

Locating and Attaching an Addendum to an Enrollment Application in ePREP

All application addenda can be accessed from the MDH Provider Enrollment webpage, <https://health.maryland.gov/mmcp/Pages/Provider-Enrollment.aspx>

Application addenda are provider type specific, although there are a few addenda that are specialty specific. The provider type specific addenda are listed on the MDH Provider Enrollment page with a two-digit alphanumeric code under “PT Code”, and specialty addenda will list N/A. Provider type specific addenda are required to be completed and uploaded to all new enrollment and revalidation applications, and for certain enrollment account updates. Specialty addenda are only needed to enroll to provide a specific service.

New enrollment and revalidation applications will contain a link to the MDH Provider Enrollment page to locate, download and complete the provider type specific addendum for those provider type applications that require a provider type specific addendum.

Below is a step-by-step guide on how to navigate, access, and successfully upload an addendum to an ePREP enrollment application.

The provider in the outline below is enrolling as a new “Individual Billing” Dental Provider.

This application is complete down to the “Practice Information”, “Additional Information,” section of the the application. Click on the link just below Lucy, “[Addenda/Supporting Documents](#).” This hyperlink will take the provider directly to the MDH Provider Enrollment webpage. (See Screen Below)

The screenshot displays the MDH Provider Enrollment application interface. At the top, a header bar shows the provider's name, type, application ID, creation date, and package type. It also includes progress indicators for '49% Complete' and '100% Documents', along with 'New Message' and 'Submit' buttons.

Below the header, a sidebar on the left lists the application sections: Profile Information, Business Information, Practice Information, Licenses & Certifications, NPI/Taxonomy/Specialty, Additional Information, Disclosure Information, Signature, and Submit Application. The 'Practice Information' and 'Additional Information' sections are highlighted with green circles.

The main content area shows the 'Addenda/Supporting Documents' section. It features a progress bar at the top with 'Addenda/Supporting Documents' and 'Summary' tabs. A message box states: 'The provider type Dental Provider requires addenda and supporting documents to be attached to this application.' Below this, a green circle highlights the link 'Addenda/Supporting Documents'. A table below the message shows the status of addenda, with a note 'There is no addenda'.

At the bottom of the main content area, there are 'Previous' and 'Continue' buttons.

From here scroll down to the “D’s” in this example as he/she is a Dental Provider


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Provider Enrollment

MDH Provider Enrollment no longer accepts paper applications. 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 ePREP, please visit health.maryland.gov/ePREP.

To access application addenda, please click on the "X" next to the appropriate provider type.

To view the Maryland Medicaid Provider Agreement, click [here](#).

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	ePREP
AMBULATORY SURGERY CENTER	39			X
ADAA CERTIFIED ADDICTIONS OUTPATIENT PROGRAM	50			X
ACUPUNCTURE	AC	ePREP	ePREP	
AMBULANCE COMPANY	TI			X
AUTISM WAIVER	40			X
APPLIED BEHAVIOR ANALYSIS	AB	ePREP	ePREP	

B

As this provider is an Individual Billing provider; they should choose the **X** across from Dental Provider, and directly below the “individual” designation. (As seen below)

D

PROVIDER TYPE DESCRIPTION

DIALYSIS FACILITIES

DMS/DME PROVIDER

DIAGNOSTIC SERVICES, OTHER

DIETITIAN/NUTRITIONIST

DDA SERVICES PROVIDER NEW ENROLLEES

DENTAL PROVIDER

DIABETES PREVENTION PROGRAM (DPP) PROVIDER

DOULA

PT CODE	INDIVIDUAL	GROUP	FACILITY
61			X
62			X
60			X
85	ePREP	ePREP	
90			X
14	X	X	
DP			X
DL	X	X	

Individual, PT 14 Dental Addendum is as follows.

Unless the Dental Provider is part of a Federally Qualified Health Center, all they need to fill out is their NPI, SSN if an Individual, Tax ID if a Group, and MA Number if already participating in Maryland Medicaid. Then on the second page they simply mark NO for FQHC participation.



**Addendum for Maryland
Medical Assistance Program Application
INDIVIDUAL**

PT 14 DENTAL

If you have questions, please contact the Provider Enrollment Helpline at **1-844-4MD-PROV (1-844-463-7768)**
Monday – Friday from 7am – 7pm.

All providers are required to use the electronic **Provider Revalidation and Enrollment Portal**, or ePREP (eprep.health.maryland.gov) for enrollment, information updates, provider affiliations and revalidations.

Please fill out the information below and upload the completed addendum to the “Additional Information” section under “Practice Information” within the ePREP (eprep.health.maryland.gov) “Applications” tab, along with any additional documents requested within the addendum.

Provider Information

NPI:

SSN:

MA Provider Number (if already enrolled in Maryland Medicaid):

Please visit health.maryland.gov/ePREP for more information about ePREP



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Please upload this form to the "Additional Information" section under "Practice Information" within the ePREP (eprep.health.maryland.gov) "Applications" tab, along with any additional applicable supporting documents requested below.

