



TO: All Providers

RE: Updated Provider Re-enrollment Notification and Process

This bulletin serves to inform providers that the Department of Social Services (DSS) is changing the re-enrollment due notification process, operated by HP Enterprise Services (HP).

Currently, the notice to re-enroll is mailed out 30 days prior to the provider's re-enrollment due date. This does not allow providers adequate time to complete the re-enrollment process before their current provider agreement expires. To circumvent this issue, the notice to re-enroll will be mailed to providers six (6) months in advance of a provider's re-enrollment due date. Any provider with a re-enrollment due date beginning March 1, 2015 and forward will be impacted by this change. Those impacted providers will begin receiving notices as early as September 1, 2014 that they are due to re-enroll within the next six months. Any providers due for re-enrollment prior to March 1, 2015 will continue to follow the current re-enrollment procedures/timelines.

Effective August 12, 2014, providers with Secure Web portal access can view their re-enrollment due date once logged in! Individual providers can view their re-enrollment due date on the Home page. As a reminder, organizations can currently view the re-enrollment due dates of their members by accessing the "Maintain Organization Members" panel. This enhancement will allow individual providers and organizations to better track their re-enrollment due dates prior to receiving their notice to re-enroll.

The re-enrollment due notice will contain the Application Tracking Number (ATN) and

provider ID required to access the re-enrollment application via the online re-enrollment Wizard. If after three (3) months the provider has not successfully re-enrolled, a reminder letter will be sent reiterating the date in which the re-enrollment application must be completed.

All providers, with the exception of those listed in Chapter 3 (Provider Enrollment/Re-enrollment), Section 3.1 must submit their re-enrollment application via the online Wizard located on the Web site www.ctdssmap.com, by clicking on Provider, then Provider Re-enrollment. Providers may refer to Chapter 10, Section 10.7 of the Provider Manual for step-by-step instructions on Web portal re-enrollment. To access Chapters 3 or 10, from the Home page, click on Publications then scroll down to the appropriate provider manual chapter.

The following provider types continue to be excluded from the HP re-enrollment process:

- Personal Care Services Providers
- Acquired Brain Injury Providers
- TCM/DDS/DMHAS Performing Providers
- Home/Community Based Providers
- State Institution – ICF/IID Providers

Important! It is imperative that providers successfully complete the re-enrollment application as quickly as possible upon receipt of their notice. Please note that 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 to allow adequate time for these



processes, which typically takes several weeks to complete.

Providers with re-enrollment applications that are not fully completed by the provider's re-enrollment due date will receive a notice advising they have been dis-enrolled from the Connecticut Medical Assistance Program (CMAP). Providers will not be able to submit claims for payment for those dates of service after the deactivation date.

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

