

Kentucky Medicaid Partner Portal Application (KY MPPA) Webinar

Level 200

Linking to a Group (MAP-347)

Welcome to the Kentucky Medicaid Partner Portal (KY MPPA)

Linking to a Group (MAP-347)



Introductions

Presenter

Support Trainer

Agenda

- Introduction
- Objectives
- Linking Overview
- Paths to Link to a Group
- Steps to Link: Group Medicaid ID
- Steps to Link: Individual Medicaid ID
- Steps to Delink
- Resources and Next Steps



Today's Objectives

- Understand the three types of linking related to KY MPPA
- Describe the paths to link a Provider to a group
- Understand the steps to take to add a Provider to a Group from the Group KY Medicaid ID
- Understand the steps to take to link a Provider to a Group from the Individual KY Medicaid ID
- Understand the steps to delink a Provider from a Group
- Utilize the KY MPPA resources to assist in completing the next steps



Linking within KY MPPA

Types of Linking for KY MPPA

(1) Link a Provider with their existing KY Medicaid ID

(2) Link a Provider to a Group

(3) Link a Credentialing Agent (CA) to a Provider via their KY Medicaid ID



Paths to Link to a Group

9/17/2019

Linking to a Group

Paths to Link to a Group in KY MPPA

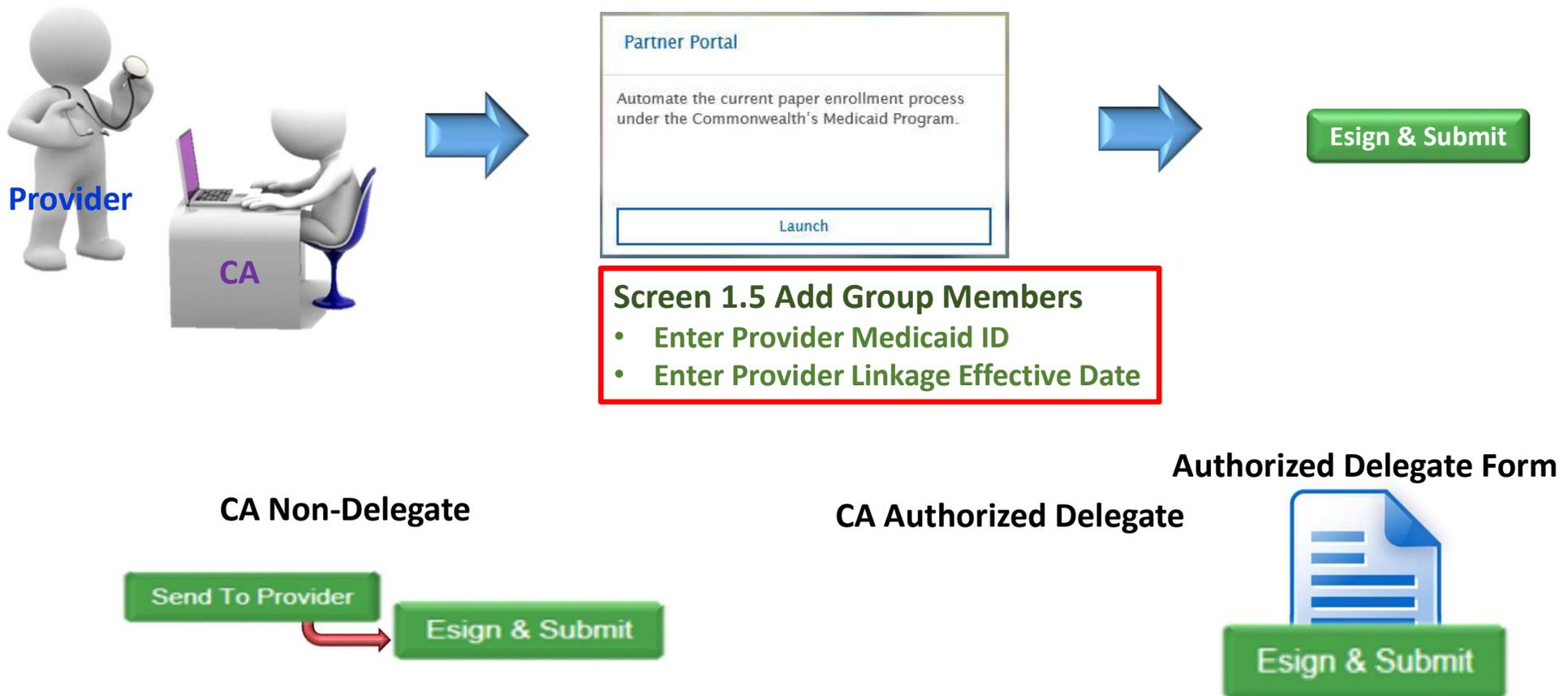
(2) Link a Provider to a Group

- Links the Individual Provider's Medicaid ID to the Group Medicaid ID for billing purposes (*MAP-347 functionality*)
- Linking can be accomplished via a **New Enrollment application** or **Maintenance action**
 - Section 5.0 (*if Individual Provider application*)
 - Section 1.5 (*if Group application*)
- Allows the Group's Credentialing Agents to work on the Provider's behalf once linked

