

Summary of changes for the 2018 North Dakota Medicaid Expansion Program

As previously communicated in Fast Facts, there are two important changes affecting all providers, pharmacies, suppliers and transportation providers.

- 1) Certain providers will need to enroll with the North Dakota (ND) Department of Human Services (DHS) Medicaid program as being affiliated with Sanford Health Plan. This change is required by federal law.
- 2) Members will be required to use in-state providers or border-county providers with only a few exceptions.

These two changes will take effect January 1, 2018.

For change number one, all Sanford Health Plan network providers located within the ND Medicaid Expansion service area will need to enroll with the ND DHS Medicaid program as being *affiliated* with Sanford Health Plan to receive payment for any claims for ND Medicaid Expansion recipients. Federal law [42 CFR §438.602(b)], requires Managed Care Organizations (Sanford Health Plan) to confirm enrollment with the Department prior to payment for dates of service after January 1, 2018.

Enrollment guidance is available on our site, which includes a step by step guide to determine your ND Medicaid provider enrollment status & enrollment needs. *Note: the enrollment with the ND DHS Medicaid program **does not** require a provider to render services to ND Fee-for-Services recipients.*

If you are located within the state of ND or a contiguous county to the state border, and are already enrolled as a traditional Medicaid provider, there is no requirement for a new application. The Department will add the Sanford Health Plan network to your enrollment via a roster provided by Sanford Health Plan. No further action is required if:

- you are currently enrolled as an active provider with ND Traditional Medicaid; and
- you are in Sanford Health Plan's network.

If you are NOT already enrolled as a ND traditional Medicaid provider, an application is required.

Who do I contact if I have questions regarding enrollment?

You will want to contact ND DHS Provider Enrollment at dhsenrollment@nd.gov for questions with enrollment. If you need to contact Sanford Health Plan directly, please contact the Provider Relations team at 1-800-601-5086 or email, providerrelations@sanfordhealth.org.

For change number two, Medicaid Expansion recipients must use network providers inside the state of North Dakota or network providers in its contiguous counties that border North Dakota in Minnesota, Montana, or South Dakota.

It is important to note that as a contracted Sanford Health Plan provider, if you reside outside the ND Medicaid Expansion service area, you will be considered an out-of-network provider for ND Medicaid Expansion members. The plan does not have out-of-network benefits unless one of the following conditions apply:

- Emergent or Urgent Medically Necessary Services - If emergency care is needed, members are always directed to go to the closest hospital or call 911; or
- Family planning services; or
- Medically Necessary Services in which services cannot be provided within the network and prior authorization has been obtained from Sanford Health Plan

Out-of-network providers will only be reimbursed if one of the above conditions apply to you and you are enrolled with the ND DHS Medicaid program. Any covered services provided to ND Medicaid Expansion members not meeting the above conditions will deny and will not be reimbursed, nor are they allowed to be collected from the patient.