

# SD MEDX

South Dakota Medical Electronic Data Exchange  
SD Department of Social Services 

SD MEDX Workgroup Minutes  
December 9, 2009

## I. WELCOME & OCTOBER 14<sup>TH</sup> RECAP

After brief introductions by DSS staff, Larry Iversen, Director of Medical Services, continued with a brief summary of the workgroup meeting held October 14, 2009. The expectations of the workgroup are to provide recommendations of the information and documents that will be presented to allow a smooth transition to SD MEDX.

## II. CLAIMS DISCUSSION – FOLLOW-UP

Mark Leonard, Deputy Director - Operations, discussed that the State decided to continue utilizing Launchpad for batch claims submission. There was a question from the previous workgroup meeting regarding Hospice claims and entering dates of admission and dates of death. Mark explained the dates of admission will continue to need to be included on the claim as well as the dates of death to expedite claim payment. He further explained there will be an interface with the Department of Health to obtain vital record information, but if providers rely on this interface, there may be a delay in payment since these records may not be updated in a timely manner. Mark showed the new design of the Remittance Advice to the group.

## III. GENERAL FOLLOW-UP ITEMS

Wendy Hanson, Deputy Director – Finance, walked the providers through the Medicaid Portal. She showed them the new on-line fee schedule, definitive pages designed specifically for providers and separate pages designed specifically for recipients, and historical fee schedule information on-line that can be downloaded in Excel or PDF format. Also, external links have been added specific to providers: [Center for Medicare and Medicaid Services](#), [Delta Dental](#), [South Dakota Administrative Rule](#), [EPSDT Immunization Schedule](#) and various others.

Angie Bren, Stakeholder/Provider Relations Manager, reviewed the PCP Selection and PCP Change form options that are currently available online. The link to the PCP Selection form is <http://apps.sd.gov/applications/SW96Provider/PCPSelectionForm.aspx> and PCP Change form is <http://apps.sd.gov/applications/SW96Provider/MMCPSelectionForm.aspx>. After filling out the form, it can either be submitted electronically or can be printed and faxed to the Managed Care staff. Upon receipt of these forms, the PCP will be changed effective the first day of the following month.

Nicole Beck, Stakeholder/Provider Relations Lead, updated the workgroup to the new listserv options that are now available. The Readiness Listserv for General Information continues to be a choice to sign up for all SD MEDX updates. The SD MEDX Security Listserv, SD MEDX Provider Enrollment Listserv, and SD MEDX Training Listserv are the new options to choose from. Nicole also reviewed the “My Inbox” that will be in the first screen providers will see when signing into the Provider Portal in SD MEDX. She informed the group this will be a useful tool to organizing diverse types of information such as Remittance Advice Notices, payroll information, provider enrollment/modification approvals, license/certification expirations, billing updates and rate changes.

#### IV. HARDWARE & SOFTWARE CHECKLIST

Nicole Beck, Stakeholder/Provider Relations Lead, reviewed the hardware requirements to include PC Running Microsoft Windows Operating System and screen resolution of 1024 x 768 or higher (recommended). The software requirements include: Internet Explorer 6 or higher, Mozilla Firefox 3.0.8, Safari 4.0, Adobe Acrobat Reader 6.0 or higher. The Adobe Acrobat Reader will be used for reviewing correspondence. Nicole also explained there is security designed into SD MEDX. Users will need credentials for logging into the system.

#### V. PROVIDER USER ACCEPTANCE TESTING

Angie Bren, Stakeholder/Provider Relations Manager, discussed with the workgroup the Provider User Acceptance Testing for Provider Enrollment. The minimum requirements for system hardware and software were reviewed by Nicole Beck previously. The test group will consist of re-enrollment information existing in SD MEDX. The group will also be given scripts for new enrollments. During the first week of January, there will be a Computer Based Training (CBT) session provided to the volunteers. The workgroup was asked to contact Angie by 12/15/09 if they wanted to participate in the user acceptance testing.

#### V. PROVIDER RE-ENROLLMENT DEMONSTRATION

Nicole Beck, Stakeholder/Provider Relations Lead, stated all active enrolled providers will be asked to re-enroll with SD MEDX. The provider information will be converted from the legacy MMIS to SD MEDX. Providers will then be asked to validate the converted information, and they may also be required to add new information.

Nicole further explained some providers will be asked to enroll from scratch because they are not active enrolled providers in the legacy MMIS. Providers that will be asked to submit new enrollments include billing agents and clearinghouses.

Nicole listed the re-enrollment timelines. Provider Re-Enrollment will begin February 26, 2010. Billing agents & Clearinghouses will submit new enrollments early March 2010. Starting Mid March 2010, groups will re-enroll by validating their converted information. This re-enrollment will include the servicing providers. In late March 2010, Facilities/Agencies/Organizations/Institutions/Pharmacies & IHS/Tribes will re-enroll by validating their information. Wrapping up re-enrollment and validation, around mid-April 2010, will be Regular Individual Providers.

The re-enrollment tools were introduced to the workgroup by Nicole. The Re-enrollment Checklist and Quick Reference Guide were reviewed with the group. Nicole accessed the Computer Based Training tool and showed the group the first step of the Provider Re-enrollment process. After the presentation of the tools, Nicole stated there would be a link sent to the workgroup to have them review the documents. After they have reviewed them, she asked that they contact us with any comments or recommendations to improve the documents. The link to the tools is <http://dss.sd.gov/sdmedx/training.asp>.

