

# **ePREP for IEP/IFSP Service Providers**

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# Focus

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- This presentation is intended for providers who bill Maryland Medicaid for Individualized Education Program (IEP) and Individualized Family Service Plan (IFSP) services.
- Such providers include Local Lead Agencies (LLAs), Local Education Agencies (LEAs), and nonpublic schools.

# Focus Continued

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- The material covered in the presentation includes instructions for both administrators at the aforementioned educational facilities, as well as individual practitioners required to enroll in the Medicaid program for the facility to receive reimbursement, per federal requirements.
- Facilities are required to enroll licensed practitioners who will be listed as Referring providers on claim submissions. Such providers are called “Rendering” providers in ePREP.

# Welcome to ePREP!

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**ePREP** stands for **e**lectronic **P**rovider **R**evalidation and **E**nrollment **P**ortal.  
Here are some of the Benefits of using ePREP:

- Applications can be filled out electronically instead of by paper
  - Easier/Quicker to fill out
  - Only the necessary fields for the type of application are generated
  - Shorter processing times
- Access to your Maryland Medicaid information (now called an Account in ePREP)
  - You can see the status of your account (Active, Suspended or Inactive)
  - You can see your affiliations
  - You can see all of your demographic information

# Helpful Resources

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- Maryland Medicaid has created a website with documents, checklists and webinars that will help you with ePREP

[health.maryland.gov/eprep](https://health.maryland.gov/eprep)

# Helpful Resources Cont.

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- **Resources within ePREP**

- **Lucy** – Your enrollment buddy and guide appears on most pages to give you helpful information.
- **Lucy Hover Help** – When you click on or hover over an action item (textbox, drop down, Radio button), Lucy will pop up again with more information on what and how to enter information
- **In Context Tutorials** – If you see a filmstrip icon you can click on it to view a short 3 to 5 minute video explaining what needs to be done .



If you are an authorized signer, use your legal first name



# ePREP Terminology – Profiles, Roles, and Accounts —

- **User Profile:** Your individual username, used to log in to ePREP.
- **Business Profile:** A centralized environment that houses your enrolled Medicaid entity accounts and applications. A user may have access to one or more business profiles.
- **Account:** ePREP record for an enrolled provider, associated with a single NPI, provider type, practice location, and entity Medicaid (MA) number.
- **Linking:** Connecting your Business Profile to an existing account so that you can view and manage it.

# Linking providers to groups

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- It is very important to note that when setting up accounts, you should **NEVER** link a rendering provider's NPI to the same Business profile as the group or facility.
- Each rendering provider should have a separate email address, User Profile, and Business Profile.

# ePREP Application Types ---

## Application Types

- **New Facility:** Application to enroll a new facility to Maryland Medicaid.
- **New Rendering:** An application to affiliate a rendering provider who is new to Maryland Medicaid to an existing facility with Maryland Medicaid.
- **Supplemental:** A change in a provider's account information or required documenting, such as a correspondence address or an updated professional license.
- **Change of Ownership (CHOW):** Application to add a new Tax Identification Number (TIN) or Employment Identification Number (EIN) to Business Information form.

# ePREP Application Types Cont. ---

## **Revalidation**

- Application to renew your Medicaid enrollment every 5 years
- Scheduled automatically in ePREP when they are due. You may only submit a reval when you receive a notification that it is time to do so.
- You will receive a printed reval notification in the mail for your initial notification. After your ePREP account is set up, you will receive electronic reval notifications.

# Signing Up

**ePREP PORTAL**

Bulletins Contact Us **Sign Up** Login

*Welcome to ePREP!*  
Let's Sign In

Username

E-mail address

Don't have a User Profile? **Sign Up**

**Maryland**  
DEPARTMENT OF HEALTH

# Sign Up (User Profile)

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## Welcome to ePREP!

My name is Lucy. I'm here to help you create your ePREP User Profile. This profile allows you to securely login to the ePREP Portal at any time (24/7) from an up-to-date web browser: Chrome, Firefox, Safari, IE Explorer.

Let's get started!



I'm not a robot



This reCAPTCHA is for testing purposes only. Please report to the site admin if you are seeing this.

reCAPTCHA  
Privacy - Terms

By selecting Next, you agree to the [Terms and Conditions](#).



