Notice to Providers:

- Per 42 CFR 455.432, the State Medicaid agency (a) Must conduct pre-enrollment and post-enrollment site visits of providers who are designated as "moderate" categorical risks to the Medicaid program. (b) Must require any enrolled provider to permit CMS, its agents, its designated contractors, or the State Medicaid agency to conduct unannounced on-site inspections of any and all provider locations.

Information about the Program:

- Provider can only be an entity, not an individual.
- Provider must have a permanent physical location.
- A valid NPI and Taxonomy Code registered with NPPES is required.
- Out-of-state providers may enroll on an emergency basis but must be licensed.
- Provider must obtain a Certificate of Need from the Division of Certificate of Need when located in and providing services in Kentucky. Out of state providers are not required to have a Certificate of Need.
- In-state providers must contact the Office of Inspector General (OIG) for a survey/license. DMS will not assign a provider number to in-state facilities unless a survey/license has been received.

New Provider Application, Revalidation and Maintenance Information:

- All provider applications (new enrollment, revalidations, and maintenance items) are now completed using the KY Medicaid Partner Portal Application (KY MPPA website).

Supporting Documentation Required for New Provider Enrollment, Revalidation and Maintenance Tasks:

- If hospital based, an accreditation letter from The Joint Commission or another CMS approved accreditation program is required.
- Hospice license (must be current and reflect the requested enrollment date)
- Out-of-state providers must provide Kentucky license (must be current and reflect the requested enrollment date) and proof of dates of service for recipient.
- 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.
- If the provider chooses to enroll in direct deposit, verification of the bank routing/accounting numbers, such as voided check or bank letter, is required.
- Pursuant to 42 CFR 455.460, an application fee is required. Payments are processed electronically through the KY MPPA website. If you have already paid an application fee to Medicare or another state's Medicaid agency, payment is not required. For information regarding the current application fee, please refer to the DMS Provider Enrollment Page.

KY Medicaid Partner Portal Application (KY MPPA):

**Link to Enroll as a Kentucky Medicaid Provider:**
https://medicaidsystems.ky.gov/Partnerportal/home.aspx and click Let's Get Started

**Link to the Kentucky Medicaid Partner Portal Application (KY MPPA):**
https://chfs.ky.gov/agencies/dms/dpi/pe/Pages/mppa.aspx

Where providers can:

- Register for a KY MPPA account
- Access KY MPPA training resources
- Register for or view pre-recorded webinars
- Subscribe to CHFS email for updates