The Breast and Cervical Cancer Treatment Program (BCCTP) Administered through KY Department for Medicaid Services (DMS) For KY Women’s Cancer Screening Program eligibles (KWSCP)

Step 1  Obtain access to MyKentucky.gov (MYKY) as a Business Partner
Step 2  Sign in to MYKY

Step 3  Open VIP Access icon
Step 4  Enter VIP Access six-digit security code
Step 5  Accept authorization statement

WARNING
This is to notify you that you are only authorized to use this site, or any information accessed through this site, for its intended purpose of assisting individuals, employers or employees in the selection or purchase of health plans or other benefits. Unauthorized access or disclosure of personal and confidential information may be punishable by fines under state and federal law. Unauthorized access to this website or access in excess of your authorization may also be criminally punishable. We follow applicable federal and state guidelines to protect the information from misuse or unauthorized access.

Reject  Accept

Step 6  Under Quick Links, click on Initiate BCCTP Application link
Step 7  Complete Customer Search information fields
Step 8  Click ‘Search’ button - If a match is found, you cannot initiate a duplicate application
Step 9  Click ‘Next’
Step 10 Complete the ‘More about the Applicant’ screen information and click, ‘Next’
Step 11  Verify address. Click on 'Choose and 'Continue'

Step 12  Complete information fields. Click ‘Submit’
Step 13 Application Results will appear
Step 14 The BCCTP Confirmation screen will appear
Step 15 Print 2 copies of the BCCTP Confirmation screen. This One copy serves as the BCCTP Card for the client. The other copy should be signed by the client and saved in the chart.

**Extension Request process for BCCTP** – Extension request are **not** available online

Step 16 Clinic sends MAP-813D BCCTP’s Request for Extension form to treating physician
Step 17 Treating physician completes MAP-813D form and returns it to the clinic
Step 18 Clinic will fax completed MAP-813D to DMS’ BCCTP Extensions at **502-564-0039**
Step 19 Call DMS extension office at 502-564-6890, ext. 2278 or 2255, to ensure receipt and uninterrupted coverage
Step 20 Put a signed copy of the MAP-813D form in the patient’s chart