

JULY 2018

KMAP GENERAL BULLETIN 18162

Provider Enrollment Managed Care Regulation Implementation Update

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. The full timeline and transition information are detailed in [MCO General Bulletin 18131](#).

As of November 1, 2018, all providers are required to have a KMAP identification (ID) number in order to participate with the MCOs. Providers are encouraged to submit enrollments prior to this date to ensure there will not be any impact to claims payments once the integrated common online application and associated claims editing is implemented on January 1, 2019.

To ensure a seamless transition, providers should note the following:

- For group enrollments, an application is required for each service location. Additional details are provided in KMAP [General Bulletin 17252](#).

Note: While each location is required to enroll, if only one National Provider Identifier (NPI) is registered for the group with the National Plan and Provider Enumeration System (NPPES), each location may carry the same NPI.

KMAP

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Customer Service

- 1-800-933-6593
- 7:30 a.m. - 5:30 p.m.
Monday - Friday

Provider Enrollment Managed Care Regulation Implementation Update continued

- For individuals practicing as part of a group, only one application is required. However, the individual is responsible for reporting all group associations so that the individual and group(s) are appropriately linked in the Kansas Modular Management System (KMMS).
- If participating as a member of a group, the group must enroll before the individual can complete an enrollment. After the group has been assigned a KMAP ID number, the individuals may enroll and associate to the enrolled group.
- Once a location has been enrolled with KMAP, the information submitted at the time of enrollment should be used for submitting both fee-for-service (FFS) and MCO claims.

Note: Synchronization and use of the following data elements across the MCOs and KMAP is critical to accurate claims processing:

- NPI
- Provider name
- Provider types and specialties
- Taxonomy
- Tax ID number

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.

To enroll with KMAP, providers can access the [Provider Enrollment Wizard](#).

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

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