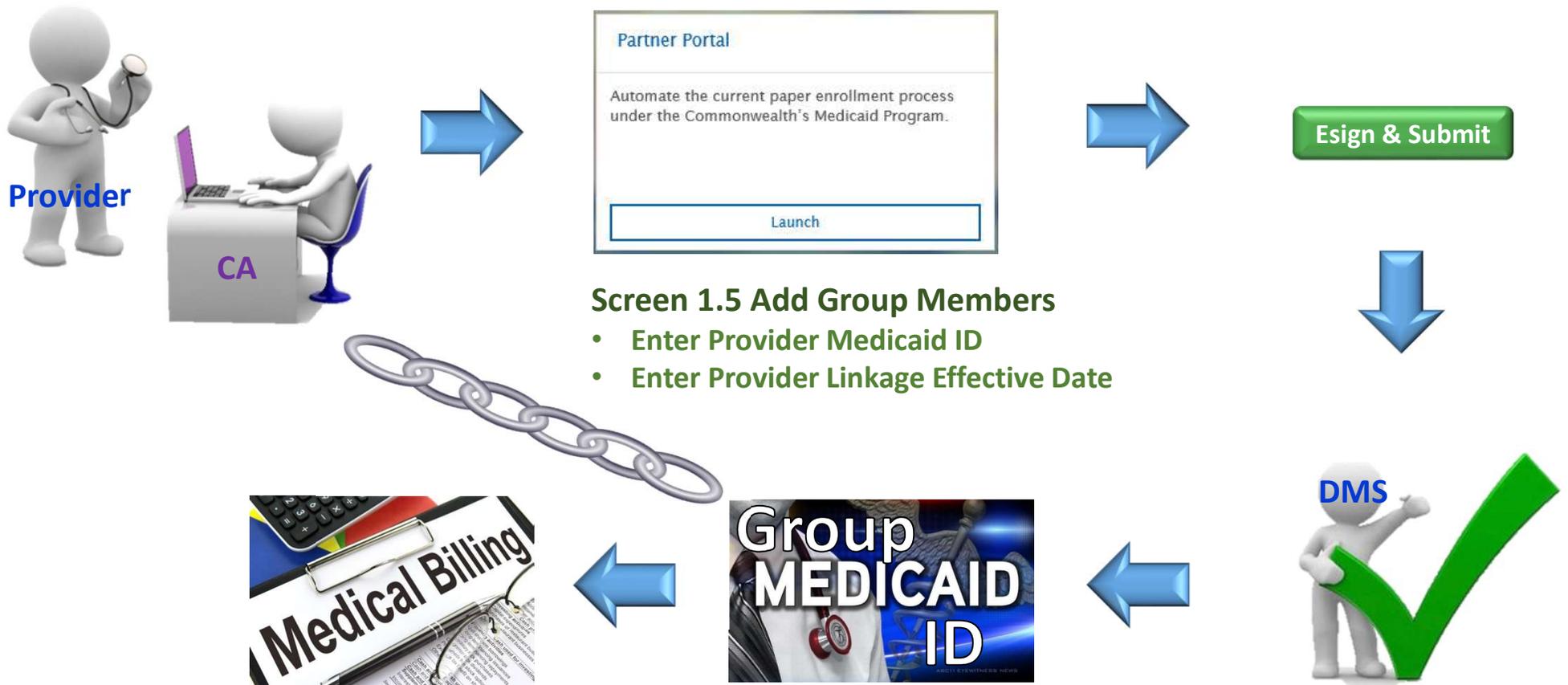


Steps to Link to a Group from Group Medicaid ID

Steps to Link to a Group: Group KY Medicaid ID

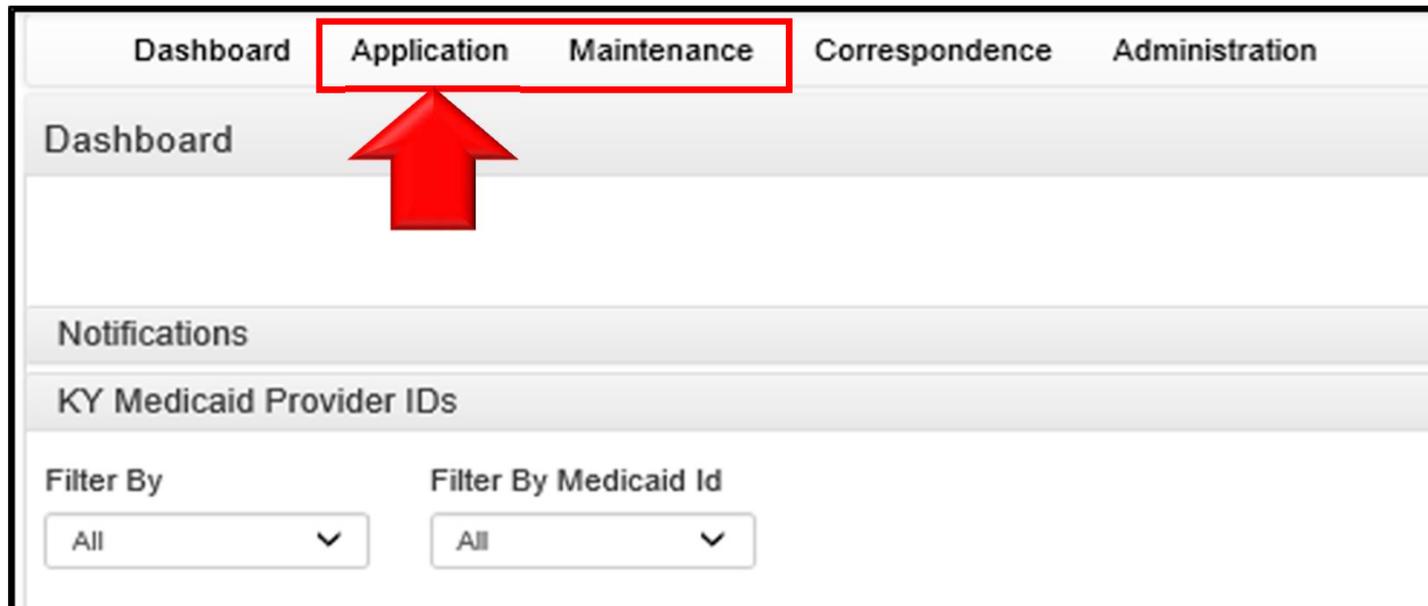


Steps to Link to a Group: Group KY Medicaid ID



Steps to Link to a Group: [Group KY Medicaid ID](#)

From the Dashboard, *click* on the **Application** tab to begin a New Enrollment or the **Maintenance** tab to begin a Maintenance action



Steps to Link to a Group: Group KY Medicaid ID

- 1.0 Administrative Information
- 1.1 Basic Information
- 1.2 Tax Information
- 1.3 NPI Information
- 1.4 Taxonomy Information
- 1.5 Add Group Members**
- 1.6 Additional Identifiers
- 1.7 Address Information
- 1.8 Contact Information
- 1.9 Language Information
- 1.10 Bed Data
- 1.11 Locum Tenens

