MMIS Claims Submission Overview:

Developmental Services

What are my options with billing to NH Medicaid?

There are 4 options of billing to NH Medicaid:

1. Paper Claims

  ➢ CMS 1500 / HCFA 1500 Insurance Claim Form

2. Third Party Trading Partner/ Billing Agent

3. Vendor Software/Trading Partner Self

  ➢ Uploading X12 batch files to MMIS manually

4. MMIS Web Portal Claim Entry

Submitting Paper Claims to Medicaid

▶ To complete your claim, you may follow the instructions in section 11 of the CFI Billing Manual posted on the MMIS Billing Manuals Page

   ▶ The manual covers all necessary fields and their requirements

▶ Claims must be submitted on an original red and white CMS 1500 form and should be typed, not handwritten.

   ▶ Data on the claim form must be aligned properly.

▶ Submitted paper claims cannot be tracked on the portal. You must contact our call center at 1-866-291-1674 to check status.

▶ All claims submitted will appear on your remittance advice for review

▶ Completed claims must be mailed to:

     Conduent Claims Unit

     P.O. Box 2003

     Concord NH 03301

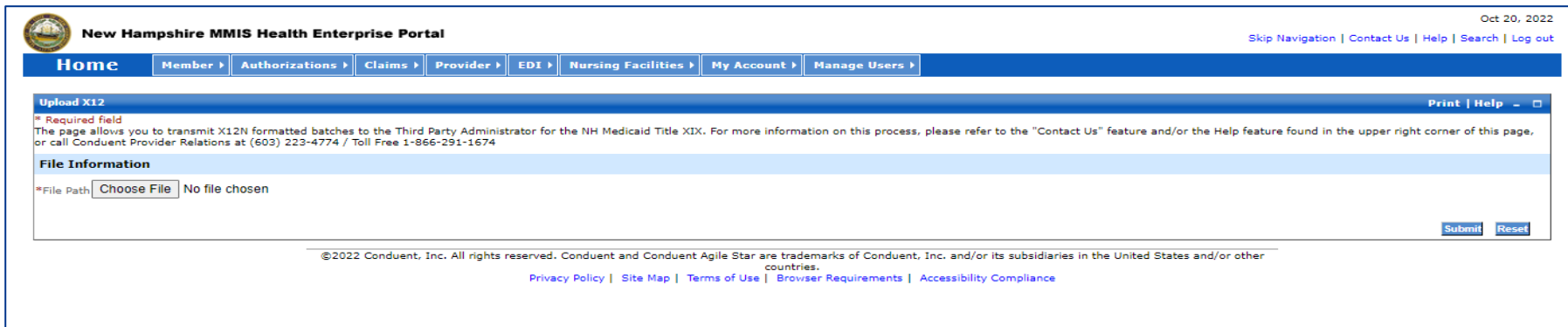November 8, 2022

Third Party Trading Partner/ Billing Agent

If a Trading Partner/Billing Agent will be submitting claims on your behalf:

▶ The third-party must be enrolled as a trading partner

▶ The following documents will be required:

  ▶ Billing Agent Agreement

  ▶ ERA Application

  ▶ Letter indicating requested transactions

▶ The trading partner must be linked to your NH Medicaid ID or application

▶ The Trading Partner/Billing Agent must complete EDI testing

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Vendor Software/Trading Partner Self

Requirements to submit X12 files to MMIS:

▶ Provider must have vendor software that can create X12 files

▶ Must be enrolled as a trading partner "self" and have portal access

▶ User must have the EDI role added to their User ID

▶ Trading partner self (provider) must complete testing with Conduent EDI before submitting files

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MMIS Web Portal Claim Submission

Requirements to submit claims on portal:

▶ Must be an enrolled NH Medicaid provider and have portal access

    ▶ You will receive portal access upon approval of your application.

    ▶ You can also gain portal access by submitting the NH MMIS Portal Registration Form via encrypted email at NHProviderRelations@Conduent.com or via secure fax at 866-446-3318

▶ User must have the claims role added to their User ID

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NHMMIS Portal Demonstration

NH Medicaid MMIS Portal Link: NHMMIS.NH.GOV

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Member Eligibility

▶ To check Eligibility on the NH MMIS Portal, you must be an enrolled provider and have portal access

    ▶ Log into your User ID and navigate to the Member dropdown list, and select Check Eligibility

    ▶ Enter at least 3 pieces of member information and select search

▶ You can also check eligibility via the AVR (Automated Voice Response) at 1-866-291-1674 or 603-223-4774

    ▶ You will need your 7-digit NH Medicaid id, 6-digit pin, and member information.

