

Medicaid Provider Enrollment Requirements by State

REVISED JANUARY 26, 2021

Purpose

The purpose of this document is to provide information on state-specific provider enrollment requirements for states where Blue Cross and Blue Shield (BCBS) Plans offer Medicaid products. This document will be updated as BCBS Medicaid Plans provide updated requirement information.

Background

State Medicaid agencies contract with BCBS Plans as Managed Care Organizations (MCOs) to provide comprehensive Medicaid benefits on a risk basis. Federal regulations guide these relationships, but the eligible population, covered benefits, and specific rules regarding each state's Medicaid program can vary from state to state. Many state Medicaid programs require providers to enroll as Medicaid providers with the state Medicaid agency before payment can be issued. In some cases, state Medicaid programs requiring provider enrollment will accept a provider's Medicaid enrollment in the state where the provider practices. Information in this document was confirmed by the BCBS Plans that have Medicaid business in the states listed.

Provider Instructions

Please refer to the table below for state-specific Medicaid provider enrollment requirements if 1) a claim submitted for a Medicaid member to whom you provided services has been denied, and 2) you have received notice from a BCBS Plan that the state where the member is enrolled in Medicaid requires provider enrollment in their Medicaid program before the BCBS Plan can issue payment.

Medicaid Provider Enrollment Requirements by State

State	BCBS Plan	Out-of-State Enrollment Requirement	Other State Medicaid Enrollment Accepted?	Detail on Out-of-State Enrollment Requirement Language	Link to Requirement	Link to State Provider Page
California	<p>Anthem Blue Cross of California</p> <p>Blue Shield of California</p>	Yes	No	Requirements: An out-of-state provider does need to register to bill the payer, however a provider can directly bill a <u>non-Medi-Cal eligible</u> patient. .	Reference to Requirements: Provider Enrollment Regulations	Link to Provider Page: Medicaid Provider Enrollment
Delaware	Highmark Blue Cross Blue Shield Delaware	Not Required	Not Applicable (Enrollment Not Required)	Requirements: The website does not address out-of-state providers specifically and Delaware requirements are not well defined for the MCOs. Highmark assumes that since it is not defined, the state does not require provider enrollment.	Reference to Requirements: State Medicaid Provider Portal	Link to Provider Website: Medicaid Provider Enrollment
Hawaii	HMSA	Not Required	Not Applicable (Enrollment Not Required)	Requirements: Out-of-state provider enrollment is not required.	Reference to Requirements: State Medicaid Provider Portal	Link to Provider Page: Medicaid Provider Enrollment
Illinois	Blue Cross and Blue Shield of Illinois	Yes	Yes, but also must enroll with Illinois. (Out-of-state Enrollment is not a replacement)	Requirements: Enrollment is required for any provider submitting a claim for the state of Illinois Medicaid Program.	Reference to Requirements: IL Provider Requirements.	Link to Provider Page: IL Medicaid Provider Website

Blue shading indicates enrollment requirement.

Medicaid Provider Enrollment Requirements by State

State	BCBS Plan	Out-of-State Enrollment Requirement	Other State Medicaid Enrollment Accepted?	Detail on Out-of-State Enrollment Requirement Language	Link to Requirement	Link to State Provider Page
Indiana	Anthem Blue Cross and Blue Shield Indiana	Yes	No	Requirements: Enrollment is required for any provider submitting a claim for the state of Indiana Medicaid Program. If the provider is not registered with the state of Indiana, the encounter will reject.	References to Requirements: Provider Reference Module: Provider Enrollment (Section 2 Provider Eligibility and Enrollment Requirements)	Link to Provider Page: Indiana Medicaid Provider Website
Kentucky	Anthem Blue Cross and Blue Shield Kentucky	Yes	Yes, but also must enroll with Kentucky (Out-of-state Enrollment is not a replacement)	Requirements Providers must have a Kentucky Medicaid ID in order to be paid.	Reference to Requirements: KY Provider Enrollment Website	Link to Provider Page: KY HFS Provider Website
Michigan	Blue Cross Blue Shield of Michigan	Yes	No	Requirements: All providers furnishing services to Michigan Medicaid beneficiaries will be required to enroll through an online portal as a requirement for reimbursement.	References to Requirements: <ul style="list-style-type: none"> • MI Provider Manual (Section 7.3) • Provider Bulletin 	Link to Provider Page: MI Medicaid Provider Website
Minnesota	Blue Cross and Blue Shield of Minnesota	No	Not Applicable (Enrollment Not Required)	Requirement: Providers who submit claims to Minnesota Medicaid Managed Care Organization (including as BCBS of MN) are required to enroll with Minnesota DHS.	Reference to Requirements: MN Provider Enrollment Website (Providers Located Outside of Minnesota Section) Out-of-State Providers	Link to Provider Page: MHCP Enrolled Providers Website