Dashboard Application Maintenance Correspondence Administration Reports

Application Header

Add Group Members

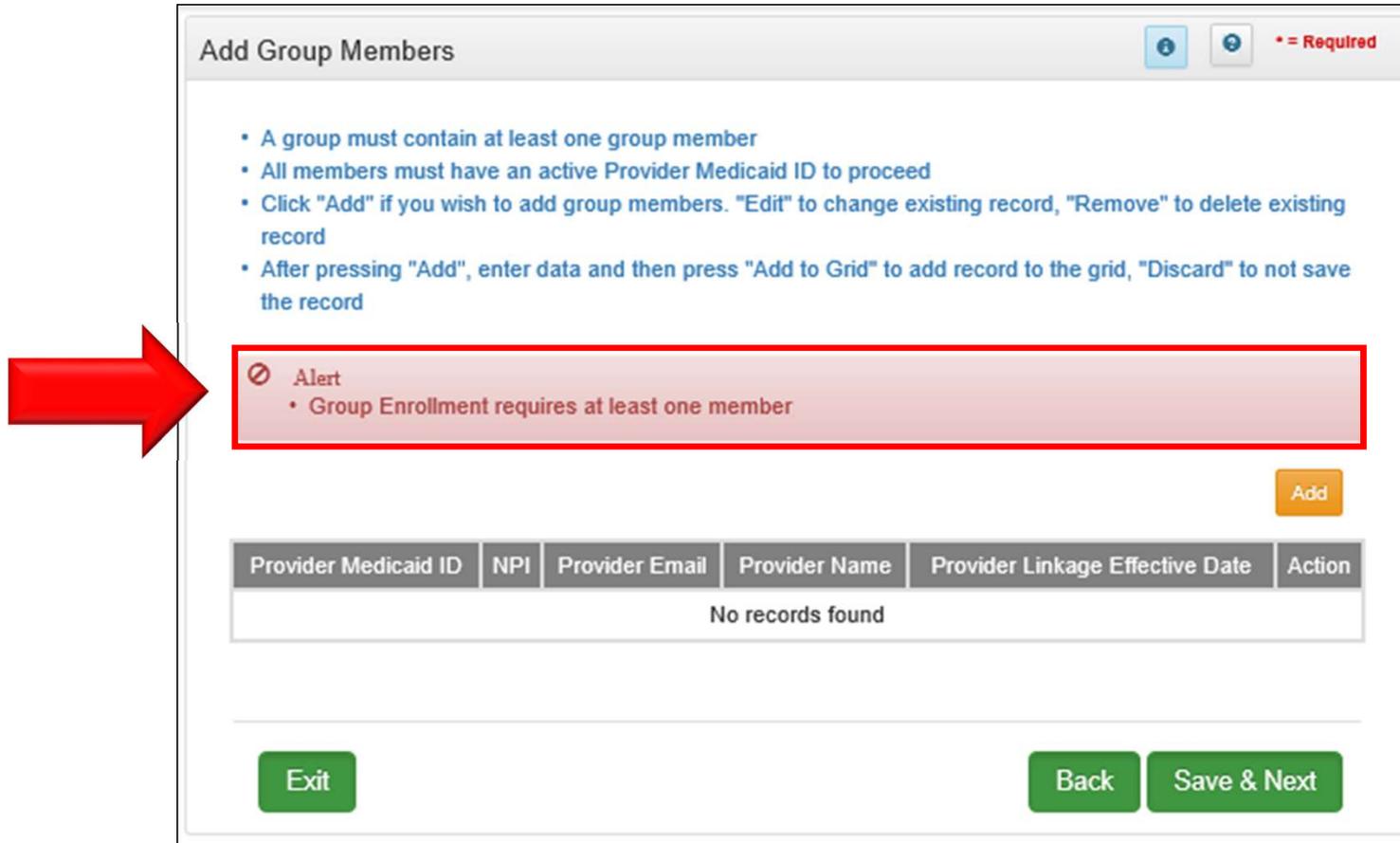
- A group must contain at least one group member
- All members must have an active Provider Medicaid ID to proceed
- Click "Add" if you wish to add group members. "Edit" to change existing record, "Remove" to delete existing record
- After pressing "Add", enter data and then press "Add to Grid" to add record to the grid, "Discard" to not save the record

Add

Provider Medicaid ID	NPI	Provider Email	Provider Name	Provider Linkage Effective Date	Provider Linkage End Date	Action
No records found						

Exit Back Save & Next

Steps to Link to a Group: Group KY Medicaid ID



The screenshot shows a web application window titled "Add Group Members". At the top right, there are help and refresh icons, and a legend indicating that a red asterisk (*) denotes a required field. Below the title, there are four bullet points providing instructions: a group must have at least one member; all members must have an active Provider Medicaid ID; users should click "Add" to add members, "Edit" to change records, and "Remove" to delete records; and after pressing "Add", users should enter data and press "Add to Grid" to save records or "Discard" to not save them. A red arrow points to a red-bordered alert box that contains the text "Alert" and "Group Enrollment requires at least one member". To the right of the alert is an "Add" button. Below the alert is a table with columns for "Provider Medicaid ID", "NPI", "Provider Email", "Provider Name", "Provider Linkage Effective Date", and "Action". The table currently displays "No records found". At the bottom of the window, there are three buttons: "Exit", "Back", and "Save & Next".

Add Group Members ⓘ ↻ * = Required

- A group must contain at least one group member
- All members must have an active Provider Medicaid ID to proceed
- Click "Add" if you wish to add group members. "Edit" to change existing record, "Remove" to delete existing record
- After pressing "Add", enter data and then press "Add to Grid" to add record to the grid, "Discard" to not save the record

Alert

- Group Enrollment requires at least one member

Add

Provider Medicaid ID	NPI	Provider Email	Provider Name	Provider Linkage Effective Date	Action
No records found					

Exit Back Save & Next

Steps to Link to a Group: Group KY Medicaid ID

- **Enter Provider Medicaid ID**
- **Enter Provider Linkage Effective Date**
- **Click Verify Provider Medicaid ID**

Note: Provider Type of Individual Provider must be compatible with the Group Provider Type

Dashboard Application Maintenance Correspondence Administration Reports Application Header

1.0 Administrative Information

- 1.1 Basic Information
- 1.2 Tax Information
- 1.3 NPI Information
- 1.4 Taxonomy Information
- 1.5 Add Group Members**
- 1.6 Additional Identifiers
- 1.7 Address Information
- 1.8 Contact Information
- 1.9 Language Information
- 1.10 Bed Data

2.0 Provider Qualifications

3.0 Disclosure of Ownership and Control Interest

4.0 Attestations

5.0 Provider Group Linkage

6.0 Account Information

7.0 Fee Payment

8.0 Document Upload

9.0 Provider Review

10.0 Submit

Add Group Members

- A group must contain at least one group member
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- Click "Add" if you wish to add group members. "Edit" to change existing record, "Remove" to delete existing record
- After pressing "Add", enter data and then press "Add to Grid" to add record to the grid, "Discard" to not save the record

