

PRV – Enrollment Iowa Medicaid Electronic Record System (I-MERS) request

Purpose:

The purpose of this procedure is to document Provider Enrollment Process of I-MERS request.

Identification of Roles:

Primary Role - The below procedure will be performed by the Provider Enrollment Team.

Secondary Role – Supervisors and Team Leads will be cross-trained in this function.

Performance Standards:

N/A

Path of Business Procedure:

Step 1: Receive the scanned document in the PRV 03 Correspondence queue on OnBase

Step 2: Review document for completeness

- a. Open PRV 03 Correspondence queue
- b. Select document
- c. The letter must be on the organization's letterhead and include:
 1. National Provider Identifier number(NPI)
 2. Provider type
 3. Tax identification number (ID)
 4. The name and address of the organization
 5. The primary point of contact for the organization, a telephone number, an e-mail address, and their role within the organization
 6. Signature
- d. Click on the user task "I-MERS request"

Step 3: I-MERS request user task

- a. Complete the user interaction form "Provider information"
- b. If all information is completed click on "Send to Data Warehouse"
- c. The document will be moved to Data Warehouse to be completed
- d. If all information is not included on the document click on "Hold for Call Back" and attach note to document for what is missing- move to step 4

Step 4: Call Back

- a. Contact provider
- b. Select document- call back documents will have a note on them indicating missing information
- c. Attach note to document with contact name and advise provider their request for I-MERS will not be completed until a new request is submitted with all required information

Step 5: Complete

- a. After you have contacted provider and attached note click on I-MERS Request user task again and click complete- document will move to complete and provider must submit new request
- b. Note: Phone calls regarding I-MERS request must be sent to the Enrollment Supervisor for review

Forms/Reports:

N/A

RFP References:

N/A

Interfaces:

OnBase
Medicaid Management Information System (MMIS)

Attachments:

Process Map

Attachment A:

