



TO: Nursing Home, Home Health, Radiology and State Agencies Providers
RE: Performing Provider Enrollment Requirements for Nursing Homes, Home Health, Radiology and State Agencies in the Medicaid Program.

Effective January 1, 2013 the Department of Social Services (DSS) will require most performing providers such as Physicians, Advanced Practice Registered Nurses (APRNs), Physician Assistants (PAs), Certified Nurse Midwives (CNMs), Dentists, Podiatrists and Audiologists who render services to HUSKY clients through Nursing Homes, Home Health, Radiology and State Agency providers to be enrolled in the Connecticut Medical Assistance Program. This requirement is for providers who are employed or contracted by these agencies that do not otherwise bill for services rendered at these agencies. This mandate is being instituted to support various program requirements and efforts, most notably sections 6401 and 6501 of the Affordable Care Act, which mandates the enrolling of ordering and referring providers. Please note that enrollment of these types of individual providers is already required for hospitals, clinics and FQHCs.

Method of Initial Enrollment

Enrollment in the Connecticut Medical Assistance Program is done via the Enrollment Wizard and a full application must be completed in the Wizard for each performing provider to be enrolled.

Enrollment Wizard

The Enrollment Wizard can be accessed from the Connecticut Medical Assistance Program Web site www.ctdssmap.com. From the Home Page go to "Provider" then to "Provider Enrollment". Follow the panels to enter data for each performing provider, as well as the instructions at the completion of the Enrollment Wizard to submit any additionally required documentation.

Ongoing Enrollment and Re-enrollment

The existing enrollment process must be followed in order to enroll and re-enroll providers. If you have any questions, please contact the HP Provider Assistance Center at: 1-800-842-8440 toll free, select option 2 for claim and enrollment assistance and then option 2 again for provider enrollment.

Enrollment Requirements by Provider Type

In an effort to clarify which providers must be enrolled in the Connecticut Medical Assistance Program, DSS is issuing the following list of required provider types

for Nursing Homes, Home Health Agencies, Radiology and State Agencies.

<u>Practitioner</u>	<u>Provider Type</u>
Physician (Inpatient and outpatient hospital-based)	31
Advanced Practice Registered Nurse (APRN) (Inpatient and outpatient hospital-based)	09
Physician Assistant (PA) (Inpatient and outpatient hospital-based)	97
Certified Nurse Midwife (CNM)	32
Dentist, with the exception of hygienists	27
Podiatrist	14
Audiologist	17

To determine a provider's specialty you will need to use the Type/Specialty/Taxonomy Crosswalk document on the Web site www.ctdssmap.com. To access the document from the Home Page of the Web site, go to "Information" then to "Publications". Scroll down to the "Forms" section under "Provider Enrollment/Maintenance Forms" select the link for "Type/Specialty/Taxonomy Crosswalk".

Claim Submission Requirements:

Specific claim submission requirements will be provided in a future provider bulletin with the intent that all performing providers are to be entered on claims and be enrolled in the Connecticut Medical Assistance Program.

