

How to Update Information on a Medicaid File (Maintenance)

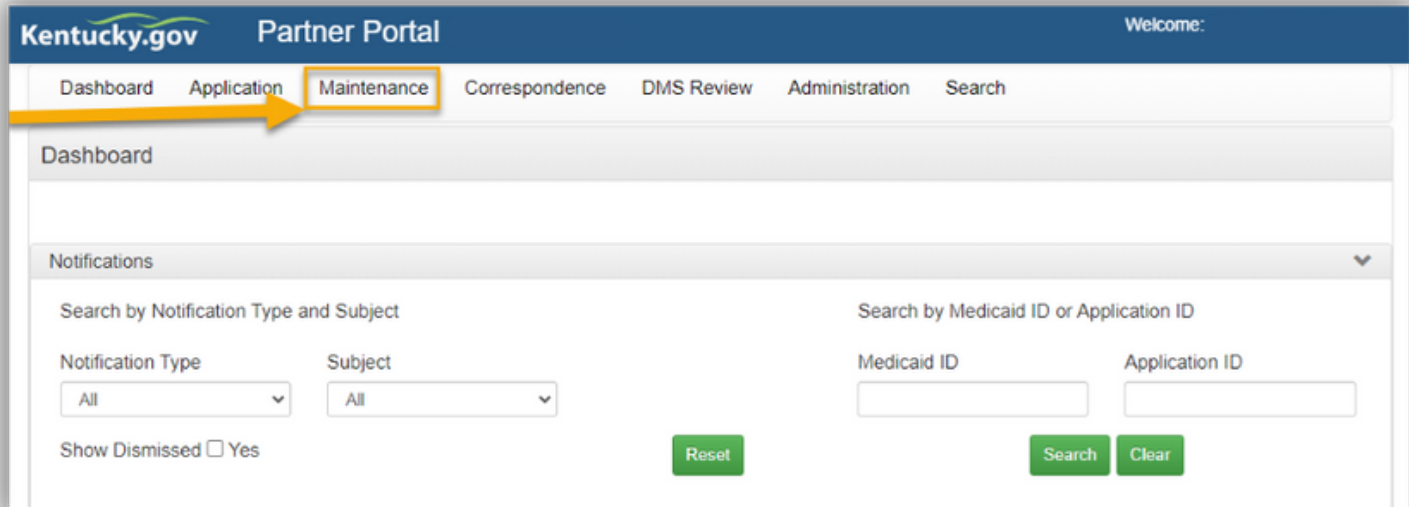
Updating information on an existing Medicaid file can be completed by performing Maintenance (MNT) in Partner Portal.

Common Items Requiring Maintenance:

- Updating License
- Updating Address
- Uploading Documents
- Updating Payment Method
- Updating Contact Information
- Updating Specialties Information

Performing Maintenance in Partner Portal

1. From the Partner Portal Dashboard, locate the Maintenance Tab on the menu bar located at the top of the screen.



The screenshot shows the Kentucky.gov Partner Portal interface. The navigation menu at the top includes Dashboard, Application, Maintenance, Correspondence, DMS Review, Administration, and Search. The Maintenance tab is highlighted with a yellow box and an orange arrow pointing to it. Below the navigation menu, the main content area displays a search interface for notifications, with fields for Notification Type, Subject, Medicaid ID, and Application ID, along with buttons for Reset, Search, and Clear.

Maintenance can also be started from the Dashboard by selecting "KY Medicaid Provider IDs" from the accordion menu, locating the Medicaid ID, and clicking "Start".

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2. Enter the Medicaid ID and click "Search".

Maintenance

- Requests for Maintenance must be processed by DMS before a new request can be submitted. In the event additional maintenance items needs to be submitted, withdraw a pending request by going to the dashboard
- Choose Voluntary Termination to end participation with Kentucky Medicaid
- Revalidation is only required every five years. Select "Revalidation" to update provider file with Kentucky Medicaid
- Select Reapplication (RAP) to reapply for a Medicaid ID that has been End Dated over a year
- Select Reinstatement (RIN) to reinstate a Medicaid ID that was Terminated by Kentucky Medicaid

* Medicaid ID

3. Review the prepopulated information and select "Maintenance" under the "I Want to Perform" section. Enter the effective date of the Maintenance. Click "Continue".