Discard

Provider Medicaid ID	NPI	Provider Email	Provider Name	Provider Linkage Effective Date	Provider Linkage End Date	Action
No records found						

* Provider Medicaid ID

* Provider Linkage Effective Date

Verify Provider Medicaid ID

Add To Grid

Exit Back Save & Next

Steps to Link to a Group: Group KY Medicaid ID

Add Group Members ⊕ ⊖ * = Required

- A group must contain at least one group member
- All members must have an active Provider Medicaid ID to proceed
- Click "Add" if you wish to add group members. "Edit" to change existing record, "Remove" to delete existing record
- After pressing "Add", enter data and then press "Add to Grid" to add record to the grid, "Discard" to not save the record

Alert

- Inactive Medicaid ID Found. Verify the Medicaid ID is correct. An inactive Medicaid ID cannot be added to the Group

Discard

Provider Medicaid ID	NPI	Provider Email	Provider Name	Provider Linkage Effective Date	Action
No records found					

Steps to Link to a Group: Group KY Medicaid ID

- **Verify Provider Data**
- **Click Add to Grid**

Dashboard Application Maintenance Correspondence DMS Review Administration Reports Search Application Header

1.0 Administrative Information

- 1.1 Basic Information
- 1.2 Tax Information
- 1.3 NPI Information
- 1.4 Taxonomy Information
- 1.5 Add Group Members**
- 1.6 Additional Identifiers
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2.0 Provider Qualifications

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Add Group Members

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Discard

Provider Medicaid ID	NPI	Provider Email	Provider Name	Provider Linkage Effective Date	Provider Linkage End Date	Action
No records found						

* Provider Medicaid ID

* Provider Linkage Effective Date

Verify Provider Medicaid ID

NPI Provider Name Provider Email

Add To Grid

Exit Back Save & Next

Steps to Link to a Group: Group KY Medicaid ID

- **Repeat** to add additional members
- **Click Save & Next**

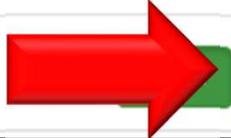
Add Group Members * = Required

- A group must contain at least one group member
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- Click "Add" if you wish to add group members. "Edit" to change existing record, "Remove" to delete existing record
- After pressing "Add", enter data and then press "Add to Grid" to add record to the grid, "Discard" to not save the record

Add

Provider Medicaid ID	NPI	Provider Email	Provider Name	Provider Linkage Effective Date	Action
710	1356431316	pro up:	Sey ne	06/24/2019	 

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Exit  **Save & Next**

Steps to Link to a Group: Group KY Medicaid ID

Upload **MAP-347** for each Individual Provider added

- Click **Edit** icon
- Browse to computer and select file
- Click **Add to Grid**

Document Upload * = Required

[Discard](#)

Document Type	Name	Required	Uploaded By	Uploaded Date	Action
IRS Letter of Verification of FEIN or Official IRS documentation stating FEIN	FEIN Verification	Y			 
MAP-347	MAP-347 - 710	Y			 

First Previous Next Last (Page 1 of 1) Page: 1

* Document Type
MAP-347

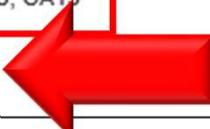
* Upload File
 [Browse](#)

* Document Name
MAP-347 - 71

Uploaded User
Train13, CA13

Uploaded Date
06/24/2019

[Add To Grid](#)



Steps to Link to a Group: Group KY Medicaid ID

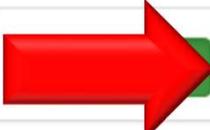
- **Repeat** until all required documents are uploaded
- **Click Save & Next**

Document Upload * = Required

[Add](#)

Document Type	Name	Required	Uploaded By	Uploaded Date	Action
IRS Letter of Verification of FEIN or Official IRS documentation stating FEIN	FEIN Verification	Y	Tr Cj	06/24/2019	 
MAP-347	MAP-347 - 710	Y	Tr Cj	06/24/2019	 

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[Exit](#)  [Save & Next](#)

Steps to Link to a Group: **Group KY Medicaid ID**

Submitting as a Group Provider

Dashboard Application Maintenance Correspondence Administration

Application Header

Application Number	Enrolling As	Provider Type	Provider Name	DBA Name	Medicaid Number
APP20618	Group	65 - Physician Group	Reports LLC corporation		
NPI/FEIN	Status	Application Start Date	Effective Date	Application Originator	Application Age
1659565539	Return To Provider	05/25/2017 10:39:12	05/01/2017		19 Days

1.0 Administrative Information

2.0 Provider Qualifications

3.0 Disclosure of Ownership and Control Interest

4.0 Attestations

5.0 Provider Group Linkage

6.0 Account Information

7.0 Fee Payment

8.0 Documentation

9.0 Provider Review

10.0 Submit

Submit

- Enter your Name, Select Title from dropdown (Group and Entity only), Date will pre-populate with current date
- Click "E-Sign & Submit" to submit application for approval, "Back" to previous screen or "Exit" to return to the Dashboard
- If Group or Entity has an individual owner, the owner's signature is required
- If Group or Entity has no individual owner, an officer or board member's signature is required

* Name

* Title

Sign Date

6/13/2017 11:28:03 AM

Exit View MAP-811 PDF Back Esign & Submit

Steps to Link to a Group: Group KY Medicaid ID

Submitting as a Credentialing Agent

5.0 Provider Group Linkage

6.0 Account Information

7.0 Fee Payment

8.0 Document Upload

9.0 Provider Review

10.0 Submit

*** Submitting as:**

Credentialing Agent – Send to Provider to Submit. Provider must log-in to Partner Portal and submit application.

