

# South Dakota Medicaid Provider Enrollment Portal User Guide

November 2024

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## Overview

The South Dakota Medicaid Provider Enrollment Portal (PE Portal) was designed to increase a provider's ability to self-control who has access to their data. The PE Portal is the entry point for an eligible provider to enroll as a SD Medicaid provider. It is also the entry point and system of record for enrolled providers to update and maintain their enrollment records.

Providers are required to maintain and update their enrollment records to always reflect current operations as a condition of participation.

The four main functionality components of the Medicaid PE Portal are:

- 1) Registering your account and logging into the system
- 2) Administrative functions to add and manage your organization's PE Portal user accounts
- 3) Completing new enrollments
- 4) Updating and maintaining existing enrollment records

The Provider Enrollment (PE) Portal operates separately and distinctly from the SD Medicaid Online Portal which permits confirmation of recipient eligibility, access to remittance advice, and the ability to submit claims.

## DSS Medicaid PE Portal Webpage & Additional Resources

The DSS Medicaid Provider Enrollment & Maintenance website can be accessed at <https://dss.sd.gov/medicaid/providers/enrollment/enrollment.aspx>.

This web page is the home page for SD Medicaid Provider Enrollment. It contains information about provider eligibility requirements and numerous provider enrollment- related source materials including those pertaining to the PE Portal. Users working in the area of provider enrollment are encouraged to save this link as a favorite.

## Definitions

**Billing NPI:** Referred to as BNPI; required to register in order to enroll BNPIs; comprised of two types of NPIs:

- A Type 2 NPI representing an Organization and utilizing a TIN; and
- An unincorporated sole proprietor operating solely under their SSN where claims would be billed only with this NPI in both the rendering and billing NPI fields.

**Centers for Medicare & Medicaid Services (CMS):** The federal regulatory agency for Medicare and SD Medicaid. In addition to setting requirements for Medicaid provider enrollment, CMS also issues authorizing approval and recognition as an eligible provider in some situations.

**Modification:** The process of making updates or changes to an enrollment record for an NPI that is in an "Approved/Active/Open" business status.



**National Plan & Provider Enumeration System (NPPES):** where providers can request NPIs and maintain public NPI information; found online at [NPPES \(hhs.gov\)](https://nppes.hhs.gov)

**National Provider Identifier (NPI):** A unique identifier issued by the Centers for Medicare & Medicaid Services (CMS) via NPPES for standard identification of providers across all health payers. It is 10-digit long number, starting with a 1.

**New Enrollment:** The user-initiated process of populating and submitting data for an unknown or terminated NPI in order to have the NPI enrolled and recognized for participation with SD Medicaid.

**Provider Enrollment System ID:** This ID is assigned for tracking and becomes visible to enrolled providers in the upper right corner of an enrollment record upon approval. These values are used to establish permission and access to the Medicaid Provider Portal.

- IDs beginning with “1”: Provider was enrolled on or before June 2010 and the enrollment record was converted into the PE Portal as an active provider.
- IDs beginning with “2”: Provider completed a new enrollment application after June 2010 and the enrollment record was converted as an active provider to the PE Portal.
- IDs beginning with “3”: Provider was not actively known at the time of PE Portal inception and a new enrollment was completed in the PE Portal.

**Servicing NPI:** Referred to as SNPI; enrolled and accessed by a registered BNPI; Type 1 NPI belonging to an individual; most common type of individual enrollment where payment is directed to a BNPI with a TIN and not the individual's SSN.

**Taxonomy Code:** A national standardized code set of 10 byte alpha/numeric “smart” numbers created by the American Medical Association & National Uniform Claim Committee that indicates a provider's type or grouping (places 1-2), specialty or classification (places 3-4), and subspecialty if applicable (places 5- 10 including “X” at the end).

**Taxpayer Identification Number (TIN):** A unique nine-digit identification number used by the Internal Revenue Service (IRS) issued by either the Social Security Administration (SSA) or by the IRS. A Social Security number (SSN) is issued by the SSA and all other TINs are issued by the IRS.

## Internet Browser Requirements

The PE Portal is the enrollment system of record and is designed to be nearly entirely online. The PE Portal will work with common internet browsers meeting the [State's browser standards](#). At the time of the original publication that includes Microsoft Edge, Chrome, Mozilla Firefox, and Safari. Please note that non-standard browsers such as Internet Explorer should be avoided. These browsers may appear to work in part, such as letting you log in, but will not fully work such as displaying records or results on the screens.



## General PE Portal Navigation

The following is general information to assist users in navigating the PE Portal.

- Click “Enrollment List” from the blue tab to exit any enrollment record and return to the main page.
- F5 or Refresh – this has limited use; the user will remain in the same enrollment record.
- Always log off your system instead of just closing your browser. Failure to do so may inadvertently lock others out of enrollment records you were in.
- Hover on “Administration” or “Enrollment” tabs to view selectable options.
- Select drop-down options from the list as opposed to typing values.
- The Enrollment area of the system is case sensitive. Only capitalize letters that need to be, such as first letters in a name.

### Button Functionality

The following are a list of icons that may be visible within the PE Portal and a general description of what the buttons do.



Click on “+” to expand the record. Additional information is available to view, but it doesn’t fit on the screen in a single row of data.



Click on “-” to minimize the data displayed. This will return the data to having a “+” next to it.



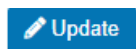
The “Next” button moves the user to the next screen.



The “Previous” button is used to return to the prior screen.



The “Add” button is used to add data to the record. This often follows the initial entry of information in data entry fields. Upon clicking “add” this data will be displayed in the data table directly under the entry form blanks.



The “Update” button is used to bring up existing data from a prior entry. When displayed the user has read-write permissions and can also modify the data as desired. Clicking the Update button in the Enrollment list, allows access to the specified record. From within an enrollment record for a certain section, clicking update will retrieve data from a data table, populate it in the data entry fields, and allow user modification.



+ Add Attachment

The “Add Attachment” button is used to upload any required documentation to support the enrollment application. Examples include the provider agreement, disclosure, license/certification, financial letter, out-of-state-claim, PRTF attestation, and addendums as applicable for PCP, MH, school, transportation, or CHW.



Reset

The “Reset” button is used to clear data entry fields such as to clear the search entries on “Enrollment List” or to clear all data entry fields during entry and before clicking “add.”



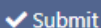
Cancel

The “Cancel” button is used to exit a record where changes have been made but are not desired to be retained. If data has already been added to a data table, “cancel” will not remove it. In that

situation, the trash can icon needs to be used. From the Enrollment List page (not within a record) it can be used to end an application that hasn’t been submitted to the State.



The trash can icon has the delete functionality. If users make an error in the initial entry, selecting the trash can icon deletes the record from the screen.



Submit

The “Submit” button is used by Providers completing a New Enrollment to indicate that the record is complete, resulting in a “submitted” business status on the Provider Enrollment List screen.



Save

The “Save” button follows certain updates where selecting the button will result in the data being saved to a data table. A “Save” button is not needed in all situations as data is saved in many areas as you progress.



Accept

The “Accept” button follows certain updates that have been made in the system and is the way to indicate that the data is good and should be saved.

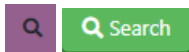


Reject

The “Reject” button is used by State users to reject a data record entry.



This button allows the user to export information from the screen into Excel for additional data sorting and manipulation.



“Search” buttons are those with the magnifying glass icon. These are selected following entry of data parameters to initiate a search.



The “Locked” button is found on the Enrollment List Page and indicates that another user is in a given enrollment record and prevents another user from making changes. Clicking on the button will show what user is in the record. Failure to logout or timing out may cause records to lock.

SD Medicaid will use a process to unlock records each night as a reset function.



The “View” button is found on the Enrollment List Page and indicates that a given record is view only. This may be due to the modification status or because the record is in a terminated or non- active status.

## User Accounts & Roles

The PE Portal functions through account registration, approval, and creation of roles. Accounts are created based on registrations of BNPIs, not on tax IDs. Multiple BNPIs sharing the same tax identifier do not automatically share accounts. Each BNPI will be required to register, including those desiring to start an enrollment. SNPIs do not need to register as gaining access to those is through a registered BNPI.

The PE Portal accounts for providers have the option of two roles: Provider Admin and Provider User. The main difference between roles is the ability to create/update accounts.

### Provider Admin Role

Provider Admin (administrator) accounts begin through [Registration](#). Accounts with the Provider Admin role will be responsible for PE Portal oversight and management of all user administrative functions for their authorized Billing NPI(s) including adding, updating, approving, and rejecting users.

The Provider Admin will be granted all available Administration tab permissions by default which includes the ability to:



- **Add Users** – Create additional Provider Admin and Provider User accounts for all or any combination of BNPIs managed by that Admin
- **Work Queue** - Approve/reject user registration requests that list BNPIs under the Admin's oversight
- **Update** – Admins can modify other Provider Admin and Provider User accounts and available permissions including add/remove access to a user's assigned Billing NPI(s), permissions available, change user's status to inactive or reactivate a user, reset a user's password and also update a user's account contact information details
- **Users** – View a list of the Provider Admin and Provider User accounts which they have created and/or approved within their Portal account.

The Provider Admin will also be granted all Enrollment tab permissions by default, including:

- **Enrollment List Page** - ability to search, access, and update existing enrollments for BNPIs and associated SNPIs; view status of existing and new enrollments
- **New Enrollment** - ability to view and submit new enrollment applications

In addition, the Provider Admin will be granted access to home page links including:

- **Edit Profile** – All account users can edit their own profile regarding contact info such as address and phone number and changing their password.
- **User Guide** - Links to this document which is the initial starting point for questions and guidance on how the PE Portal performs.

Once a Provider Admin registration has been approved by the PE Portal Team, ONLY the Provider Admin will have the ability to administer account permissions for their assigned Billing NPI(s). SD Medicaid recommends that this initial primary Provider Admin is someone within the organization rather than an outside party. The Provider Admin should create at least one additional Provider Admin user. This additional account provides a built-in back-up to assist with registration requests and PE Portal User maintenance for their organization in the event of the primary Provider Admin's absence.

If additional Billing NPI(s) access is required after initial registration approval and account creation, the user must email [SDMedicaidPE@state.sd.us](mailto:SDMedicaidPE@state.sd.us) with the subject "Additional BNPI" and request that an additional BNPI which is not yet known to the PE Portal be added to their account. This includes BNPIs that need to enroll.





## Provider User Role

The SD Medicaid PE Portal Team does not create Provider User accounts. Provider User accounts are under the control of Provider Admin accounts. This ensures that the Provider, who is best suited to make data sharing determinations for their organization, has full control to do so.

Access is controlled on the basis of individual BNPIs and whether or not new enrollments can be submitted. Each Provider User account will list the BNPI records that can be accessed.

A Provider User can be granted Enrollment tab permissions including:

- **Enrollment List Page** - ability to search, access, and update existing enrollments for authorized BNPI found on their account and associated SNPI
- **New Enrollment** - ability to view and submit new enrollment applications; limitations based on association to an authorized BNPI on the User account

A Provider User will have access to home page links including:

- **Edit Profile** – All account users can edit their own profile regarding contact info such as address and phone number and changing their password.
- **User Guide**

A Provider User will have no access to Administration.

## Registration

Access to the PE Portal begins with the registration process. The registration process requires the requester to click “Register,” found next to “Login” in Figure 1 below.

## South Dakota Medicaid Provider Enrollment



Welcome to South Dakota Medicaid Provider Enrollment.

A valid username and password is needed for Provider Enrollment.

Provider Enrollment username and passwords must be set up separately from the Medicaid Portal login information.

For assistance with username and password, contact your administrator.

For more help contact the State at [SDMedicaidPE@state.sd.us](mailto:SDMedicaidPE@state.sd.us)

### LOGIN

(Note: This is your login email)

[Register](#)[Forgot Password](#)

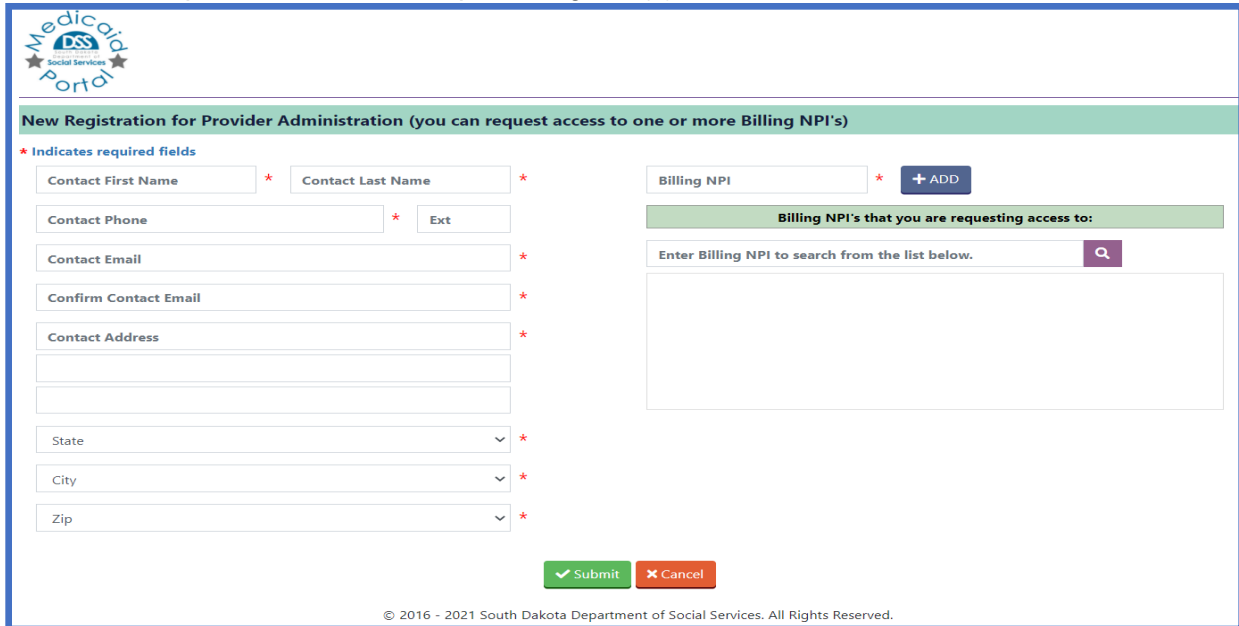
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*Figure 1: PE Portal New Registration Form*

Once the Registration screen is displayed (Figure 2), the user must populate the required data fields with the business contact information. One registration form can be used to request access for multiple Billing NPI(s).



