Medicaid Reimbursement Readiness Checklist

Establish Eligibility & Certification

- [ ] State Medicaid Enrollment completed
  - Example: Oregon Medicaid Enrollment portal
  - If applicable, registration with CAQH Council for Affordable Quality Healthcare (*the trusted data connector at the core of healthcare - Before a shared platform like DataSpring's CAQH Provider Data Portal, a clinician working with multiple payers could be asked to complete and update the same information across many different applications and portals*).
    - CAQH For Clinicians
- [ ] If not already done, obtain your NPI (National Provider Identifier)
  - NPI Registration - https://nppes.cms.hhs.gov/login / NPI provider types

- [ ] Proof of doula certification on file (per state requirements)
  - Example: Oregon THW Registry

Billing & Coding Infrastructure

- [ ] CPT/HCPCS codes for perinatal services identified (example: Oregon)
  - Claim + Billing Code
  - Diagnostic Code

- [ ] Fee schedule developed
  - A fee schedule is simply a standardized pricing document that lists your services, billing codes (if applicable), rates, units, & payment terms. Example Fee Schedule

- [ ] Billing software or partner identified
  - Example(s): ClientCare (Starter - $99/mo) EZClaim ($199/mo may be additional fees per claim), Tebra (Billing Starter - $99/mo; 100 claims each month), etc

Documentation Standards + Templates

- [ ] Client intake forms include Medicaid ID and consent

- [ ] Progress notes templates in use [Notes must include: *Date, Time, Location, Services Provided, Education Delivered, Care Coordination, Follow-Up Plan and Signature(s)*]

- [ ] HIPAA-compliant records storage system set up
  - If no EHR, start with professional GoogleSuite or Microsoft 365 account

Payer Contact + Reimbursement Information

- ☐ Contracts or contact established with MCOs or Medicaid office
  - List of Oregon CCOs and MCOs: click here

- ☐ Reimbursement process flow documented
  - 20 State Comparison Reimbursement Logic: click here

Client Intake + Data Collection SOP (Sample)

Foundational Intake Steps

1. Upon successful interview with Staff, Client completes HIPAA-compliant intake form (*digital or paper*)

2. Staff collects insurance information and verifies Medicaid eligibility (*verification should be completed before every visit to catch any insurance changed ahead of time*)

3. Consent forms signed by both Client(s) + Staff prior to first visit (*service scope, data sharing, reimbursement terms*)

Data Collection + Analysis

- ☐ Basic demographics (*name, DOB, contact info, etc*)

- ☐ Reproductive history (*Maternal Care Team, LMP, # of pregnancies, etc*)

- ☐ Risk factors or support needs (*History of risk or Previous pregnancy issues*)

- ☐ Service plan created with client (*SLA agreement with clear terms*)

Tracking + Reporting

- ☐ Encounter logs completed after every session; within 24hrs

- ☐ Outcome metrics updated monthly (e.g., birth outcomes, referral follow-ups)