

Medicaid Enrollment Application and Agreement for Nonbilling Individual Providers

This form is used to enroll individuals who wish to become ordering, referring, prescribing providers, as well as individuals who wish for their nonbilling providers identifier to be identified on hospital services claims submitted to the Health Care Authority (HCA).

This form should not be used to enroll with HCA as a billing individual, group, or performing provider (under a group or facility) with the intent to submit claims for reimbursement.

Note: A provider cannot have both a core provider agreement (CPA) and this nonbilling individual provider agreement.

For individuals submitting this form:

- Any existing CPA with HCA will be terminated and replaced by this agreement,
and/or
- If your services are currently being billed to Medicaid through a group or facility, that billing process for your services will be deactivated and that group or facility will no longer be able to use your NPI as a performing provider for professional services.

Any failure to submit the requested information may cause the HCA to refuse to enter into an agreement with the enrolling provider.

Please answer all questions as of the current date. All links contained on this form are functional as of April 18, 2013.

To enroll as a billing group or performing provider, see the provider enrollment site at:

<http://hca.wa.gov/billers-providers/apple-health-medicaid-providers/enroll-provider>

| I. Enrolling Nonbilling Provider's Information | | |
|---|--|---|
| <i>Complete this section with information about the individual provider. Specify the provider's name, (legal name reported to the IRS), Social Security number, national provider identifier (NPI), date of birth and gender. Enter applicable professional license, the state the license was issued in, the Drug Enforcement Agency (DEA) number, and the type/specialty/subspecialty of the enrolling provider's practice.</i> | | |
| Nonbilling provider name (legal name) | Social Security number | |
| National provider identifier (NPI) | Date of birth | Gender (check one) <input type="checkbox"/> Male <input type="checkbox"/> Female |
| Professional license number | License state of issue | Drug enforcement agency # (DEA) |
| Type of practice | Specialty | Subspecialty |
| II. Enrolling Nonbilling Provider's Primary Business Location Information | | |
| <i>Complete this section with the address of the location where client services are performed, or in the case of multiple locations, where the head office of the business is located. Include the office telephone and fax numbers, and email address.</i> | | |
| Primary business location name (if different from enrolling provider legal name) | NPI (if different from enrolling provider) | |
| Street name and number, suite, room, etc. | | |
| City/town | State | ZIP code + 4 |
| Telephone | Fax | email address |

III. Nonbilling Provider Debarment, Suspension, and Exclusion Checklist

Complete this section by checking yes or no for each question. A response is required. If you answered “yes” to any of the questions in section III A, complete section III B.

A. Has the enrolling individual provider ever:

- Had exclusion under Medicare, Medicaid, or any other federal health care program taken against them? YES NO
- Had civil money penalties or assessment imposed under Section 1128A of the Social Security Act? YES NO
 More Info: http://www.socialsecurity.gov/OP_Home/ssact/title11/1128A.htm
- Had a restriction or sanction imposed on their professional license, accreditation, or certification? YES NO
- Had a program exclusion taken against them? YES NO
 More info: <http://exclusions.oig.hhs.gov> and <https://www.sam.gov/>
- Been convicted of any health-related crimes as defined by Washington State Department of Health? YES NO
[RCW 18.130.180: http://apps.leg.wa.gov/rcw/default.aspx?cite=18.130](http://apps.leg.wa.gov/rcw/default.aspx?cite=18.130) and
[WAC 246-16: http://apps.leg.wa.gov/wac/default.aspx?cite=246-16](http://apps.leg.wa.gov/wac/default.aspx?cite=246-16)
- Been convicted of a criminal offense as described in Section 1128A (1), (2) or (3) of the Social Security Act? YES NO
 More Info: http://www.socialsecurity.gov/OP_Home/ssact/title11/1128A.htm
- Been convicted of a crime involving the abuse, neglect, abandonment, or exploitation of a vulnerable person? More info: [WAC 388-71-0540; http://apps.leg.wa.gov/WAC/default.aspx?cite=388](http://apps.leg.wa.gov/WAC/default.aspx?cite=388) and [RCW 74.34, http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34](http://apps.leg.wa.gov/RCW/default.aspx?cite=74.34) YES NO

B. If you answered “yes” to any of the questions listed under III A:

Report final adverse legal action history, including each final legal adverse action, when it occurred, the federal or state agency or the court/administrative body that imposed the action, and the resolution, if any. Attach a copy of the relevant final legal adverse action documents.

| Final adverse legal action | Date | Taken by | Resolution |
|----------------------------|------|----------|------------|
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For any person with an exclusion under Medicare, Medicaid, or any other federal health care program taken against them, items and services furnished, ordered, or prescribed by a specified individual will not be reimbursed under Medicare, Medicaid, or any other federal health care program until the individual is reinstated by the Office of the Inspector General.

IV. Nonbilling Individual Provider Agreement

Only the individual practitioner who is applying to become a nonbilling provider for the purpose of ordering, referring, and prescribing items or services to medical assistance and medical care services clients may sign and date this agreement.

The Health Care Authority (HCA) administers medical assistance and medical care services programs for eligible clients. HCA provides medical assistance or medical care services to certain eligible clients by enrolling eligible providers of medical services.

A provider will be considered enrolled as a nonbilling individual provider once the provider completes the above application and signs this agreement, and HCA approves the nonbilling individual provider’s application. HCA allows for the NPIs of nonbilling individual providers to be used on claims as an ordering, referring, and prescribing provider as well as identified on claims for hospital services.

