MEDICAID ENROLLMENT INSTRUCTIONS for Respite Providers

Enrollment to become an Independent Respite Provider is a two-step process.

1. You must first have/complete a current First aid/CPR as well as complete your Criminal History check or state name check. This must be completed prior to enrollment.
2. Complete the online Medicaid provider enrollment application

The application cannot be processed without including all of this required documentation.

You cannot deliver respite services until you receive a letter of approval from Molina

Step 1 – Complete a criminal history background check

Each applicant must show clearance of a criminal history check through the Department of Health and Welfare Criminal History Unit. The employer identification number to use to apply is **6255.** For more information on how to complete a criminal history background check go to the website: https://chu.dhw.idaho.gov or
PHONE (208) 332-7990 TOLL FREE 1 (800) 340-1246

1. If you already have a Health & Welfare background check and it is less than 3 years old you may be able to transfer it in lieu of completing a new one. In these cases, you will need to request an Idaho State Police (ISP) Name Check, which is less expensive. More information is available on the Criminal History Unit's web site. If you have questions please ***contact Lynda Bales at 208-528-4041 or Rebecca Fadness at 208-334-5701.***

   The applicant must complete the top section of the ISP name check application, purchase a money order for $20.00 made out to the **Idaho State Police**, and send the application and money order to:
   Lynda Bales: FACS-DD 150 Shoup Ave. Idaho Falls Idaho 83402

   The Department of Health and Welfare (DHW) will then complete the bottom portion of the application and submit it to the Idaho State Police with the money order. All other forms of payment will not be processed.

2. If you have not completed a criminal history check, go to the website at https://chu.dhw.idaho.gov and click *New Registration* in the left navigation panel.

   a. Do not proceed until you review the *Common Questions* tab for important information about the process. After reviewing the *Common Questions*, go to the *How to Apply* tab for instructions.

   b. For the purposes of the children's developmental disabilities program, the application should be completed with the following information:

      a. Register as an applicant - **Select Applicant.**
      b. Use the employer number assigned by the Department (***it is not your tax ID#***) - **Enter 6255, and click "Add to List".**
      c. Check the type of service **- Home and Community Based Services (HCBS) – Children, and click "Next".**

   c. Submit the criminal history check application.

d. Schedule a fingerprinting appointment immediately after submitting the application. After submitting your application, the buttons at the bottom of your last page will give you the option of choosing to schedule your fingerprint appointment at a DHW location, or mailing in your fingerprints and application.

e. If you have difficulties scheduling an appointment, contact the Central Criminal History Unit toll free number at **1-800-340-1246** for assistance. As long as you schedule a fingerprinting appointment immediately, the background check process does not typically take longer than 45 days.

f. To avoid a delay in your provider application**, do not** submit your provider application to Molina until your criminal history background check is completed.

   a. Your background check is completed when you receive notification from the Criminal History Unit that you have cleared.
   b. Print your **Notice of Clearance** from the Criminal History Unit website and include it with your Medicaid provider application. It will not be mailed to you.

g. Proceed to **Step 2 – Complete an online Medicaid enrollment application.**

Step 2 – Complete an online Medicaid enrollment application

Prior to enrolling as a respite provider, the individual must have a current CPR and First-Aid Certificate, along with a completed background check. The application cannot be processed without including all of this required documentation.

1. Go to the website at www.idmedicaid.com and click *Provider Enrollment* in the left navigation panel. (To request a paper application, contact Molina's Customer Service at (866)-686-4272).

2. Refer to the **User Guide** at https://www.idmedicaid.com/User%20Guides/Forms/AllItems.aspx for step-by-step instructions. For respite instructions click "**New Provider Enrollment Guide - Facility/Agency/Org**."

3. Click *New Provider Enrollment Application*.

4. Fill in all required fields. Respite providers are "atypical providers". When the application asks for information regarding a business, this information is your personal information such as address and phone, etc.

HERE ARE SOME TIPS:

Application Questions:	Select in Drop Down Menu:
Enumerated with NPI Registry as	No NPI (NPI is optional)
Enrollment Type	Facility/Agency/Organization
Tax ID Type	SSN (FEIN is optional)
Provider Type	Agency Professional
Provider Specialty	Respite Care
Population Served	Children **0 – 18** years old

*By enrolling as a respite provider, you understand and agree that by direct receipt of the funds, you are assuming potential tax and employer responsibilities that may include, but are not limited to, worker's compensation, employee withholding, unemployment insurance, and liability insurance.

5. Make sure you complete the Disclosure of Ownership in the general section under forms.
6. Click *Submit*. The system will respond with a case number. Use this case number whenever you contact Molina or DHW about your application.

7. At the end of the enrollment application, download the Fax Cover Sheet. Mail or scan your name and case number, along with the following current information:
   - CPR and First-Aid Certificate;
   - W-9 form; and
   - Criminal History Check Notice of Clearance

Scan and email to:
IDProviderEnrollment@MolinaHealthCare.Com

or **Mail to:**
Molina Medicaid Solutions
P.O. Box 70082
Boise, ID 83707

What happens next?

Do not deliver any services until you have completed the provider enrollment process. Molina will review to assure all the required documentation is submitted. If the application is incomplete you will receive and email indicating the items that are incomplete within 3-5 days from submission. You must then submit any additional documentation until the application is complete.

The process is complete when you receive and email from Rebecca Fadness outlining your requirement references and billing information. You will also get an email approval from Molina with your Medicaid provider number. Once you receive this notice you may start providing and billing for respite services.

Medicaid Guidelines

Guidelines	Section	Description
Provider Handbook	Agency Professional CMS 1500 Instructions	https://www.idmedicaid.com/Provider%20Guide/Provider%20Handbook.aspx Click **Provider Handbook, then Agency Professional** under the Provider guidelines. Respite under section 2.9.2.1 and 2.9.3.1. Rule requirements are located at: http://adminrules.idaho.gov/rules/current/16/0310.pdf listed under Respite in section 663 and 664. Procedure code: T1005 modifier is HA. Rate is $2.05 per unit.
Billing instructions		ICD-9 or Diagnostic code is V60.4 Patient account # is the child's MID number on the plan of service.