

KMAP GENERAL BULLETIN 19040

UPDATED: 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 all network billing, rendering, ordering, prescribing, referring, sponsoring, and attending providers. All MCO network providers must be enrolled with KMAP and screened prior to receiving payments from an MCO.

To assist providers with the transition to KanCare 2.0, all KanCare MCOs will delay denying claims for the above requirement until July 1, 2019. It is imperative that providers ensure they have enrolled with KMAP by July 1, 2019. Failure to do so will result in denial of claims and possible recoupment of claims paid during the delay period. As a courtesy, KMAP will automatically backdate all enrollments during this period to January 1, 2019.

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

Providers can contact KMAP at 1-800-933-6593 with any additional questions including their current status with KMAP.

Reference KMAP General Bulletins [18180](#), [18183](#), [18218](#), [18223](#) and MCO General Bulletin [18131](#) for additional information.

KMAP
[Kansas Medical Assistance Program](#)

- [Bulletins](#)
- [Manuals](#)
- [Forms](#)

Customer Service

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