▶ You can contact a NH Provider Relations Call Center representative at 1-866-291-1674 or 603-223-4774

▶ You may also check eligibility through your Trading Partner/Billing Agent depending on the transactions you have set up with them.

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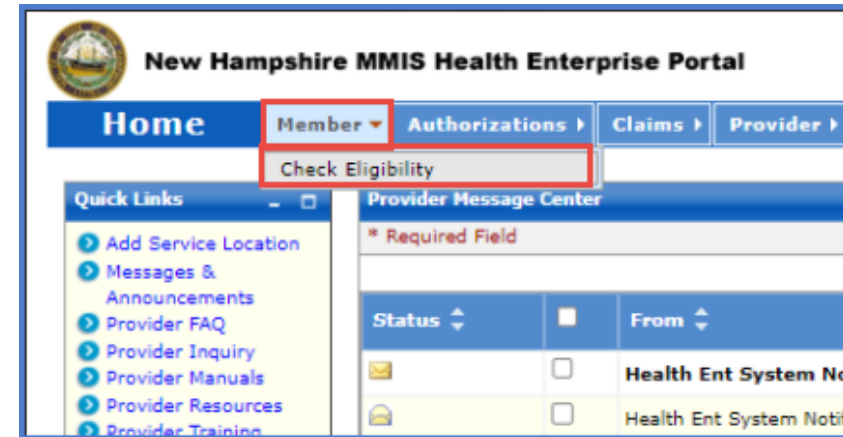
Important Information

▶ Be sure to check member eligibility prior to providing services.

▶ To keep your user id from going inactive, set a monthly reminder to log in every month. After 30 days of not logging in, your account will go inactive and be removed after 60.

▶ When billing a claim it must match your service authorization. If you receive service/prior authorizations from DHHS in paper form or electronically, save this for reference when submitting claims.

▶ Timely filing is one year from the date of service of the claim. Please ensure you submit the claim within that year, otherwise you will receive a denial for timely filing, which you can appeal using the Timely Filing Override Form

▶ All forms and information can be found on the MMIS Documents and Forms page

▶ NH Provider Relations Call Center – 1-866-291-1674

  ▶ Select option "1" for providers on first menu

    ▶ If you want to use the AVR (Automated Voice Response System), enter your 7-digit Medicaid ID number and your 6-digit AVR Pin

    ▶ If you wish to speak to a representative, just wait on this menu without entering anything and you will be transferred to a representative

Open for questions and discussion

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Thank You!

For any questions or concerns, please contact the NH Medicaid Provider Relations Call center:

1-866-291-1674 or 603-223-4774

Provider Field Representative Contact Information: nhproviderrelations@conduent.com

- **Brian Parsons**

Brian.Parsons@conduent.com

603-219-1499

- **Alyssa Stephenson**

Alyssa.Stephenson@conduent.com

603-674-6995

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Document Quick Links Reference Page:

- [MMIS Billing Manuals Page](#)

- [MMIS Documents and Forms](#)

- [837P Companion Guide](#)

- [Timely Filing Override Form](#)

- [NH MMIS Portal Registration Form](#)

- [Billing Agent Agreement](#)

- [Electronic Remittance Advice Application](#)

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Glossary

- **MMIS**: <u>M</u>edicaid <u>M</u>anagement <u>I</u>nformation <u>S</u>ystems. The system where providers go to enroll for direct billing.

- **Provider**: Medicaid enrolled entity that will be submitting claims for covered Medicaid services.

- **Trading Partner/Billing Agent**: A third party entity that enters into a business relationship with the Medicaid provider to complete transactions. Trading partners must be enrolled with MMIS and have completed authorizations from each provider entity to act of their behalf.

- **Trading Partner Self:** Provider who utilizes claim software that generates and sends X12 files directly to Medicaid, not through a third party.

- **CMS 1500 / HCFA 1500 Insurance Claim Form:** Standard health insurance claim form used for submitting physician and professional claims.

- **X12 Batch File:** X12 is a message formatting standard used with Electronic Data Interchange (EDI) documents for trading partners to share electronic business documents in an agreed-upon and standard format.

- **Remittance Advice:** An explanation from a health plan to a provider about a claim payment denial or suspended claim.

- **User ID:** NH Medicaid provider log in to access the NHMMIS portal.

- **EDI**: Electronic Data Interchange.

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