# Verification Code

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- Once you enter your User Profile information and select the method of verification, ePREP sends a six digit verification via email, text, or a phone call if selected to ensure a secure and safe login.
- If you select the email verification method, please check your inbox for an email from [ePREP-MDH@dharbor.com](mailto:ePREP-MDH@dharbor.com) with a subject of ***ePREP Verification Code***.
- You may have to check your Spam, Junk, Trash or Clutter folder to find the six digit verification code.

# Sign up verification



*Last step. Select the location where I can send you the 6-digit verification code. Once you enter the code, select Verify. Once the correct code is entered, I will log you in.*

- Send text message to my phone number
- Call my phone number
- Send to my recovery email address

BACK

NEXT



From the verification options provided, the top two options will require a phone number, which will be used to send out a text message or phone call with the area code: **1(850)**.



# Email Verification

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Subject: **ePREP Verification Code**  
To: **joe**  
From: **ePREP-MDH@dharbor.com**  
Received: **Wed Feb 12 2020 11:01:13 GMT-0500 (Eastern Standard Time)**  
Sending IP: **103.47.204.66**  
Parts: **html**  
Attachments: [Subscribe to receive Attachments]

[Back To Inbox](#)

Your code is **ePREP-113881**

ePREP Portal Administration

Please note: This email was sent from an auto-notification system that cannot accept incoming email. Please do not reply to this message.

# Verification Code

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*I'm sending the verification code to this location:*

*Verify Your Phone Number:*

(667) 305-5010

Enter 6 digit Verification Code

ePREP-922161

BACK CALL INSTEAD VERIFY

Once the six digits verification code is received and entered, Clicking on “VERIFY” completes the sign up process.

# Creating Business Profile (NPI verification)

**ePREP PORTAL**

Let's Create Your Business Profile

Enter NPI or Provider ID

Verify NPI/Provider ID

Great! It looks like you have one or more existing Maryland Medicaid accounts. If you want to change the existing Business Name do so, before you select *Create Business Profile*

Existing Business Name

Charles Choh MD

Cancel Create Business Profile

As first time users on ePREP, once the sign up process is complete, and we successfully login to the accounts, verifying the NPI numbers and existing business names is required to proceed with creating the business profile.

# Verifying Existing Business Profile

Let's Create Your Business Profile

*You have 3 chances per session to answer correctly.*

**First Question**

What are the last 4 digits of your SSN? ▾

Answer

\*\*\*\*

Correct Answer

**Second Question**

What is the year when you were enrolled with Maryland Medi... ▾

Answer

\*\*\*\*

Correct Answer

**Third Question**

What is your professional license number? ▾

Answer

\*\*\*\*\*

Correct Answer



**Congratulations!!**

You had successfully linked your account(s) to your Business Profile.

To see your account(s) now [click here](#) or select continue to go



# Home Page

The screenshot shows the ePREP PORTAL home page. At the top, there is a dark blue navigation bar with the ePREP PORTAL logo on the left and user information on the right. Below the navigation bar are menu items: My Home, Applications, Accounts, My Tools, and Help. The main content area features a 3D isometric illustration of a city with buildings labeled 'LEARNING CENTER', 'MY TOOLS', 'MESSAGE CENTER', and 'MY ACCOUNTS'. A virtual guide character, Lucy, is shown in a thought bubble on the left. A speech bubble from Lucy contains the following text: 'Hello and Welcome! I'm Lucy, your virtual guide. I'll assist you through ePREP on your journey to become a Maryland Medicaid provider. This is the Welcome page. Here you'll have quick access to different parts of ePREP Portal. As you explore this page by hovering over different items, I'll tell you more about where each item will take you.' Two red arrows point from text boxes to the user profile icon in the top right corner. The first text box says 'This is your Business Profile' and the second says 'This is your User Profile'.

**ePREP PORTAL**

My Home Applications Accounts My Tools Help

Hello and Welcome! I'm Lucy, your virtual guide. I'll assist you through ePREP on your journey to become a Maryland Medicaid provider. This is the Welcome page. Here you'll have quick access to different parts of ePREP Portal. As you explore this page by hovering over different items, I'll tell you more about where each item will take you.

