

Overview

Per OAR 410-120-1260, all providers who receive payment for services rendered to Oregon Medicaid Members must have their National Provider Identification (NPI) number enrolled in Oregon Medicaid for the dates of service. This includes NPIs for submitting, rendering, and the primary attending on a claim. Enrollments are specific to NPI numbers and are non-transferable. All NPIs which appear on a claim will need to be enrolled in order to be reimbursed for services rendered.

Enrollments for providers outside the state of Oregon are for a 6 month date range unless claims service dates are greater than 6 months.

There are 2 types of Medicaid Enrollment which a provider could qualify:

- 1) **Fee for Service**
- 2) **Encounter Only**

Fee for Service Enrollments (FFS)

These enrollments are done directly between a provider and Oregon Health Authority's Division of Medical Assistance Programs (DMAP) when services were rendered to an **Open Card member** whose services are covered directly by DMAP. Information regarding Fee for Service enrollments, as well as forms and additional links can be found on the Oregon Health Plan's website at <http://www.oregon.gov/oha/HSD/OHP/Pages/Provider-Enroll.aspx>.

FFS Enrollments will cover all services rendered to Oregon Medicaid members, both Open Card members and those covered by a CCO, within the effective date range.

Encounter Only

These enrollments are done between a provider and one of Oregon's 16 Coordinated Care Organizations (CCO). A list of all CCOs can be found at

<http://www.oregon.gov/oha/HSD/OHP/Pages/Coordinated-Care-Organizations.aspx>.

Each CCO has their own process for gathering necessary information and processing enrollments. If a claim is processed and denied by one of the CCOs, they will reach out to providers regarding their individual process.

Encounter Only enrollments will only cover services rendered to Oregon Medicaid members covered by an Oregon CCO within the effective date range.

Online Resources:

Oregon Coordinated Care Organizations List and Contact Information:

<http://www.oregon.gov/oha/HSD/OHP/Pages/Coordinated-Care-Organizations.aspx>

Oregon Health Plan Tools for Providers (provider enrollments, forms and instructions):

<http://www.oregon.gov/oha/HSD/OHP/Pages/Provider-Enroll.aspx>

Oregon Administrative Rules – Division 120 Medical Assistance Programs:

http://arcweb.sos.state.or.us/pages/rules/oars_400/oar_410/410_120.html

Contact Information

Oregon Health Authority Provider Enrollment:

Phone: 1-800-422-5047 / Email: provider.enrollment@state.or.us

Health Share Provider Enrollment for Behavioral Health Providers:

Send completed enrollment form to: map.enrollment@phtech.zendesk.com

Fax completed enrollment form to: 503-315-4138 Attn MAP Enrollment

Medicaid Enrollment Status Inquiry: 503-315-4130

Medicaid Enrollment Questions: providers@healthshareoregon.org

Health Share Provider Enrollment for Physical Health Providers:

Care Oregon: ProviderUpdates@careoregon.org

[http://www.careoregon.org/Providers/ProviderUpdates/17-06-01/New Medicaid Enrollment Requirement on Claims Submitted to CareOregon.aspx](http://www.careoregon.org/Providers/ProviderUpdates/17-06-01/New_Medicaid_Enrollment_Requirement_on_Claims_Submitted_to_CareOregon.aspx)

Kaiser: NW-Provider-Enrollment@kp.org

Providence: (503) 574-7500 or (800) 878-4445

Tuality: Alexis Underwood / Alexis.Underwood@tuality.org

Frequently Asked Questions

Q: I work for an organization, do I still need to have my individual NPI enrolled in Oregon Medicaid?

A: Yes. All NPIs which appear on a claim will need to be enrolled in order to be reimbursed for services rendered.

Q: Can unlicensed clinicians be enrolled in Oregon Medicaid?

A: Yes. NPIs for all providers, regardless of licensure, which appear on a claim will need to be enrolled in order to be reimbursed for services rendered.

Q: I am not enrolled in Oregon Medicaid, but I have an authorization to provide services to a Health Share member. Can I start the enrollment process before claims are submitted?

A: Yes. As long as you have an authorization to see a member, you can start the enrollment process.

Q: How can I start the Oregon Medicaid enrollment process with Health Share?

A: If you have submitted a claim to Health Share, and you are not yet enrolled in Oregon Medicaid, you will receive a claim denial and the Oregon Medicaid Enrollment Form will be sent. If you have not yet submitted a claim, but are authorized to see a Health Share member, you can contact us at providers@healthshareoregon.org and request an Oregon Medicaid Enrollment Form.

Q: How long does the enrollment process take?

A: The enrollment process varies based on the time of year and current enrollment workload. On average, an enrollment can take 6-8 weeks to process.

Q: I have submitted my completed Oregon Medicaid Enrollment Form to PHTech for processing, how can I check the status of my request?

A: For questions regarding the status of your pending enrollment, please call the Provider Enrollment Department at PH Tech at 503-584-2169, option 2.

Q: I have already provided services to a Health Share member, but am not enrolled in Oregon Medicaid. Can the enrollment be processed with a retroactive effective date?

A: Yes. An Oregon Medicaid Enrollment Number can have a retroactive effective date up to 1 year in the past if it is to encompass a rendered service.

Q: I don't know if I am enrolled in Oregon Medicaid. How can I find out?

A: If you are unsure whether or not your NPI is enrolled in Oregon Medicaid, you can send an email to providers@healthshareoregon.org. Be sure to include your full legal name, or organization name as well as your NPI(s) along with your request to confirm Medicaid enrollment.