As a nonbilling individual provider in the medical assistance and medical care services programs (“nonbilling provider”), the provider agrees to the following:

1. The nonbilling provider shall abide by all applicable state and federal laws and regulations. The medical assistance and medical care services programs are authorized and governed by Title XIX of the Social Security Act, Title XXI of the Social Security Act, Chapter IV of Title 42 of the Code of Federal Regulations (CFR), Chapter 74.09 of the Revised Code of

Washington (RCW), and Washington Administrative Code (WAC) 182-502-0006. The nonbilling provider is subject to and shall comply with all program policy provisions, including pre-2012 numbered memoranda, provider notices, medicaid provider guides, and other associated written HCA issuances in effect at the time the service is rendered, which are incorporated into this agreement by this reference.

2. The nonbilling provider will not knowingly order and/or refer an item and/or service that allows false or fraudulent claims to be presented for payment by HCA.
3. **National provider identifier (NPI).** The nonbilling provider must provide its NPI to HCA (if eligible for an NPI).
4. **Changes.** At any time during the course of this agreement, the nonbilling provider agrees to notify HCA of any material and/or substantial changes in information contained in this application. This notification must be made in writing within 30 calendar days of the event triggering the reporting obligation. Material and/or substantial changes include, but are not limited to, changes in:
 - a. Licensure, e.g., limitations, sanctions and expirations.
 - b. Any denial, termination, or lack of professional liability coverage, or any change in professional liability coverage, including restrictions, modifications, or discontinuing coverage.
 - c. Any change in address or telephone number.
5. If the provider wishes to be reimbursed by HCA, the provider must enroll and sign a core provider agreement as required under WAC 182-502-0005 instead of submitting this nonbilling individual provider agreement.
6. **Governing law and venue.** This agreement shall be governed by the laws of the state of Washington. The jurisdiction for all lawsuits in which the nonbilling provider alleges a breach of this agreement shall be exclusively in the Superior Court for the state of Washington. Venue for any such lawsuits shall be in the Thurston County, Washington, Superior Court.
7. **Severability.** The provisions of the agreement are severable. If any provision of the agreement is held invalid by any court, that invalidity shall not affect the other provisions of this agreement and the invalid provision shall be considered modified to conform to existing law.
8. **Indemnification and hold harmless.** The nonbilling provider shall be responsible for and shall indemnify and hold HCA harmless from all liability resulting from the acts or omissions of the nonbilling provider.
9. **Provider not employee or agent.** The nonbilling provider is not an employee or agent of HCA.
10. **Professional liability coverage.** By signing this agreement the nonbilling individual provider certifies that the individual currently has and will maintain the professional liability insurance coverage so long as the individual provider is providing services to Apple Health clients.
11. **Additional requirements.** Additional requirements for providers enrolled with HCA as nonbilling individuals are provided under [WAC 182-502-0006](http://apps.leg.wa.gov/wac/default.aspx?cite=182), <http://apps.leg.wa.gov/wac/default.aspx?cite=182>.
12. **Electronic signatures.** Nonbilling provider and HCA agree that each may treat executed faxes, scanned images, or photocopies as original documents.
13. **Certification.** This is to certify that the information provided in support of this agreement is true and accurate and I completely understand that any falsification or concealment of a material fact may be prosecuted under federal and state laws. Willful misstatement of any material fact in the enrollment application may result in criminal prosecution. I acknowledge that this is being signed under penalty of perjury and understand that HCA is relying on the accuracy of the information I have presented. I agree to abide by the terms of this agreement, including all applicable federal and state statutes, rules, and policies.
14. **Signature block.** I further certify that I am the individual practitioner who is applying for the sole purpose of ordering, referring and prescribing items or services to medical assistance and medical care services clients, and I have signed and dated this agreement.

| | | |
|---|-------|------|
| Signature of enrolling nonbilling individual provider | Title | Date |
|---|-------|------|

Full name (printed)

For additional information, see provider enrollment site at:
<http://hca.wa.gov/billers-providers/apple-health-medicaid-providers/enroll-provider>
 Questions? Toll-Free 1-800-562-3022, ext. 16137

To fax:
 Attn: Provider Enrollment
 360-725-2144

To mail, send to:
 Provider Enrollment
 PO Box 45562
 Olympia, WA 98504-5562

Definitions

Hospital services claims means claims submitted by hospitals or other institutions (for which a UB04 form is used) to HCA for Washington's health care programs administered by the Health Care Authority.

Ordering or referring provider means physician or other professional that orders or refers items or services for clients eligible for Washington's health care programs administered by the Health Care Authority.

Prescribing provider means physician or other professional authorized by law or rule to prescribe drugs for clients eligible for Washington's health care programs administered by the Health Care Authority.

Code of Federal Regulations (CFR) means the codification of the general and permanent rules published in the *Federal Register* by the departments and agencies of the Federal Government. These regulations can be found at: www.gpo.gov/fdsys/browse/collectionCfr.action?collectionCode=CFR

Washington Administrative Code (WAC) means the regulations of executive branch agencies issued by authority of statutes. Like legislation and the Constitution, regulations are a source of primary law in Washington State. The WAC codifies the regulations and arranges them by subject or agency. These regulations can be found at: <http://apps.leg.wa.gov/wac/default.aspx>