**MY TOOLS**

**LEARNING CENTER**

**MESSAGE CENTER**

**MY ACCOUNTS**

This is your Business Profile

This is your User Profile

# Accessing Accounts

Charles CARE CTRS INC: Accounts Dashboard

The dashboard features two donut charts. The left chart, titled 'Accounts: 1', is blue and shows 1 'Current' account. The right chart, titled 'Affiliations: 0', is grey and shows 0 'Current' affiliations. A 'Link Accounts' button is located in the top right. Below the charts is a table with columns for Account ID, Provider ID, Status, Provider Name, Provider Type, Account Type, NPI, Begin Date, License State, Service Address, and Actions. A red circle highlights the 'Add Affiliation' icon in the Actions column of the first row.

Account ID	Provider ID	Status	Provider Name	Provider Type	Account Type	NPI	Begin Date	License State	Service Address	Actions
800000000		36 - Active Pay	URGENT CARE CTRS INC	Urgent Care Center	Facility		05/01/2016		BALTIMORE AVENUE, I MD, 21000-0000	

Accounts: 1

Affiliations: 0

The “Add Affiliation” symbol will enable viewing and adding new rendering providers

Accounts from the menu bar populates facility’s information

# Eligible Rendering Provider Types ---

- Speech Language Pathologists
- Physicians (Psychiatrists)
- Psychologists (Clinical)
- Licensed Certified Social Workers – Clinical
- Nurse Practitioners
- Nurse Psychotherapists
- Audiologists
- Physical Therapists
- Occupational Therapists
- Speech Language Pathologists
- Dietitians/Nutritionists

# Ineligible Rendering Provider Types ---

- Teachers
- Registered nurses
- Social workers (unlicensed)
- School psychologists (unlicensed)
- Physical Therapy Assistants
- Occupation Therapy Assistants
- Speech Language Pathology Assistants

# Affiliating Rendering Providers

The image shows a screenshot of a web application interface. At the top, a blue header bar contains the text "Create Affiliation Application" and a close button. Below this, a white pop-up form is displayed with the instruction "Enter the provider's NPI you would like to affiliate with:". The form includes a text input field labeled "National Provider Identification (NPI)" with a "+ Verify" button to its right. A red error message "value is required" is visible below the input field. A red arrow points from the text "Enter Affiliating NPI" to the input field. In the background, the "Account Affiliations" page is visible, showing a list of affiliations for "CATON MANOR" at the service location "3330 WILKENS AVENUE, BALTIMORE-MD, 21229-4610". A red circle highlights the "Add Affiliation" button, with a red arrow pointing to it from the text box on the right. Below the button is a search bar and a table with columns: "Account ID", "Rendering Name", "NPI", "Provider Type", "Affiliation Status", and "Actions". The table currently shows "No data available in table". At the bottom, there is a "Showing" dropdown set to "5" and "records per page".

Clicking on “Add Affiliation” will bring up a pop-up screen where you can enter the affiliating NPI. You will be able to add the Licensed Practitioners NPI to affiliate with the facility. After you enter the NPI, click “verify.”

# Affiliating Rendering Providers

**PORTAL**

## Create Affiliation Application

Enter the provider's NPI you would like to affiliate with:

National Provider Identification (NPI)

The NPI you entered is not enrolled in Maryland Medicaid. Would you like to start a new application for this rendering provider.

Yes  No

To remove an affiliation, please select the trash icon from the provider record you would like to disaffiliate. You will then submit a Disaffiliation form.

Once the provider's NPI is verified, start a new application for the rendering provider by checking "Yes" then Continue.

# Verifying Providers Information

My Home **Applications** Accounts My Tools - Help

Start Application Provider Type Summary

We found the following records from NPPES. The following records will be used to create a new rendering affiliation application. Select Continue to create an affiliation application using this record or Cancel to close this window.

National Provider Identification (NPI)	1851509285
Type	1- -----
First name	MOLLY
Last name	
Taxonomy Code(s)	235Z00000X
NPPES address (registered)	5458 TOWN CENTER RD STE 10 BOCA RATON, FL 334861026

✕ Cancel

Continue →

- Confirm the Licensed Practitioner's name is correct on the next page before selecting continue at the bottom right corner. It is okay if the taxonomy code is not correct or cannot be confirmed at this point.

# Provider Type

My Home   **Applications**   Accounts   My Tools ▾   Help

Start Application   **Provider Type**   Sum

Now, choose one of the following options and specify your **provider type** from the drop-down list. Then select **Continue** when you're finished.

