

Transcript: Submitting as an Authorized Delegate (Video CA-5)

This document contains the transcript for Video CA-5: Submitting as an Authorized Delegate.

Introduction

In this video, you will learn how to submit a Provider's new enrollment application or maintenance-related action as an Authorized Delegate.

As an Authorized Delegate, the CA will be able to perform all the actions for the Provider to include electronically signing and submitting the application. In order to act as an Authorized Delegate, the Provider must first complete and sign the Authorized Delegate Form giving the CA permission to act fully on their behalf. The CA will be required to upload this form during the submission process.

Authorized Delegate Form

The Authorized Delegate Form can be downloaded from the Medicaid Partner Portal web page.

The form must be completed by each Provider who intends to use an Authorized Delegate. The Provider can authorize one Credentialing Agent or a Credentialing Agent group by entering the individual or group name in the appropriate field.

As they complete the form, the Provider will need to enter their name, NPI, and SSN if an Individual (unless you are reporting under FEIN), & FEIN for Group or Entity owners.

The form is valid for up to five years or until the next Revalidation on the Medicaid ID. The CA will need to verify the date on the form when they submit the maintenance action to DMS to ensure it has not expired. If the action is submitted with an expired Authorized Delegate form, DMS will return the application & require an updated Authorized Delegate form before proceeding.

If the action is a Revalidation, the CA will need to upload a new form into KY MPPA.

When the Provider completes and signs the form, they are agreeing to the Medicaid rules and terms as laid out by reference within the form itself. The Provider needs to ensure they understand and accept these terms.

The Provider will send the completed form to the Credentialing Agent. The Credentialing Agent will be required to upload the form into KY MPPA the first time they perform work for the Provider as an Authorized Delegate. The form must have been signed within the last 30 days prior to the initial upload.

On subsequent actions for that Provider, they will verify the form is still correct. If it is not, they will need to upload a new form.

For example:

- If the CA enters a New Enrollment application for the Provider, they will upload the form as it is the first time they are acting as an Authorized Delegate.
- When they perform maintenance for the same Provider, they will be the Authorized Delegate for a 2nd time.
 - The form will already be in the system - the CA will either verify the form is still correct or upload a new form.

Authorized Delegate Submission Process

The Credentialing Agent will enter the new enrollment application or maintenance-related action into KY MPPA. On the Section 10.0 Submit screen, the CA will be provided the opportunity to select whether they will be submitting as a Credentialing Agent (a non-delegate) or as an Authorized Delegate.

- As a non-delegate, the Provider will be required to electronically sign and submit the application.
- As an Authorized Delegate, the CA will electronically sign and submit the application for the Provider.

Let's walk through the steps to submit an application as an Authorized Delegate.

From the **10.0 Submit** screen, select **Authorized Delegate**. The CA will then need to either upload the Authorized Delegate Form or verify the form already uploaded is correct (i.e. no changes to data from the uploaded form).

First Time as Authorized Delegate for a Provider

If this is the first time the CA will be performing as an Authorized Delegate for the Provider, they will need to upload the Authorized Delegate form. You will be able to tell this is the case when you see the **No Form found link**.

If the Provider has not already completed the form and the CA needs a copy, they can click on the template link to download the form. The blank form will open in another browser. It is a fillable PDF document.

To upload the completed and signed form:

- Click on **Browse** to navigate to your computer.
- Select the form to upload and click **Open**.
- The document name, Uploaded User name and Uploaded Date will be populated.

When clicking on Esign & Submit, if the form is not in the correct format, you will receive an error message. Please note, the form must be a pdf document; if you upload a Word document it will not work.

Once the form is uploaded, click the **Esign & Submit** button.

If you have not uploaded the Authorized Delegate form, you will receive an error message that a file upload is required.

Once you have submitted the application, you will be provided with a confirmation screen that let's you know the application has been submitted and provides you with the application number. We recommend writing this number down so you can locate it more easily on the dashboard or have it available in the event you need to reach out to the contact center.

Click on **Return to Dashboard** to navigate back to the dashboard to locate the application or begin a new action.

Second or Subsequent Action as Authorized Delegate (Same Provider)

If this is the second or a subsequent action for the CA acting as an Authorized Delegate for the same individual Provider, the form will already have been uploaded into KY MPPA.

The CA will be able to tell the form has been uploaded previously because the screen will instruct them to click on the link to review the form. The CA needs to click on the link to review

the form and ensure it is still correct. For example, no name changes for the Provider or Credentialing Agent or group.

- If the form is not correct, click No. The CA will click on Browse to upload the new form.
- If the form is correct, click Yes.

Remember if the form is not correct, DMS will return the application & require an updated Authorized Delegate Form.

Once the form is verified as correct or the new form is uploaded, click on **Esign & Submit**. Again, you can return to the dashboard to verify the submission status.

Additional Assistance

If you have questions after watching this video, you can access the “Authorized Delegate Submission Process” job aid from the KY MPPA Training Resources web page.

You can also reach out to the KY MPPA Contact Center if you require further assistance.

Contact Center

If you have questions after reviewing the provided training materials or you need to speak with a Customer Service Representative, you can reach out to the KY MPPA Contact Center via phone at 877-838-5085.

- For program or policy questions, select Extension 2.
- For technical support or questions regarding KY MPPA functionality or use, select Extension 1 or email medicaidpartnerportal.info@ky.gov.