Authorized Delegate – E-sign and Submit on behalf of the Provider (Requires Authorized Delegate form)

Click on link to review form: [No form found](#)

[Click here to download Template-KY DMS Partner Portal Authorized Delegate Form](#)

Upload the completed Authorized Delegate form and Click on E-sign & Submit

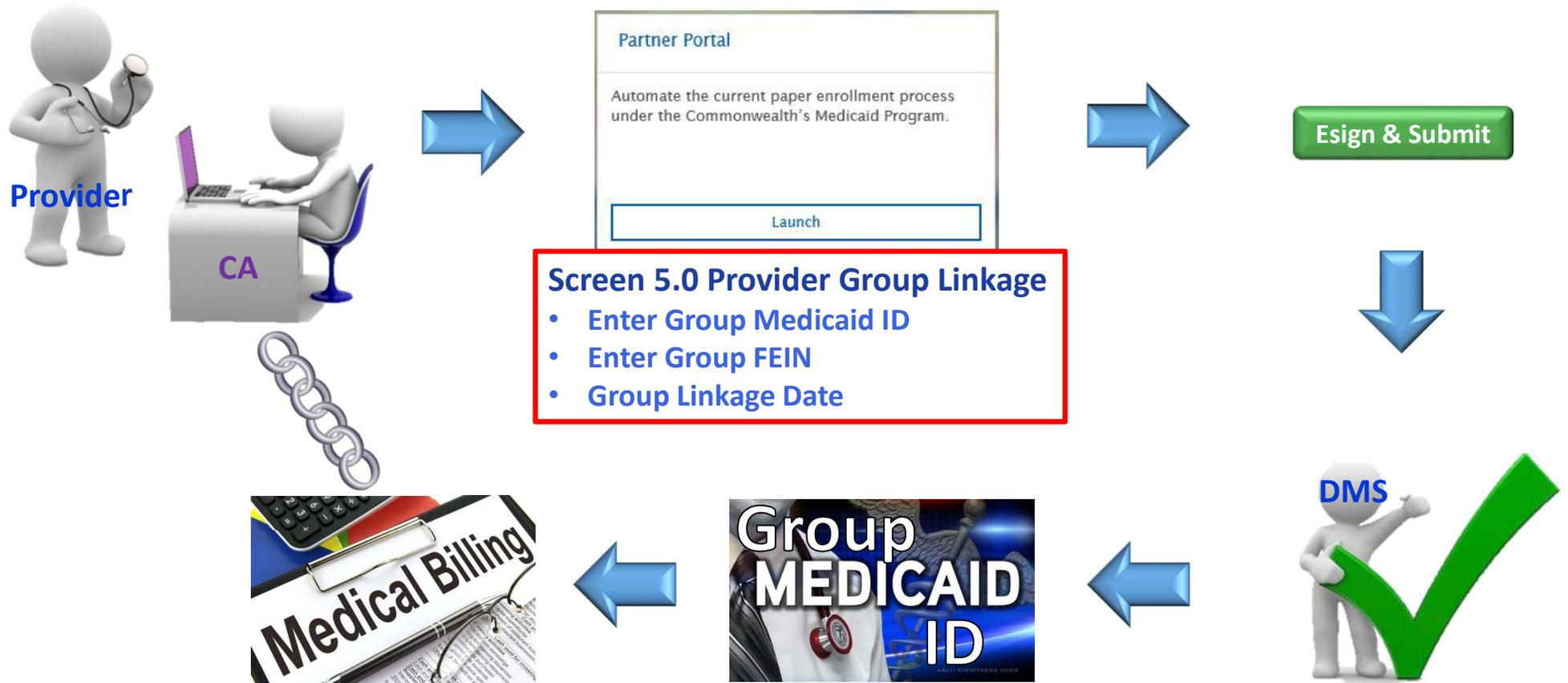
*** Upload File**

*Document Name	Uploaded User	Uploaded Date
<input type="text"/>	Train15, CA15	02/11/2019

For more on submitting a New Enrollment or Maintenance action, attend our companion webinars

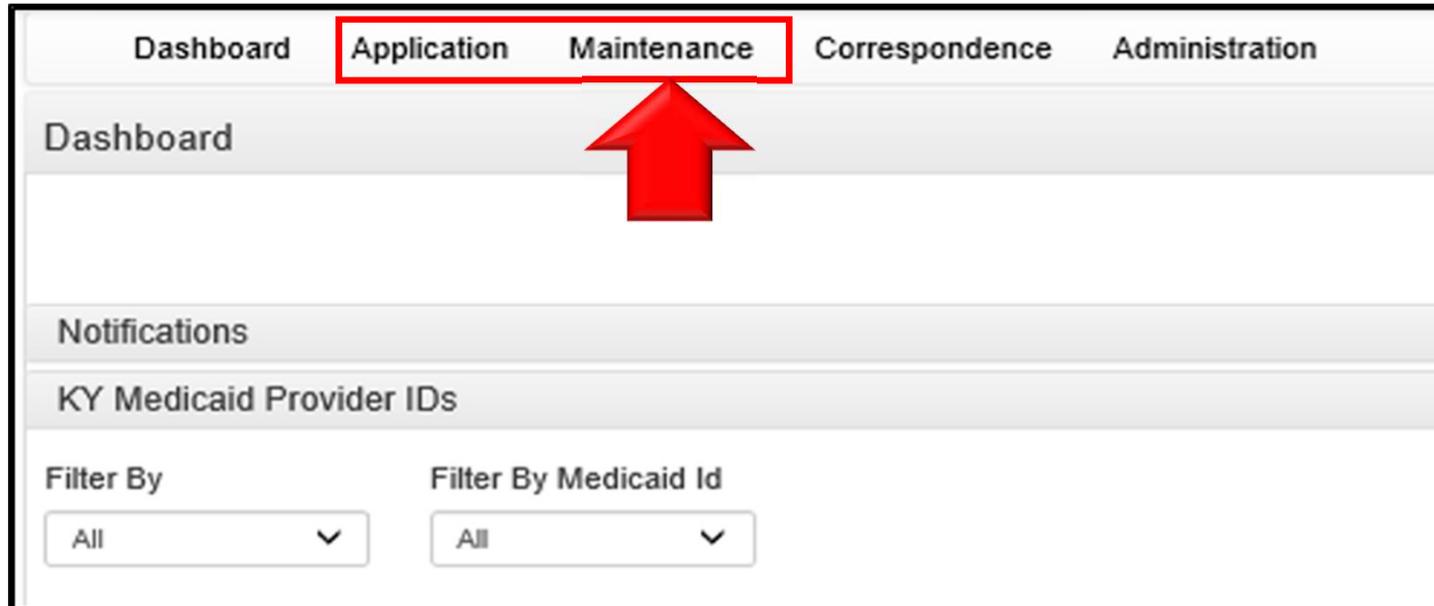
Steps to Link to a Group from Individual Medicaid ID