**New Registration for Provider Administration (you can request access to one or more Billing NPI's)**

\* Indicates required fields

Contact First Name \* Contact Last Name \*

Contact Phone \* Ext

Contact Email \*

Confirm Contact Email \*

Contact Address \*

State \* City \* Zip \*

Billing NPI \* + ADD

Billing NPI's that you are requesting access to:

Enter Billing NPI to search from the list below. Q

✓ Submit ✕ Cancel

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Figure 2: New Registration Form Screen

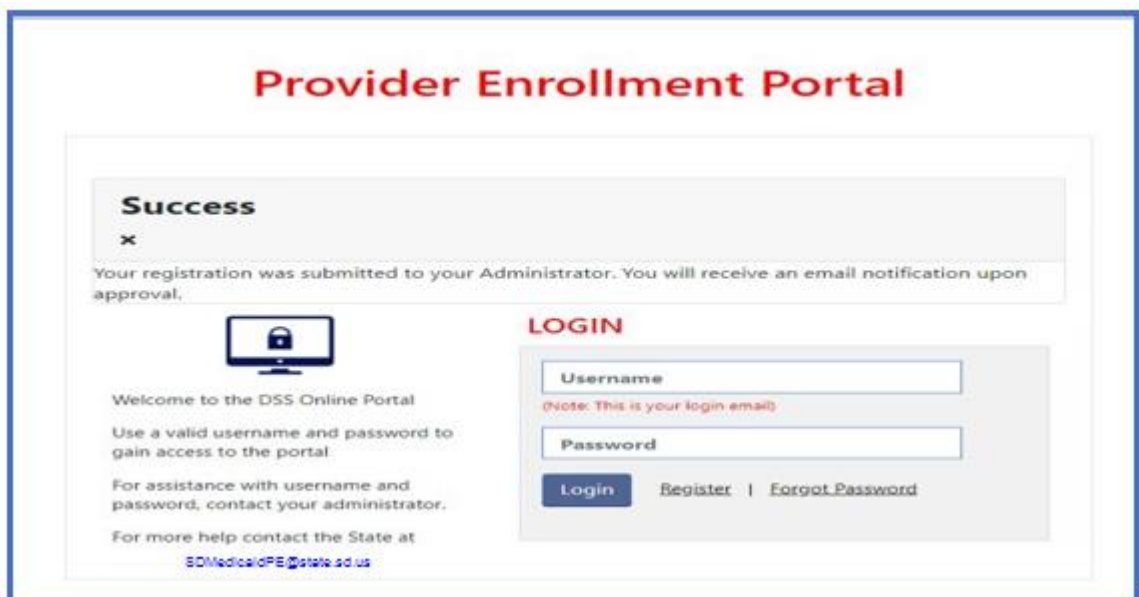
Keep the following in mind when completing the form:

- **Asterisk (\*)** – Each required field is indicated with an asterisk (\*) symbol.
- **Contact First Name** – the first name of account requestor; can't be generic like "provider"
- **Contact Last Name** – the last name of account requestor; can't be generic like "enrollment"
- **Phone** – Enter 10 numeric values only. This field is formatted (XXX)XXX-XXXX and will automatically populate "(" and "-" as the requestor begins typing.
- **Ext.** – The extension field allows up to seven (7) numeric-only values. This is optional.
- **Contact Email** – This will become the requestor's Username. Only one account per email address is permitted. Dual entry is required to minimize entry error.
  - If an account has already been requested or approved for an email address, the requestor will receive an error that the email already exists and will not be able to submit the New Registration form.
  - Generic or shared email addresses will not be approved. Registration requires a person-specific email address.
  - If requestors do not receive a confirmation email at the expected email address, they entered within a short timeframe of submitting

their request, they may have typed their email incorrectly. If this occurs, please send an email to [SDMedicaidPE@state.sd.us](mailto:SDMedicaidPE@state.sd.us) with the subject "Incorrect Email" and include the BNPIs tied to the account registration and indicate the email address may have been entered incorrectly on the pending registration request.

- **Contact Address Line 1** – Enter the name of the business organization that the requester is employed by or working on behalf of. For requesters who will have multiple BNPIs tied to their account, use the highest-level name common between the NPIs such as "Provider Health."
- **Contact Address Line 2** – Enter the physical location of the business organization.
- **State, City & ZIP** – These fields are dynamic and require users to select them in the order in which they are displayed on the screen. Once a user selects State, the City dropdown allows users to select the list of cities specific to that State. After selecting the appropriate City, the user can select the appropriate ZIP Code value. If the City/ZIP dropdowns do not near-instantly populate after State is selected, please wait a few additional seconds as the PE Portal is querying the State database.
- **BNPI** – Type each BNPI that the requestor should have administrator privileges to, followed by "add." BNPIs that have been selected will display in the box. The "search" capability is provided for users who may add so many BNPIs that they are not all visible at one time.
- **Submit** – click submit when entry is finished.

After submitting a New Registration request, the requestor will be directed back to the Login screen and receive a "Success" message (Figure 3) notifying them that their request was submitted for approval. The requestor will also receive a confirmation email at the email address listed in their New Registration form that their request was submitted for approval (Figure 4).




**Provider Enrollment Portal**

**Success**

✕

Your registration was submitted to your Administrator. You will receive an email notification upon approval.



Welcome to the DSS Online Portal

Use a valid username and password to gain access to the portal

For assistance with username and password, contact your administrator.

For more help contact the State at [SDMedicaidPE@state.sd.us](mailto:SDMedicaidPE@state.sd.us)

**LOGIN**

(Note: This is your login email)

Login
Register
Forgot Password

Figure 3: New Registration “Success” Message upon Submission

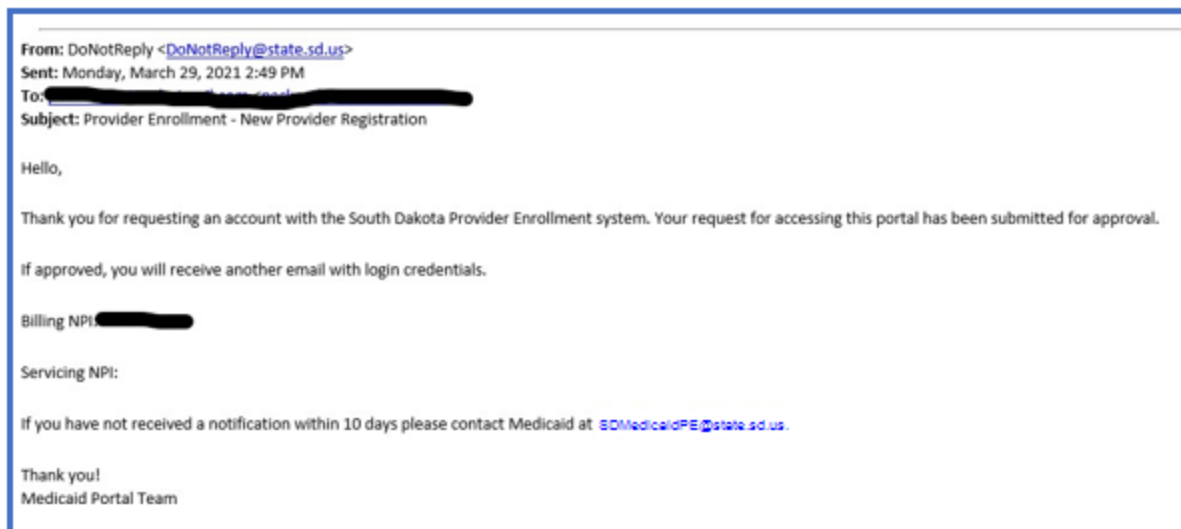


Figure 4: New Registration Request Email

- New registration requests for BNPIs without a Provider Admin account will be directed to the PE Portal Team for review.
- New registration requests for BNPIs with an existing Provider Admin account will be directed to that Provider Admin in their “Work Queue.”
- Incomplete or invalid registration forms will not be reviewed.
- Forms that cannot be validated or confirmed may be rejected.
- Emails are sent to the requestor with rejection or approval (Figure 5).

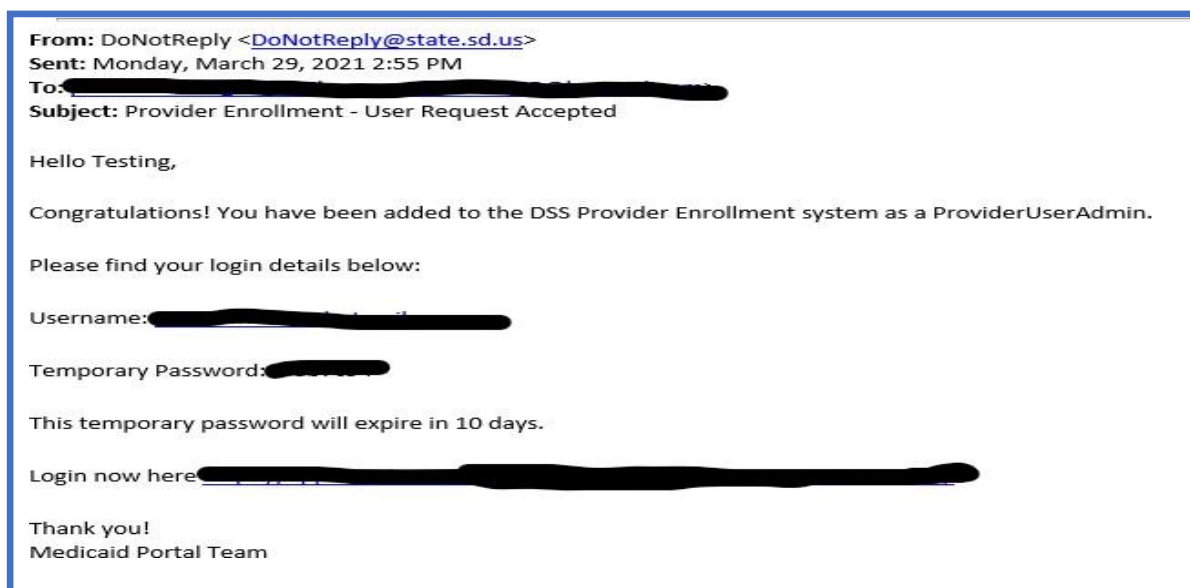


Figure 5: Approved Registration Message

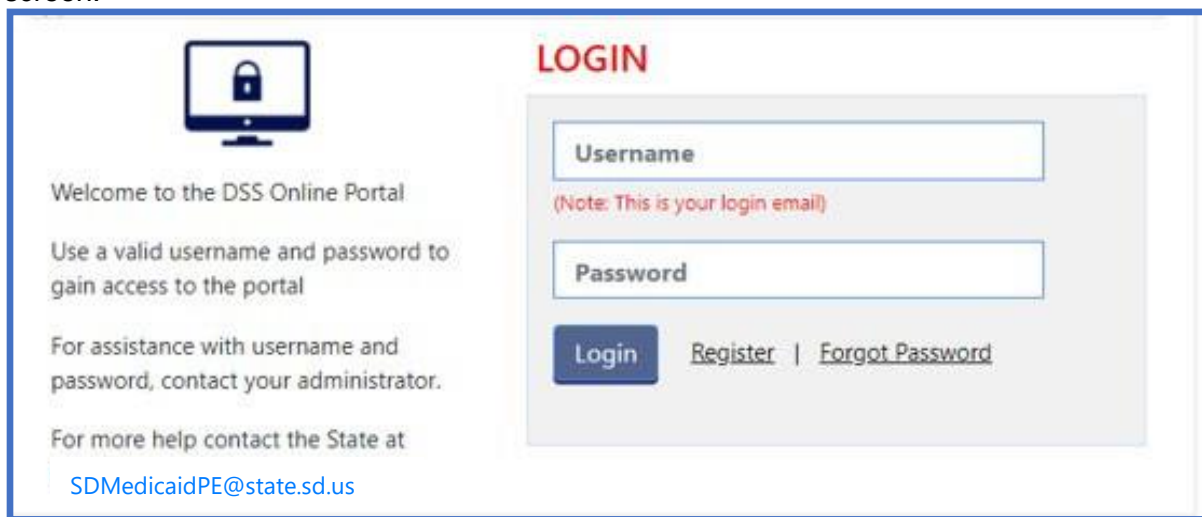
## Login

The Login page (Figure 6) clicking any PE Portal access link.

- Username - the user's email address that they registered with.
- Password
  - General: the user's saved password meeting the system's [Password Requirements](#).
  - First-time login: the temporary password found in the account approval email notification. Remember temporary passwords are only good for 72 hours.

Click "Login" following entry of the Username and Password.

**Note:** Upon successful first-time login, users will be directed to the [Change Password](#) screen.



The screenshot shows the PE Portal Login Screen. On the left, there is a welcome message: "Welcome to the DSS Online Portal", "Use a valid username and password to gain access to the portal", "For assistance with username and password, contact your administrator.", and "For more help contact the State at SDMedicaidPE@state.sd.us". On the right, there is a login form with the title "LOGIN" in red. The form contains two input fields: "Username" and "Password". Below the "Username" field, there is a red note: "(Note: This is your login email)". Below the "Password" field, there is a blue "Login" button. To the right of the "Login" button, there are two links: "Register" and "Forgot Password".

Figure 6: PE Portal Login Screen

## Passwords

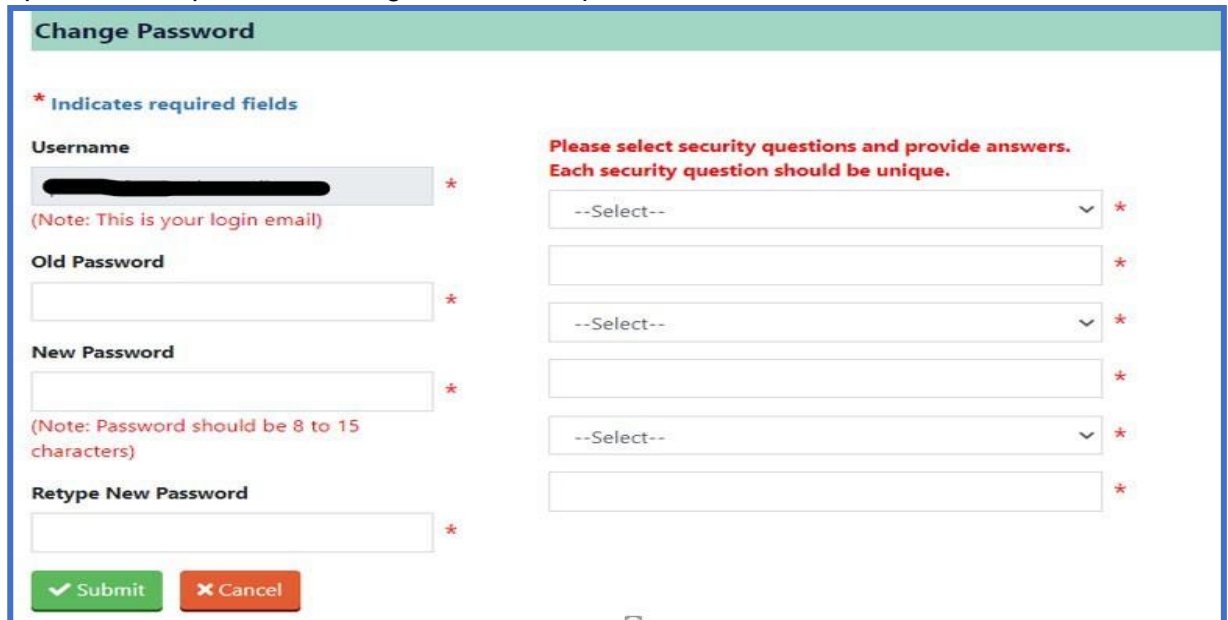
### Password Requirements

The following are the standards for PE Portal passwords. Please review and apply these standards to your password entries to ensure compliance:

- Must be changed every ninety days.
  - On screen prompts will display when approaching password expiration.
- Must be at least eight characters and no more than 15 characters.
- Must contain at least one from each of the following groups:
  - English uppercase characters (A through Z)
  - English lowercase characters (a through z)
  - Numbers (0 through 9)
  - Symbols (!, \$, #, %)
- Must not be one of the five most recent passwords.

## Change Password

Users will be directed to the “Change Password” screen (Figure 7) immediately following their initial system login, after clicking on “Change Password” from their profile sub-menu options, or as part of the “Forgot Password” process.



