health agencies are subject to a certificate of need process and the number of case management providers is limited.
- The fourth state accepts enrollment provider applications on an ongoing basis, but there also are web-based training and classroom instruction/testing requirements. Classroom instruction/training is offered twice a year.



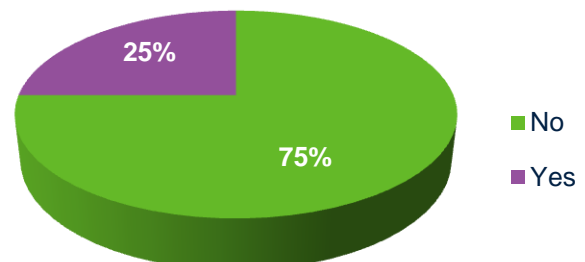
Are There Differences between “Agency-Based” and “Consumer-Directed” HCBS?

Every state except one indicated that there is no difference between “agency-based” and “consumer-directed” HCBS providers in the *frequency of opportunity* to enroll as a Medicaid provider. That state noted that the consumer may hire a personal care attendant at any time, but an agency must have a contract with the State in order to send a personal care attendant into a home where the consumer is not participating in consumer-direction.

Eighteen states (75 percent) responded that there are no differences in the types of Medicaid enrollment *administrative functions* for “agency-based” and “consumer-directed” HCBS providers.

Six states (25 percent) said there are differences in administrative functions:

- One reported that there are different forms, processes, and computer systems. Similarly, another responded that there are differences in contract terms and conditions and background check processing.



- Three states mentioned differences arising from the fiscal component of consumer-directed services:
 - One explained that the “fiscal intermediary” is approved by the Medicaid agency, while other providers go through training and the application process through the Department of Aging Services with ultimate approval by the Medicaid agency.
 - Another indicated that if a provider is selected by the consumer, the employer of record is the “fiscal management services” contractor.
 - A third state commented that services are based on a “government fiscal/employer agent” model in which support broker and fiscal management functions are provided by the same entity through a request-for-proposal process.
- One state described web-based training modules, but a paper enrollment process for providers of “consumer-directed” services.