

## MEDICAID ENROLLMENT INSTRUCTIONS for Respite Providers

Prior to enrolling as a respite provider, the individual must have a current CPR and First-Aid Certificate, along with a completed background check from Department of Health and Welfare. 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

1. Go to the website at <https://chu.dhw.idaho.gov> and click *New Registration* in the left navigation panel.
2. Do not proceed until you review the *Common Questions* tab for important information about the process.
3. After reviewing the *Common Questions*, go to the *How to Apply* tab for instructions.
4. For the purposes of the children's developmental disabilities program, the application should be completed with the following information:
  - Register as an applicant - **Select Applicant**.
  - Use the employer number assigned by the Department (it is not your tax ID#) - **Enter 6255, and click "Add to List"**.
  - Check the type of service - **Home and Community Based Services (HCBS) – Children, and click "Next"**.
5. Submit the criminal history check application.
6. Schedule a fingerprinting appointment immediately after submitting the application. If you have difficulties scheduling an appointment, contact the Central Criminal History Unit toll free number at **1-800-340-1246** for assistance.
7. As long as you schedule a fingerprinting appointment immediately, the background check process does not typically take longer than 45 days.
8. To avoid a delay in your provider application, do not submit your provider application to Molina until your criminal history background check is completed.
  - Your background check is completed when you receive notification from the Criminal History Unit that you have cleared.
  - 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.
9. As an alternative to completing these steps, if your Health & Welfare background check is less than 3 years old you may be able to transfer it in lieu of completing a new one. Contact the Criminal History Unit at 1-800-340-1246 to discuss completing the transfer. You will then have to follow the appropriate steps to complete this action with the assistance of our program.
10. Proceed to **Step 2 – Complete an online Medicaid enrollment application.**

## Step 2 – Complete an online Medicaid enrollment application

1. Go to the website at [www.idmedicaid.com](http://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. Click *New Provider Enrollment Application*.
3. 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.**”
4. Fill in all required fields. Respite providers are “atypical providers”.

### 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. Click *Submit*. The system will respond with a case number. Use this case number whenever you contact Molina or DHW about your application.
6. At the end of the enrollment application, download the Fax Cover Sheet. Mail or fax 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 (less than 3 years old)

**Fax number:**  
1 (877) 517-2041

**Mailing address:**  
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. The process is complete when you receive an approval letter from Molina with your Medicaid provider number. Once completed, you may start providing and billing for respite services.

### Medicaid Guidelines

Guidelines	Section	Description
Provider Handbook	Agency Professional	<a href="https://www.idmedicaid.com/Provider%20Guide/Provider%20Handbook.aspx">https://www.idmedicaid.com/Provider%20Guide/Provider%20Handbook.aspx</a> Click <b>Agency Professional</b> . Look for the section called “Children’s Developmental Disabilities Redesign Services”.
	CMS 1500 Instructions	Click <b>CMS 1500 Instructions</b> . Look for section “Children’s DD Redesign – Traditional Option”