Select your Rendering provider type

- [Select a Provider Type]
- ABA Services
- Audiology Provider
- Certified Professional Counselor
- Nurse Practitioner
- Occupational Therapist
- Physical Therapist
- Physician
- Physician Assistant
- Social Worker
- Speech/Language Pathologist**

**Continue** →

ePREP Portal  
Version: 4.10.5.9 Build: #556  
© Copyright 2018 Digital Harbor Inc. All rights reserved.

• Select the Rendering provider type from the drop down menu and Click “Continue” to proceed to the application.

# Verifying Group and Rendering Provider Information



Great! I now have all the information I need to create your customized application.  
Let's review the information you provided to avoid any mistakes.

## Affiliate Application Summary

The following Affiliate application will be created:

### Group Billing Provider Information

National Provider Identifier (NPI)	[REDACTED]	✓
Provider legal name	HIGH ROAD SCHOOL	✓
Provider type	Local Education Agencies/Local Lead Agency	✓
Service address	[REDACTED]	✓

### Rendering Provider Information

National Provider Identifier (NPI)	[REDACTED]	✓
Provider legal name	[REDACTED]	✓
Provider type	Speech/Language Pathologist	✓
Application type	New Rendering application	✓

In order to submit this Affiliate application, electronic counter signatures are required from both the Rendering provider and Group Billing provider.

