

ePREP for Outpatient Providers

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Welcome to ePREP!

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

- There are resources you can use to learn all about ePREP and how to use it. Maryland Medicaid has created a website with documents, checklists and webinars that will help you with ePREP.
 - health.maryland.gov/eprep

Helpful Resources Cont.



- **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.

ePREP Application Types

Application Types

- **Outpatient New Facility:** Application to enroll an Outpatient new facility to Maryland Medicaid.
- **Supplemental:** A change in a provider's account information or required documenting, such as correspondence address or an updated professional license.
- **Disenrollment:** An application to stop being part of Maryland Medicaid. Started from the Accounts screen when viewing active accounts. An example of when to create a disenrollment application, will be if a facility intends to stop being part of Maryland Medicaid, or shutdown.

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** **Next**

Maryland
DEPARTMENT OF HEALTH

Sign Up (User Profile)



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

- 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 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

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

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.

Sign Up Complete



You did it!



Success

Select Login to continue



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 you 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, notification icons (43 and 21) in the center, and user information (Charles Choh DDS and Charles) on the right. Below the navigation bar are menu items: My Home, Applications, Accounts, My Tools, and Help. The main content area features a light blue background with a virtual guide character, Lucy, in a thought bubble. A speech bubble from Lucy reads: "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." Below this, there is an isometric illustration of a city with several buildings labeled: LEARNING CENTER, MY TOOLS, MESSAGE CENTER, MY ACCOUNTS, and APL. Two red arrows point from the annotations to the user information in the navigation bar. One arrow points to the user name 'Charles Choh DDS' and the other points to the user profile icon 'Charles'.

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.

LEARNING CENTER

MY TOOLS

MESSAGE CENTER

MY ACCOUNTS

Charles Choh DDS

Charles

This is your Business Profile

- This is your User Profile

Linking providers to groups

- 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.

Add Affiliation

Charles CARE CTRS INC: Accounts Dashboard

Accounts: 1

Affiliations: 0

- Current: 1
- Suspended: 0
- Revalidation Started: 0
- Revalidation Scheduled: 0





- Current: 0
- Suspended: 0
- Revalidation Started: 0
- Revalidation Scheduled: 0

Link Accounts

- Filter by -

- Please select a filter -

Search

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 21000-0000	   

Clicking on the Icon opens the affiliation page, where existing affiliates can be viewed, and new affiliations can be added.

Add Affiliation Cont.

Create Affiliation Application

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

National Provider Identification (NPI) + Verify

value is required

Enter Affiliating NPI

Account Affiliations

Listed are the affiliations for CATON MANOR at the service Location: 3 BALTIMORE-MD, 21229-4610.

You can "Add" an affiliation with a provider for this server location by selecting the button "Add Affiliation".

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

Search

Account ID	Rendering Name	NPI	Provider Type	Affiliation Status	Actions
No data available in table					

Showing 5 records per page

- Clicking the Add Affiliation Icon starts the affiliation process by generating a text box for the NPI to be added can be verified
- Once the application is generated, the rendering provider will have to sign the application from their accounts to complete the process.

Facilities

Outpatient

New Application Option

Start Application Business Structure NPI Provider Type

Hello, Charles!

Please answer this simple questionnaire to help me to determine **the correct type of application for you.** If you need help with any of these options, you can watch the **Questionnaire In-context tutorial.**

Let's get started!

- I'm enrolled in Maryland Medicaid, and I want to create an application
- I'm enrolled in Maryland Medicaid, and I want to affiliate with another provider
- I'm new to Maryland Medicaid, and I want to create a new application
 - What kind of provider are you?
 - I'm an Individual health care practitioner
 - I'm a Group or FQHC health care practice
 - I'm a Facility, Clinic, Health Care Organization or Waiver Provider.
 - I want to make changes to my account

Once you have made your choice, select **Continue**.

← Previous Continue →

Applications For New Outpatient Providers

Outpatient facilities must select the correct application and provider type to ensure that Medicaid can reimburse for their services.

Start Application **Business Structure** NPI Provider Type

Great! Now select the business structure which best fits you as a Facility, Clinic, Health Care Organization or Waiver Provider.