## VI. PROVIDER QUESTIONS

**Q. Can providers receive copies of remittance advice examples.**

A. Yes, we will forward out the remittance advice examples to attendees.

**Q. Several providers have one billing NPI. Will they be split out using the taxonomy code?**

A. Taxonomy codes are associated to the servicing NPI.

**Q. When submitting claims, providers enter five leading zeros before the recipient 9 digit ID#. Different values are returned on the 835 back to the providers. With the new system will it return 5 leading 0s?**

A. We are currently developing this. We will answer at the next workgroup meeting.

**Q. We have a contracted doctor and he provides services at 15 different sites. Will we be able to see all the contracted doctor sites or just our facility?**

A. The billing provider will have a secure login to SD MEDX and will be able to associate servicing providers as well as servicing locations. Providers will only be able to see provider-specific information.

**Q. When a change form is completed and submitted, does the change take effect immediately?**

A. Currently, the changes occur the first of the next month. Managed care enrollment is being reviewed by Medical services for some possible changes to the program.

**Q. Where can we access the listserv?**

A. The SD MEDX website is <http://dss.sd.gov/sdmedx/index>. Scroll down to **SD MEDX Readiness Listservs** and click “here” on the SD MEDX General Listserv, SD MEDX Enrollment Listserv, SD MEDX Training Listserv, or SD MEDX Security Listserv.

**Q. Will this update the PECO system?**

A. No, the Department of Social Services, Division of Medical Services will not be using the PECO system for its provider enrollment functionality. SD MEDX will directly handle the enrollment of providers who wish to be South Dakota Medical Assistance providers.

**Q. Will Birth to 3 providers have different provider numbers?**

A. In SD MEDX there will be association by multiple taxonomies. Birth to 3 providers will check an indicator.

**Q. What provider type do nursing homes fall into?**

A. Nursing homes are considered a Facility.

**Q. How do the providers know when it is their time to re-enroll? Are we just supposed to know or do you tell us?**

A. We will keep providers informed of training and re-enrollment by sending information out via mail, listserv, and postings on the SD MEDX website.

**Q. Billing agents enroll and then the individual will associate as they enroll. With electronic filing, there is total onboarding like Medicare. Do you see that being a similar process?**

A. Agents will be able to access specific information, retrieve acknowledgements for them. There will be no file maintenance from billing agents/trading partners.

**Q. How long will the revalidation take?**

A. We are currently conducting User Acceptance Testing, and a new enrollment takes about 30 minutes or less. As providers get acquainted with system, it will be even faster.

**Q. The timing for Billing Agents enrollment is during a busier time of the month. How many days will we have to enroll?**

A. Billing agents will have 10- to 14-day time line to enroll.

**Q. Once re-enrolled, will providers be contacted from Medicaid to notify everything is approved with the enrollment?**

A. After submitting and all enrollment information is complete and submitted, a confirmation notice will be given. When provider enrollment staff has reviewed and all documents and approved the enrollment, a Welcome letter will be sent. The anticipated time for re-enrollment approval is 5 days.

**Q. Will there be any other forms of training?**

A. There will be Computer Based Training, Re-enrollment and Enrollment Checklists, and Quick Reference Guides.

**Q. Does the provider agreement require signature?**

A. Yes. Providers will be required to sign the agreement and mail in the ‘wet signature’ to South Dakota Medical Assistance.

**Q. If you are entering and missing a piece of information, can you save application?**

A. Yes. The providers will be given an application number to write down. With the application number, you will be able to go back in and continue the application process.

**Q. Will electronic signatures be allowed? Providers do not have access to providers in house. Agreements are sent to providers and have to wait for it to be returned.**

A. Not currently.

**Q. What would be appropriate as far as timeline for providers to start an application to submission of the complete application?**

A. 60 days at the minimum is preferred.

**Q. Can the new Provider Agreement be sent out early?**

A. Yes, the state can send out the new Provider Agreements upon request.

**Q. Are you going to have scheduled training?**

A. Yes, there will be training offered for every enrollment type.

**Q. Will there be a spreadsheet given to providers with the converted data listed?**

A. Providers will be given the Re-enrollment checklist, which will provide a list of all required fields needed to complete the re-enrollment process. They will need to access SD MEDX to verify data.

**Q. If the Billing Agents do not receive a signed agreement, will it hold up payment? How much time is there between enrollment and system Go-Live?**

A. Billing Agents must enroll in SD MEDX. Providers who will be using a billing agent must associate to that billing agent in SD MEDX. Whatever the billing agent requires for providers who wish to use its services is directly between the billing agent and that provider and is not housed in SD MEDX. .

**Q. Will Clearinghouses need to make sure that every provider has signed the Electronic Media Provider Agreement for SD MEDX?**

A. Information captured in the old Electronic Media Provider Agreement will be captured in SD MEDX during the enrollment process. Therefore, providers will no longer be required to sign a separate Electronic Media Agreement.

**Q. Will there be an association between foster home agencies and the counseling services for the recipients?**

A. No, foster home agencies will not be associated to counseling service provider; however, as the guardian of recipients, foster agencies will be able view recipient information after the recipient functionality is released in SD MEDX. Counseling services will be billed separate and not associated with the foster home.