Steps to Link to a Group: Individual Provider KY Medicaid ID



Steps to Link to a Group: Individual Provider KY Medicaid ID

From the Dashboard, *click* on the **Application** tab to begin a New Enrollment or the **Maintenance** tab to begin a Maintenance action



Steps to Link to a Group: Individual Provider KY Medicaid ID

Dashboard Application Maintenance Correspondence Administration Application Header

1.0 Administrative Information
2.0 Provider Qualifications
3.0 Disclosure of Ownership and Control Interest
4.0 Attestations
5.0 Provider Group Linkage
6.0 Account Information
7.0 Fee Payment
8.0 Document Upload
9.0 Provider Review
10.0 Submit

Linking to a Group

- If you are not linking to any group,press "Save and Next" to continue
- If you are linking to a group you are authorizing the group to receive payments for your services billed through that group
- Click "Add" if you wish to link to group,"Edit" to change the linkage of a group,"Remove" to delete linkage to a group
- After pressing "Add",enter data and then press "Add to Grid" to add a record to the grid, "Discard" to not save the record

Add

Group Medicaid ID	Group FEIN	Group Name	Group Linkage Effective Date	Action
No records found				

Exit **Back** **Save & Next**

Steps to Link to a Group: Individual Provider KY Medicaid ID

- Enter Group Medicaid ID
- Enter Group FEIN
- Enter Group Linkage Effective Date

Dashboard Application Maintenance Correspondence DMS Review Administration Search

3.0 Disclosure of Ownership and Control Interest

4.0 Attestations

5.0 Provider Group Linkage

6.0 Account Information

7.0 Fee Payment

8.0 Document Upload

9.0 Provider Review

10.0 Submit

- To change information, edit to End Date the allowable field(s) and to link or de-link a provider from the group
- Any changes made to the Group Linking or Delinking requires a MAP 347 upload for each
- Provider must have an active Medicaid ID Number to link to the group
- Provider Linkage Date can be no greater than 1 year in the past, and must fall within the individual and group's effective dates
- User must select Verity Provider Medicaid ID to verify provider is active
- Click "Save & Next" to proceed, "Back" to return to previous screen, and "Exit" to return to the Dashboard
- User must proceed to screen 8.1 to "Upload Documents" and then proceed to screen 10.0 to "Submit" Maintenance item once all items have been updated for DMS

Discard

Group Medicaid ID	Group FEIN	Group Name	Group Linkage Effective Date	Group Linkage End Date	Action
No records found					

* Group Medicaid ID

* Group FEIN

* Group Linkage Effective Date

Group Linkage End Date

Verify Group Name

Add To Grid

Exit Back Save & Next

Steps to Link to a Group: Individual Provider KY Medicaid ID

- **Click Verify Group Name**
- *Verify* information is correct
- **Click Add to Grid**

Linking to a Group * = Required

[Discard](#)

Group Medicaid ID	Group FEIN	Group Name	Group Linkage Effective Date	Group Linkage Expiration Date	Action
No records found					

* Group Medicaid ID

* Group FEIN

* Group Linkage Effective Date

Group Linkage Expiration Date

[Verify Group Name](#)

Group FEIN

Group Name

Group Email

[Add To Grid](#)

Steps to Link to a Group: Individual Provider KY Medicaid ID

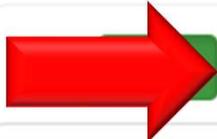
- **Repeat** to add additional groups
- **Click Save & Next**

Linking to a Group * = Required

[Add](#)

Group Medicaid ID	Group FEIN	Group Name	Group Linkage Effective Date	Group Linkage Expiration Date	Action
711	54-	Test Physician's Group	06/25/2019	12/31/2299	 

[First](#) [Previous](#) [Next](#) [Last](#) (Page 1 of 1) Page: 1

[Exit](#)  [Save & Next](#)

Steps to Link to a Group: Individual Provider KY Medicaid ID

Upload MAP-347

- Not required

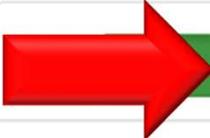
Upload other documents as required

Document Upload * = Required

[Add](#)

Document Type	Name	Required	Uploaded By	Uploaded Date	Action
Social Security Card	Social Security Card	N	Tra	06/24/2019	 
Physician License	Physician License - 456987	N	Tra	06/24/2019	 

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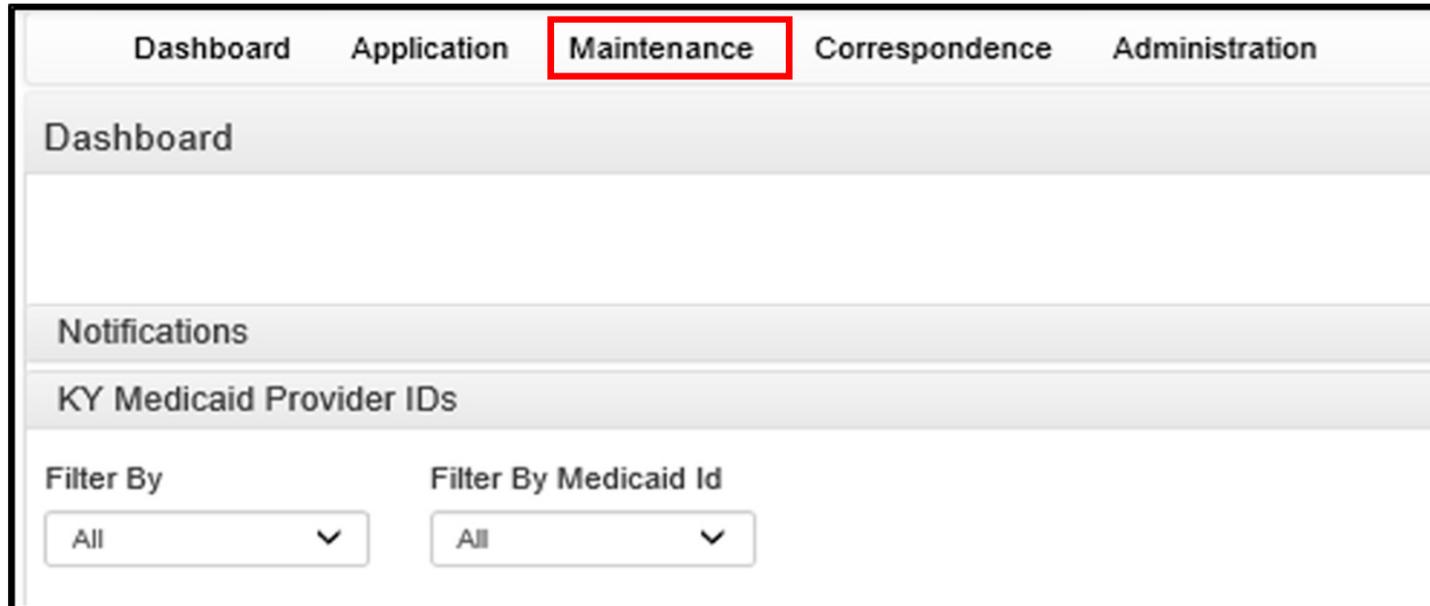
[Exit](#)  [Save & Next](#)

