

MEDICAID WAIVER PROVIDER FILE MAINTENANCE for CDC+ CONSULTANT REGISTRATION

Cover Sheet (Checklist)

CDC+ CONSULTANT [Direct Service Provider]

NAME: _____

DD/HCBS PROVIDER NUMBER: _____

[9-digit Medicaid Provider Number used for Waiver Support Coordination billing.]

ARE YOU A SOLO PRACTITIONER? YES NO

IF **NO**, PROVIDE AGENCY NAME: _____

& AGENCY'S *CDC+* GROUP NUMBER _____

[9-digit Medicaid Provider Number used for *CDC+ Consultant Services* billing.]

CDC+ AGENCY [Group Provider]

GROUP NAME: _____

DD/HCBS GROUP NUMBER: _____

[9-digit Medicaid Provider Number used for *Waiver Support Coordination* billing.]

This packet includes:

REQUIRED ITEMS	SOLO PRACTITIONER	TREATING PROVIDER	GROUP PROVIDER
Medicaid Waiver Provider File Maintenance Request Form			
APD-issued Certificate of Completion for CDC+ New Consultant Training			
CDC+ Consultant Registration Form			

Area _____ Contact for this Data _____ Phone Number (_____) _____

APD CENTRAL OFFICE USE ONLY

Date Received by APD _____ Date sent to EDS _____ Received by CDC+ Unit _____

CDC+ Consultant/Agency Registration Process

Step 1 - Qualify

1. Consultant (Solo Practitioner and Treating Provider)
 - must be a Waiver Support Coordinator in good standing, as determined by the APD Area Office, and
 - must have completed CDC+ Introductory Training and received a Certificate of Completion from either the APD Central Office or Area Office¹.
2. Group (Agency)
 - must employ at least 2 Waiver Support Coordinators who have attended CDC+ Introductory Training, received a Certificate of Completion, and submitted a Medicaid Waiver Provider File Maintenance Request Form to obtain a Specialty Code for Consumer Directed Care Plus.

Step 2 – Complete File Maintenance

Effective immediately, consultants will use the same Medicaid Waiver Provider Number that was issued to them by the Medicaid fiscal intermediary for Waiver Support Coordination. In order to be able to provide and bill for consultant services, consultants must submit a Medicaid Waiver Provider File Maintenance Request Form to obtain a Specialty Code for CDC+. Consultants serving a CDC+ applicant will bill for support coordination services until the applicant's first Purchasing Plan has been approved and processed, at which time the consultant will begin billing for consultant services.

The Medicaid Waiver Provider File Maintenance Request Form is to be completed as follows:

1. Solo Practitioners, Treating Providers, and Group (Agency) Providers complete Provider Number and Provider Name, check "Approve" box, check the box for "068 – Consumer Directed Care", and enter Effective Date.
2. Treating Providers additionally check "Group Membership", "Add" and enter the Group Medicaid ID, Group (Agency) Provider Name, and Effective Date.

Step 3 – Sign CDC+ Memorandum of Agreement

A Memorandum of Agreement must be executed between each Solo Practitioner or Group (Agency) and the Area Administrator, or designee, of each APD Area in which services are to be provided. The Memorandum of Agreement is kept at the APD Area Office.

Step 4 – Complete the appropriate Consultant Registration Form

- CDC+ Registration - Solo Practitioner form
- CDC+ Registration – Agency-Affiliated form
- CDC+ Agency Registration form

Step 5 – Submit Consultant Registration Packet

The Area office completes the CDC+ Consultant Registration Cover Sheet (Checklist), attaches the three required items, and submits the package to the APD Provider Enrollment Unit at the Central Office for processing. This will result in the specialty code being added to the WSC's Waiver record in FMMIS and the consultant's data being entered into the CDC+ Consultant Registry.

¹ The CDC+ Certificate of Completion is issued by the CDC+ Trainer. If applicant attended the required training but did not receive a certificate, the CDC+ Area Liaison may confirm attendance and training completion by contacting the CDC+ trainer, and if confirmed may issue the required certificate. A support coordination agency can be enrolled as a Medicaid Group Provider for consultant services when the agency employs at least 2 trained CDC+ consultants. If an agency has only one enrolled consultant, that consultant is considered (and must bill as) a solo practitioner until such time as another consultant employed by that agency is enrolled in Medicaid and the agency becomes a group provider for consultant services.