

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

Third Party Trading Partner/ Billing Agent

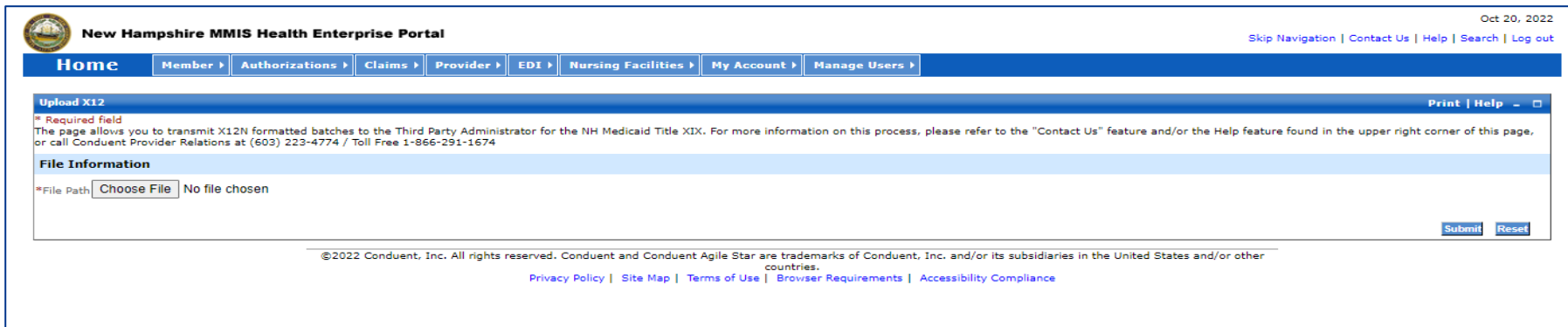
If a Trading Partner/Billing Agent will be submitting claims on your behalf:

- ▶ 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

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



The screenshot displays the 'New Hampshire MMIS Health Enterprise Portal' interface. At the top, there is a navigation bar with links for Home, Member, Authorizations, Claims, Provider, EDI, Nursing Facilities, My Account, and Manage Users. The date 'Oct 20, 2022' is shown in the top right corner. Below the navigation bar, the 'Upload X12' form is visible. It includes a 'Required field' warning and a message: 'The page allows you to transmit X12N formatted batches to the Third Party Administrator for the NH Medicaid Title XIX. For more information on this process, please refer to the "Contact Us" feature and/or the Help feature found in the upper right corner of this page, or call Conduent Provider Relations at (603) 223-4774 / Toll Free 1-866-291-1674'. The 'File Information' section shows a 'File Path' field with a 'Choose File' button and the text 'No file chosen'. At the bottom of the form, there are 'Submit' and 'Reset' buttons. The footer contains copyright information for Conduent, Inc. and links for Privacy Policy, Site Map, Terms of Use, Browser Requirements, and Accessibility Compliance.

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



NHMMIS Portal Demonstration

NH Medicaid MMIS Portal Link: NHMMIS.NH.GOV

New Hampshire MMIS Health Enterprise Portal Nov 3, 2022
[Skip Navigation](#) | [Contact Us](#) | [Help](#) | [Search](#)

Home | [Program](#) | [Member](#) | [Provider](#) | [Documentation](#) | [Directories](#)

Welcome
Welcome to the Conduent Government Solutions Health Enterprise Portal. This system supports all of your State Medicaid and Decision Support needs.

NH MMIS has established a maintenance window from 12:01 A.M. to 12:00 P.M. every Sunday to apply scheduled system upgrades. During the maintenance window, the system may not be accessible.

Provider Registration
For providers to obtain a user name and password to use the Health Enterprise portal, they must be a current provider for Medicaid. For trading partners to obtain a username and password, they must be a current Trading Partner with a trading partner ID. To begin the registration process, they must have their enrollment form ready.

[Register](#)

Quick Links

- Enrollment
- Provider Enrollment Overview
- Documents and Forms
- Find a Health Care Provider
- Department of Health and Human Services
- Report Fraud & Abuse
- ICD10 Resources
- Provider Revalidation
- Interoperability Exchange

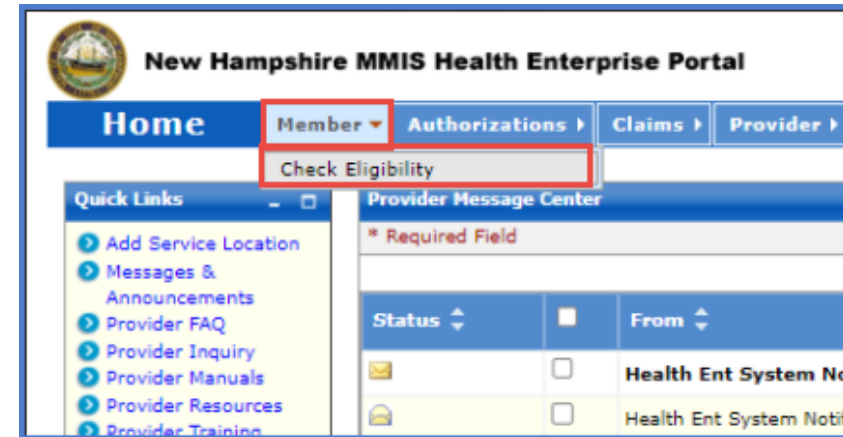
Sign In
Log into the system based upon your role:
[Providers](#)
[Internal Users](#)

When you are granted access, you will log in here at the "Providers" link.

©2022 Conduent, Inc. All rights reserved. Conduent and Conduent Agile Star are trademarks of Conduent, Inc. and/or its subsidiaries in the United States and/or other countries.
[Privacy Policy](#) | [Site Map](#) | [Terms of Use](#) | [Browser Requirements](#) | [Accessibility Compliance](#)

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.



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



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

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](#)

Glossary

- **MMIS:** Medicaid Management Information Systems. 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.