Provider Enrollment Timeline Updates

In compliance with the Centers for Medicare & Medicaid Services (CMS) Medicaid Managed Care Final Rule 2390F and 42 CFR 438.602(b)(1), all KanCare Managed Care Organization (MCO) network providers who receive payment for KanCare members are required to be screened and enrolled in the Kansas Medical Assistance Program (KMAP).

This federal requirement applies to all provider types and specialties and is inclusive of the billing, rendering, ordering, prescribing, referring, sponsoring, and attending providers. All network providers must be KMAP enrolled and screened prior to receiving payment from an MCO.

As KMAP implements this CMS requirement, there are several transition dates impacting the provider community. To help providers prepare for these changes, the transition dates and corresponding actions are outlined below.

**June 1, 2017**

*Managed Care Common Credentialing Application*

The Managed Care Common Credentialing Application has been required for use since June 1, 2017. This application is in a fillable portable document format (PDF). This credentialing application can be completed digitally once and printed multiple times to contract with multiple MCOs. As part of the enrollment process, the attestation section of the application will need to be re-selected and printed separately for each MCO and will require an original, wet signature. Enrollments for fee-for-service (FFS) providers continue to process through the KMAP Provider Enrollment Wizard.

**January 1, 2018**

*New Enrollment and Re-credentialing Requirements*

If a provider not currently enrolled with KMAP wishes to contract with an MCO, they must first complete the KMAP screening and enrollment process. Once a provider has successfully enrolled with KMAP, the active KMAP identification (ID) number can be used to start the MCO credentialing/contracting process. If a provider is already enrolled with KMAP, the provider can contact the MCO directly and provide the active KMAP ID number to initiate the enrollment process. The MCO validates that a current KMAP enrollment exists before proceeding with their credentialing/contracting process. For those providers not enrolled with KMAP who need re-credentialed with one or more of the MCOs on or after January 1, 2018, the same requirement applies.
Provider Enrollment Timeline Updates continued

November 1, 2018
KMAP Enrollment and MCO Contracting Requirements
If a provider not currently enrolled with KMAP wishes to contract or continue contracting with an MCO, they must first complete the KMAP screening and enrollment process. Once a provider has successfully enrolled with KMAP, the active KMAP Identification (ID) number can be used to start the MCO credentialing/contracting process. If a provider is already enrolled with KMAP, the provider can contact the MCO directly, providing the active KMAP ID number, to initiate the enrollment process. The MCO will validate a current KMAP enrollment exists before proceeding with their credentialing/contracting process.

December 17, 2018
Streamlined Enrollment Wizard – Common Application
With the exception of nursing homes, all providers will enroll with KMAP and the KanCare MCO plans through the KMAP Provider Enrollment Wizard. In an effort to streamline the enrollment process, a common online application will be available. Once the common application is submitted, KMAP will review, screen, and issue a KMAP ID number. After the KMAP ID number is issued, the enrollment application and all attachments will systematically be forwarded to the MCO(s) of the providers choosing to begin their credentialing and contracting process. Nursing homes will continue to enroll following the KDADS process.

Failure to enroll an active KanCare network service location with KMAP will prohibit the provider from participating in the KanCare program and will result in denial of claims.

Providers can contact KMAP at 1-800-933-6593 with any additional questions.