

MAY 2020

KMAP GENERAL BULLETIN 20098

Enrollment Types, NPI Requirements, and MCO Contracting Request Form Notifications

Effective January 1, 2018, in order to contract with a Managed Care Organization (MCO) or to receive reimbursement for Medicaid eligible services, a provider must be actively enrolled in the Kansas Medical Assistance Program (KMAP). The enrollment process should begin with the KMAP Provider Enrollment Wizard where a provider will be required to identify the type of entity for which they are requesting enrollment.

The enrollment types are intended to categorize providers who have the same or similar requirements (attachments, disclosures, NPI type etc.). The enrollment type also dictates a provider's ability to bill claims to the MCOs or KMAP.

Individual within a Group Organizational Type Code and W-9

For an Individual within a Group (IG), it is important to note that the group must be enrolled and have a KMMS identification (ID) number before an IG can be enrolled and affiliated as an IG within that group. During the enrollment, the IG will be required to list the KMMS ID for all group service locations where he/she will see Kansas Medicaid beneficiaries. Please note a W-9 for EACH unique (different Tax IDs) group affiliation is required. During the enrollment, the IG should choose "Individual" as the "Organizational Type" Code. After the initial application for the IG is submitted, any new group affiliations must be handled through a maintenance request with KMAP and a W-9 for each unique (different Tax IDs) affiliation is required.

MCO Contracting Request Form Notifications

For providers already enrolled with KMAP and wishing to start the enrollment process with one or more of the MCOs, they will complete the MCO Contracting Request form in the Provider Enrollment Wizard.

Upon submitting the MCO Contracting Request Form, the provider will receive two emails. One email contains an Application Tracking Number (ATN). The second email containing a system generated password. The provider will use the ATN and password supplied to resume and submit the MCO Contracting Request Form. Please

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[Kansas Medical Assistance Program](#)

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

Customer Service

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



Enrollment Types, NPI Requirements, and MCO Contracting Request Form Notifications continued

check your spam folder if you have not received the ATN and password email from Kansas-Provider-Enrollment@dxc.com. If you have questions, contact Provider Enrollment at 1-800-933-6593.

Reminder - Accuracy and Completeness

In order to eliminate the potential for the return of an improperly completed application, providers are encouraged to validate the accuracy and completeness of all information submitted on an application. Any application received that does not comply (example- Individual application is submitted with a Type 2 NPI) with the requirements in the chart below will be returned to provider. The application will not be processed until the appropriate corrections, as requested in the return notification comments, are completed and the application is resubmitted.

Enrollment Type Reference Chart

The following grid should be referenced when determining which Enrollment Type to select. Please note that not all Enrollment Types are available for all Provider Types. For example, a hospital may only enroll as a Facility where a physician may enroll as an Individual, Individual within a Group or an OPR. For information regarding CMS NPI requirements, the CMS NPI Fact Sheet can be found [here](#).

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Individual

	Enrollment Type	Entity Type (individual or Business)	Tax Identifier Type	Billing Permissions	Performing Permissions	NPI Type	Service Location Requirements	Organization Code Type
Individual or Individual Business with no Employer Identification Number (EIN).	Individual	Individual	SSN	Y	Y	Type 1 NPI only	A separate enrollment for each service location address is required.	Select one of the following Org Codes: Hospital Based Physician Sole Proprietor Individual
Individual Business with EIN	Individual	Business	SSN and EIN	Y	Y	Type 1 NPI only	A separate enrollment for each service location address is required.	Select one of the following Org Codes: Hospital Based Physician Individual
Individual performing under the EIN of an entity* eg FQHC/RHC, IHS	Individual	Business	SSN and EIN of the entity	Y	Y	Type 1 NPI only	A separate enrollment for each service location address is required.	Select one of the following Org Codes: Hospital Based Physician Individual
An incorporated Individual provider with a Type 1 NPI only. <i>This situation should not occur. Incorporated individuals should obtain a Type 2 NPI and enroll as an organization.</i>	See Organization below. Must enroll as a Group or Facility.							
An incorporated Individual provider with a Type 1 and Type 2 NPI	Group Enrollment Type for the corporate entity (must be completed first)	Business	EIN	Y	N	Type 2 NPI Only	A separate enrollment for each service location address is required.	Select one of the following Org Codes: Corporation Partnership Government owned Not for profit
	Individual within a Group (IG)	N/A	SSN	N	Y	Type 1 NPI only	Supply the KMMS ID of each service location address of the Group.	Individual
Individual Ineligible to obtain an NPI	Atypical	Individual	SSN	Y	Y	No NPI is supplied. These providers do not provide health care services as defined by HIPAA and are considered ineligible to obtain an NPI.	A separate enrollment for each service location address is required.	Individual
Ordering, Referring, Prescribing, Sponsoring or attending providers only	OPRS	N/A	SSN	N	N	Type 1 NPI only	As an OPRS, only one enrollment is required.	Hospital Based Physicians Individual
Individual practicing as part of a group	Individual within a Group (IG)	N/A	SSN	N	Y	Type 1 NPI only	Supply the KMMS ID of each Group affiliation.	Individual

Organization

	Enrollment Type	Entity Type (individual or Business)	Tax Identifier Type	Billing Permissions	Performing Permissions	NPI Type	Service Location Requirements	Organization Code Type
Group Practice (one or more practitioners sharing a Tax ID number)	Group Enrollment	N/A	EIN	Y	N	Type 2 NPI Only	A separate enrollment for each service location address is required.	Select one of the following Org Codes: Corporation Partnership Government owned Not for profit Privately owned
Facility	Facility	N/A	EIN	Y	N	Type 2 NPI Only	A separate enrollment for each service location address is required.	Select one of the following Org Codes: Corporation Partnership Government owned Not for profit Privately owned
Entity Ineligible to obtain an NPI	Atypical	Business	EIN	Y	Y	No NPI is supplied. These providers do not provide health care services as defined by HIPAA and are considered ineligible to obtain an NPI.	A separate enrollment for each service location address is required.	I should select one of the following Org Codes: Corporation Partnership Government owned Not for profit Privately owned

*For individuals that perform under the TIN of an entity, provide a W-9 of the pay-to entity and provide the information in the pay-to field of the application.

Note: For all enrollment types, the provider legal name and Federal Tax Identification Number must match the information on the supplied W-9 or IRS records.