

**Speech Language Pathologist
Provider Type 79
[907 KAR 8:030](#)**

Notice to Providers:

- Upon request, providers may be subject to an onsite inspection.

Information about the Program:

- Provider can only be an individual.
- Out-of-state providers may enroll but must be licensed by the state where they practice. The licensing authority for Kentucky is the [Kentucky Board of Speech-Language Pathology & Audiology](#).
- *Speech-Language Pathologist-Clinical Fellow may enroll with an active interim license from the [Kentucky Board of Speech-Language Pathology & Audiology](#) in accordance with <https://apps.legislature.ky.gov/law/statutes/statute.aspx?id=31894>, ending 24-months from issuance, and the application must include a licensed SLP as supervisor that is currently enrolled with KY DMS. Out of state SLP-Clinical Fellow with an interim license may not enroll.*
- Provider must have a permanent physical location.
- A valid [NPI and Taxonomy Code](#) registered with NPPES is required

New Provider Application, Revalidation and Maintenance Information:

- All provider applications (new enrollment, revalidations, and maintenance items) are now completed using the **KY Medicaid Partner Portal Application** ([KY MPPA website](#)).

Supporting Documentation Required for New Provider Enrollment, Revalidation and Maintenance Tasks:

- Speech Language Pathologist license (must be current and reflect the requested enrollment date)
- **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 the additional requirements on the [DHS/INS Documentation](#). A Social Security Card with moniker “not valid for employment” will not be accepted.
- If applicant is sole owner of a tax id, 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.
- If the provider chooses to enroll in direct deposit, verification of the bank routing/accounting numbers, such as voided check or bank letter, is required.

KY Medicaid Partner Portal Application (KY MPPA):

Link to Enroll as a Kentucky Medicaid Provider:

<https://medicaidsystems.ky.gov/Partnerportal/home.aspx> and click *Let's Get Started*

Link to the Kentucky Medicaid Partner Portal Application (KY MPPA):

<https://chfs.ky.gov/agencies/dms/dpi/pe/Pages/mppa.aspx>

Where providers can:

- Register for a KY MPPA account
- Access KY MPPA training resources
- Register for or view pre-recorded webinars
- Subscribe to CHFS email for updates

