

How to Update Information on a Medicaid File (Maintenance)

Updating information on an existing Medicaid file can be completed by performing Maintenance (MNT) in Partner Portal.

Common Items Requiring Maintenance:

- Updating License
- Updating Address
- Uploading Documents
- Updating Payment Method
- Updating Contact Information
- Updating Specialties Information

Performing Maintenance in Partner Portal

1. From the Partner Portal Dashboard, locate the Maintenance Tab on the menu bar located at the top of the screen.

The screenshot shows the Kentucky.gov Partner Portal interface. At the top, there is a navigation bar with the following tabs: Dashboard, Application, Maintenance, Correspondence, DMS Review, Administration, and Search. The 'Maintenance' tab is highlighted with a yellow box and an orange arrow pointing to it. Below the navigation bar, the main content area is titled 'Dashboard'. Underneath, there is a 'Notifications' section with search filters for Notification Type and Subject, and search fields for Medicaid ID and Application ID. There are also 'Reset', 'Search', and 'Clear' buttons.

Maintenance can also be started from the Dashboard by selecting "KY Medicaid Provider IDs" from the accordion menu, locating the Medicaid ID, and clicking "Start".

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2. Enter the Medicaid ID and click "Search".

The screenshot shows a web application window titled "Maintenance". At the top right, there are two circular icons and a red asterisk followed by the text "= Required". Below this, there is a list of instructions:

- Requests for Maintenance must be processed by DMS before a new request can be submitted. In the event additional maintenance items needs to be submitted, withdraw a pending request by going to the dashboard
- Choose Voluntary Termination to end participation with Kentucky Medicaid
- Revalidation is only required every five years. Select "Revalidation" to update provider file with Kentucky Medicaid
- Select Reapplication (RAP) to reapply for a Medicaid ID that has been End Dated over a year
- Select Reinstatement (RIN) to reinstate a Medicaid ID that was Terminated by Kentucky Medicaid

Below the instructions is a form with a label "* Medicaid ID" and an empty text input field. To the right of the input field are two buttons: "Search" and "Clear". At the bottom left of the form is an "Exit" button.

3. Review the prepopulated information and select "Maintenance" under the "I Want to Perform" section. Enter the effective date of the Maintenance. Click "Continue".

The screenshot shows the "Maintenance" form with prepopulated information. At the top, there is a "* Medicaid ID" label and an empty text input field. To the right of the input field are two buttons: "Search" and "Clear". Below this, there are several input fields with prepopulated data:

- Provider Name: [Empty]
- NPI: [Empty]
- Taxonomy: [Empty]
- Primary Physical Address: [Empty]
- Revalidation Date: 05/10/2028
- Medicaid ID Effective Date: 05/01/2023
- Medicaid ID End Date: 12/31/2023
- Status: Active
- Status Reason: Active

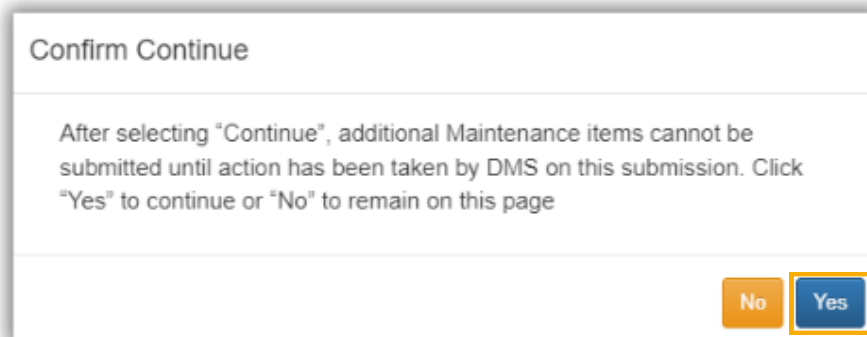
Below the prepopulated information is a section labeled "* I Want to Perform:" with a list of radio buttons:

- Maintenance
- Revalidation
- Voluntary Termination
- Reinstatement
- Reapplication
- Intent to bill