I need a Maryland Medicaid account to bill for health care services and I am applying as:

- Facility
- Inpatient
- Outpatient
 - This facility provides and submits Maryland Medicaid claims for outpatient health care services at the location disclosed on my application.
 - I'll be using a Type 2 NPI (Organization).
- Other Health Care Organization
- Waiver Provider

Once you have made your choice, select **Continue**

← Previous Continue →

Completing the Application

Provider Name 3% Complete 0% Documents

Provider Type Urgent Care Center

Application ID 189AD069

Creation Date 09/05/2018

Package Type Facility

[New Message](#) [Submit](#)

Content Expand All

- Getting Started Filled Circle
- Getting Started Half Circle
- Business Information Empty Circle
- Practice Information Empty Circle
- Disclosure Information Empty Circle
- Rendering Provider Affiliations Empty Circle
- Signature Empty Circle
- Submit Application Empty Circle

Getting Started

Let's take a few minutes to watch these In-Context Tutorials before you start your application as a **Urgent Care Center**. These videos will help you get oriented and make filling out your application a breeze.

If you need help while working on your application, you can always come on back here for a refresher, or just look for the icon throughout ePREP Portal.

Getting Started

Familiarize yourself with all the elements of this page, including:

- Application structure
- Social tools
- Status indicators

REP PORTAL

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

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

Provider Addendum

- Almost half of the outpatient facility provider types must attach an Addendum to their application.
- Each Addendum is available on the Maryland Medicaid website. ePREP will direct providers to the link below to find the correct Addendum for each provider type.

health.maryland.gov/providerinfo

- The provider will need to navigate to the Enrollment page. This is where the provider can then find their Provider Type (PT) and click on the “X” to retrieve that PT’s Addendum.

Outpatient PTs that do NOT require Addendum —

Facilities that *Do Not Require* an Addendum

- Vision Care Providers, Organization = PT 12
- Abortion Clinic = PT 30
- Freestanding Birth Center = PT 31
- Family Planning Clinic = PT 33
- Rural Health Clinic = PT 37
- Pediatric Nursing / Home Health Aide Services Agency = PT 53
- Outpatient Mental Health Center (MC) = PT MC
- Community-based Partial Hospitalization Program = PT MH
- Mobile Treatment Program = PT MT
- Psychiatric Rehabilitation Facility = PT PR
- Support Employment = PT SE

Outpatient PTs that require Addendum ---

Facilities that *Require* an Addendum

- [Urgent Care Centers = PT 08](#)
- [Drug Clinic = PT 32](#)
- [Local Health Department \(LHD\) = PT 35](#)
- [Freestanding Oncology Center = PT 36](#)
- [General Clinic = PT 38](#)
- [Ambulatory Surgery Centers = PT 39](#)
- [Medical Day Care, Adults = PT 42](#)
- [Substance Use Disorder \(SUD\) = PT 50](#)
- [1915i Intensive Behavioral Health Services for Children, Youth & Families \(Organization\) = PT 89](#)
- [Local Education Agency / Local Lead Agency = PT 91](#)

Provider Addendum Cont.

Content Expand All

Getting Started

Business Information

Practice Information

Licenses & Certifications

NPI/Taxonomy

Additional Information

Disclosure Information

Rendering Provider Affiliations

Signature

Submit Application

Addenda/Supporting Documents Summary

Okay, your provider type Urgent Care Center requires specific addenda and supporting documents to be included in this application for enrollment approval. Please add them by selecting the hyperlink.

Select [Addenda/Supporting Documents](#) to obtain the required addenda and supporting documents for the Urgent Care Center provider type. Once you have completed your required attachments select the Add button to attach them to this application.

N/A

Add

Addenda/Supporting Document Name	Documents	Actions
There is no addendums		

The addendum is a requirement to complete the application. It can be obtained directly from the Maryland web page by clicking on the link “Addenda/Supporting Documents” in blue, as indicated. Once the addendum is saved and completed, Clicking on “Add” enables us to add the completed document to the application.

Where To Find Addenda on MDH Website

Maryland.gov Phone Directory State Agencies Online Services Translate

MARYLAND DEPARTMENT OF HEALTH

Enter search term

HOME CHILDREN'S HEALTH PHARMACY LONG TERM CARE HEALTH CHOICE

PROGRAM INFORMATION

- > State Innovation Model (SIM)
- > About our programs
- > Apply for Medicaid
- > Applications for Long Term Care (all 9709 versions available)
- > Medicaid Renewals
- > Provider Information

CHILDREN'S HEALTH

- > Maryland Children's Health Program
- > Provider Search

Provider Enrollment

Most solo practitioners, rendering only providers and group practices may no longer submit paper applications. These providers must enroll via ePREP at ePREP.health.maryland.gov. You may also click on the "ePREP" link next to your provider type to enroll.