Steps to Delink from a Group Medicaid ID

Individual Medicaid ID and Group Medicaid ID

Steps to Delink from a Group

Will always be a **Maintenance** action



The screenshot shows a navigation menu with five items: Dashboard, Application, Maintenance, Correspondence, and Administration. The 'Maintenance' item is highlighted with a red rectangular border. Below the navigation menu, the page content includes a 'Dashboard' header, a 'Notifications' section, and a 'KY Medicaid Provider IDs' section. At the bottom of the screenshot, there are two filter dropdown menus: 'Filter By' and 'Filter By Medicaid Id', both currently set to 'All'.

Steps to Delink from a Group: Individual Provider KY Medicaid ID

Navigate to 5.0 Linking to a Group screen

- **Group Linkage Expiration Date** auto-filled with default date of 12/31/2299
- Cannot delete the record; must end-date the record
- *Click* **Edit** icon to begin

Linking to a Group

• = Required

Add

Group Medicaid ID	Group FEIN	Group Name	Group Linkage Effective Date	Group Linkage Expiration Date	Action
710	54-	Test Physician's Group	06/25/2019	12/31/2299	 

First Previous Next Last (Page 1 of 1) Page: 1

Exit Back Save & Next

Steps to Delink from a Group: Individual Provider KY Medicaid ID

- Grayed out fields cannot be edited
- Enter Group Linkage Expiration Date
- Click Add to Grid

Linking to a Group * = Required

[Discard](#)

Group Medicaid ID	Group FEIN	Group Name	Group Linkage Effective Date	Group Linkage Expiration Date	Action
71	54-	Test Physician's Group	06/25/2019	12/31/2299	 

[First](#) [Previous](#) [Next](#) [Last](#) (Page 1 of 1) Page: 1

* Group Medicaid ID

* Group FEIN

* Group Linkage Effective Date 

Group Linkage Expiration Date 

[Verify Group Name](#)

[Add To Grid](#)

[Exit](#) [Back](#) [Save & Next](#)

Steps to Delink from a Group: Individual Provider KY Medicaid ID

- Record is updated with the new Group Linkage Expiration Date
- **Click Save & Next**

Linking to a Group

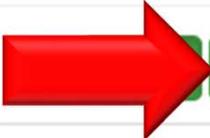
Date was 12/31/2299. Now 12/31/2019.

* = Required

Add

Group Medicaid ID	Group FEIN	Group Name	Group Linkage Effective Date	Group Linkage Expiration Date	Action
710	54-	Test Physician's Group	06/25/2019	12/31/2019	 

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Exit  Save & Next

Steps to Delink from a Group: Individual Provider KY Medicaid ID

- There is no requirement to upload a MAP-347

Document Upload * = Required

[Add](#)

Document Type	Name	Required	Uploaded By	Uploaded Date	Action
Social Security Card	Social Security Card	N	Tr.	06/24/2019	 
Physician License	Physician License - 456987	N	Tr.	06/24/2019	 
Physician License	Physician License - 456987	N	Tr.	06/24/2019	 

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[Exit](#) [Back](#) [Save & Next](#)

Steps to Delink from a Group: Group KY Medicaid ID

- All group members are listed in the grid
- **Provider Linkage Expiration Date** auto-filled with default date of 12/31/2299
- Cannot delete the record; must end-date the record
- *Click **Edit** icon to begin*

Add Group Members

Info Refresh * = Required

Add

Provider Medicaid ID	NPI	Provider Email	Provider Name	Provider Linkage Effective Date	Provider Linkage Expiration Date	Action
71	1467534727	pro n1: t	Ja ss:	06/25/2019	12/31/2299	 
71	1356431316	pro n1: t	Se Ja	06/24/2019	12/31/2299	 
71	1043438468	pro n1: t	Mc ck:	06/26/2019	12/31/2299	 

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Exit Back Save & Next



Steps to Delink from a Group: Group KY Medicaid ID

- Grayed out fields cannot be edited
- *Enter Provider Linkage Expiration Date*
- *Click Add to Grid*

Add Group Members Discard

Provider Medicaid ID	NPI	Provider Email	Provider Name	Provider Linkage Effective Date	Provider Linkage Expiration Date	Action
710	1467534727	pr n1: t	Jan sse	06/25/2019	12/31/2299	 
710	1356431316	pro n1: t	Se Ja	06/24/2019	12/31/2299	 
710	1043438468	pro n1: t	M cl	06/26/2019	12/31/2299	 

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* Provider Medicaid ID * Provider Linkage Effective Date  Provider Linkage Expiration Date 

Verify Provider Medicaid ID

Add To Grid 

Exit Back Save & Next

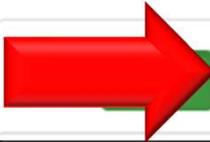
Steps to Delink from a Group: Group KY Medicaid ID

- Record is updated with the new Provider Linkage Expiration Date
- **Click Save & Next**

Add Group Members * = Required

Provider Medicaid ID	NPI	Provider Email	Provider Name	Provider Linkage Effective Date	Provider Linkage Expiration Date	Action
710	1467534727	provi n13(t	Ja ss			<input type="button" value="Edit"/> <input type="button" value="Delete"/>
710	1356431316	provi n13(t	Se : Ja			<input type="button" value="Edit"/> <input type="button" value="Delete"/>
710	1043438468	prov n13(t	Mi : ck	06/26/2019	10/31/2019	<input type="button" value="Edit"/> <input type="button" value="Delete"/>

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Note: A yellow callout box points to the Expiration Date field in the third row, containing the text: "Date was 12/31/2299. Now 10/31/2019." The date "10/31/2019" in the table is also highlighted with a red box.

