

Request Existing KY Medicaid ID From DMS

In the event a KY Medicaid Provider does not know their existing KY Medicaid ID number, a letter can be sent to the Department for Medicaid Services, Division of Program Integrity to request an existing KY Medicaid ID.

This document provides the steps to request an existing KY Medicaid ID.

For an Individual Provider

- Submit a written request on company letterhead, signed by the Individual Provider, along with Social Security Number, NPI Number, and contact phone number.
- If you prefer the requested Medicaid ID be returned by email, provide an email address in the request.
- If you prefer the requested Medicaid ID be returned by fax, provide a fax number in the request.

For an Entity Provider

- Submit a written request on company letterhead with FEIN number, NPI number, physical location address, and contact phone number.
- If an owner exists, the owner must sign. If no owner, then an officer or board member must sign the letter and their title must be included.
- If you prefer the requested Medicaid ID be returned by email, provide an email address in the request.
- If you prefer the requested Medicaid ID be returned by fax, provide a fax number in the request.

DMS Email and Address Details

Requests for an existing KY Medicaid ID can be sent to DMS by email or United States Postal Service. See details below:

Email Request to: program.integrity@ky.gov

Mail Request to: KY Medicaid, P.O. Box 2110, Frankfort, KY 40602