



TO: Federally Qualified Health Centers (FQHC)
RE: New Provider Enrollment Requirements for FQHC Providers Performing Non-FQHC Services

The Department of Social Services (DSS) has recently approved Federally Qualified Health Centers (FQHCs) to bill on behalf of FQHC employed physicians for non-FQHC services when provided in a hospital or nursing home setting. To process these claims, the FQHC will have to enroll under a separate provider type and specialty. FQHC providers can begin to enroll starting May 1, 2014 through the Web site www.ctdssmap.com.

Please note that, if the FQHC previously enrolled themselves as an OB/GYN group, that OB/GYN group will be deactivated once the application is received for the new FQHC provider type. At the time that OB/GYN group is deactivated the performing providers will systematically be dis-associated from that OB/GYN group. The performing providers will need to be associated to the new FQHC provider type by the FQHC, following the instructions outlined in the Organization Members section.

Services will not be payable as of July 1, 2014 for FQHCs previously enrolled as on OB/GYN group under that group.

Provider Enrollment

FQHCs can enroll using the HP Provider Enrollment Wizard located on the Web site www.ctdssmap.com starting May 1, 2014. From the Home page, click on the Provider tab, and then click on Provider Enrollment to begin the enrollment process. Any providers enrolling will be required to complete the entire enrollment application.

During the enrollment process, you will have an option to select provider type and specialty. For Provider Type, select "Clinic," and then choose either "Physician Services – Non-Mental Health" or "Physician Services – Mental Health" for Provider Specialty.

FQHC providers will have no additional follow up documents that require submission to HP. However, FQHCs will be required to provide the clinic's license information when enrolling through the enrollment wizard. The license entered via the Wizard will be validated against the Department of Public Health (DPH).

Upon completion of the Wizard, you will receive an Application Tracking Number (ATN) and will have an opportunity to print a hard copy of the application submitted via the Web. Please do not send the hard copy to HP.

Once a provider is enrolled, systematic monthly validation will occur ensuring that the provider continues to be eligible to participate in the Connecticut Medical Assistance Program. This validation includes license verification and confirmation that the provider has not been sanctioned by the Office of the Inspector General.

Provider Re-enrollment

Once enrolled, the FQHC clinics will be required to re-enroll every two years via the on-line Re-enrollment Web Wizard. A notification will be sent as you approach your re-enrollment due date.

Secure Web Portal

Once your enrollment is completed, you need to establish your provider's Web account by logging on to www.ctdssmap.com → Provider → Secure Site and selecting setup account. You must enter the Initial Web User ID and Personal Identification Number (PIN) mailed to you upon completion of your enrollment application to make your Web account active.

Organization Members

Once enrolled and your Web account is active, the FQHC clinics are required to identify the members of their organization and associate them with the new AVRS IDs. FQHCs can use the Maintain Organization Members link to add members to their new AVRS ID.

Performing providers will need to be added to the new AVRS ID, by the FQHC.

The Maintain Organization Members link is located by clicking on the Demographic Maintenance tab under the main account administrator's secure Web account on the www.ctdssmap.com Web site. Once in the Demographic Maintenance tab, you would select the Maintain Organization Member link.



Instructions for adding or separating members of an organization can be found in Chapter 10, Section 10.15 of the Provider Manual. The provider manual is located by clicking Information, then Publications from the home page of www.ctdssmap.com.

The following performing provider types and specialties may be enrolled under the new FQHC Non-Mental Health AVRS IDs:

- Physician Assistants
- Advanced Practice Registered Nurses (with the exception of Psychiatric/Mental Health Nurse Practitioners and Psychiatry)
- Certified Nurse Midwives
- Physicians (with the exception of Psychiatry and Child & Adolescent Psychiatry)
- Podiatrists

The following performing provider types and specialties may be enrolled under the new FQHC Mental Health AVRS IDs:

- Advanced Practice Registered Nurses, with specialties of Psychiatric/Mental Health Nurse Practitioners and Psychiatry
- Physicians, with specialties of Psychiatry and Child & Adolescent Psychiatry

DSS will communicate billing instructions via a future provider bulletin on how FQHCs can bill on behalf of FQHC employed physicians for non-FQHC services.

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