Steps to Delink from a Group: Group KY Medicaid ID

- There is no requirement to upload a MAP-347

Document Upload * = Required

[Add](#)

Document Type	Name	Required	Uploaded By	Uploaded Date	Action
IRS Letter of Verification of FEIN or Official IRS documentation stating FEIN	FEIN Verification	N	Tr C/	06/24/2019	 
MAP-347	MAP-347 - 71	N	Tr C/	06/24/2019	 

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[Exit](#) [Back](#) [Save & Next](#)

KY MPPA Resources and Next Steps

Resources

-  Review the Informational Bullets located toward the top of the web page.
 -  Click on the On-Screen Help Content.
 -  View the “How-To” videos.
 -  Review Job Aids, FAQs, Quick Reference Guides and Glossary.
 -  See the User Guide for step-by-step instructions.
 -  Call or e-mail the Contact Center to communicate with a Customer Service Representative.
- Within KY MPPA**
- On KY MPPA Training Web Site**

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

KY MPPA Training Website

PROVIDER ENROLLMENT

Medicaid Partner Portal Training

The KY MPPA has extensive embedded help resources including on-screen help and tips to complete each screen.

The resources here complement the application's built-in user support to help you get started or increase your proficiency using KY MPPA. Here, you'll find:

- Job aids, quick references and user guides for specific operations
- Archive of newsletters issued during the KY MPPA extended pilot
- Release notes on the latest system enhancements
- Links to and transcripts of YouTube how-to videos
- For an overview of available training videos and documents, please see the [Training Resources Topic Map](#)

To learn more about KY MPPA on your own schedule, access the appropriate self-paced training plan:

- [Stage 1: Learn About KY MPPA](#)
- [Stage 2: Setting Up Your KY MPPA Account and Logging On](#)
- [Stage 3: Linking Credentialing Agents and Providers](#)
- [Stage 4: Learn About KY MPPA Menus and Functionality](#)
- [Stage 5: Using KY MPPA to Start a New Enrollment or Complete Maintenance/Revalidation](#)

Training Media

Filter training video by topic. Video series can be viewed in order according to Video Number.

Select a category

Select a media topic

SEARCH

KY MPPA Web Pages

[KY MPPA Home Page](#) Statewide rollout schedule and updates

[KY MPPA Newsletters and Release Notes](#)

Training Documents

Filter training documents by topic.

Select a category

Select a topic

SEARCH

Helpful Links

- [Provider Enrollment](#)
- [Subscribe to CHES email updates](#)
- [Webinar Training Catalog](#)
- [Register for KY MPPA Account](#)

Additional Information

- [Authorized Delegate Form](#)
- [Organization Administrator Set Up Request Letter Template](#)
- [Request CA Linking to KY Medicaid ID Letter Template](#)
- [CA Linking to KY Medicaid ID Request Spreadsheet](#)
- [KOG Onboarding Tip Sheet](#)

KY MPPA Contact Center

<p style="text-align: center;">KY MPPA Contact Center Phone: 877-838-5085 Website: KY MPPA Website Monday – Friday 8 am – 5 pm</p> 		
Description	Phone	Email
<p>Technical support for:</p> <ul style="list-style-type: none"> • KY MPPA technical issues • Remote identity validation • Credentialing Agent management • Access issues 	Extension 1	medicaidpartnerportal.info@ky.gov
<p>Program or policy inquiries. Status and help with paper applications.</p>	Extension 2	

Preparing to Reach Out to the Contact Center

- Can call or email the Contact Center - Best to call when Provider or CA are having issues
 - Setting up their account
 - Signing on to KY MPPA
 - Navigating within KY MPPA
 - Linking to Medicaid IDs or linking Providers to CAs
- Information you may be asked to provide
 - First/Last name, organization name, email address, VIP Credential ID
 - Provider SSN, Provider NPI, Provider KY Medicaid ID
 - Group FEIN, Group Medicaid ID
 - Application number (APP), Maintenance item number (MNT), Revalidation item number (RVL)
- If the Provider does not have a Medicaid ID or does not know their Medicaid ID, the Contact Center
 - Will only be able to discuss general KY MPPA navigation
 - Will not be able to provide any specific information regarding an application or Medicaid ID data
 - Will not be able to provide the KY Medicaid ID via phone or email

Handouts

- [Request Medicaid ID from DMS](#)
- [Contact Center Assistance](#)
- [Preparing to Call or Email the KY MPPA Contact Center](#)
- [Authorized Delegate Form](#)
- [KOG Onboarding Tip Sheet](#)
- [Provider and Credentialing Agent Initial Medicaid ID Linkage](#)
 - Link Provider to their KY Medicaid ID during the account set up process
- [Provider and CA Linking Tip Sheet](#)
 - Provider and CA linking scenarios and the paths to follow to link (OMA or KY MPPA Contact Center)
- [Organization Administrator Set Up Request Letter Template](#)
 - When using the Organization Management Application (OMA)
- [Request CA Linking to KY Med ID Letter Template](#)
 - When linking via the KY MPPA Contact Center
- [CA Linking to KY Medicaid ID Request Spreadsheet Template](#)
 - When linking via the KY MPPA Contact Center
- [Using OMA to Invite-Link-Delink CAs](#)
 - For Individual Providers who will be participating in KY MPPA to invite CAs or Credentialing groups who support group with KY Group Medicaid IDs

**All Handouts are available from the
KY MPPA Training Website**

Next Steps in Your KY MPPA Journey

- Download session handouts
- Attend all the webinars in this series and the Level 100 series if you haven't previously attended

Level 200 Webinars

(Register through the Adobe catalog located on the KY MPPA Training Webpage)

- ✓ Getting the Most out of your KY MPPA Dashboard Navigation
- ✓ New Enrollment Application (MAP-811)
- ✓ Linking to a Group (MAP-347)
- ✓ Maintenance & Revalidation (MAP-900)

Level 100 Webinars

(Recorded and available through the KY MPPA Training webpage)

- ✓ Overview and Roles
- ✓ Account Set-Up and Sign-On
- ✓ Navigation & Functionality
- ✓ Linking Providers and CAs using the OMA

- Bookmark KY MPPA and KY MPPA Training Resource webpage
 - Access training materials from KY MPPA Training Webpage
- Utilize Contact Center for support as needed



Questions/Discussion

