

Question: How long does it take for a LBA to complete the process of becoming a Medicaid ABA provider?

Answer: TMHP has up to 30 days to process or review the information. However, this is usually done much quicker, usually 5-15 days. Once TMHP has determined there are no deficiencies we will send the application request to OIG for their review. OIG can take up to 30 days to decide to approve the provider or not. Once OIG has decided, they will notify TMHP who in turn, will notify you within about a week.

Question: For LBAs operating within a group who were approved individually via PEP before group applications were available: what is the directive from TMHP regarding how we should proceed with what amounts to "adding LBAs to the roster"? The most recent update I was given a couple weeks ago was that trying to apply as a group under a group NPI to would create problems with existing LBA enrollments that have already been approved under individual providers' NPIs, so does that mean that even LBAs are operating under the same tax ID should apply with their individual NPIs?

Answer: You can keep the LBA's enrolled as individuals. You do not need to do anything. However, group enrollments are easier to manage. Since you are maintaining all the group information under that identifier; think EFT, W-9 info, and ownership information. Once this group is set up, you can add performing providers to the group without needing to include this information. With an individual enrollment, you would need to include this for each enrollment request.

Question: Will this be on available on play back? I missed the beginning.

Answer: A PDF copy of the presentation along with the speaker notes will be provided to Judith to distribute to anyone in attendance today.

Question: Is it possible to review the provider manual and provider agreement before applying?

Answer: The policy related training and instructional material is still in development. Please continue to check the TMHP website for updates.

Question: what if the facility is nonprofit

Answer: You would answer yes to the 501(c)(3) question in the W-9 tab. You will also need to include an IRS exemption letter attached within the W-9 tab. We are providing Judith with a copy of what documents are needed for various scenarios within the W-9 tab.

Question: Where can enrolled LBAs direct questions/concerns/complaints regarding MCOs that appear to not be following the TMPPM? What is the timeline for TMHP to respond to such inquiries?

Answer: Please send any complaints regarding MCOs to HHSC at HPM_Complaints@hhsc.state.tx.us. HHSC will respond to the inquiry and not TMHP. TMHP and the MCOs have separate contracts with the State and are not affiliated.

Question: Do the Ownership/Controlling interest forms require a wet signature?

Answer: No, wet signatures are no longer required and will not be accepted. To sign an agreement whether it's the HHSC Agreement or EFT Agreement, you will e-sign. Please reference the PDF copy of this presentation for step-by-step instructions on how to e-sign documents.

Question: I am not seeing a provider handbook for ABA therapy or autism services? I found the behavioral health and case management services handbook, but there is no mention of ABA services.

Answer: The policy related training and instructional material is still in development. Please continue to check the TMHP website for updates.

Question: Did I understand correctly, that if LBAs is enrolled under a group, each individual LBA would still need to sign/fill out their own LBA attestation? Or just one group representative needs to?

Answer: Yes, an LBA Attestation would need to be included for each enrolling LBA provider, whether they are an individual or performing provider. The group enrollment will also need to include the LBA Attestation form. When completing the group attestation please use the group name on that form and not the individuals.

Question: I work part-time for a company that is working on having me credentialed with Medicaid. I also see my own private clients through my own company and would like to be able to accept Medicaid for them. Am I able to be considered an individual provider for both of these situations? Do I need to go through this process separately to be able to accept Medicaid for my private clients?

Answer: You would need to add both practice locations to your enrollment record. If you are already enrolled with TMHP, you would need to create an 'Existing Enrollment' request to add the other practice location to your identifier. Every location you see Medicaid clients would need to be tied to your NPI/enrollment record.

Please reference the handout "Adding a Practice Location" which we provided to Judith for steps on this process.

Question: Will a copy of the recording be emailed to us?

Answer: Yes, a PDF copy of the presentation along with the speaker notes will be provided to Judith to distribute to anyone in attendance today.