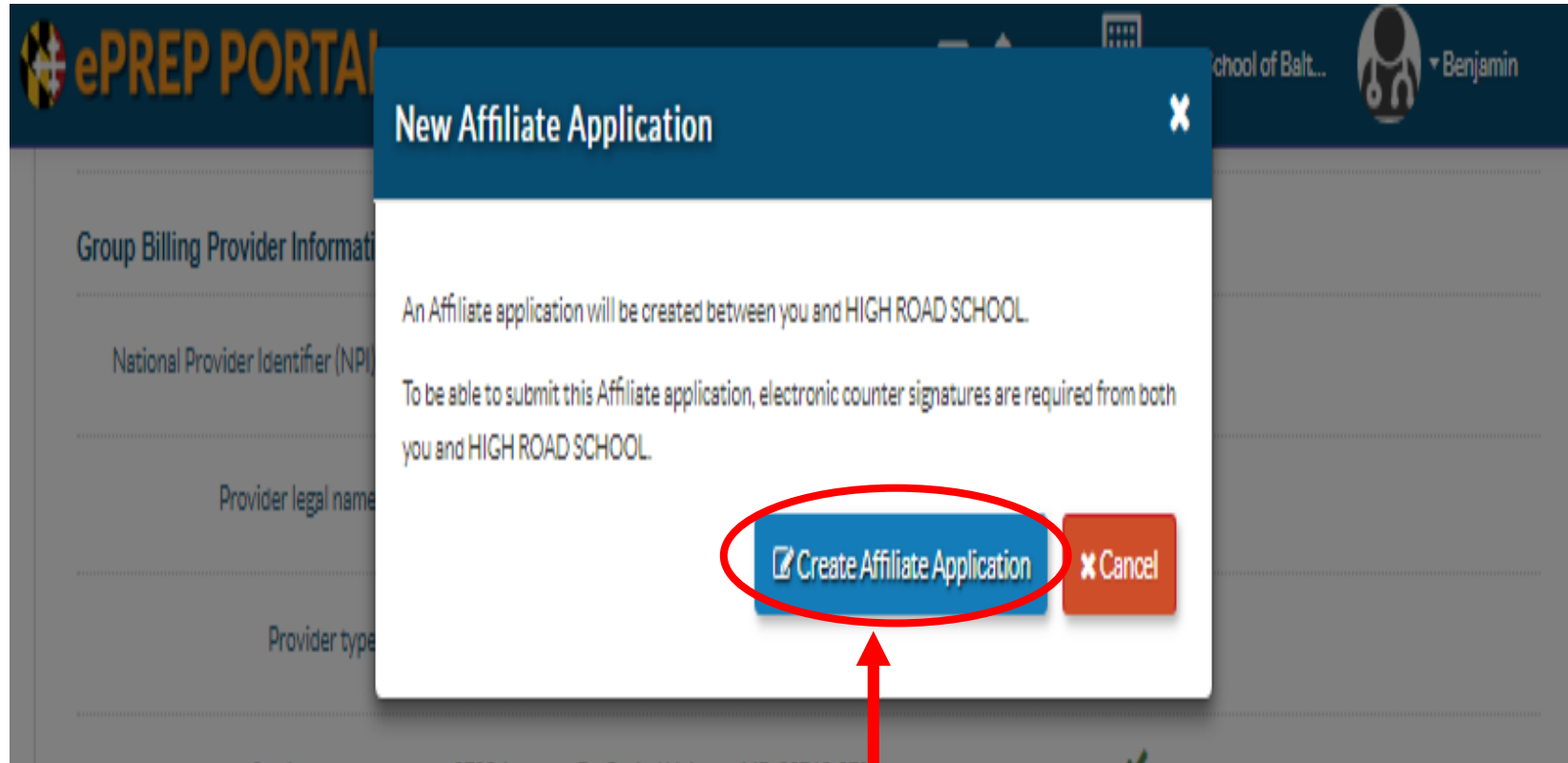
← Previous

Continue →

- Confirm the information is correct for both the Facility Billing Provider and the affiliated Rendering Provider information.
- It will be important for both the administrator in charge of Facility Provider information and the Rendering provider to be consistent with the submitted information.
- Click “Continue” to confirm information and proceed.

# Creating New Affiliation Application

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- Select “Create Affiliate Application.” from pop up window, and the new application will be generated.

# Completing the Application

Group Info Expand All

- Business Information
- Profile Information
- Service Address
- Group Signature

Rendering Info Expand All

- Getting Started
- Profile Information
- Business Information
- Practice Information
- Disclosure Information
- Rendering Signature
- Submit Application

Profile Information

Hi HIGH ROAD SCHOOL. Please review the accuracy of the information belonging to the affiliator application.

Account ID		✓
Provider name	HIGH ROAD SCHOOL	✓
Provider type	Local Education Agencies/Local Lead Agency	✓
National Provider Identification (NPI)		✓

Continue →

Keep an eye on the completion prompts to guide you. Make sure all the circles are filled in

- Filled circles indicate the section is completed.
- Half circles mean the section is not completed.
- Empty circles indicate sections not started.

# Completing the Application Cont.

To complete the application, you will need to send the application in-progress to the rendering provider for the provider to sign. You may first fill in the rendering provider information for your affiliated provider, but you will *not* be able to sign the application for the Rendering Provider

Provider Type: Speech/Language Pathologist 76% 100%

Application ID: 1811HQ7F

Creation Date: 11/30/2018

Package Type: RenderingProvider

Group Info

- Business Information
- Group Signature

Rendering Info

- Getting Started
- Profile Information
- Business Information
- Practice Information
- Disclosure Information
- Rendering Signature
- E-Signature**

Declarations E-Signature Summary

Oops! It seems that you're trying to complete the Rendering Info section as the Group.

If you need help with this section, please watch this In-Context Tutorial about e-signing a Rendering application.

This section needs to be completed by the Rendering provider with whom you are affiliating.

To notify the Rendering provider that they need to sign this section of the application, please **Send to Rendering** above to transfer the application over to the Rendering provider to sign and submit this application.

Previous Continue

- When you are ready for the rendering provider to review and sign the application, click **“Send to Rendering.”** link in the text of the page.

# Rendering Provider Sign up

**After the Facility Administrator sends the invitation to the Rendering Provider. The Rendering Provider will receive an email, with the subject below.**

ePREP Portal - Important Message From Maryland Department of Health

ePREP Portal Notification [ noreplymd@dharbor.com ]

Thu Nov 29 2018 11:57:10 GMT-0500 (Eastern Standard Time) ✕

Dear ,

High Road School, requests that you become affiliated with their organization. You must first become a member of the ePREP Portal. To self-register and create a Business Profile, select the hyperlink below. This message request will be good for 30 days.

[Self-registration](#)

Sincerely,  
High Road School

To review Maryland Department of Health's Internet Policies and Procedures select, [MDH Policy/Procedure](#)

Please note: This e-mail was sent from an auto-notification system that cannot accept incoming e-mail. Please do not reply to this message.

CONFIDENTIALITY NOTICE: The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

- In the body of the text, select the “Self-registration” link to start the sign up process for the rendering provider

# Rendering Affiliation Invitation

**Rendering Affiliation Invitation**

Date: Thu 11/29/2018 01:00 PM

**From :** High Road School

Subject: Rendering Affiliation Invitation

[Attached Files](#) 0

To: Molly Abitbol

## Message Invitation

High Road School requests that you become affiliated with them as a rendering service provider.