The screenshot shows the 'Change Password' form. It has a green header bar with the title 'Change Password'. Below the header, there is a red asterisk icon and the text '\* Indicates required fields'. The form is divided into two main sections. The left section contains four text input fields: 'Username' (which is grayed out and has a red asterisk), 'Old Password' (with a red asterisk), 'New Password' (with a red asterisk and a note below it: '(Note: Password should be 8 to 15 characters)'), and 'Retype New Password' (with a red asterisk). The right section contains four dropdown menus for selecting security questions, each with a red asterisk. The first dropdown menu has the text '--Select--' and a red asterisk. The second dropdown menu has the text '--Select--' and a red asterisk. The third dropdown menu has the text '--Select--' and a red asterisk. The fourth dropdown menu has the text '--Select--' and a red asterisk. At the bottom of the form, there are two buttons: a green 'Submit' button and a red 'Cancel' button. A red error message is displayed at the top right of the form: 'Please select security questions and provide answers. Each security question should be unique.'

Figure 7: Change Password Screen

The “Change Password” screen needs to be populated with the following:

- **Old Password** – Enter the existing password. Use the temporary password received via email when completing your initial login or login following the “Forgot Password” process.
- **New Password** – Enter a new password meeting the Password Requirements found above.
- **Retype New Password** – Re-enter the New Password. The entries in New Password and Retype New Password fields must match or the user will receive an error.
- **Select Security Questions and Responses** - These Security Questions and Responses will be used for the “Forgot Password” functionality. Duplicate answers between the questions are prohibited and will generate an error message.

**Note:** The Username field is grayed out on the “Change Password” form. The Contact Email Address submitted on the Registration form or when the user account was added, becomes the unique account Username.

- Email addresses cannot be duplicated, and users will not be able to have two active accounts with the same Username.
- If a User’s email address changes, their Portal Provider Admin will

need to update the user's account to "Inactive" status and create a new account for them under their new email address.

After completing the Change Password form and clicking "Submit" the user will receive an email notification concerning changes made to their account.

## Forgot Password

A temporary login password can be requested using the "Forgot Password" button on the login screen if the user has forgotten or misplaced their password.

- o Click "Forgot Password" on the Login screen (Figure 6)
  - o Enter your Username on the "Forgot Password" screen (Figure 8) and then click "Submit"
  - o Enter responses to the Security Questions selected when completing the login process for the first time (Figure 9)
  - o Click "Submit"
  - o A new Temporary Password will be sent to the user's account email address
- Note:** Temporary passwords are only good for three days (72 hours).
- o Upon login with the temporary password, the user will be directed to Change Password.



Medicaid  
DSS  
Social Services  
Portal

### Forgot Password

\* Indicates required fields

Username (Note: This is your login email) \*

Submit Cancel

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Figure 8: Forgot Password Username





Figure 9: Forgot Password Security Question Responses

## Logout

Users should select “Logout” from their profile sub-menu options when they are done in the PE Portal. Users will then be logged out and directed back to the Login screen. Failure to appropriately log out, such as simply closing the internet browser or being timed out of the system, may result in enrollment records being “locked” and unavailable to other PE Portal users.

## General Structure

The general PE Portal structure includes menu options shown as half-moons along the left top portion of a user’s Portal account screen and additional header information on the right side (Figure 10).



Figure 10: User Role & Account Profile View

The menu option of Enrollment is always visible. The Administration menu option is visible for those with an Admin role.

The PE Portal also has header information that will display on the right side of the screen for all users after login, regardless of account set-up.

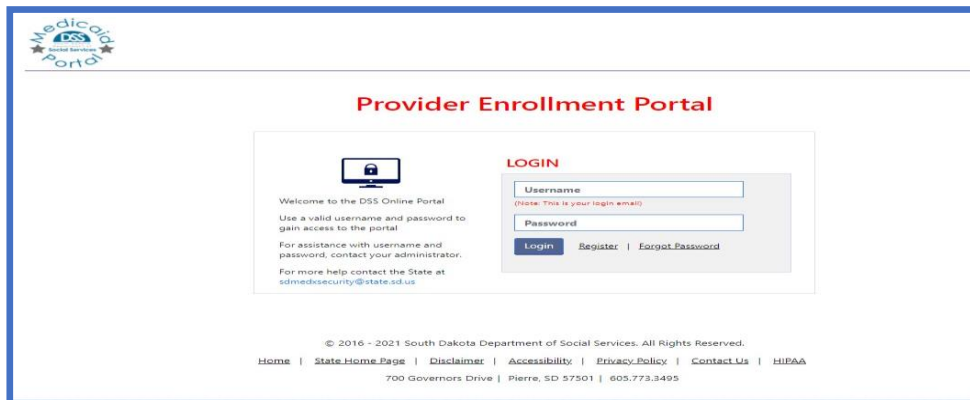
- User Role – “You are logged in as...” message displays in the upper right-hand with the role the user was given at account creation such as Prov Admin or

Prov User.

- User Guide Links – These user reference documents will open in a new browser tab when selected.
- User Profile Icon & First Name – The user first name button contains a dropdown arrow with a sub-menu and additional available actions
  - My Profile (Figure 11)
    - Users can review their contact details, Billing NPIs they have access to and available permissions
    - Greyed out fields can't be updated – contact the Admin to update. If the originally master Provider Admin account requires updates, email details to [SDMedicaidPE@state.sd.us](mailto:SDMedicaidPE@state.sd.us) noting “Profile Updates Required” in the subject.
    - Provider Users can't see or add Admin permissions without their account being noted as “inactive” and a new account being established.


Figure 11: Provider Admin - My Profile screen

- Change Password – refer to [Change Password](#) section
- [Logout](#) – logs user out and returns them to the Login page
- PE Portal Logo – links to DSS Medicaid Provider Enrollment & Maintenance webpage; opens in new browser window (Figure 12)
- Home – Logged in users are directed to the Enrollment List page. Other users will remain on the PE Portal Login in
- State Home Page – links to the Official South Dakota State Government website
- Disclaimer - links to South Dakota Medicaid Disclaimer and Limitation of Liability web address
- Accessibility – links to SD Medicaid Accessibility Policy
- Privacy Policy – links to South Dakota Medicaid Privacy Policy
- Contact Us – Opens blank email addressed to the PE Portal address tied to access questions
- HIPAA – DSS Health Insurance Portability and Accountability Act



**Medicaid Portal**

### Provider Enrollment Portal



Welcome to the DSS Online Portal  
Use a valid username and password to  
gain access to the portal  
For assistance with username and  
password, contact your administrator.  
For more help contact the State at  
[sdmedsecurity@state.sd.us](mailto:sdmedsecurity@state.sd.us)

**LOGIN**

Username  
(Note: This is your login email)

Password

[Login](#) [Register](#) [Forgot Password](#)

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*Figure 12: Medicaid Portal Logo and Links*

## User Maintenance

The User Maintenance function is found under the Administration menu. This is where a Provider Admin can complete administrative functions related to users.

### View, search, and export user lists

- The default view is for “Active” users in a collapsed view (Figure 13).
  - Click the “+” to expand and view details including BNPIs (Figure 14).
- Select options from the “Status” or other drop-down options and then “Search” to change the displayed data.
- Use “Export Users” to export the list of displayed information to Excel

Figure 13: Users List Default View

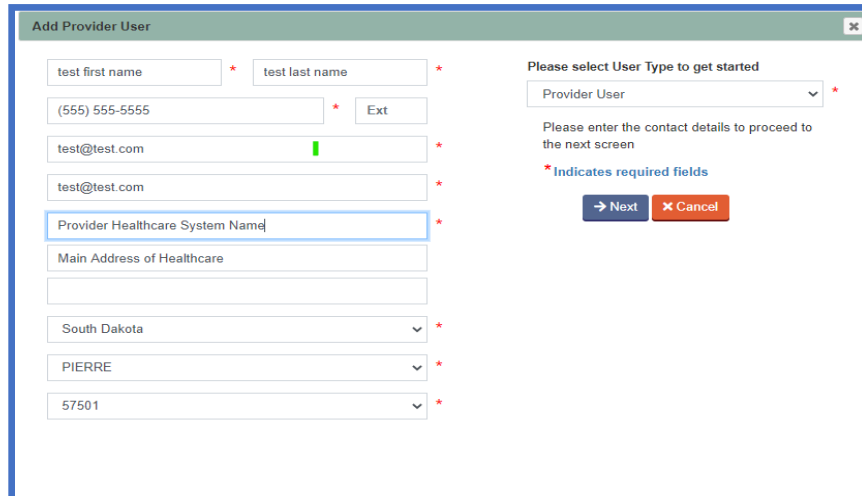
Figure 14: Users List Displayed in Expanded User View

### Add User

Provider Admin accounts can create additional user accounts. The process of adding users follows the same steps regardless of whether a Provider Admin role or Provider User role is assigned.

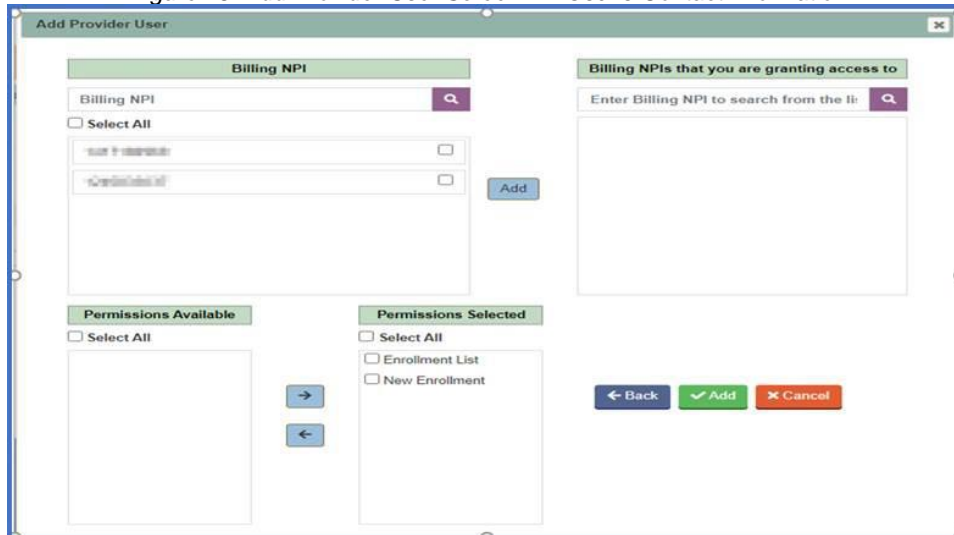
Complete the following actions to add an additional provider account:

- Hover/click on Administration
- Select “User Maintenance”
- Select “Add User”
- The Add User entry screen will be displayed (Figure 15).
  - Select “Provider User” or “Provider Admin” from the User Type drop-down list depending on the type of account desired.
  - Enter the contact information on the Add Provider User screen as described in the [Registration](#) section.
  - Click Next to proceed.



The screenshot shows the 'Add Provider User' screen. It contains several input fields with red asterisks indicating required fields: 'test first name', 'test last name', '(555) 555-5555', 'Ext', 'test@test.com', 'test@test.com', 'Provider Healthcare System Name', 'Main Address of Healthcare', 'South Dakota' (dropdown), 'PIERRE' (dropdown), and '57501' (dropdown). On the right, there is a section titled 'Please select User Type to get started' with a dropdown menu set to 'Provider User'. Below this is a message: 'Please enter the contact details to proceed to the next screen'. At the bottom right, there are 'Next' and 'Cancel' buttons. A legend indicates that red asterisks indicate required fields.

Figure 15: Add Provider User Screen 1 – User's Contact Information



The screenshot shows the 'Add Provider User' screen, specifically the 'Billing NPI' section. It features a search bar for 'Billing NPI' with a magnifying glass icon. Below the search bar is a list of 'Billing NPIs that you are granting access to' with an 'Add' button. To the left, there is a 'Permissions Available' section with a 'Select All' checkbox and a list of permissions. To the right, there is a 'Permissions Selected' section with a 'Select All' checkbox and a list of selected permissions: 'Enrollment List' and 'New Enrollment'. At the bottom, there are 'Back', 'Add', and 'Cancel' buttons.

Figure 16: Add Provider User Screen 2 – BNPI Selection

- The second Add User screen (Figure 16) will be displayed.
  - BNPI already assigned to the Provider Admin will generally pre-fill in the “Billing NPI” box.
    - Provider Admin can enter a BNPI into the Billing NPI section search box on the left and click the search icon to search for and add a NPI to the list
    - Repeat this process for all BNPIs the user should have access to
  - Select which BNPIs the user should have access to by either individually marking the selection box or by checking the “Select All” checkbox.
  - Click “Add”
- The Provider Admin user will receive a pop-up confirmation that the Billing NPI has been added successfully. Click “OK” to proceed (Figure 17).
  - The list of authorized BNPIs will be displayed in the upper right “Billing NPI’s that you are granting access to” section.
    - If a BNPI was added in error, click the red “x” next to the BNPI to remove it.
    - Users can enter a NPI to search and validate a given NPI was added when a large list of BNPIs has been assigned.
      - Values matching the search will be displayed in red.

The screenshot shows the 'Add Provider User' interface. At the top, a status bar indicates the user is logged in as 'Provider Admin'. A modal window displays the message 'Billing NPI added successfully' with an 'OK' button. The main form is divided into several sections: 
 

- Billing NPI:** Includes a search box and a 'Select All' checkbox. Below are two rows of BNPIs, each with a selection checkbox. An 'Add' button is to the right.
- Billing NPIs that you are granting access to:** Includes a search box labeled 'Enter Billing NPI to search from the li:'. Below is a large empty box for the results.
- Permissions Available:** Includes a 'Select All' checkbox and an empty list box.
- Permissions Selected:** Includes a 'Select All' checkbox and two checkboxes for 'Enrollment List' and 'New Enrollment'.

 At the bottom, there are navigation buttons: 'Back' (blue), 'Add' (green), and 'Cancel' (red). A right sidebar contains a 'Testing' dropdown and an 'Action' section.

Figure 17: Adding a Billing NPI to Access List for Provider User

- Review and select the user’s permissions (Figure 18).
  - The system defaults to all available options being displayed in the “Permissions Selected” section.

- The permissions will vary depending on whether the Provider Admin or Provider User role was selected.
- Click next to one or more specific permissions followed by the left or right arrow to move between Permissions Selected and Permissions Available Click the green **Add** button when finished.
- A pop-up (Figure 19) will display asking the Provider Admin to confirm their desire to proceed
  - Selecting “OK” results in the submission/saving of the user info which is then available in the User List (Figure 20)
  - Selecting “Cancel” allows the user to return to prior steps to make changes before submitting the form again

Figure 18: Selecting Multiple Permissions Checkboxes

Figure 19: Confirmation

Figure 20: Added Provider User Account got Displayed in User maintenance List

## Update User

Provider Admin users have the ability to update another user's profile information including changing a user's contact information, resetting their password, inactivating a user, adding/removing Billing NPI access and adding/removing permissions. Provider Admins can only update users that are tied to the BNPI under control of the Provider Admin. Take the following general steps to make an update:

- Go to User List (Figure 20)
- Select "Update" next to the user being modified
- Make contact updates as needed on the Update Provider Admin screen 1 (Figure 21)
  - The email field cannot be updated as it is the username.
  - If an email address changes the administrator must inactivate that user's account and then create a new account
- Click "Next" to proceed to the second Update Provider Admin screen (Figure 22)
- Perform any necessary updates to the user's Billing NPI access
  - To remove a Billing NPI, click the red 'x' for the Billing NPI populated in the Billing NPI granted access list
  - To add a Billing NPI to the user's existing permissions, see the [Add User](#) section
- Perform any necessary updates to the user's Permissions by selecting and moving the desired permissions into the appropriate list
  - Permissions *NOT* assigned will be in the Permissions Available list
  - Permissions currently assigned will be in the Permissions Selected list
- Click the Update button to complete and save the changes
  - Click "OK" to confirm you wish to proceed with making the updates
  - Click "Cancel" to return to the Update Provider Admin screen and made additional changes
- Users will have autogenerated emails upon acceptance of updates
- Users will be able to see these changes by viewing their "My Profile" sub- menu



Figure 21: Update Provider Admin Screen 1 – Contact Info, Inactive Checkbox, Reset Password

Figure 22: Updating Provider Admin Screen 2

### Inactivate/Reactivate User

Provider Admins can inactivate or reactivate user accounts. Once a user's account is made inactive, that user will be unable to login and access the PE Portal. This process can be done in the Update User screens by clicking the "Inactive" box within the desired user's account and then clicking "Next" to complete the process.

