



TO: Nursing Home and Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID) Providers

RE: Nursing Home and ICF/IID Enrollment/Re-enrollment on the Web

This bulletin serves to inform Nursing Home and ICF/IID providers that the Department of Social Services (DSS) is implementing a number of enhancements to streamline enrollment and re-enrollment application processing. These enhancements are designed to increase efficiency, reduce the amount of wait time, and reduce errors and delays in application processing. Specifically, the enhancements will:

- Replace the current Nursing Facility paper application with a **Web based application** that incorporates the standard provider agreement and addendum for nursing homes or ICF/IID providers
- Eliminate the need for the Deputy Commissioner's signature on the provider agreement and reduce the number of signed provider agreements to one
- Extend the re-enrollment period of Nursing Facilities and ICF/IID providers to once every 5 years to align with the maximum term allowed by the Affordable Care Act (ACA)
- Eliminate the need for the provider's enrollment and re-enrollment to be conducted in concert with Medicare's Certification and Transmittal process
- Increase the lead time to 8 months for Connecticut Medical Assistance

Program (CMAP) re-enrollment notification and process

- Ensure payment to facilities only when a valid provider agreement exists

Web Based Application

Effective July 1, 2015, providers submitting an application for the first time or providers receiving a notice on or after that date that they are now due to re-enroll must do so using the HP Provider Enrollment Wizard located on the CMAP Web site: www.ctdssmap.com. From this Home page, click on "Provider" then "Provider Enrollment" or Provider Re-Enrollment. This Wizard will collect all data necessary from Nursing Facilities and ICF/IID providers to enroll/re-enroll. The provider agreement is included in the on-line application and is signed electronically. Providers may print a copy at the conclusion of the application for their records. Please do not send any hard copies of the application submitted via the Web portal.

Follow on Documents

HP will coordinate monthly verifications with the Department of Public Health (DPH) between a provider's re-enrollment periods to ensure license compliance on an ongoing basis. Since DPH does not license ICF/IID facilities, these providers will need to submit "follow on documents" as part of their enrollment/re-enrollment application which includes a copy of their current license from the Department of

Questions? Need assistance? Call the HP Provider Assistance Center Mon. – Fri. 8:00 a.m. – 5:00 p.m.
Toll free 1-800-842-8440 or write to HP, PO Box 2991, Hartford, CT 06104

Program information is available at www.ctdssmap.com **As a reminder, DSS will no longer distribute paper communications to providers as of June 30, 2015. Please see PB15-23 for details.**



Developmental Services (DDS) to the HP Provider Enrollment Unit in order to complete their enrollment/or re-enrollment application.

Provider Re-enrollment

Providers will begin receiving notices as early as July 1, 2015 stating that they are due to re-enroll via the Web portal, following the process outlined below. The notice to re-enroll will contain an Application Tracking Number (ATN) and provider ID. Both the ATN and provider ID will be required to access the re-enrollment application via the Web portal Re-enrollment Wizard. Please note that the Web portal presents providers with the information currently on file for the facility, so that data does not have to be re-keyed but instead may be verified and updated if necessary.

The Re-enrollment Wizard is located on the CMAP Web site at www.ctdssmap.com. From the Home page, click on “Provider” then “Provider Re-enrollment”.

Providers that do not re-enroll in a timely manner will be subject to additional outreach, including telephone and correspondence reminders that their re-enrollment is due by the date printed on their re-enrollment notice. This is in an effort to assist providers with timely re-enrollment. Providers that have not successfully re-enrolled thirty (30) days before the provider’s “re-enrollment respond by date” will receive a notice warning of pending deactivation. Given the increased lead time for completing a re-enrollment application and the additional pending deactivation notification required by State Statutes, if a provider’s application is not finalized by their re-enrollment due date, the provider will be deactivated and their provider agreement will be terminated.

Important! It is essential that providers successfully complete their re-enrollment application as quickly as possible to ensure adequate time for processing. Each application once submitted by the provider must then be processed by HP and the Department of Social Services’ (DSS) Quality Assurance Unit. The application must be submitted timely to allow sufficient time for these processes, which typically takes several weeks to complete. HP recommends providers complete their re-enrollment upon receipt of notice that it is time to re-enroll.

Provider Re-enrollment Period

Once the enrollment / re-enrollment process is completed, Nursing Home and ICF/IID providers will now be required to re-enroll once every five (5) years. Providers will continue to receive a notification from HP when it is time to re-enroll eight (8) months in advance of their re-enrollment due date. It is imperative that providers successfully complete their re-enrollment application prior to the provider’s “re-enrollment respond by date” on the re-enrollment due notice to avoid dis-enrollment from the Medicaid program.

Complete instructions regarding how to enroll/re-enroll are available on the CMAP Web site at www.ctdssmap.com. Providers may refer to Chapter 10, Section 10.7 of the Provider Manual for step-by-step instructions on CMAP Web portal enrollment/re-enrollment. To access Chapter 10, from the Home page, click on “Publications” then scroll down to chapter 10, Web/AVRS.

Note: Provider enrollment/re-enrollment applications must be completed in their entirety. The application cannot be saved for later completion, and cannot be modified once



submitted. If changes are needed, providers will need to submit paper corrections to the HP Provider Enrollment Unit on provider letterhead.

To prepare for these upcoming changes, educate providers and ensure provider awareness, HP will be offering training on how to enroll/re-enroll on the Web. These workshops will prepare providers for transitioning to enrolling/re-enrolling on the CMAP Web portal. Workshop invitations will be mailed immediately following the distribution and publishing of this provider bulletin. If an invitation is not received, providers can view workshop offerings and sign up on the CMAP Web site at www.ctdssmap.com. From the Home page, go to 'Provider Services', 'Provider Training', under 'Workshops', and then click on the workshop you wish to attend.

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

