



KMAP Provider Enrollment Wizard

The [KMAP Provider Enrollment Wizard](#) allows you to start or resume a new application, revalidation, or an MCO contracting request. Please review the following options to determine which selection is appropriate.

New Enrollment Application

To enroll a new provider, provider type, change a Tax ID, add an additional service location or a new location

- [Start New Application](#)
- [Resume Application](#)
- [Check Application Status](#)

Enrollment types and requirements information, [click here](#)

Revalidation

The following link can be used to start the revalidation when an Application Tracking Number (ATN) has been received.

- [Resume/Revalidate Enrollment](#)

MCO Contracting Request

To contract with the KanCare MCOs and the provider is already enrolled with KMAP, use the following link.

- [MCO Contracting Request Form](#)

Bulletins

[20112: KMAP Provider Enrollment System Upgrade](#)

[20098: Enrollment Types and NPI Requirements](#)

[19200: Provider Application Fee change 2020](#)

[19119: Ordering Referring Prescribing Requirements](#)

[19115: Managed Care Rule Provider Enrollment](#)

All KMAP Bulletins are available [here](#).



KMAP Provider Enrollment Billing Requirements Q&A

For additional information, please review the following questions and answers regarding provider enrollment and billing requirements.

Important Contacts

- Kansas Medical Assistance Program (KMAP): 1-800-933-6593
- Aetna Better Health of Kansas: 1-855-221-5656
- Sunflower State Health Plan: 1-877-644-4623
- UnitedHealthcare Community Plan of Kansas: 1-877-542-9235

Additional Information

If you wish to credential/contract with the KanCare MCOs, select the MCOs you wish to be credentialed/contracted with as you complete your application. Only one application is needed, the information will be shared with the MCOs chosen.

As of July 1, 2019, the KanCare MCOs started denying payments for providers who are not actively enrolled with KMAP.

Provider Enrollment Guide

This resource guide is intended to provide clarification and updates to the provider enrollment requirements for Kansas Medicaid Providers.

- [Provider Enrollment Guide](#)

Who should enroll using the online application?

All providers wishing to enroll with an MCO must now access the application through the Provider Enrollment Wizard. This is the same application used to apply directly with Kansas Medicaid.

How does my application get to the MCOs?

During the enrollment process, you will select which MCO(s) you wish your application and supporting documentation to be sent to for use in the MCO credentialing and contracting process. Once your enrollment with KMAP is approved, the application and all supporting documentation will be sent to a portal for retrieval/download by the MCOs.

I'm already enrolled with KMAP, when should I provide my existing KMAP ID?

Please provide your existing KMAP ID in the appropriate box. You will be asked to provide your current (active) provider ID or previous (inactive) provider ID.



KMAP Provider Enrollment Billing Requirements Q&A

(Continued)

For additional information, please review the following questions and answers regarding provider enrollment and billing requirements.

In what instances is a maintenance request required instead of a new enrollment (or MCO Contract Request Form)?

- Demographic update (such as address or phone number)
- Addition of a provider specialty
- Group association
- National Provider Identifier (NPI) update
- Name update
- License update

Who should the maintenance request be submitted to?

Reference KMAP General Bulletin 19064. Until further notice, all providers should direct any changes to their provider record to KMAP. KMAP is the main point of contact for these updates. Once the updates are received, KMAP will forward the requested updates to the MCOs. The MCOs will then update their records accordingly.

What provider data elements are critical for claims processing?

Synchronization and use of the following data elements when billing across the MCOs and KMAP is critical for accurate claims processing. The following data elements, when a claim is processed, must match exactly as they were submitted at the time of enrollment (or according to the latest maintenance request received and processed by KMAP):

- NPI
- Provider name
- Provider type/specialty
- Taxonomy
- Tax ID number
- Service location address