For more information about Phase I provider types and ePREP, please visit health.maryland.gov/ePREP.

To access applications for Facilities, Dental Providers and 1915(i) provider types, please click on the "X" next to the appropriate provider type.

A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q | R | S | T | U | V | W | X | Y | Z

A

PROVIDER TYPE DESCRIPTION	PT CODE	INDIVIDUAL	GROUP	FACILITY
AUDIOLOGY PROVIDER	19	ePREP	ePREP	X
AMBULATORY SURGERY CENTER	39			X
ADAA CERTIFIED ADDICTIONS OUTPATIENT PROGRAM	50			X
ACUPUNCTURE	AC	ePREP	ePREP	
AMBULANCE COMPANY	T4			X

T

PROVIDER TYPE DESCRIPTION	PT CODE	INDIVIDUAL	GROUP	FACILITY
THERAPY GROUP PROVIDER - EPSDT (PT. OT. SPEECH)	28		ePREP	

U

PROVIDER TYPE DESCRIPTION	PT CODE	INDIVIDUAL	GROUP	FACILITY
URGENT CARE CENTER	8			X

V

PROVIDER TYPE DESCRIPTION	PT CODE	INDIVIDUAL	GROUP	FACILITY
VISION CARE PROVIDER	12	ePREP	ePREP	X

Uploaded file will be indicated by number next to the paper clip








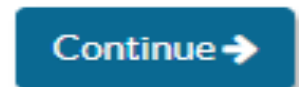
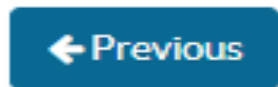
Okay, your provider type **Urgent Care Center** requires specific addenda and supporting documents to be included in this application for enrollment approval. Please add them by selecting the hyperlink.

Select [Addenda/Supporting Documents](#) to obtain the required addenda and supporting documents for the Urgent Care Center provider type. Once you have completed your required attachments select the Add button to attach them to this application.



+ Add

Addenda/Supporting Document Name	Documents	Actions
Addendum	 <i>Attached:Frank</i>	   



Disclosure of Ownership

- **MOCA = Managing employees, Owners and Controlling interest Agents.**
 - These will always be updated in the Disclosure Information section of an ePREP application.
 - MOCA information can be updated without a need to complete a CHOW application

Disclosure of Ownership Cont.

- Add new MOCAs to Disclosure Information form and this determines who can sign the application.

- Business Information
- Practice Information
- Disclosure Information
- Adverse Actions
- Fines and Debts (Gov.)
- Subcontractors
- Ownership/Control Interest**
- Significant Transactions
- Delegated Officials
- Rendering Provider Affiliations
- Signature

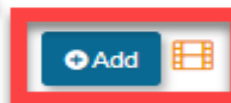


In this section, a complete disclosure of ownership and financial interest is required. Please add at least one owner or those parties who have control interest in your Group. Keep in mind that you can share any record with another user, making it easy to complete your application.

Are there any Individuals or Entities (Corporations, unincorporated associations, partnerships, or similar entities) who have 5% or more (direct or indirect) Ownership or control interest, or any partnership interest in **URGENT CARE,LLC?**

All entity owners' **board members, officers of a corporation, and directors** must be disclosed in this section. Indirect entity owners do not need to disclose board members, officers of a corporation or directors if those individuals' only relation to applicant is via the indirect owner.

Additionally all **board members, officers of a corporation, directors, agents, and managing employees** of **URGENT CARE,LLC** must be reported in this section as well.



Type	Name	Ownership/Control Interest	Status	Actions
No Ownership Control Interest listed.				

Electronic Signature

Content Expand All

- Getting Started
- Business Information
- Practice Information
- Disclosure Information
- Rendering Provider Affiliations
- 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

Maryland
DEPARTMENT OF HEALTH

Applications

Messages

Notifications

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.

Your list of applications

The Status of your apps.

New Application

Additional Status Information.

Application ID	Status	Name	Type	NPI	Application	Complete	Last Update	Owner	Actions
2049BLNG	In Progress	Outpatient Facility	Urgent Care Center	1234512345	Facility	11%	04/10/2020	Charles Chon	

Questions & Contacts

ePREP Portal: eprep.health.maryland.gov

Resources and frequently asked questions: health.maryland.gov/eprep

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

Monday – Friday 9AM- 5PM

Closed on State holidays