



Puerto Rico Medicaid Management Information System (PRMMIS)

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| Provider Effective/End Date | Policy No.: | PRMMIS – PRV-0003 |
| | Classification: | Provider Enrollment |
| | Effective Date: | 04/27/2020 |
| | Supersedes: | New |
| | Last Change: | N/A |
| | Mandate Review: | Annual |

Purpose

The purpose of this policy is to establish the effective and end date of an in-state provider enrollment record.

| Acronym/Term | Definition |
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| CHIP | Children's Health Insurance Program |
| MAO | Medicare Advantage Organization |
| MCO | Managed Care Organization |
| ORP | Ordering, Referring, and Prescribing |
| PEU | Provider Enrollment Unit |
| PRMMIS | Puerto Rico Medicaid Management Information System |
| PRMP | Puerto Rico Medicaid Program |

Scope

All references to the Puerto Rico Medicaid Program (PRMP) in this policy are inclusive of Children’s Health Insurance Program (CHIP). This policy covers all providers enrolling in the PRMP. This includes participating providers; ordering, referring, and prescribing (ORP) providers; and providers who are enrolling for the purposes of collecting encounter data for services not covered by the Medicaid State Plan but that are covered by the Managed Care Organization (MCO)/Medicare Advantage Organization (MAO) (e.g., Home Health Agency and Non-Emergency Transportation services). This policy excludes out-of-state providers. Please refer to the Out-of-State Providers Policy for information on effective and end dates.

Policy

Effective Date

The effective date of a provider's enrollment will be the date the PRMP receives the complete and accurate enrollment application. An application is considered complete when all required information has been accurately submitted, all supplemental documents have been received by the PRMP, and all criteria have been met.

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Effective Date Backdating or Postdating

Upon request from the provider, the effective date of a provider enrollment record may be backdated up to 90 days prior to the receipt of the completed application and/or postdated up to 90 days, as long as all PEP requirements are met for the entire timeframe requested.

End Date

The end date of the provider’s enrollment will be 3 years from the enrollment effective date.

Home Health Agencies and Durable Medical Equipment Providers

Home Health Agencies and Durable Medical Equipment providers are required to be enrolled in Medicare as a condition of Medicaid enrollment. Their Medicaid effective and end dates must not overlap a period of non-Medicare enrollment. HHAs who provide services to children with special healthcare needs are not required to be enrolled with Medicare, so this is not a factor for effective dates.

References

Key Decision P2-KD00011

Change History

| Date | Version | Change Details | Date of MMIS Mgr Approval |
|------------|---------|--|---------------------------|
| 05/03/2019 | 1.0 | New Policy | 05/03/2019 |
| 04/09/2020 | 1.1 | Policy revised by Provider Enrollment Unit. | 04/09/2020 |
| 05/29/2020 | 1.2 | Policy revised by Operations (item 158) to include an exception to the 90 days backdate when the new provider’s wave restricts them for enrolling simultaneously with the MCO, MAO or PBM. | 06/08/2020 |
| 04/07/2021 | 1.3 | Policy revised by Operations to remove the 90 days backdate exception and to include the following statement “HHAs who provide services to children with special healthcare needs are not required to be enrolled with Medicare, so this is not a factor for effective dates”. | 04/29/2021 |

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