Question: Will any information for billing claims be discussed today or at a later time?

Answer: The policy related training and instructional material is still in development. Please continue to check the TMHP website for updates.

Question: I don't think my question was clear. Example: an organization has 3 LBAs. 2 LBAs were TMHP enrolled individually in November/December before group enrollment

applications were even available. LBA #3 is a new hire and is not TMHP-enrolled at all, but needs to be enrolled. Should LBA #3 apply individually like the other LBAs?

Answer: A group application would probably be the easiest in the long run, for any additional LBAs you are adding to your group. Once the group application is finalized, you can add #3 to this group, along with the other 2. However, if it's easier for you, you can also enroll this person as an individual. Unfortunately, TMHP cannot dictate how they should be enrolled, only the options. For this person both options would be acceptable.

Question: Just to confirm, if we are starting from scratch with the group and providers not being credentialed, we should complete the group application first, and then add individual providers to the group for credentialing?

Answer: Correct. You would enroll the group. Once the group enrollment is finalized, you would add the individual LBAs to your group as performing providers.

Question: Can you clarify the difference between the individual providers and the performing provider?

Answer: An individual is a person who can bill on their own. Since it is a billing identifier, we would need Accounting/Billing information for this type of enrollment. For a performing provider a group is the billing provider. So that information is tied to the group record. On the claim that is submitted to TMHP you would identify the group is the billing provider and include the performing provider who is part of the group listed within the same claim.

Question: We are seeing issues with Authorizations and the inconsistency with THMP billing guidelines VS what is being told to providers by reps.

Answer: My apologies for that, for billing/policy questions we will not be discussing those today's. For specific issues like authorizations, you can email provider.relations@tmhp.com for assistance.

Question: any information for ABA services would be greatly appreciated for billing claims - CPT codes, modifiers

Answer: The policy related training and instructional material is still in development. Please continue to check the TMHP website for updates.

Question: how do you attest an NPI once a provider has been approved but mid-way the LBA license has been updated

Answer: If you mean enrolled by "attest" you can update the license by submitting a PEMS request for the license update.

Question: Are there a minimum number of LBAs required to enroll as a group?

Answer: No, there is no minimum. You can have a group with only one provider and that would be acceptable.

Question: Is there a site audit tool available?

Answer: No. If you are looking for a checklist, we can provide that information to Judith to disperse to the attendants.

Question: Regarding the File Maintenance Updates: can you clarify the timeline between licensure update being required and LBAs being inactivated with TMHP and it causing an enrollment issue?

Answer: Once the license is expired a status code will be placed on that identifier the following day.

You can submit a request to update the license and those are usually processed much quicker than an enrollment request.

Question: I am sorry, I missed the answer for the question on minimum of LBAs to enroll as a group

Answer: You would need at least one performing to add to the group. We do not require anymore than one person, but you can as many as you would like.

Question: So if we bill under the group NPI then we should apply as a group and not an individual?

Answer: Yes, if you plan on billing as a group, you would enroll as a group and bill as a group.

Question: How do we upload our renewed LBA license? TMHP website?

Answer: You would create a request for the license update for that NPI within PEMS. Click "Edit Enrollment Record" once the NPI record is open and create a request for "Maintenance – Licenses" to update this.

Question: What is the recourse for credentialing applications that are significantly over the time frame that was provided for LBAs. Specific email address?

Answer: Please email provider.relations@tmhp.com

Question: Is a 1person org chart okay if you 100 percent the company?

Answer: Yes, this is fine. TMHP must verify an organizational structure chart is included to progress the application to OIG.

Question: What is the timeframe for TMHP responding to Provider Relations emails?

Answer: Provider Relations will start reaching back out to your request within a week to schedule a walk-through for any PEMS related assistance.

Question: Regarding the CDE training: is there an email address to which diagnosticians who want to be part of this conversation/training can be directed?

Answer: Any upcoming trainings will be posted on the TMHP website.