ePREP For Waiver

Courtney Barno Provider Enrollment, Claims and Compliance



Welcome to ePREP!

ePREP stands for **e**lectronic **P**rovider **R**evalidation and **E**nrollment **P**ortal. Here are some of the Benefits of using ePREP:

- Applications can be filled out electronically instead of by paper Easier/Quicker to fill out Only the necessary fields for the type of application are generated Shorter processing times
- Access to your Maryland Medicaid information (now called an Account in ePREP)

You can see the status of your account (Active, Suspended or Inactive) You can see your affiliations

You can see all of your demographic information



Helpful Resources

• There are resources you can use to learn all about ePREP and how to use it. Maryland Medicaid has created a website with documents, checklists and webinars that will help you with ePREP.

<u>health.maryland.gov/eprep</u>



Helpful Resources Cont.

- **Resources within ePREP**
- <u>Lucy</u> Your enrollment buddy and guide appears on most pages to give you helpful information.
- <u>Lucy Hover Help</u> When you click on or hover over an action item (textbox, drop down, Radio button), Lucy will pop up again with more information on what and how to enter information
- <u>In Context Tutorials</u> If you see a filmstrip icon you can click on it to view a short 3 to 5 minute video explaining what needs to be done .







ePREP Terminology – Profiles, Roles, and Accounts –

- **User Profile:** Your individual username, used to log in to ePREP.
- **Business Profile:** A centralized environment that houses your enrolled Medicaid entity accounts and applications. A user may have access to one or more business profiles.
- Account: ePREP record for an enrolled provider, associated with a single NPI, provider type, practice location, and entity Medicaid (MA) number.
- **Linking:** Connecting your Business Profile to an existing account so that you can view and manage it.



ePREP Application Types -

Application Types

- New Application: Application to enroll new facility to Maryland Medicaid.
- **Supplemental:** A change in a provider's account information or required documenting, such as correspondence address or an updated professional license.
- **Change of Ownership (CHOW):** Application to add a new Tax Identification Number (TIN) or Employment Identification Number (EIN) to Business Information form.



ePREP Application Types Cont.

Revalidation

- Application to renew your Medicaid enrollment every 5 years
- Scheduled automatically in ePREP when they are due. You may only submit a reval when you receive a notification that it is time to do so.
- You will receive a printed reval notification in the mail for your initial notification. After your ePREP account is set up, you will receive electronic reval notifications.

Disenrollment

Providers Who wish to no longer partcipate in Medicaid Waiver



Application Process



WorkFlow

- 1. Provider submits application to ePREP
- 2. Application is reviewed and validated by ePREP team (Exclusion list, NPI verification, Tax ID verification, Address check and SDAT verification)
- 3. Referred to Community Long Term Care Unit (CLTC) Provider enrollment unit- Verification of business documents and staff documents.
- 4. Referred to Site Survey Unit- Moderate Risk Team.
- 5. Referred to Community Settings Provider enrollment Site Visit and Settings Compliance.
- 6. Enrollment and New provider orientation .



Required Documents



Provider Addendum

- Almost all provider types will need an Addendum.
- If providers cannot find their Provider Type specific Addendum, or are not sure if they need to complete one, ePREP directs them to the State's website.

health.maryland.gov/providerinfo

- The provider will need to navigate to the Enrollment page. This is where the provider can then find their Provider Type (PT) and click on the "X" to retrieve that PT's Addendum.
- PT 76 Assisted Living Addendum <u>https://health.maryland.gov/mmcp/Provider%20Enrollment%20Application%2</u> <u>OMaterial/PT76_Assisted_Living_Facility/Facility/76_AssistedLivingFacility_e</u> <u>PREPAddendum_V2.pdf</u>



Required Documents

1. A copy of current resume for the Assisted Living Manager documenting a minimum of three (3) years direct

patient care experience plus certifications i.e., Medication Technician, CPR, First Aid, Assisted Living

Management Training etc. (A five (5) or more bed facility manager must have the 80-hour Management Training Course)

2. A copy of current resume for the Alternate Assisted Living Manager documenting a minimum of three (3) years direct patient care experience plus certifications i.e., Medication Technician, CPR, First Aid, Assisted

Living Management Training etc.

3. If you are a registered nurse:

a. A copy of your license, CPR certification and assisted living management training

4. For the Delegated Nurse:

a. A copy of the Delegated Nurse's license

b. A copy of the verification of completion of the Delegated Nurse Curriculum

c. A copy of the Delegated Nurse Contract

5. Copies of all Employee's Certifications including current First Aid, CPR cards, Med.Tech Certificate, Criminal Background Checks and two forms of ID.

Note: Criminal Background Checks: The facility must have an account with the Criminal Justice

Information System (CJIS) to perform criminal history record checks. CJIS Checks submitted for

review must have facility name on them. Other types of Criminal Record Checks are not acceptable.

6. A copy of Resident Agreement

7. A copy of Resident Rights

8. A copy of Resident House Rules

9. A copy of literature that is used to promote your facility, i.e. brochures etc.



Resident Agreement & House Rules

Resident agreements and house rules should align with program regulation and the final setting rule.

Providers will have their facility resident agreement and house rules reviewed for revisions prior to the site visit.

Important Items of the resident agreement:

- Fee's
- Occupancy provisions
- Services provided
- Admission and Discharge
- Daycare Policy
- Resident finances



Site Visits

- Site visits are conducted prior to enrollment for all new waiver providers, visits can be done in-person and virtual via google meets.
- Visits are recorded
- Providers are expected to provider pictures and additional videos after the visit has been completed
- Providers will be given a follow up letter if there are outstanding documents or a no concerns letter.



Final Settings Rule

Assisted Living Facility (ALF) were required to meet new criteria by January 2019 due to the Home and Community Based Settings Rule.

This rule, issued by the Federal Medicaid agency, applies to all Medicaid assisted living providers.

The manual attached has the rule broken into six sections. In each section, there is a checklist and examples.

https://health.maryland.gov/mmcp/waiverprograms/pages/Community-Settings-Final-Rule.aspx

The department has been completing second and third rounds site visits for all providers even after enrollment has been granted.



Questions or Concerns



Questions & Contacts

ePREP Portal: <u>eprep.health.maryland.gov</u>

Resources and frequently asked questions: <u>health.maryland.gov/eprep</u>

ePREP Call Center: 1-844-4MD-PROV (1-844-463-7768)

Monday – Friday 9AM- 5PM

Closed on State holidays

Email :Provider enrollment, claims and compliance

MDH.coproviders@maryland.gov

