

Commission for Children with Special Health Care Needs
Provider Type 22
[911 KAR 1:080](#)

Information about the program:

- All Commission for Special Health Care Needs providers must be approved by the [Kentucky Commission for Children with Special Health Care Needs](#)
- Out-of-state providers may not enroll in this program
- Provider can only be an entity - NO INDIVIDUALS
- The Commission is the enrolled entity. They do have sub-contractors

Information to be submitted by the provider for application processing:

- [Map-811\(Enrollment\)](#)
- [Map-811 Addendum E](#) and verification of bank account/routing number such as voided check or bank letter if provider chooses to enroll in direct deposit
- IRS letter of verification of FEIN or Official IRS documentation stating FEIN. FEIN must be pre-printed by IRS on documentation. W-9 forms will not be accepted

Submit the completed MAP-811 (Enrollment) application and supporting documentation to:

KY Medicaid
Provider Enrollment
P.O. Box 2110
Frankfort, KY 40602

Important address:

Commission for Children with Special Health Care Needs
310 Whittington Parkway, Suite 200
Louisville KY 40222
Phone: 502- 429-4430
Toll-free: 800-232-1160