Preventative and Remedial Public Health Services
Provider Type 20
907 KAR 1:360

Notice to Providers:
• Upon request, providers may be subject to an onsite inspection.

Information about the Program:
• Provider can only be an entity, not an individual.
• Provider must have a primary physical location in Kentucky.
• Out-of-state providers may not enroll.
• Provider must have an Interagency Agreement (subcontract) with Department for Public Health.
• A valid NPI and Taxonomy Code registered with NPPES is required

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:
• For state agency providers, submit a notarized statement attesting to being a state agency.
• Clinical Laboratory Improvement Amendments (CLIA) certificate (if applicable) (must be current and reflect the requested enrollment date) CLIA address must match primary physical address. Additional CLIAs at different locations require separate location enrollment
• IRS letter of verification of FEIN, official IRS documentation stating FEIN, or W-9 form
• 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.

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