### Resetting User Password

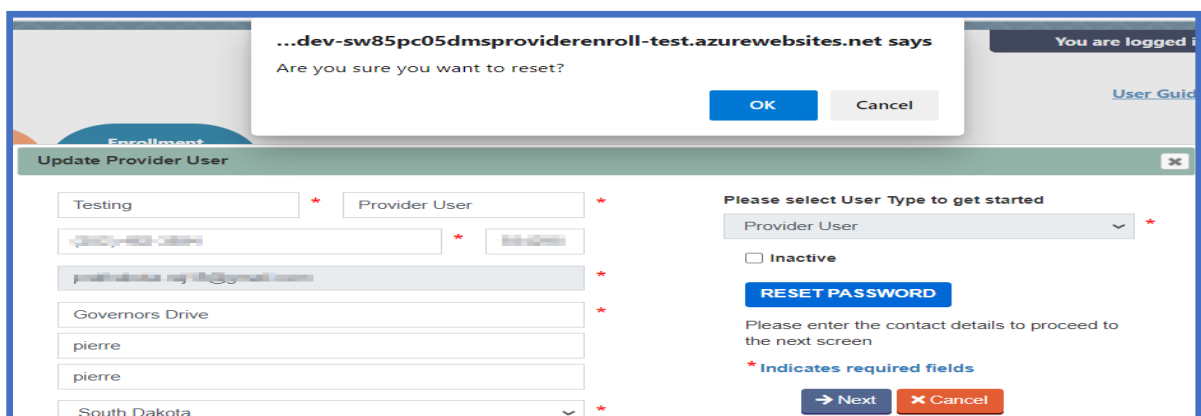
Users should generally be able to reset their own password without Provider Admin assistance by following the [Forgot Password](#) instructions. Provider Admin assistance may be needed if:

- the user cannot remember their security question responses
- the user has not logged into their Portal account for more than 90 days
- the user is unable to complete the Forgot Password process for some reason

To perform a “Reset Password” the Provider Admin must:

- Navigate to User Maintenance under Admin
- Go to User List (Figure 20)
- Select “Update” next to the user being modified
- Click the “Reset Password” (Figure 21) button
- Click “OK” on the confirmation pop-up (Figure 23) to confirm the process to reset the user’s password

The user will receive a Temporary Password via the user’s email address on record. This Temporary Password will expire 3 days (72 hours) after receipt of the email. The user must login and change their password, prior to the temporary password expiration timeframe. If this is not completed timely, the password reset process must be completed again.



...dev-sw85pc05dmsproviderenroll-test.azurewebsites.net says  
Are you sure you want to reset?

OK Cancel

**Update Provider User**

Testing \* Provider User \*

\*

\*

\*

Governors Drive \*

pierre \*

pierre \*

South Dakota \*

Please select User Type to get started

Provider User \*

☐ Inactive

**RESET PASSWORD**

Please enter the contact details to proceed to the next screen

\* Indicates required fields

→ Next × Cancel

Figure 23: Reset Password confirmation screen

## Work Queue

The Work Queue is available to all Provider Admin accounts. New Registration requests submitted that include one or more Billing NPIs under the Provider Admin’s account will be directed here.

- Provider Admins need to check their Work Queue regularly for pending Registration requests.
- Registration requests not approved or rejected within 3 days of submission will trigger an email to the Provider Admin regarding the pending request.
- Registration requests are displayed in the Work Queue only when the requestor includes BNPIs under control of the Provider Admin

The screenshot shows a web application interface with two tabs: 'Administration' (orange) and 'Enrollment' (blue). Below the tabs is a 'Work Queue' section with a '+ Add User' button. A table displays a single pending registration request. The table has columns for Contact Email, Contact Last Name, Contact First Name, Submit Date/Time, Provider Name, Billing NPI, and Action. The data row shows an email address ending in @hotmail.com, 'Provider-User' as the last name, 'Testing' as the first name, a submit date of 03/29/2021, and a Billing NPI of 1. An 'Accept / Reject' button is visible in the Action column. At the bottom, there is a pagination bar with '<< < 1 > >>' and 'Go to page: 1', a 'Row count: 10' dropdown, and 'Showing 1-1 of 1'.

Contact Email	Contact Last Name	Contact First Name	Submit Date/Time	Provider Name	Billing NPI	Action
[REDACTED]@hotmail.com	Provider-User	Testing	03/29/2021		1	Accept / Reject

Figure 24: Work Queue with Pending Registration Request for Review

## Accept/Reject Provider Registration Request

To Accept/Reject a User's Registration Request:

- Click the blue "Accept/Reject" button within the Work Queue (Figure 24).
- The requestor's Contact form will be displayed (Figure 25).
  - Note:** Contact details can't be updated or modified here. If the form has errors, the Provider Admin should reject the request and use the "Add User" functionality to permit access.
- Select the appropriate User Type
  - [Provider Admin](#) – ability to create/update other user accounts & complete enrollment actions
  - [Provider User](#) – ability to complete enrollment actions
- Click "Next" to display the Accept/Reject Provider Admin screen 2 (Figure 26)
- Review the requested Billing NPI access being requested are legitimate and that there are no obvious Billing NPIs omitted from their request
- Review and select the user's permissions (Figure 26).
  - The system defaults to all available options being displayed in the "Permissions Selected" section.
    - The permissions will vary depending on whether the Provider Admin or Provider User role was selected.
  - The Provider Admin has the following options:
    - Click "Select All" to agree.
    - Click next to one or more specific permissions followed by the left or right arrow to move between Permissions Selected and Permissions Available
  - Click the "Accept" button when finished.
  - A confirmation pop-up will be displayed and the user must click on "OK" to proceed with the approval or "Cancel" to return the user back to the Accept/Reject screen to make additional changes if necessary
    - Emails will be autogenerated upon acceptance or rejection.

- Approvals will also result in users being added into the Provider Admin's Users list

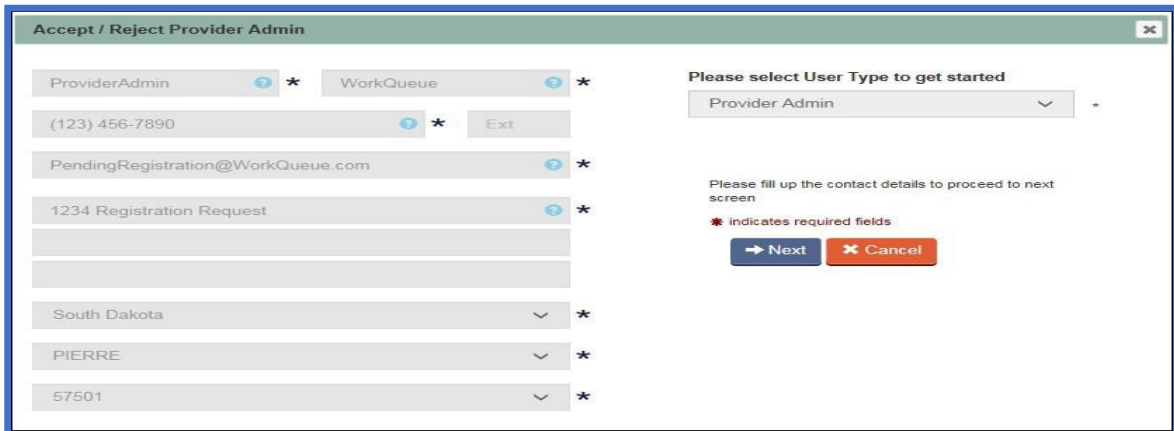


Figure 25: Accept/Reject Provider Admin Screen 1 – User Contact Details

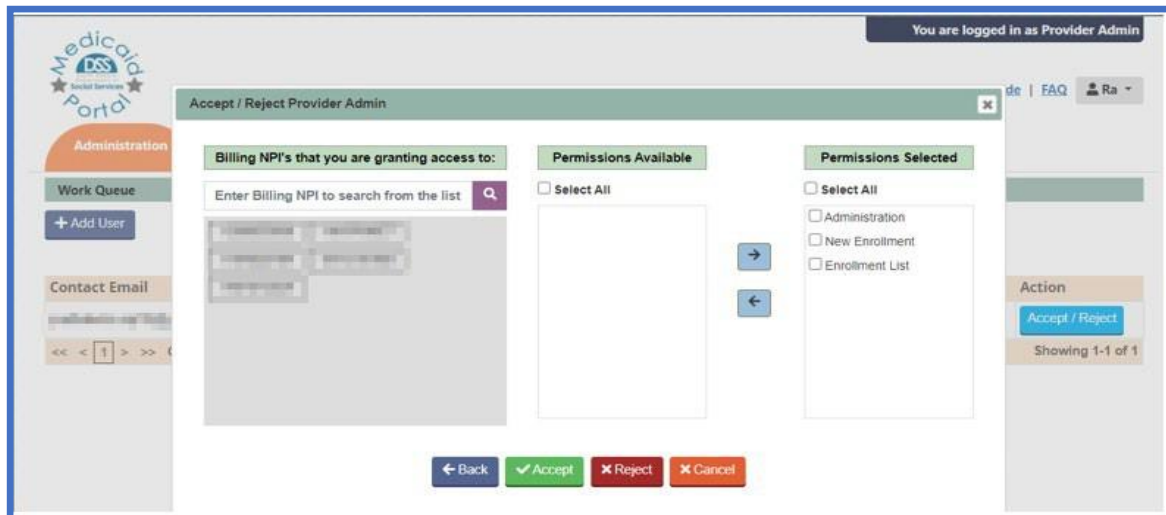


Figure 26: Accept/Reject Screen 2 – User's Request Access Details & Permissions

## Enrollment

The Enrollment area is where most actions take place and include two sub-menus: Enrollment List and New Enrollment.

### Enrollment List

The Enrollment List is set as the default home page for Provider roles. All NPIs that the user has access to can be found from this page including incomplete new enrollments, existing active records, and historical terminated records.

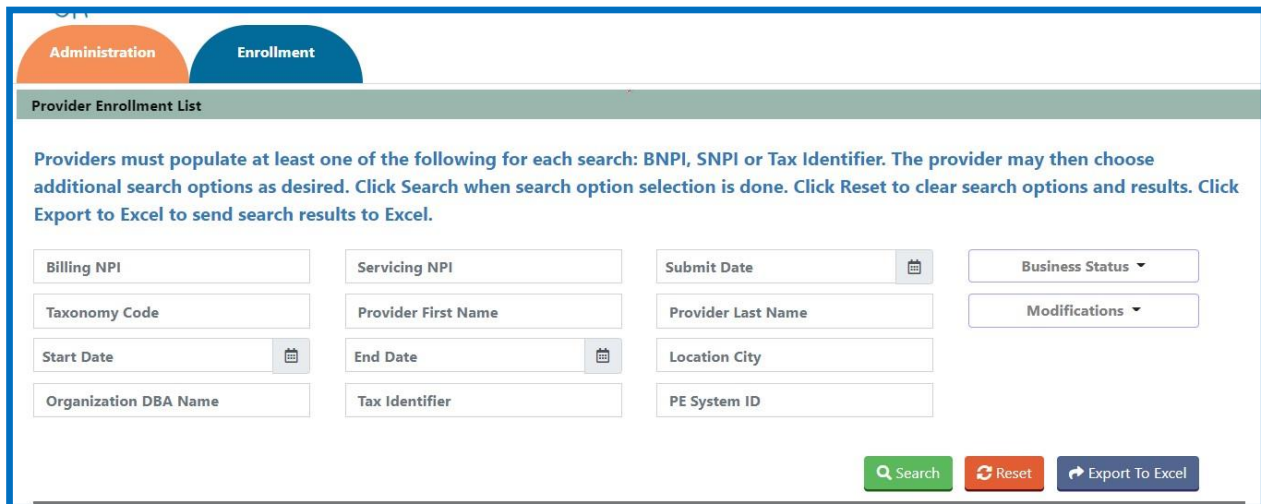
### Conducting a Search

The Enrollment List provides an opportunity for users to search records within the limitations of their role. For example, providers will only be able to see BNPI or SNPI

records tied to a BNPI that are found in their profile.

### Search Navigation

- Provider users must have at least one of the following populated to begin a search: BNPI, SNPI, or a FEIN.
  - Users can search with additional criteria shown in Figure 27 as desired.
- Some search criteria fields allow “%” to be used as a wild card.
  - NPI fields must have at least the first 4 digits.
- The order of the results in the NPI List can be modified by selecting the up (^) or down indicators.
- Search results are paginated with the ability to show 10, 25, 50, 100, 250 or 500 results per page.
- The results of the search can be exported to Excel when desired.
- Search results are retained until the “reset” button is selected which returns the search criteria to the home setting.
- Click on “+” to see additional details about the record, including the current modification status or most recent approval date.
- Click on “Update” to view a record and make changes if desired.
- Click “Cancel” next to a new enrollment that no longer needs to be submitted. This is like a delete feature for unapproved new enrollments.
- Click “View” to have read-only access to records such as those no longer in an approved/active/open status.



The screenshot displays the 'Provider Enrollment List' interface. At the top, there are tabs for 'Administration' and 'Enrollment'. Below the tabs, a header bar reads 'Provider Enrollment List'. A blue informational message states: 'Providers must populate at least one of the following for each search: BNPI, SNPI or Tax Identifier. The provider may then choose additional search options as desired. Click Search when search option selection is done. Click Reset to clear search options and results. Click Export to Excel to send search results to Excel.' The search form consists of a grid of input fields: 'Billing NPI', 'Servicing NPI', 'Submit Date' (with a calendar icon), 'Business Status' (dropdown), 'Taxonomy Code', 'Provider First Name', 'Provider Last Name', 'Modifications' (dropdown), 'Start Date' (with a calendar icon), 'End Date' (with a calendar icon), 'Location City', 'Organization DBA Name', 'Tax Identifier', and 'PE System ID'. At the bottom right, there are three buttons: 'Search' (green), 'Reset' (orange), and 'Export To Excel' (blue).

Figure 27: Enrollment List view

### Search Criteria

#### Billing NPI

- Enter the BNPI you desire to find in whole or with at least the first 4 digits followed by the wildcard (ex: 1234%).
- Can be combined with other search criteria



- Results are limited to BNPIs found in the profile.
- Results will display for each BNPI/SNPI combination found with the entered BNPI, depending on search criteria.
  - **Note:** ALL records with the BNPI populated in the BNPI column will display the BNPI record. Click the View or Update button any row to access the BNPI record.