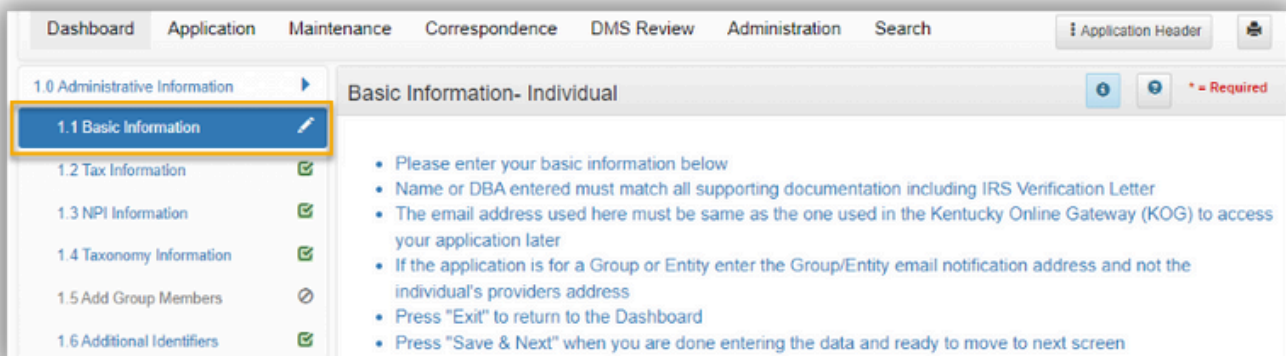
To the right of the radio buttons is a "* Requested Effective Date" label and a date input field with the placeholder "MM/DD/YYYY". At the bottom left of the form is an "Exit" button, and at the bottom right is a "Continue" button.

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4. A Confirm Continue pop up box will appear. To continue with the Maintenance, click "Yes". If users receive an error message after clicking "Yes," they may have another Maintenance in progress or are not linked to the Medicaid ID. If this occurs, please call the Contact Center.



5. After Clicking continue, users will be navigated to the 1.1 Basic Information screen where updates can be made.



When performing Maintenance for the first time, users will need to navigate through each screen. For subsequent Maintenance actions, users can navigate directly to their desired screen.

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6. If any changes have been made during the Maintenance item, navigate to the 8.0 Document Upload screen to upload required documents.
 - Required documents will be marked with a "Y"
 - For assistance on how to upload required documents, please see the [Uploading Documents Job Aid](#).
7. When all information has been updated, navigate to the 10.0 Submit screen.
8. Review and Agree to the Terms of Agreement and Electronically Sign the Maintenance.
 - Authorized Delegates and Legally Authorized Agents are required to submit additional documentation before submitting to DMS.

The screenshot displays the 'Submit' screen in the Kentucky.gov Partner Portal. The page includes a navigation menu on the left with '10.0 Submit' highlighted. The main content area contains the following text and form elements:

- Instructions for signing: Enter Name as it appears on the application; For Group or Entity with an Individual owner, owner's signature is required via e-sign; For Group or Entity with no Individual owner, an officer or board member's signature listed in the application is required via esign; For Individual providers, the Title is prepopulated based on Enrollment; For Group or Entity only, select Title from dropdown; Sign Date is default of today's date; Click "Esign & Submit" to submit maintenance for approval, "Back" to previous screen or "Exit" to return to Dashboard.
- A statement: "By entering the name below, I am indicating I have reviewed the KY Medicaid Rules, Regulations, Policy and 42 USC 1320a.7b, and it is my intent to electronically sign the application and represent that all of the information I have provided is true, complete, and accurate."
- Form fields: *Electronic Signature (text input field), *Title (dropdown menu set to 'Podiatrist'), and Sign Date (7/24/2023 3:12:06 PM).
- Buttons: Exit, View MAP-811 PDF, Back, and Esign & Submit.

For more information on performing Maintenance for a specific task, refer to the Job Aids found on the [Training Resources Web Page](#).