* Medicaid ID

| | | | |
|----------------------------|----------------------|----------------------|---------------|
| Provider Name | NPI | Taxonomy | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | |
| Primary Physical Address | Revalidation Date | | |
| <input type="text"/> | 05/10/2028 | | |
| Medicaid ID Effective Date | Medicaid ID End Date | Status | Status Reason |
| 05/01/2023 | 12/31/2023 | Active | Active |

* I Want to Perform:

Maintenance

Revalidation

Voluntary Termination

Reinstatement

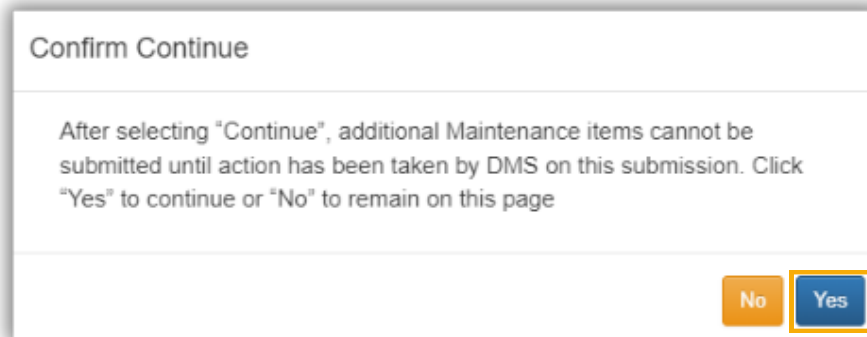
Reapplication

Intent to bill

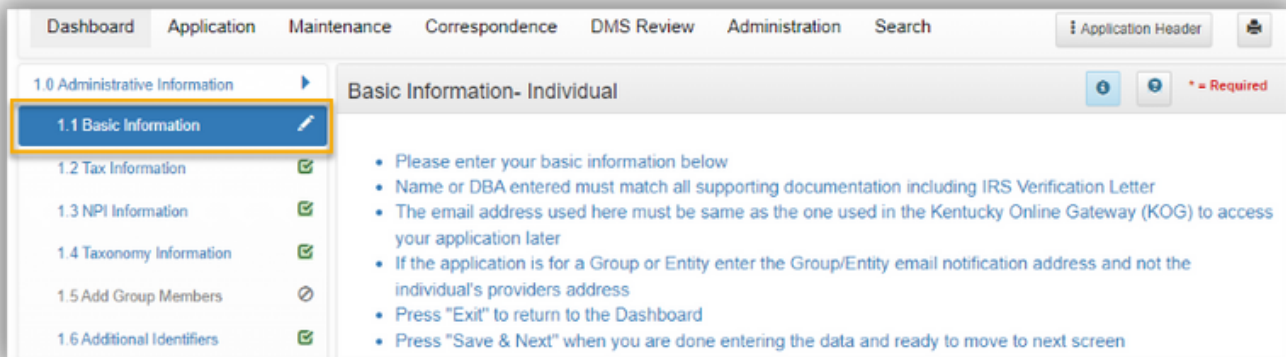
* Requested Effective Date

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4. A Confirm Continue pop up box will appear. To continue with the Maintenance, click "Yes". If users receive an error message after clicking "Yes," they may have another Maintenance in progress or are not linked to the Medicaid ID. If this occurs, please call the Contact Center.



5. After Clicking continue, users will be navigated to the 1.1 Basic Information screen where updates can be made.



When performing Maintenance for the first time, users will need to navigate through each screen. For subsequent Maintenance actions, users can navigate directly to their desired screen.

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6. If any changes have been made during the Maintenance item, navigate to the 8.0 Document Upload screen to upload required documents.
 - Required documents will be marked with a "Y"
 - For assistance on how to upload required documents, please see the [Uploading Documents Job Aid](#).
7. When all information has been updated, navigate to the 10.0 Submit screen.
8. Review and Agree to the Terms of Agreement and Electronically Sign the Maintenance.
 - Authorized Delegates and Legally Authorized Agents are required to submit additional documentation before submitting to DMS.

The screenshot displays the 'Submit' screen in the Kentucky.gov Partner Portal. The page header includes 'Kentucky.gov Partner Portal' and 'Welcome:'. The navigation menu on the left lists various application steps, with '10.0 Submit' highlighted. The main content area contains the following instructions:

- Enter Name as it appears on the application
- For Group or Entity with an Individual owner, owner's signature is required via e-sign
- For Group or Entity with no Individual owner, an officer or board member's signature listed in the application is required via esign
- For Individual providers, the Title is prepopulated based on Enrollment
- For Group or Entity only, select Title from dropdown
- Sign Date is default of today's date
- Click "Esign & Submit" to submit maintenance for approval, "Back" to previous screen or "Exit" to return to Dashboard

Below the instructions, there is a statement: "By entering the name below, I am indicating I have reviewed the KY Medicaid Rules, Regulations, Policy and 42 USC 1320a.7b, and it is my intent to electronically sign the application and represent that all of the information I have provided is true, complete, and accurate."

The form fields include:

- *Electronic Signature: A text input field with a yellow border.
- *Title: A dropdown menu set to "Podiatrist".
- Sign Date: 7/24/2023 3:12:06 PM.

At the bottom of the form, there are four buttons: "Exit", "View MAP-811 PDF", "Back", and "Esign & Submit". The "Esign & Submit" button is highlighted with a yellow border.

For more information on performing Maintenance for a specific task, refer to the Job Aids found on the [Training Resources Web Page](#).