### Servicing NPI

- Enter the SNPI you desire to find in whole or with at least the first 4 digits followed by the wildcard (ex: 1234%).
- Can be combined with other search criteria
- Results are limited to SNPIs that are associated to a BNPI in the profile or incomplete SNPI new enrollments started by the provider account.
- Results will display for the SNPI and also any BNPI the SNPI is associated to, depending on search criteria.
  - **Note:** To view the SNPI record, click on the record where only the SNPI is populated in the NPI List (no BNPI).

### Submit Date

- The date a new enrollment was submitted. This may be blank for enrollment records existing prior to PE Portal Go-Live.
- Use in combination with the NPI or Tax ID criteria. May add additional search criteria if desired.

- **Business Status** – This provides the highest-level status of the enrollment record.
  - **Incomplete:** populated by the system automatically with the date and time that the application is started and indicates that the application has not yet been submitted for State review.
  - **Submitted:** populated by the system automatically with the date and time the application is completed and submitted; indicates that the application has been submitted for State review.
  - **In Review:** populated by PE staff at the time they begin their review of a new enrollment
  - **Provider action required:** PE Staff use this to indicate that additional information or action is required from the provider in order to continue reviewing the new enrollment; the enrollment contact should look for an email with additional details.
  - **Submit for Screening:** temporary status indicating that PE staff have flagged a new enrollment or existing enrollment record for screening
  - **Pending Screening Results:** indicates that the record is in the federally required screening process
  - **Approved/Active/Open:** indicates that that provider is actively enrolled with SD Medicaid.
  - **Denied:** indicates that a new enrollment (application) was denied. Additional reasons for why the new enrollment was denied would be found in an email to the enrollment contact on the record.
  - **Terminated/Inactive:** indicates that an NPI is no longer active to participate with



SD Medicaid; inactive does not mean closure due to lack of activity, just that the provider is not active/open.

### **Taxonomy Code**

- Enter all of a taxonomy code or a portion of the taxonomy code with the wildcard (%).
- Use in combination with the NPI or Tax ID criteria. Add additional search criteria if desired.
- Records with the active taxonomy code entered in addition to records meeting the other search criteria will be displayed in the NPI List.

### **Provider First Name**

- Enter all of the individual provider's first name or a portion of the name with the wildcard (%)
- Use in combination with the NPI or Tax ID criteria. Add additional search criteria if desired.
- Records matching the entered name criteria and additional search criteria will be displayed in the NPI list.

### **Provider Last Name**

- Enter all of the individual provider's last name or a portion of the name with the wildcard (%)
- Use in combination with the NPI or Tax ID criteria. Add additional search criteria if desired.
- Records matching the entered name criteria and additional search criteria will be displayed in the NPI list.

**Modifications** -This provides the status of enrollment records that are or have been in an active/open/approved status in the past. This is different from Business Status as this captures subsequent changes to the record. A provider who makes updates to an existing approved NPI record will see this status change.

**In Review:** this will automatically be populated and indicates a change to the record was made; a few items such as a change to the enrollment contact name and contact info will not trigger an In Review record as no review is needed by the State.

- **Provider action required:** PE Staff use this to indicate that additional information or action is required from the provider in order to continue reviewing the modification. The enrollment contact on record should look for an email with additional details.
- **Submit for Screening:** temporary status indicating that PE staff have flagged a new enrollment or existing enrollment record for screening
- **Approved:** this indicates that a modification has been accepted and the provider is free to make additional changes as needed in the future
- **Reject:** this indicates that PE staff did not accept certain data within the record; this could be due to typos, incorrect data, or requested information to support the change not being provided. This does not change the business status so an approved/active/open business status could show a rejected modification status.





### **Start Date**

- Enter the start date.
- Use in combination with the NPI or Tax ID criteria. Add additional search criteria if desired.
- Records matching the start date and the other search criteria will be displayed in NPI List

### **End Date**

- Enter the termination (end) date.
- Use in combination with the NPI or Tax ID criteria. Add additional search criteria if desired.
- Records matching the end date and the other search criteria will be displayed in NPI List.

### **Location City**

- Enter the name of the city.
- Use in combination with the NPI or Tax ID criteria. Add additional search criteria if desired.
- Records where the entered name is found under the Location section that meet any other search criteria entered will be displayed.

### **Organization DBA**

- Enter all or a portion of the doing business as name with use of the wildcard (%).
  - Note: Use of the wildcard is recommended when looking by name as typos or other slight variations in name will impact the displayed results.
- Use in combination with the NPI or Tax ID criteria. Add additional search criteria if desired.

### **Tax Identifier**

- Enter the tax identifier found on the enrollment record being sought.
- Use alone or in combination with other search criteria.
- Records with the tax identifier entered that meet any other search criteria entered that also are on the account profile will be displayed.

### **System ID**

- Enter the 7-digit ID assigned for tracking and used to establish permission and access to the Medicaid Provider Portal.
- Use in combination with the NPI or Tax ID criteria. Add additional search criteria if desired.

## **New Enrollment**

New enrollment is similar to applying. It is the process of having an unknown or terminated NPI recognized as eligible to participate with SD Medicaid.

### **Preparation**

Prior to starting a new enrollment, providers should:





- Review the Provider Enrollment Chart to ensure that all eligibility criteria are met.
- Gather pertinent data needed to complete the new enrollment record at one time.
- Gather any necessary supporting documentation for submission to DSS.
- Search the BNPI and/or SNPI fields on the Provider Enrollment List to confirm that a new enrollment record or approved record doesn't already exist.
  - Only NPIs not yet enrolled or terminated NPIs where the requested enrollment date is on/after the termination date are permitted to enroll. Known NPIs will get an "NPI already Exists" error message
- SNPIs – make sure the BNPI(s) that this individual will be associated to are in an approved/active/open status and have the BNPI available as at least one association is required to complete a new enrollment.
- BNPIs – make sure the BNPI is registered and that the user attempting to complete the new enrollment has permission to this BNPI.

### Completing the New Enrollment

After completing the preparation activities, the new enrollment entry can be started.

- Click on "New Enrollment" from the Enrollment tab.
- A blank form will display.
- Use the descriptions found below in Enrollment Records by Sections to complete the form.
- Populate and select the data and then click the "Add" button.
- Clicking "Add" moves the data from the entry fields to the data table.
- Prior to clicking "Add", if you need to clear the fields and start over entirely, click "Reset."
- If you have clicked "Add" and find an error, ~~you have two options to correct:~~
  - Click the garbage can icon to delete the data
  - Click "Update" which will return the data from the data table to the data entry fields. Correct as needed and then select "Accept" or "Save" which will be found directly under the entry fields. When done correctly the updated data will then return to the data table.
- If you do not complete the form at one time, you can gain access to the partially completed form by searching on Provider Enrollment List (Provider homepage) with the NPI and a business status of "incomplete."
- **New enrollment records started by the Provider are view only to State users.** State users are unable to make changes to a new enrollment that has not yet been submitted.
- New enrollments not completed within 30 days may be cancelled and providers would need to start over.
- BNPI new enrollments will not ask about associating SNPIs because the BNPI must be approved before associations are permitted.
- SNPI new enrollments will require that one or more associations are added to complete the new enrollment.

## Enrollment Records by Section

- All Items in the PE Portal denoted with an asterisk (\*) are mandatory fields.
- Refer to screen shots to see the asterisks and for additional information.

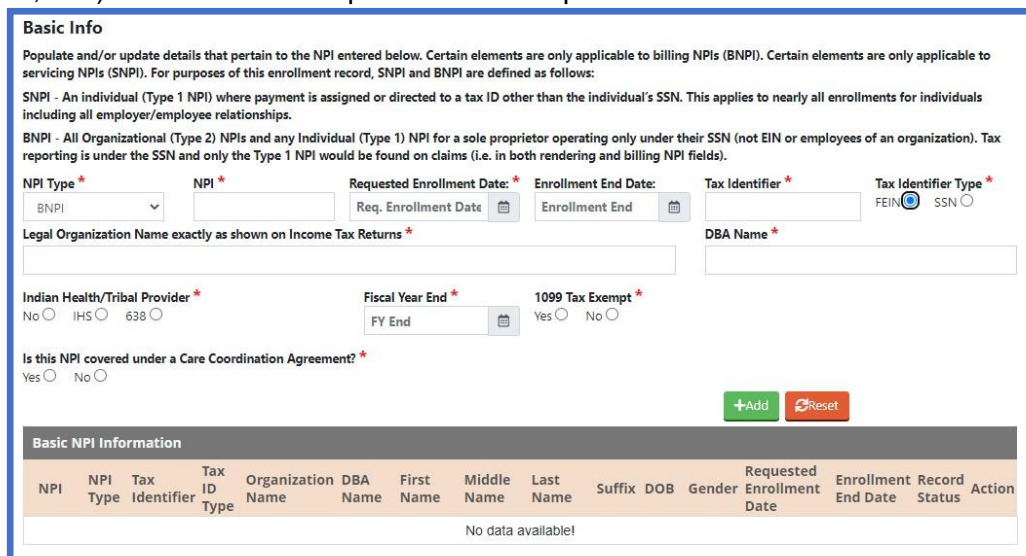
### Basic Info

This section captures basic information that must be completed to enroll a provider. The combination of NPI Type and tax identifier type conditionally change other field expectations within the enrollment record. There are also duplication checks and edits in place. For these reasons, the NPI Type, Requested Enrollment Date, NPI value, and Tax Identifier Type fields are not able to be modified following entry. Errors in these areas during entry will require cancellation of the application and starting over.

Subsequent changes to these values post-approval will require the NPI enrollment record to be terminated and a new enrollment to be completed.

### Entities

Entities are businesses that operate under a FEIN and include all incorporated entities (Inc, PC, LLC, etc.) as well as all non-profits or not-for profits.



**Basic Info**

Populate and/or update details that pertain to the NPI entered below. Certain elements are only applicable to billing NPIs (BNPI). Certain elements are only applicable to servicing NPIs (SNPI). For purposes of this enrollment record, SNPI and BNPI are defined as follows:

SNPI - An individual (Type 1 NPI) where payment is assigned or directed to a tax ID other than the individual's SSN. This applies to nearly all enrollments for individuals including all employer/employee relationships.

BNPI - All Organizational (Type 2) NPIs and any Individual (Type 1) NPI for a sole proprietor operating only under their SSN (not EIN or employees of an organization). Tax reporting is under the SSN and only the Type 1 NPI would be found on claims (i.e. in both rendering and billing NPI fields).

NPI Type \*  NPI \*  Requested Enrollment Date: \*  Enrollment End Date:  Tax Identifier \*  Tax Identifier Type \* ☒ FEIN ☐ SSN

Legal Organization Name exactly as shown on Income Tax Returns \*  DBA Name \*

Indian Health/Tribal Provider \* ☐ No ☐ IHS ☐ 638 ☐ Fiscal Year End \*  FY End  1099 Tax Exempt \* ☐ Yes ☐ No

Is this NPI covered under a Care Coordination Agreement? \* ☐ Yes ☐ No

Basic NPI Information															
NPI	NPI Type	Tax Identifier	Tax ID Type	Organization Name	DBA Name	First Name	Middle Name	Last Name	Suffix	DOB	Gender	Requested Enrollment Date	Enrollment End Date	Record Status	Action
No data available!															

Figure 28: Basic Info view

**NPI Type:** Select BNPI.

**NPI:**

- Enter the 10-digit Type 2 National Provider Identification Number (NPI) for the organization.
- If you are unsure if your NPI is a Type 2, please conduct a search on the [NPI registry](#) which is the national issuer of NPIs.
  - **Note:** It is important that the provider maintain and update their NPI registry record as information may be relied upon from that record.
- This NPI will be found on claims as the “billing NPI.”
- Error messages will be triggered for bad or invalid data.



- o Must be a valid 10-digit NPI: Triggered when the NPI is not in the correct format.
- o BNPI is not registered: Triggered when the entered NPI is not found to be registered.
- o NPI already exists: Triggered when the NPI entered is already known to the PE Portal for the Requested Enrollment Date.

**Requested Enrollment Date:**

- Populate the date the provider is requesting to be recognized as eligible to render services.
- This date must be within the timely filing requirements in [ARSD 67:16:35:04](#) for all providers.
- Out of state providers must retroactively enroll and provide a claim for eligible services rendered that meets the timely filing requirements in [ARSD 67:16:35:04](#) as well as [prior authorization](#) requirements. The Requested Enrollment Date should be the oldest date of service meeting these requirements.
  - o **Note:** Providers outside of SD that are within 50 miles of the border are exempt from the out-of-state prior authorization requirements but still must meet the timely claim requirement.

**Enrollment End Date:**

- Leave this field blank unless the provider only desires to enroll for a specific period of time or is only eligible for a specific period of time.
- The system will populate blank fields as 12/31/2999 which is the manner to indicate “ongoing” in the PE Portal.

**Tax Identifier:**

- Enter the FEIN known to the IRS that the Legal Business Entity operates under.
- For Medicare enrolled providers, this FEIN must match the FEIN on record with Medicare.

**Tax Identifier Type:** Select FEIN

**Legal Organization Name:**

- Populate the Legal Business Name exactly as it is known to the IRS and found on a W-9.
- Providers with multiple BNPIs operating under the same FEIN must ensure consistent population of the name down to spacing and punctuation to prevent 1099 issues.

**Doing Business As (DBA Name):**

- Populate the common name that the general public would know the provider as.
- This name is the name found in phone listings, on signage, or when calling the provider.
- If the provider operates under multiple names with the same NPI, pick the DBA that matches the primary or base location.

**Indian Health/Tribal Provider:**

- Select IHS when the NPI entered in basic information is part of the Indian Health Services (IHS).
  - Providers must be recognized and actively participating with Medicare. Refer to Medicare's enrollment system, PECOS, to answer questions about participation.
- Select Tribal when the legal entity is a tribal entity under contract with the federal government authorized by Public Law 19-638 and some or all the services being provided are included in the contract.
- Select No for all other situations. This is the most common response.

**Fiscal Year End:**

- Enter the end date of the entity's financial year used for accounting purposes in MM/DD form.
- If the entity doesn't have a specific fiscal year end, 12/31 can be used.
- Only 1 fiscal year is permitted per BNPI.
- For select entities, this information may impact data tied to cost reporting.

**1099 Tax Exempt:**

- Select Yes if the entity is recognized by the IRS as exempt from tax reporting.
- All others select No.

**Care Coordination Agreement:**

- Select Yes if the entity and the NPI in basic information has a signed care coordination agreement with Indian Health Services (IHS). This contract lays out specific provisions that the provider must meet for the services they provide to be deemed an extension of IHS services and eligible for enhanced federal funding.
- Providers may be asked to provide a copy of the care coordination agreement or the yearly confirmation of NPIs or FEIN recognized by IHS as participating.

Click "Add" after populating the data.

The data will then be displayed in the table.

To update data shown in the table, click "update" and the data will be moved from the table to the entry fields.

Modify the data as needed and then click "save" or "accept" which will be directly below the entry fields and above any data tables.

**Individuals**

Individual enrollments are unincorporated individuals who operate under their SSN.

Individuals can be classified by the NPI Type as either a BNPI or an SNPI. This classification is critical as it will drive the data requested, expected claims data, and reporting to the IRS. If the wrong classification is made the incorrect record must be terminated and the provider must complete new enrollments.