Medicaid Provider Enrollment Requirements by State

State	BCBS Plan	Out-of-State Enrollment Requirement	Other State Medicaid Enrollment Accepted?	Detail on Out-of-State Enrollment Requirement Language	Link to Requirement	Link to State Provider Page
New Jersey	Horizon Blue Cross and Blue Shield	Yes, for certain services	<i>When required for certain services:</i> Yes, but also must enroll with New Jersey. (Out-of-state Enrollment is not a replacement.)	<p>Requirements:</p> <ul style="list-style-type: none"> New Jersey does not require providers to enroll/register with Medicaid prior to rendering services or being reimbursed by Medicaid HMOs (such as Horizon BCBS). For carve out services (not usually covered by Medicaid) provided by any Fee-for-Service provider submitting a claim to the state of New Jersey Medicaid Program, enrollment is required. 	Reference to Requirements: New Jersey Medicaid Administration Manual (Title 10 Chapter 49 Subchapter 3)	Link to Provider Page: New Jersey Medicaid Provider Portal
New Mexico	Blue Cross and Blue Shield of New Mexico	Yes	Yes, but also must enroll with New Mexico. (Out-of-state Enrollment is not a replacement)	Requirements: Enrollment is required for any provider submitting a claim for the state of New Mexico Medicaid Program.	Reference to State Medicaid Page: NM Medicaid General Provider Policies (Out-of-State and Border Area Providers)	Link to Provider Page: New Mexico Medicaid Provider Portal
New York	Healthnow Excellus Blue Cross Blue Shield	Not Required	Not Applicable (Enrollment Not Required)	Requirements: Enrollment in New York State Medicaid is not required for out-of-state professional or institutional providers to bill an MCO in New York State.	Reference to Requirement: Link to provider Manual	Link to Provider Page: eMedNY Provider Website

Medicaid Provider Enrollment Requirements by State

State	BCBS Plan	Out-of-State Enrollment Requirement	Other State Medicaid Enrollment Accepted?	Detail on Out-of-State Enrollment Requirement Language	Link to Requirement	Link to State Provider Page
Pennsylvania	Independence Blue Cross	Yes	Yes, but also must enroll with PA (Out-of-state Enrollment is not a replacement)	Requirements: Out-of-State providers must enroll in Pennsylvania’s Medicaid program, but must be enrolled first in their home state. Out-of-state practitioners must be licensed and currently registered by the appropriate agency in their state and they must provide documentation that they participate in that state's Medicaid program. The Plan’s Prior Authorization line operators will be trained to insist that out of area providers enroll.	Reference to Requirement: Pennsylvania Enrollment Information	Link to Provider Page: Pennsylvania Provider Website
Puerto Rico	Triple S	Not required.	Not applicable (Enrollment Not Required)	Requirements: Triple-S Salud (Puerto Rico) does not require providers to enroll/register with Medicaid prior to rendering services or being reimbursed by Medicaid. Reimbursement based on local Medicaid Coverage.	Reference to Puerto Rico Medicaid Page: Puerto Rico Medicaid	Link to Provider Page: Provider Portal Website
South Carolina	Blue Cross and Blue Shield of South Carolina	Yes – for services other than emergency that have prior authorization.	No	Requirements: For services other than emergency that require prior authorization, the out-of-state provider must confirm, in writing, that he or she will enroll in the South Carolina Medicaid program and will accept Medicaid reimbursement as payment in full.	Reference to Requirements: Provider Enrollment Information	Link to Provider Page: Healthy Connections Medicaid Provider Information

Medicaid Provider Enrollment Requirements by State

State	BCBS Plan	Out-of-State Enrollment Requirement	Other State Medicaid Enrollment Accepted?	Detail on Out-of-State Enrollment Requirement Language	Link to Requirement	Link to State Provider Page
Tennessee	Blue Cross Blue Shield of Tennessee	Yes	No	Requirements: New TennCare/ Medicaid providers need to register.	References to Requirement: Provider Registration	Link to Provider Page: TennCare Providers
Texas	Blue Cross and Blue Shield of Texas	Yes	Yes, but also must enroll with TX STAR Program. (Out-of-state Enrollment is not a replacement)	Requirements: Enrollment is required for any provider submitting a claim for the state of Texas Medicaid Program	Reference to Requirement: Texas Medicaid Provider Procedures Manual (Volume I Section 1)	Link to Provider Page: Provider Enrollment Website
Virginia	Anthem Blue Cross and Blue Shield Virginia	Yes	Yes Enrollment in state Medicaid Program where provider practices is also required.	Requirement: Billing, Rendering, and Attending Providers need to be registered on the master file with the state. For physicians that operate out-of-state (more than 50 miles from the VA border) you will also need to attest to enrollment in your resident state Medicaid program.	Reference to Requirement: Provider Enrollment Tutorial	Link to Provider Page: DMAS Provider Services DMAS Provider Resources
Wisconsin	Anthem Blue Cross and Blue Shield Wisconsin	Not Required	Not Applicable (Enrollment Not Required)	Requirement: Out-of-state providers who do not meet the requirements for border state enrollment may be reimbursed for non-emergency services provided to a Wisconsin medical assistance recipient through a prior authorization, under Wisconsin state law DHS 107.04 .	Reference to Requirement: Wisconsin State Legislature Rule for Out-of-State Providers	Link to Provider Page: Forward Health Provider Links

