



TO: All Providers, Administrative Service Organizations
RE: Elimination of Paper Re-enrollment Applications

Effective March 1, 2013, paper provider re-enrollment applications submitted to HP will no longer be accepted. All providers, with the exception of those listed below, must submit their provider re-enrollment application via the online Wizard located on the www.ctdssmap.com Web site by clicking on Provider, then Provider Re-enrollment. Providers do not need to log on to their secure site to access their re-enrollment application. Providers will continue to be notified by mail indicating that they are required to re-enroll. This letter contains the Application Tracking Number (ATN) for the re-enrollment application. This ATN and the provider ID are required to access the re-enrollment application.

Due to their unique enrollment requirements, the following providers cannot currently enroll/re-enroll using the online Wizard. Such providers should continue to follow established procedures for enrollment and re-enrollment:

- Acquired Brain Injury Fiduciary
- CT Home Care Program (CHC) Access Agencies
- CT Home Care Program (CHC) Access Agency Performing Providers
- DMH and DDS Performing Providers
- Employment and Day Support Waiver Performing Providers
- Long Term Care Facilities
- Private Non-Medical Institution Billing and Performing Providers
- Regional Family Service Coordination Center (RFSCC) (Birth to Three) Billing and Performing Providers
- School Corporations
- State Institution – ICF/MR

- Personal Care Assistant (PCA) Fiduciary

As previously communicated in provider bulletins PB 2012-53 and PB 2012-54, the Department of Social Services (DSS) has implemented enhancements to the enrollment/re-enrollment online Wizard which has increased efficiency and reduced errors. The online re-enrollment application is much more efficient than paper as the existing provider data is pre-populated within the application. Providers simply need to verify that their information is correct and current and submit the application. If the pre-populated information is not correct, changes can be made online and submitted to HP via the Wizard.

Important! Providers should **not** mail a hard copy of the actual re-enrollment application to HP. If prompted to submit any follow on documents, only those documents should be submitted on paper, noting the ATN on the upper right corner of each page.

If a paper application is received from a provider who is required to submit their re-enrollment application via the Wizard, the paper application will not be processed and will be returned to the provider with instructions to use the online Wizard.

As a reminder, DSS has changed the way performing providers of an organization, such as a group, clinic or outpatient hospital, are re-enrolled in the Connecticut Medical Assistance Program. Performing providers are required to re-enroll independently from the organization(s) of which they are a member. The organization is no longer required to submit signed provider



agreements on their behalf. The performing provider will re-enroll on the enrollment Wizard once they receive their re-enrollment letter.

If you have any questions regarding this bulletin, please contact the HP Provider Assistance Center at 1-800-842-8440.