Figure 29: Individual enrollment- Basic Info

All fields noted with asterisks must be populated and mean the following:

#### NPI Type:

- Read the definition of both SNPI and BNPI to ensure that the correct NPI Type is selected.
- Select SNPI for all individuals who have payment for their services directed to a tax ID other than their SSN.
  - This is the most common type for individuals.
  - This applies to employer/employee relationships and sole proprietors who operate under a FEIN.
    - Sole proprietors operating under a FEIN are required to have both a Type 2 BNPI enrolled as an entity and their individual Type 1 NPI enrolled as an individual.
- Select BNPI for sole proprietors who operate under and report taxes under their SSN.
  - This is not a common arrangement.
  - Providers may only select this option when all payers recognize the provider as operating exclusively under their SSN and a single NPI.

#### NPI:

- Enter the 10-digit Type 1 National Provider Identification Number (NPI) for the individual.
- If you are unsure if your NPI is a Type 1, please conduct a search on the [NPI registry](#) which is the national issuer of NPIs.
  - Note: It is important that the provider maintain and update their NPI registry record as information may be relied upon from that record.
- SNPIs will be found on claims in locations such as the servicing, rendering, or treating.



- BNPIs will be found in both the servicing, rendering, or treating locations and the billing NPI locations.

**Requested Enrollment Date:**

- Populate the date the provider is requesting to be recognized as eligible to render services.
- This date must be within the timely filing requirements in [ARSD 67:16:35:04](#) for all providers.
- Out of state providers must retroactively enroll and provide a claim for eligible services rendered that meets the timely filing requirements in [ARSD 67:16:35:04](#) as well as [prior authorization](#) requirements. The Requested Enrollment Date should be the oldest date of service meeting these requirements.
  - **Note:** Providers outside of SD that are within 50 miles of the border are exempt from the out-of-state prior authorization requirements but still must meet the timely claim requirement.

**Enrollment End Date:**

- Leave this field blank unless the provider only desires to enroll for a specific period of time or is only eligible for a specific period of time.
- The system will populate blank fields as 12/31/2999 which is the manner to indicate “ongoing” in the PE Portal.

**Tax Identifier:**

- Enter the SSN known to the IRS for this individual.

**Tax Identifier Type:** Select SSN**First Name:**

- Populate the full legal first name.
  - Note: This legal name is who the IRS knows and should also reflect the name on any license.

**Middle Name:**

- Populate the full legal middle name.
- Initials should only be used when the legal middle name is an initial.
- In the uncommon situation where the individual has no legal middle initial or name, populate “none” in this field.

**Last Name:**

- Populate the full legal last name
  - Note: This legal name is who the IRS knows and should also reflect the name on any license.

**Suffix:**

- Select from the drop-down as applicable.
- Leave blank when not applicable.

**Date of Birth:**

- Select the date of birth from the calendar or enter the provider's date of birth in MM/DD/CCYY format.

**Gender:**

- Select male, female, or unknown as applicable.
  - Note: NPPES often includes this information, make sure it matches

Click "Add" after populating the data to advance to the next section. The data will then be displayed in the table.

To update data shown in the table, click "update" and the data will be moved from the table to the entry fields.

Modify the data as needed and then

**Taxonomy Code/Specialty**

Taxonomy codes are a way of identifying the type of provider, their specialty, and any subspecialty if it applies. This information is used on claims and it is critical that the value(s) on the enrollment record are the exact values utilized on claims. Failure to do so will result in claim denials. While taxonomy codes are a national standard code set, SD Medicaid recognizes only a portion of them as eligible to enroll and be used on claims.

The selection of multiple taxonomy codes is conditionally appropriate or prohibited. At times SD Medicaid may dictate that specific taxonomy codes be used or that separate BNPIs be used to distinguish certain provider types due to eligibility, payment, or other operational differences.

**Individuals:**

- Generally, individuals only have one specialty and can select only one taxonomy code.
- Unless exceptions found on the Provider Enrollment Chart such as Birth to Three participation exist, only one taxonomy code may be selected.
- Taxonomy code differences due to different employers is not acceptable. The individual needs to select the broadest applicable taxonomy code and ensure that in the case of multiple employers, they agree on which single taxonomy code to use.

**Entities:**

- Entities selecting one of the two group taxonomy codes are generally prohibited from additional taxonomy code use. SD Medicaid will determine what "type" of group a practice is by looking at the taxonomy codes for associated individuals.
  - Ex.: 193200000X can't be combined with 1223S0000X.
- Entities outside of the group are often able to utilize multiple taxonomy codes although limitations can be found on the Provider Enrollment Chart.

Refer to the Provider Enrollment Chart for valid codes, exceptions, and other information.



## Taxonomy Code:

### Taxonomy Code/Specialty

Populate/select the valid taxonomy code(s) representing the specialty associated to the NPI. Refer to the Provider Enrollment Chart for details on valid taxonomy code values and when multiple taxonomy codes are permitted due to SD Medicaid groupings. Share this information with your billing staff as exact matches are required to prevent claim denial.

Taxonomy Code \*

Effective Date \*

Effective Date

End Date

End Date

+ Add
Reset

Specialization/Taxonomy Code Details				
Specialization/Taxonomy Code	Effective Date	End Date	Record Status	Action
No data available!				

Figure 30: Taxonomy code view

Populate at least the beginning 4 bytes of the taxonomy code and the list of SD valid values will display to select from.

- Only codes eligible with SD Medicaid will be listed.

### Effective Date:

- Populate the beginning date that the taxonomy code is to be recognized in MM/DD/CCYY format.
  - New enrollments should use the same date as the Requested Enrollment Date in the Basic Info section.
  - Subsequent additions of additional codes should use the first date within timely filing requirements that the provider is desiring to have recognized.

### End Date:

- This represents the last eligible date that the taxonomy code should be recognized.
  - New enrollments should leave this field blank unless there is a limited time that the taxonomy code will be used.
    - The system will automatically populate 12/31/2999 as the end date where the field was left blank. This represents the “ongoing” date in PE Portal.
  - Updates to enrollment records must populate this field prior to adding additional taxonomy codes unless the situation meets the exceptions to allow multiple active taxonomy codes at the same time.

Click “Add” when done inserting new records.

Use “Update” next to an existing desired record to bring the data from the data table to the entry fields where changes can be made. Click “accept” or “save when done.”

Repeat using the Add or Update button as required.

## License/Certification

Most providers conduct business under a health care license or state or federal health care related certification. This section is intended to capture the applicable license(s), certification(s),





the effective period, and who it was issued by. Refer to the Provider Enrollment Chart for the selected taxonomy code to determine license and certification requirements.

Remember that as a condition of participation, providers agree to not only maintain good-standing with their licensing and certification entities, but to update their enrollment records to reflect their ongoing licensure or certification.

**License/Certification**

Populate the license/certification information supporting the NPI's selected taxonomy code(s). Licenses usually must be issued by the State where the provider renders services. Refer to the Provider Enrollment Chart for more information. Group taxonomies select "none." Select "US Gov't" for certifications issued by a U.S. Government entity. Select "USA" for other national certifications.

License/Certification Type \* State \* Lic/Cert# \*

Select Select

Effective Date \* End Date \*

Start Date End Date

+ Add Reset

License/Certification Details						
License/Certification Type	State	License/Cert #	Effective Date	End Date	Record Status	Action
No data available!						

Figure 31: License/Certification view

### License/Certification Type:

- Select the applicable type from the drop-down.
  - "None" is provided as an option but should only be used when the Provider Enrollment Chart indicates that neither a license nor certification is required.
    - Ex: Group, School District
  - Do not use "Other License/Certification" without contacting the Provider Enrollment Team first.

### State:

- Select the State where the entity issuing the license/certification is based and where the authorizing state regulations for the scope of practice or license/certification exist.
  - Select "US Government" in the case of certifications issued by the Centers for Medicare and Medicaid Services, HRSA, or other federal governmental entities.
    - Ex: License/Cert Type = DMEPOS, ESRD, HHA, IHS, CLIA, RHC, FQHC, or ASC.
  - Select "USA" in the case of certifications issued by a national accreditation body.
    - Ex: License/Cert Type = DEA, Joint Commission
  - Select the state you are based in (will be populated in Location Section later) when "None" was selected as the License/Certification Type.
- The State(s) selected must match the servicing location populated in the Location Section for all individuals with the exception of those only providing services at an IHS

**Lic/Cert #:**

- Enter the license or certification value exactly as found on documentation from the issuing entity, including spaces, periods, and hyphens.
- If “None” was selected in the License/Certification Type field, populate “NA” in this field.
- If licensed individuals will be providing services in multiple states, a license covering each state will be required.

**Effective Date:**

- Enter the effective date of the license.
  - Make sure that the Effective Date covers the Requested Enrollment Date.

**End Date:**

- Enter the end date of the license.
- End Dates of “12/31/2999” to show ongoing is only applicable for certifications such as CMS recognition where there is no specific end date issued by the issuing body.

**Ownership**

In accordance with federal regulation, each individual or entity with a 5% or greater ownership interest must be listed and disclosed. This includes direct and indirect ownership.

- Populate data for each individual with a 5% or greater ownership interest using the individual's SSN.
  - **Note:** Use of SSN does NOT change how the provider is viewed. Ownership and Legal Business Name/IRS Tax identifier of provider are separate and distinct.
- Populate data for each entity with a 5% or greater ownership interest using the entity's TIN. Follow the instructions on screen regarding the determination of %.
- Ownership for those providers known to Medicare should match the data given to Medicare.
- System allows entry of partial values with the use of a decimal point. Ex: 33.3.
- System does not add the total of ownership percent. Should the population of direct and indirect owners require exceeding 100% in a rare situation, the system will allow the entry of such.
- If there are no owners in increments of 5% or more, enter the provider's name from Basic Information and the value of “0.”

**Changes in Ownership**

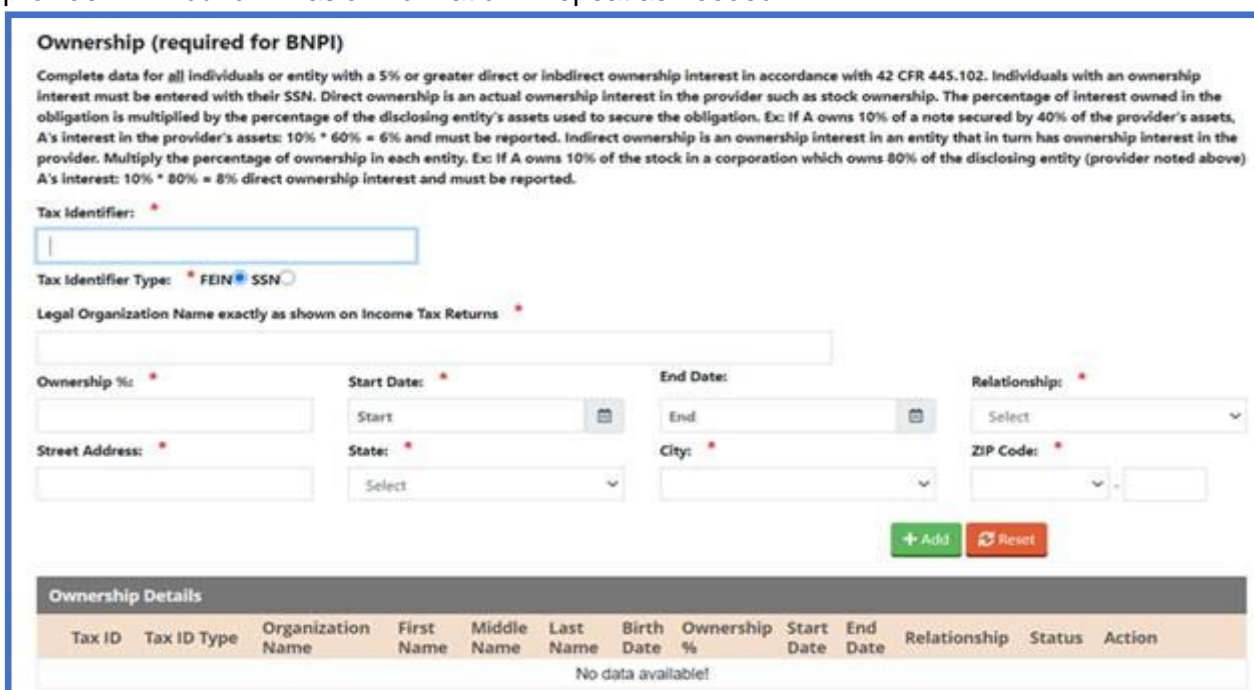
- The sale or transfer of ownership, assets, or control terminates the provider agreement.
- The sale or transfer of ownership or control of a provider requires at least 30 days advance notice before the effective date per ARSD 67:16:33:07.
  - Send an email to [SDMedicaidPE@state.sd.us](mailto:SDMedicaidPE@state.sd.us) with the subject “Pending CHOW” that includes the NPI, intended effective date of change, and whether the FEIN and BNPI will be remaining the same.
- Changes in percentage of ownership amongst known owners where no other updates

are being made can be updated in the existing online enrollment record.

- Additional owners being added to an existing enrollment that do not eliminate the known users can be done by the changing of ownership percentage, capturing the additional owner, and submitting a new provider agreement and disclosure document.
- Changes in ownership that will result in a provider operating under a new FEIN or a new BNPI will require the existing record to be terminated and a new enrollment to be completed.
- No overlap of ownership dates is allowed between historical enrollment records and new enrollments.

### Organization Owner:

Select and populate a record for each organization that has an ownership interest in the provider NPI found in Basic Information. Repeat as needed.



**Ownership (required for BNPI)**

Complete data for all individuals or entity with a 5% or greater direct or indirect ownership interest in accordance with 42 CFR 445.102. Individuals with an ownership interest must be entered with their SSN. Direct ownership is an actual ownership interest in the provider such as stock ownership. The percentage of interest owned in the obligation is multiplied by the percentage of the disclosing entity's assets used to secure the obligation. Ex: If A owns 10% of a note secured by 40% of the provider's assets, A's interest in the provider's assets: 10% \* 60% = 6% and must be reported. Indirect ownership is an ownership interest in an entity that in turn has ownership interest in the provider. Multiply the percentage of ownership in each entity. Ex: If A owns 10% of the stock in a corporation which owns 80% of the disclosing entity (provider noted above) A's interest: 10% \* 80% = 8% direct ownership interest and must be reported.

Tax Identifier: \*

Tax Identifier Type: \* FEIN ☒ SSN ☐

Legal Organization Name exactly as shown on Income Tax Returns \*

Ownership %: \* Start Date: \* End Date: \* Relationship: \*

Street Address: \* State: \* City: \* ZIP Code: \*

Ownership Details												
Tax ID	Tax ID Type	Organization Name	First Name	Middle Name	Last Name	Birth Date	Ownership %	Start Date	End Date	Relationship	Status	Action
No data available!												

Figure 32: Organization Owner view

**Tax Identifier:** Enter the FEIN of the owner.

**Tax Identifier Type:** Select FEIN

**Legal Organization Name:** Enter the name of the owner exactly as the one reported to the IRS.

**Ownership %:**

- Enter the percentage owned by the listed owner.
- No decimal place is needed if reporting a whole number.

**Start Date:** Enter the effective date of the ownership in MM/DD/CCYY format.

**End date:**

- Leave blank if the ownership record still applies. The system will populate it to 12/31/2999.
- Populate with the last day of ownership if the owner no longer applies.
  - Note: Certain changes of ownership may require a new enrollment, including the 100% sale or transfer of assets to another.

**Relationship:** Select as appropriate. If no situation fits, select “none.”

**Address:** Provide the business address for the owner.

**State:** Select the state where the business is located.

**City:** Select the city where the business is located from the drop-down. This list is loaded based on the selected State.

