



ISSUE DATE December 29, 2022	EFFECTIVE DATE February 27, 2023	NUMBER 99-22-11
SUBJECT Reinstatement of Provider Enrollment Requirements		BY  Sally A. Kozak, Deputy Secretary Office of Medical Assistance Programs

IMPORTANT REMINDER: All providers must revalidate the Medical Assistance (MA) enrollment of each service location every 5 years. Providers should log into PROMISe to check the revalidation dates of each service location and submit revalidation applications at least 60 days prior to the revalidation dates. Enrollment (revalidation) applications may be found at: <https://www.dhs.pa.gov/providers/Providers/Pages/PROMISe-Enrollment.aspx>.

PURPOSE:

The purpose of this bulletin is to inform providers that the Department of Human Services (Department) will reinstate provider enrollment requirements that were in place prior to the COVID-19 public health emergency (PHE).

SCOPE:

This bulletin applies to all providers enrolled in or seeking to enroll in the Medical Assistance (MA) Program.

BACKGROUND/DISCUSSION:

In response to the COVID-19 pandemic, the Department requested provider enrollment flexibilities under Section 1135 of the Social Security Act. The Centers for Medicare & Medicaid Services (CMS) approved the Department's Section 1135 request for provider enrollment flexibilities on March 27, 2020. Providers were advised of these flexibilities in [Provider Quick Tip 240](#), which was issued on April 9, 2020.

The CMS approved flexibilities allowed the Department to enroll providers provisionally and temporarily in the MA Program without payment of the enrollment application fee; without the completion of fingerprint-based background checks or site visits for providers assigned to the high categorical risk level; and without the completion of a site visit for providers assigned to the moderate categorical risk level. The Department implemented these provider

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:

The appropriate toll-free number for your provider type.

Visit the Office of Medical Assistance Programs website at:

<https://www.dhs.pa.gov/providers/Providers/Pages/Health%20Care%20for%20Providers/Contact-Information-for-Providers.aspx>.

enrollment flexibilities to ensure that MA beneficiaries had access to providers during the PHE.

The mitigation measures that were imposed in response to the COVID-19 pandemic have been lifted. In addition, the Department has reinstated some of the requirements that were in place prior to the COVID-19 pandemic, including prior authorization requirements and provider revalidation. The Department will end the provider enrollment flexibilities that allowed providers to enroll provisionally and temporarily in the MA Program, effective February 27, 2023, and will reinstate all of the provider enrollment requirements that were in place prior to the PHE.

PROCEDURE:

Effective February 27, 2023, the Department will reinstate the requirements for provider payment for enrollment application fee, fingerprint-based backgrounds and site visits for provider. Providers temporarily enrolled in the MA Program during the PHE who did not satisfy the enrollment requirements that were suspended under the Section 1135 flexibilities must satisfy the enrollment requirements as described below.

Providers submitting enrollment applications on and after February 27, 2023, must pay the enrollment application fee as specified in [MA Bulletin 01-16-14](#), "ACA Enrollment Application Fee". Providers enrolled in the MA Program who requested and received hardship exemptions to the application fee requirement by identifying the PHE as the basis for the request, will have to complete all enrollment requirements, including payment of the enrollment application fee, during revalidation to remain enrolled in the MA Program on or after February 27, 2023. With the reinstatement of the enrollment requirements, a provider seeking an exemption from paying the enrollment application fee must submit the documentation described in MA Bulletin 01-16-14.

Providers assigned to the high categorical risk level that submit enrollment applications on and after February 27, 2023, must complete fingerprint-based criminal background checks and undergo a site visit as specified in [MA Bulletin 99-16-13](#), "Assignment of ACA Categorical Risk Levels and the Implementation of Site Visits". Providers assigned to the high categorical risk level and provisionally enrolled in the MA Program during the period of March 1, 2020, through February 27, 2023 without fingerprint-based criminal background checks or a site visit will receive a 30-day advance notice from the Department advising them that they must submit fingerprint based criminal background checks by the date specified in the letter and that the Department or its contractor will be conducting a site visit within the next 30 days. Failure to submit fingerprint based criminal background checks will result in closure of the provider service locations in PROMISE. Further, if the Department is not able to verify through the site visit that the information in the enrollment application is accurate (e.g. the service location is not in operation) or the provider does not cooperate with the site visit, this will result in the closure of the provider service locations in PROMISE.

Providers assigned to the moderate categorical risk level that submit enrollment applications on and after February 27, 2023, must undergo a site visit as specified in [MA Bulletin 99-16-13](#). Providers assigned to the moderate categorical risk level and provisionally

enrolled in the MA Program during the period of March 1, 2020, through February 27, 2023 without a site visit will receive a notice from the Department advising them that the Department or its contractor will be conducting a site visit within the next 30 days. If the Department is not able to verify through the site visit that the information in the enrollment application is accurate (e.g. the service location is not in operation) or the provider does not cooperate with the site visit, this will result in the closure of the provider service locations in PROMISe.

OBSOLETE PROVIDER QUICK TIP:

This bulletin obsoletes [Provider Quick Tip 240](#), *Provider Enrollment and Revalidation Changes During the COVID-19 Emergency*.

RESOURCES:

For questions regarding provider enrollment, revalidation, enrollment fees, site visits, or criminal background checks please contact 1-800-537-8862, option 2, option 4, option 2.

For questions regarding claims please contact 1-800-537-8862, option 2, option 6, option 1.

Providers should continue to check the Department of Human Service's COVID-19 [website](#) and the Department of Health's [website](#) for updates.