To accept this affiliation, select the [Accept Affiliation](#) hyperlink.

To reject this affiliation, select the [Reject Affiliation](#) hyperlink.

Sincerely,  
High Road School

Message History Thread

From	To	Subject	Type	Date Sent
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- Once the NPI has been verified, the ePREP main home page with a pop-up window “Rendering Affiliation Invitation.” In the text of the message, accept the affiliation from the facility by clicking the “Accept Affiliation” link.

# Electronic Signature

Group Info Expand All

- Business Information
- Group Signature

Rendering Info Expand All


- Getting Started
- Profile Information
- Business Information
- Practice Information
- Disclosure Information
- Rendering Signature**
- E-Signature
- Submit Application

Declarations E-Signature Summary

You're almost ready to sign your application!

Even though you're completing and submitting your application through ePREP Portal and not on paper, your signature is still required. Using the electronic signature feature, you can submit this application just like your handwritten signature.

Please read the Maryland Medicaid Provider Agreement, and then check the boxes to declare that you agree with this process.

Please note that in order to continue with the e-Signature process, you **must** read the Provider Agreement. 

[Maryland Medicaid Provider Agreement](#)  
review is required

I, **Eprep Portal**, have read, understood, and agree with the terms of the Maryland Medicaid Provider Agreement.  
value is required

I, **Eprep Portal**, declare that I have legal authorization to sign this application for and on behalf of 3330  
value is required

- Once the rendering provider accepts affiliation, then they are able to view and sign the application under the “Rendering signature.”
- The “Maryland Medicaid Provider Agreement” link must be clicked to start the electronic signature process.

# Electronic Signature Cont.



To continue with the e-Signature process, I need to verify your personal information.  
After agreeing to the declaration, make sure your Social Security Number and Date of Birth **are identical** to what you entered in the **Personal Information** section of the **Ownership/Control Interest** sub-form.  
Please treat this section the same way as if you were using your PIN at an ATM.

If you need help with this section, please watch this In-Context Tutorial about e-signing a Facility application.

I, **Eprep Portal**, agree that my electronic signature is attributable as defined in Commercial Law Article § 21-208.

value is required

SSN (last 4 digits)

###-##-\_\_

Year of birth

##/##/\_\_

Email address

training@mailinator.com

Password

\_\_\_\_\_

← Previous

Continue →

To electronically sign the application, the last four digits of the SSN, Year of birth, and Password of the authorized signer or provider is required to complete and submit the application for review and update.

# Applications

My Home **Applications** Accounts My Tools ▾ Help

My Applications

Here are your in-progress or submitted applications for your Maryland Medicaid accounts. Once you have completed the enrollment process, you will be able to modify your accounts. Listed below are the provider applications you have or are currently enrolling in Maryland Medicaid.

**New Application**

- Filter by -  - Please select a filter -  Search

Application ID	Status	Name	Type	NPI	Application	Complete	Last Update	Owner	Actions
1811PHTS	In Progress	Speech/Language Pathologist		1497036362	Rendering Provider	24%	11/29/2018	Molly	

ePREP Portal

Your list of submitted and in progress apps.

The Status of your apps.

New Application

Additional Status Information.

# User Administration and Privileges

My Home   Applications   Accounts   **My Tools** ▾   Help

User Administration

Do you want to invite new members to the Business? Do you want to change a member's privileges? See the prompts.

- Document Library
- User Administration**
- Auto-Populate Application Prompts
- Business Profile Settings

In User Administration, click on "Invite User" to delegate privileges to a Facility administrator

**Invite User**

Name	Privilege Type	Status	Actions
Ben Wolff	Administrator	Active	
Benjamin Harper	Administrator	Active	
Charles Chon	Administrator	Active	
Brenda Logan	Administrator	Active	
harperbenjamin1@gmail.com	Administrator	Pending	

# Questions & Contacts

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ePREP Portal: [eprep.health.maryland.gov](https://eprep.health.maryland.gov)

Resources and frequently asked questions: [health.maryland.gov/eprep](https://health.maryland.gov/eprep)

ePREP Call Center: 1-844-4MD-PROV (1-844-463-7768)

Monday – Friday 9AM- 5PM

\*\*\*Closed on State holidays\*\*\*