**ZIP Code:** Select the ZIP code from the drop-down. This list is loaded based on the selected City.

**ZIP+4:** Enter the +4 portion of the ZIP code.

### Individual Owner:

Select and populate a record for each individual that has an ownership interest in the provider NPI found in Basic Information. Repeat as needed.

**Ownership (required for BNPI)**  

Complete data for all individuals or entity with a 5% or greater direct or indirect ownership interest in accordance with 42 CFR 445.102. Individuals with an ownership interest must be entered with their SSN. Direct ownership is an actual ownership interest in the provider such as stock ownership. The percentage of interest owned in the obligation is multiplied by the percentage of the disclosing entity's assets used to secure the obligation. Ex: If A owns 10% of a note secured by 40% of the provider's assets, A's interest in the provider's assets: 10% \* 60% = 6% and must be reported. Indirect ownership is an ownership interest in an entity that in turn has ownership interest in the provider. Multiply the percentage of ownership in each entity. Ex: If A owns 10% of the stock in a corporation which owns 80% of the disclosing entity (provider noted above) A's interest: 10% \* 80% = 8% direct ownership interest and must be reported.

Tax Identifier:   
 Tax Identifier Type: ☒ FEIN ☐ SSN  
 First Name:  Middle Name:  Last Name:  Date of Birth:    
 Ownership %:  Start Date:  End Date:  Relationship:   
 Street Address:  State:  City:  ZIP Code:

Ownership Details													
Tax ID	Tax ID Type	Organization Name	First Name	Middle Name	Last Name	Birth Date	Ownership %	Start Date	End Date	Relationship	Status	Action	
No data available!													

Figure 33: Individual Owner view

**Tax Identifier:** Enter the SSN of the individual with an ownership interest.

**Tax Identifier Type:** Select SSN.

**First Name:** Populate the full legal first name of the individual with an ownership interest.

**Middle Name:**

- Populate the full legal middle name.



- o Check NPPES and the license as it may be found here.
- Initials should only be used when the legal middle name is an initial.
- In the uncommon situation where the individual has no legal middle initial or name, populate “none” in this field

**Last Name:** Populate the full legal last name of the individual with an ownership interest.

**Date of Birth:** Enter or use the calendar icon to populate the date of birth in MM/DD/CCYY format for the individual with an ownership interest.

**Ownership %:** Populate the percentage of ownership interest for the individual.

**Start Date:** Provide the effective date of the ownership in MM/DD/CCYY format for the individual.

**End Date:** Leave blank for ongoing ownership. Populate the ownership end date when not ongoing.

**Relationship:** Select the relationship of the individual listed.

**Address:** Provide the address for the individual listed.

**State:** Select the state where the individual is located.

**City:** Select the city where the individual is located from the drop-down. This list is loaded based on the selected State.

**ZIP Code:** Select the ZIP code from the drop-down. This list is loaded based on the selected City.

**ZIP+4:** Enter the +4 portion of the ZIP code.

Use the green add button after you have populated all the required fields and you will see the information appear in a table.

Use the orange reset button to clear the information if needed before using the add button.

### Contractual Relationship

This area has been significantly revised from other enrollment forms. It is critical that providers review these instructions before populating their response.

Read the question below which is found on the screen immediately preceding “Contractual Relationships.” *Read the definitions under “Type” which follow below prior to responding to this question.* Failure to respond correctly could result in a failure to disclose required information which could be grounds for termination. Select “Yes” or “No” as applicable.

Do you have an affiliation with another entity or individual including but not limited to a parent organization, management contract, or lessee arrangement? \*

Yes ☒ No ☐

**Contractual Relationships**

Figure 34: Question about contractual relationships

### Contractual Relationships

Refer to the User Guide for definitions and additional information in completing this section regarding relationships to others. Data needs to be populated for Parent organizations, certain management contracts, and property arrangements.

Tax Identifier: \*

Tax Identifier Type: \* ☒ FEIN ☐ SSN

Legal Organization Name exactly as shown on Income Tax Returns \*

Type: \* Start Date: \* End Date:

Select

Start

End

Street Address: \* State: \* City: \* ZIP Code: \*

Select

+ Add

Reset

Contract Details											
Tax ID	Tax ID Type	Organization Name	Start Date	End Date	First Name	Middle Name	Last Name	DOB	Contract Type	Status	Action
No data available!											

Figure 35: Contractual Relationship view (Entity)

Providers who select “Yes” to the contractual relationship question will be shown additional information as shown in Figure 35. The data in the form will dynamically change based on the tax identifier type. Populate the fields as noted below.

**Tax Identifier:** Enter the SSN that belongs to the individual or the FEIN that belongs to the entity which will be populated. The name fields will change dynamically based on the selection.

**Legal Organization Name:** For FEIN selections only. Populate legal business name of entity provider organization contracts with as known to the IRS.

**First Name:** For SSN selections only. Populate the legal first name of the individual that the provider organization contracts with.

**Middle Name:** For SSN selections only. Populate the legal middle name of the individual that the provider organization contracts with.

**Last Name:** For SSN selections only. Populate the legal last name of the individual that the provider organization contracts with.

**Date of Birth:** For SSN selections only. Populate the date of birth for the individual that the provider organization contracts with.

**Type:**

- **Parent Organization** - The highest organizational level entity. For health care systems the parent organization should be across all providers that are under the health care system’s umbrella. This includes entities who have a different FEIN and potentially different owners but are still affiliated to one another through the parent organization.
- **Management Contract – Managerial**  
An entity or person contracted to oversee the day-to-day operations of the facility. This may result in the securement of an administrator, business manager, director of nursing, or others to perform these duties. A contracted entity who provides the





individual staff member should be listed under the management contract and any individual employed by the contract should be listed as a managing employee.

- **Management Contract - Billing**

An entity or person contracted to provide financial oversight of the facility. Examples may include preparation and submission of claims to South Dakota Medicaid.

- **Management Contract - Consultative**

An entity or person contracted to provide the facility with technical assistance, solutions, and collaboration on an as needed basis to address the needs of the facility. Examples may include a review and implementation of new organizational structures, strategic planning, and service expansion.

- **Management Contract - Medical Personnel Staffing**

Professional medical personnel (ex: MDs, PAs, CNPs) providing direct medical care to recipients who are not employees of the provider, but of another entity. The entity who employs the staff and makes them available to another provider group through contract should be listed.

- **Property Arrangement**

If the building where services are being performed is leased, rented, or otherwise not owned by the provider or provider owners, list the entities or individuals with a 5% or greater property ownership interest.

**Start Date:** Provide the effective date of the contractual relationship for each individual or entity. **End Date:** Leave blank for ongoing relationships. Populate the end date when not ongoing or for a date certain period of time.

**Address:** Provide the address for the individual or entity who the contract is with.

**State:** Select the state where the individual or entity business is located.

**City:** Select the city where the individual or entity business is located from the drop-down. This list is loaded based on the selected State.

**ZIP Code:** Select the ZIP code from the drop-down. This list is loaded based on the selected City.

**ZIP+4:** Enter the +4 portion of the ZIP code.

Use the green add button after you have populated all the required fields and you will see the information appear in a table.

Use the orange reset button to clear the information if needed before using the add button.

### **Managing/Controlling & Convicted Employees**

Providers are federally required to disclosure information about all individuals who have a managing or controlling interest in the provider as well as disclosing any individual who has been convicted of a criminal offense related to a federally funded healthcare program. Refer to the screen shot regarding the federal provisions and expectations. Failure to appropriately disclose this information is grounds for a for- cause termination which may impact the provider's ability to participate with Medicare or other State Medicaid Agencies.

### Managing/Controlling & Convicted Employees

Pursuant to 42 CFR 455.101, list all individuals with operational or managerial control over the disclosing party or individuals who directly or indirectly conduct the day-to-day operations of the disclosing party. This includes but is not limited to all individuals in the position of general manager, business manager, administrator, director(s), and members of board of directors.

Also list any employee, agent, or person with an operational or managing interest in the disclosing party who has ever been convicted of a criminal offense related to the involvement in a federally funded healthcare program. Select "Managing-Convicted" or "Non-Managing Convicted."


List all Managing Employees:

First Name \*

Middle Name \*

Last Name \*

Date of Birth \*

DOB 

SSN (XXXXXXXX) \*

Street Address: \*


State: \*

Select ▼

City: \*

ZIP Code: \*

Start Date: \*

Start 

End Date:

End 

Type: \*

Select ▼

+ Add

Reset

Figure 36: Managing/Controlling & Convicted Employees view

**First Name:** Populate the full legal first name of the individual.

**Middle Name:**

- Populate the full legal middle name.
- Initials should only be used when the legal middle name is an initial.
- In the uncommon situation where the individual has no legal middle initial or name, populate "none" in this field

**Last Name:** Populate the full legal last name of the individual with an ownership interest.

**Date of Birth:** Enter or use the calendar icon to populate the date of birth in MM/DD/CCYY format for the individual with an ownership interest.

**SSN:** Enter the SSN belonging to the individual.

**Street Address:** Enter the home street address of the managing employee and not the address belonging to the provider.

**State:** Select the state where the individual resides from the drop-down.

**City:** Select the city where the individual resides from the drop-down. This list is loaded based on the selected State.

**ZIP Code:** Select the ZIP code from the drop-down. This list is loaded based on the selected City.

**ZIP+4:** Enter the +4 portion of the ZIP code.

**Start Date:** Enter or select the date from the calendar icon to capture the effective date of the interest in MM/DD/CCYY format for the individual. In the situation of a non-managing convicted employee, use the hire date.

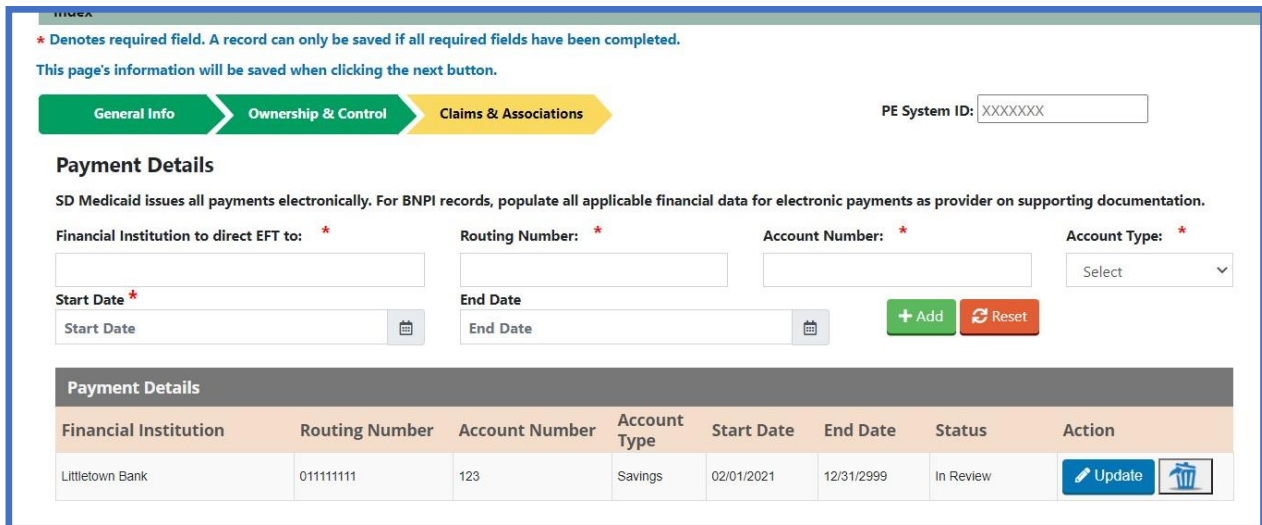
**End Date:** Enter or select the date from the calendar icon to capture the last day of the interest in MM/DD/CCYY format for the individual.



## Payment Details

SD Medicaid payments are issued electronically. This section captures where these payments will be directed. Payments can only be directed to one financial account per BNPI and the account must be located within the United States. Upon initial entry and any subsequent changes, the Provider will need to provide a letter from the financial institution that includes the name of the institution, the routing number, the account number, and the account type. Failure to populate this information correctly may result in payments not reaching the provider.

**Note:** Dental providers are required to populate this data but will be asked to provide it to the dental claim processor as well.



\* Denotes required field. A record can only be saved if all required fields have been completed.  
This page's information will be saved when clicking the next button.

General Info Ownership & Control Claims & Associations PE System ID: XXXXXXXX

### Payment Details

SD Medicaid issues all payments electronically. For BNPI records, populate all applicable financial data for electronic payments as provider on supporting documentation.

Financial Institution to direct EFT to: \* Routing Number: \* Account Number: \* Account Type: \*

Start Date \* End Date

Start Date End Date + Add Reset

Financial Institution	Routing Number	Account Number	Account Type	Start Date	End Date	Status	Action
Littletown Bank	011111111	123	Savings	02/01/2021	12/31/2999	In Review	Update Delete

Figure 37: Payment Details view

### Financial Institution:

- Type the name of the financial institution where the account resides.
- This should match the documentation letter from the institution.

**Routing Number:** Enter the 9-digit routing number for electronic transactions that will begin with "0" or "1."

**Account Number:** Enter the digits only for the account number with no spaces.

**Account Type:** Select either "checking" or "savings" that reflects the type of account.

### Start Date:

- Populate today's date or a future date that reflects the start of the banking information.
- Changes to payments made electronically can't functionally be applied retroactively.

### End Date:

- Leave End Date blank unless you are changing financial institutions.
- Populate an End Date prior to clicking "Add" to enter an altogether different payment account.



Click on the green “Add” button to add an initial record.

Click on the Garbage can icon of existing records in the data table to delete them during entry review.

Click “Update” to bring data from the data table to the entry fields to populate minor changes or corrections.

### Claim Submission Method (EDI)

This section captures whether a provider will be sending or receiving HIPAA compliant transactions. Providers should review the [electronic data interchange \(EDI\) documentation](#) for additional details about electronic submissions and who does and doesn’t qualify to be a Trading Partner.

#### Claim Submission Method

SD Medicaid can send/receive data to/from our authorized trading partners electronically. This process of computer to computer data transfer is called Electronic Data Interchange (EDI). Please capture whether you have this functionality directly, through another party, or not at all. Providers who use another trading partner to send/receive the data must contact the trading partner to obtain their trading partner ID. Only 1 trading partner ID can be captured.

Is claims data sent/received electronically through EDI? \*

Are EDI transactions sent/received without another trading partner's assistance (i.e. self-submitter)? \*

Select

Select

Trading Partner ID: \*

Transactions: \*

Start Date \*

End Date

Transactions ▾

Start Date

End Date

+ Add

Reset

Claims Submission Information							
Electronically Received	Sent without assistance	Trading partner ID	Transactions	Start Date	End Date	Status	Action
No data available!							

Figure 38: Claim Submission Method view

#### Is claims data sent/received electronically through EDI:

- Select “Yes” if you or your trading partner acting on your behalf are able to send/receive any of all of the Transactions listed.
- Select “No” if:
  - You are a pharmacy that only uses the Point of Sale (POS) and don’t additionally submit 837Ps for DMEPOS services such as infusion or incontinence supplies that are billed as medical services or desire batch 835s in addition to the POS info.
  - You are a dentist that only submits 837D AND your trading partner is not listed. You will be prompted to provide this information to the dental claim processor.
  - You only submit claims through direct data entry on the SD Medicaid Provider Online Portal (separate from PE Portal) or on paper claim forms.

