

**Physician  
Provider Type 64  
[907 KAR 3:005](#)**

**Information about the program:**

- Provider can only be an individual.
- All Physician providers must be licensed by the state where they practice. The licensing authority for Kentucky is the Kentucky Board of Medical Licensure.
- Providers with specialties (anesthesia, obstetrics, etc.) must have certification for specialty.
- Out-of-state providers may enroll.

**Information to be submitted by the provider for application processing:**

- [Map-811\(Enrollment\)](#)
- [Map-811 Addendum E](#) and verification of bank account/routing number such as voided check or bank letter if provider chooses to enroll in direct deposit
- Physician license (current and reflecting requested enrollment date)
- Specialty certification (if applicable)
- [Map-347](#) (if working in a group setting)
- CLIA Certificate (if applicable)
- Copy of social security card- No other forms of verification will be accepted. If applicant has a social security card stating “valid for work only with DHS/INS Authorization, please refer to additional requirements by clicking on the following link: [DHS/INS Documentation](#). Social security cards with moniker “not valid for employment” will not be accepted.
- If applicant is sole owner of a tax id, need to submit IRS letter of verification of FEIN or Official IRS documentation stating FEIN. FEIN must be pre-printed by IRS on documentation. W-9 forms will not be accepted.
- [NPI and Taxonomy Code Verification](#)

**Important addresses:**

- KY Board of Medical Licensure  
310 Whittington Parkway  
Suite 1B  
Louisville, KY 40222
- KY Medicaid  
Provider Enrollment  
P.O. Box 2110  
Frankfort, KY 40602