#### Are EDI transactions sent/received without another trading partner’s assistance:

- Select “Yes” only if you are a self-submitter who directly sends the data file from your computer to the State or who receives data from the State on their computers on your behalf.



- o This is not the most common route of transmission.
- Select “No” if you have a trading partner who sends the data file from their computer to the State.

**Transactions:**

- Select all HIPAA compliant formats that apply to this BNPI and that the provider or their designated trading partner is authorized and capable of

**Location**

The location section is intended to capture the physical street address(es) where services will be performed by the BNPI or providers associated to the BNPI. The location cannot be a PO Box, Virtual Office space, or address used only for Agent of Process. Each servicing location listed that is not within the boundaries of SD must have a claim meeting the applicable prior authorization and timely filing rules to be added.

The corporate BNPI location should be listed as the base/primary location. Each additional location where services take place should be listed with the following additional considerations:

Services provided via telehealth must list the distant site location where the provider is physically located at the time the services are rendered. If the provider uses his or her home to render telehealth services, the home must be listed on the enrollment record. If more than one provider renders telehealth services from their home, each home address must be listed on the enrollment record.

Services performed as off-site services (ex: anesthesia group billing for services at a non-owned hospital, recipient homes, community settings) must list the corporate or home location where administrative tasks are completed as the base/primary location. The home office locations of the providers must be listed as locations, in the enrollment record, if there is no separate office. *(For example, if a provider goes into recipient homes to render services but documents the services at the provider's home or stores medical records, or the device which is used to document and store medical records, at the provider's home, the provider's home address must be listed).*

Each location listed on the enrollment record must have a distinct name. Home offices should be listed as Home Office with the providers initials.

**Location**

List the physical street address(es) belonging to the BNPI where services will be performed. Post office boxes are not permitted. If there is more than one location, the first entered will be deemed the base/primary location. If all services are performed off-site, list the corporate or home location where administrative tasks are completed. Non-SD locations must have a claim meeting applicable prior authorization and timely filing rules to be added.

Physical Locations:

Primary location: ☒ Yes ☐ No

Location Name: \*

Street Address: \*

State: \*

City: \*

ZIP Code: \*

Start Date: \*

End Date:

+ Add Reset

Location Name	Address	City	State	ZIP Code	Primary Location	Start Date	End Date	Status	Action
No data available!									

Figure 39: Location view

### Primary Location:

Select "Yes" for the main physical address of the business or where the services take place.

- o Note: There can only be one primary location at a time.
- Select "No" for all subsequent addresses added where services will be provided.

### Location Name:

- Populate the name of the provider at the location being entered.
  - o The name the public would know the provider as, likely supported by signage.
  - o The DBA Name from the Basic Info section if there is a single location.
- Newly entered locations will require a name that is unique from existing locations on record.
  - o Consider adding the town or street address to make the name unique if multiple locations with the same name exist under the same BNPI.
    - Ex: Provider Clinic – Pierre and Provider Clinic – Fort Pierre

### Street Address:

- Populate the physical street address belonging to the BNPI where the services are being performed at.
  - o Note: PO Boxes or addresses of mailing services (ex: post office) are not valid
- If all services are performed off-site (e: anesthesia group billing for services at a non-owned hospital), list the corporate or home location where administrative tasks



are completed.

**State:** Select the state in which the location address is located.

**City:** Select the city in which the location address is found. The drop-down is displayed following selection of the state.

**ZIP Code:** Select the ZIP code from the list that is used with the location address populated. The drop-down is displayed following selection of the city. Make sure this reflects the ZIP code used in claims submission.

**ZIP+4:**

- Populate the applicable +4 portion of the ZIP code.
- If there is no recognized +4 for this location, utilization of 1234 or 0000 is permitted.
- Make sure this reflects the +4 ZIP code used in claims submission.

**Start Date:**

- The start date in which the provider is requesting to have this location recognized by SD Medicaid.
- In the case of out-of-state providers, the start date should be the same as the oldest date of service on the accompanying claim required to support the location addition.

**End Date:**

- Populate only when the location has or will be ceasing to exist or participate with SD Medicaid. In that situation the date populated is the last day in which the location existed or participated with SD Medicaid.
- Leave blank in all other situations and the system will populate 12/31/2999 to indicate ongoing participation.

## NPI Associations

This section captures the relationship or association between an entity and individual.

- BNPI new enrollments will not see this section until after their enrollment record has been approved.
- SNPI new enrollments will require that at least one BNPI is associated in order to complete the enrollment.
- Once approved on an enrollment record, the system will automatically add the association to the other record.
- It is recommended that the associations originate on the individual records whenever the record is available to make updates.
- Entity to Individual associations are permitted. Entity to Entity or Individual to Individual are prohibited.
- Providers are required to keep their associations current as a condition of participation.

### NPI Associations

**BNPI:** Add any servicing NPI that is rendering services that will be billed for by this BNPI and capture at what BNPI location(s) the services are being provided. A claim meeting timely filing and prior authorization requirements is necessary for each SNPI at each non-SD location selected. With the exception of IHS/Tribal entities, BNPI who do not bill for professional services on a CMS 1500 generally do not need to associate SNPI. Please visit our website for additional details. If an SNPI ceases to be with a BNPI, populate an end date. SD Medicaid processes claims based on eligibility on the date of services, not the date the claim is processed.

**SNPI:** Add the BNPI that will be billing for your services and capture at which location(s) you are providing services. If you are eligible and participate in the PCP program (see website for details), please capture at what location(s) and the related timeframes. If you cease to be associated to the BNPI, at a given location, or change PCP status, simply populate the end date.

<b>Associated NPI:</b> <input type="text"/>	<b>SSN:</b> <input type="text"/>	<b>Date of Birth: *</b> DOB <input type="text"/>	<b>Location: *</b> Select <input type="text"/>	<b>Start Date: *</b> Start Date <input type="text"/>	<b>End Date:</b> End Date <input type="text"/>
<b>PCP: *</b> Yes <input type="radio"/> No <input type="radio"/>	<b>PCP Start Date: *</b> Start <input type="text"/>	<b>PCP End Date:</b> End <input type="text"/>	<b>See Patients?: *</b> Yes <input type="radio"/> No <input type="radio"/>	<b>Phone # for patients:</b> <input type="text"/>	
				<input type="button" value="+Add"/> <input type="button" value="Reset"/>	

Figure 40: NPI Association view

### Adding an Entity to an Individual Enrollment Record:

**Associated NPI:** Add the BNPI that will be billing services provided by the SNPI.

**SSN:** Not applicable for this association; will be grayed out.

**Date of Birth:** Not applicable for this association; will be grayed out.

#### Location:

- Click on the drop-down to see all locations from the BNPI's enrollment record and select the desired location.
- Select an address and then return to the drop-down again in order to see more of the address displayed.

#### Start Date:

- Enter the date the association started in MM/DD/CCYY format.
- This date must be within the active/open/approved date range of the SNPI.

#### End Date:

- Leave blank for ongoing associations. The system will automatically populate 12/31/2999 to indicate the ongoing date.
- For date specific timeframes or to update an ending association, populate the last day the association was active.
  - Note: SD Medicaid processes claims based on the provider's eligibility on the date of service, not the date of claim processing. Providers should not delay in capturing associations that have ended and are required to do so as a condition of participation.

#### PCP:

- PCP is the primary care physician program.
- Eligibility requirements apply. Please review the PCP Addendum for additional details.
- Select the appropriate response.
  - "Yes" applies to eligible individuals desiring to participate as well as IHS Clinics, RHCs, and FQHCs.





- o “No” applies to all other entities and ineligible individuals or those not desiring to participate.

**PCP Start Date:**

- Required when PCP = Yes.
- Identifies the first day of participation as a PCP.
- Grayed out when PCP = No; it is not applicable.

**PCP End Date:**

- Grayed out when PCP = No; it is not applicable.
- Field can be left blank when PCP = Yes and the provider is still a participating PCP. The system will automatically add 12/31/2999 to indicate ongoing.

**See Patients:**

- Select “Yes” when patients are seen at the location.
- Select “No” when patients are not seen at the location.
  - o Ex: Administration only location is listed as there are no BNPI locations such as a Group of anesthetists.

**Phone # for patients:** Provide a phone number patients (recipients) could use to schedule appointments.

**Adding an Individual to an Entity Enrollment Record:**

- Completion of this section is conditionally optional as certain entities do not bill for the professional services of a servicing or treating individual. Ex: Hospital
- Providers desiring to enroll an individual only to list them as an attending, ordering, referring or prescribing provider may not need to take any enrollment action due to SD Medicaid’s streamlined enrollment process which is triggered during claims adjudication.

**Associated NPI:** Add the SNPI that the BNPI will be billing services for.

**SSN:** Enter the SSN for the SNPI

**Note:** If the SSN doesn’t match the SSN found on the SNPI enrollment record, an error will be displayed. The association will not be permitted until the data has been corrected.

**Date of Birth:** Enter the SNPI’s date of birth in MM/DD/CCYY format.

**Note:** If the DOB doesn’t match the DOB found on the SNPI enrollment record, an error will be displayed. The association will not be permitted until the data has been corrected.

**Location:**

- Click on the drop-down to see all locations from the BNPI’s enrollment record and select the desired location.
- If you are unable to see enough of the address, select any address and then return to the drop- down again to view a larger portion of the address.

**Start Date:**

- Enter the date the association started in MM/DD/CCYY format.
- This date must be within the active/open/approved date range of the BNPI and SNPI.

**End Date:**

- Leave blank for ongoing associations. The system will automatically populate 12/31/2999 to indicate the ongoing date.
- For date specific timeframes or to update an ending association, populate the last day the association was active.
  - Note: SD Medicaid processes claims based on the provider's eligibility on the date of service, not the date of claim processing. Providers should not delay in capturing associations that have ended and are required to do so as a condition of participation.

**PCP:**

- PCP is the primary care physician program.
- Eligibility requirements apply. Please review the PCP Addendum for additional details.
- Select the appropriate response.
  - "Yes" applies to eligible individuals desiring to participate as well as IHS Clinics, RHCs, and FQHCs.
  - "No" applies to all other entities and ineligible individuals or those not desiring to participate.

**PCP Start Date:**

- Required when PCP = Yes.
- Identifies the first day of participation as a PCP.
- Grayed out when PCP = No; it is not applicable.

**PCP End Date:**

- Grayed out when PCP = No; it is not applicable.
- Field can be left blank when PCP = Yes and the provider is still a participating PCP. The system will automatically add 12/31/2999 to indicate ongoing.

**See Patients:**

- Select "Yes" when patients are seen at the location.
- Select "No" when patients are not seen at the location.
  - Ex: Administration only location is listed as there are no BNPI locations such as a Group of anesthetists.

**Phone # for patients:** Provide a phone number patients (recipients) could use to schedule appointments.

**Common NPI Association Error Messages**

- Must be a valid 10-digit NPI.
  - Triggered when the entered NPI is not in the correct format
- BNPI is not registered.
  - Triggered when the entered NPI is not known
- SNPI is not enrolled.
  - Triggered when the entered SNPI is not known

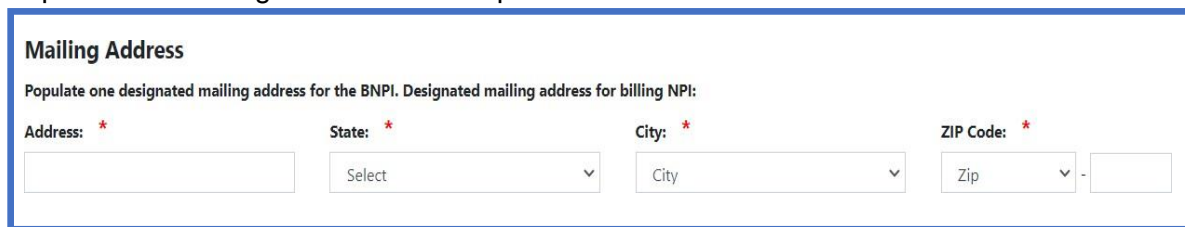




- NPI already exists.
  - Triggered when the entered NPI already associated.
- The NPI being associated is not approved/active/open.
  - Triggered when entered NPI is not approved.
- NPI association not allowed.
  - Triggered if attempting to associate FEIN to FEIN or SSN to SSN
- NPI cannot be associated with the given combination.
  - Triggered when the entered SNPI, SSN, & DOB combination don't match enrollment record.

## Mailing Address

Populate the mailing address that the provider could be reached at.



**Mailing Address**

Populate one designated mailing address for the BNPI. Designated mailing address for billing NPI:

Address: \*      State: \*      City: \*      ZIP Code: \*

                  -

Figure 41: Mailing Address view

**Address:** Enter the mailing address.

**State:** Select the State where the mailing address is located from the drop-down.


**City:** Select the City where the mailing address is location from the drop-down which populates based on the State selection.

**ZIP Code:** Select the ZIP Code for the City from the drop-down.

**ZIP+4:** Populate the 4-digit ZIP+4 tied to this address.

## Enrollment Contact

List the contact information that should be used by SD Medicaid when communications about the specific enrollment are required.



**Enrollment Contact**

Populate an enrollment contact for each NPI where enrollment related communications will be directed.

Enrollment Contact Info:

Email: \*      First Name: \*      Last Name: \*      Phone: \*      Fax:

Figure 42: Enrollment Contact view

**Email:** Populate the email address for the contact (this may be a shared account).

**First Name:** Populate the first name of the contact.

**Last Name:** Populate the last name of the contact.

**Phone:** Enter the 9-digit phone number without parentheses or dash.

**Fax:** Enter the 9-digit fax number, if applicable, without parentheses or dash.

## Supporting Documentation

In addition to creating and maintaining online enrollment records in the PE Portal, there are requirements to provide supporting documentation. Supporting documentation should be limited to those items noted as required unless otherwise requested by the SD Medicaid Provider Enrollment Team. Supporting documentation should be uploaded to the PE Portal using the “Add Attachment” button. Visit the [SD Medicaid Provider Enrollment webpage](#) for the list of required documentation and current versions of the forms.

### Documentation Format

- o Uploaded documentation cannot exceed a max of 25 documents at 10MB per attachment.
- o Supporting documentation may be in PDF, JPG, or GIF.
  - Preferred file format is .PDF
  - Documentation with signatures must be in PDF format.
    - .JPG/.JPEG is not accepted on signatory documents.
    - DocuSign and Adobe Sign are accepted.

Always send documentation as “actual size” and in its original orientation, so it could be reproduced by printing.

- o Documents may be combined into one file.

### Signature Documentation Requirements:

- o Documents requiring signature for individual providers must be signed by the individual, assignment of signature is not accepted.
- o Documents requiring signature for entity providers must be signed by the CEO or other individual with legal binding authority.

### General Assistance

- o Remember that documentation is to support data added and updated in the PE Portal. It does not eliminate the need to make updates to the actual data, such as license expiration.
- o Do not mix documentation for different NPIs in the same submission.
  - Do not submit documentation for an individual under an entity/group record. Only submit required documentation for the entity/group that pertains specifically to the entity/group application.
  - Documentation related to the individual provider should be uploaded to the individual’s record, not the group/entity whenever permitted by existing access.
- o Complete copies of the document, not just the signatory page is required. Ex: All pages of the provider agreement, disclosure, and all addendums would be required.
- o License documentation is required at the time of enrollment, when a new



- license # is being added to an existing record, or if/when a name change occurs on the license or basic information section.
- o If documentation is emailed, always include the NPI that the documentation applies to on the documentation as well as within the body of the email to [SDMedicaidPE@state.sd.us](mailto:SDMedicaidPE@state.sd.us).