Please respond to the question below:

1. Are you rendering services in an FQHC?

☐

YES

☐

N

- If yes, please provide the name, Maryland Medical Assistance Provider Number, and NPI of the FQHC in which you render services:

FQHC Name: _____

Maryland Medical Assistance Provider Number: _____

NPI: _____

****SKYGEN USA is the Administrative Service Organization (ASO) for the Maryland Healthy Smiles Dental Program (MHSDP). Please contact the SKYGEN USA Network Development Team at (800) 508-6965 or at Network Development @skygenusa.com after you receive your Medical Assistance approval to ensure all payee information has been provided.****

Saving & Attaching the Document

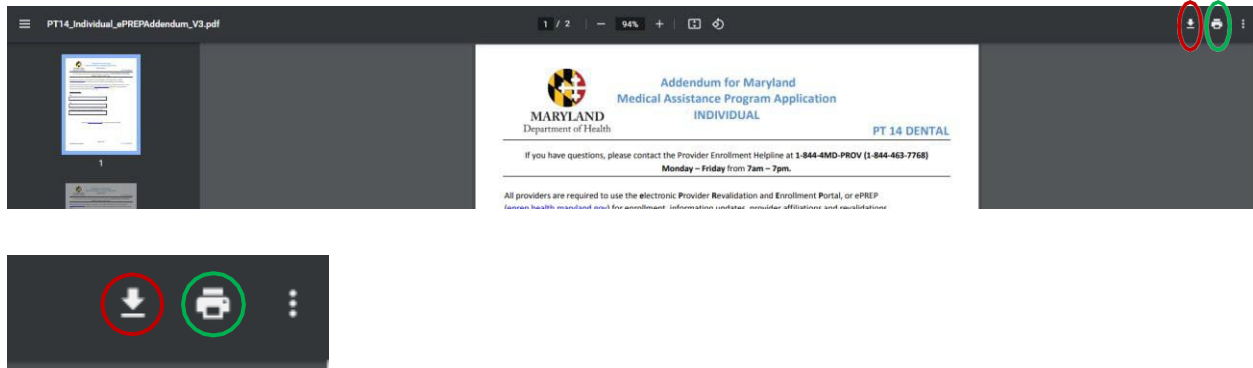
NOTE: There is a limitation in the ability for providers to download any addendum from the MDH website and then attach the document into ePREP.

Instruction: The below screen shots will walk you through how to guide providers in downloading and attaching Addendums without issue.

The following screen shot is what a provider will see after they have filled out the Addendum and are ready to download and attach.

Two Items of note


- The download arrow circled in red
- The print icon circled in green



Using the download icon will NOT allow providers to attach any addendum to their ePREP application after filling it out and saving it to their computer.

First, click the Printer Icon and the below page will open.

Notice the “Destination” has the name of the printer.

**MARYLAND**
Department of Health

**Addendum for Maryland
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Provider Information

NPI:

SSN:


MA Provider Number (if already enrolled in Maryland Medicaid):

Please visit health.maryland.gov/ePREP for more information about ePREP

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V3 2019 effective 10/15/2019

Print 2 sheets of paper

Destination  EPSONBA41FC (WF-4" ▼

Pages All ▼


Copies 1

Color Color ▼

More settings ▼

Print Cancel

By clicking on the name of the printer, a dropdown will appear with a “Save as PDF” option. The document must be saved so it can be uploaded and attached to the ePREP application.



MARYLAND
Department of Health

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Provider Information

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SSN:

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Please visit health.maryland.gov/ePREP for more information about ePREP

V3 2019 effective 10/15/2019

Page 1 of 2

PT 14 DENTAL

Print

2 sheets of paper

Destination
EPSONBA41FC (WF-4740 Series)
Save as PDF
See more...

Pages


Copies
1

Color
Color

More settings

Print Cancel

When clicking “Save as PDF”, the screen will change (as seen below) and the addendum document can be saved.



MARYLAND
Department of Health

Addendum for Maryland
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PT 14 DENTAL

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Page 1 of 2

PT 14 DENTAL

Print

2 pages

Destination

 Save as PDF

Pages

All

Pages per sheet

1

Save

Cancel

Once the addendum has been saved, return to the ePREP Portal Application and select +Add.

Addenda/Supporting Documents Summary

The provider type Dental Provider **requires** addenda and supporting documents to be attached to this application.

Select Addenda/Supporting Documents to select the required addenda and supporting documents. Once you have completed the required attachments select the Add button.

Addenda/Supporting Document Name	Documents	Actions
There is no addenda		

[← Previous](#) [Continue →](#)

This will open the following “Addenda/Supporting Document” Naming box.

Type in a name for the document (example below) and then click +Add.

Addenda/Supporting Document ✕

Addenda/Supporting Document Name

[+ Add](#) [✕ Cancel](#)

Once the above is complete, click on the Blue Attach button, as seen below


The provider type Dental Provider **requires** addenda and supporting documents to be attached to this application.

Select Addenda/Supporting Documents to select the required addenda and supporting documents. Once you have completed the required attachments select the Add button.

Addenda/Supporting Document Name	Documents	Actions
PT 14 Individual Addendum	Attach	

[+ Add](#)




This will present the “Browse” option where the saved addendum document can be located and attached.




The provider type Dental Provider **requires** addenda and supporting documents to be attached to this application.

Select [Addenda/Supporting Documents](#) to select the required addenda and supporting documents. Once you have completed the required attachments select the Add button.

Add

Addenda/Supporting Document Name	Documents	Actions
PT 14 Individual Addendum	<div>Drag and drop here or browse 50MB Maximum</div>	  





A properly attached document will look like the screen shot below.



The provider type Dental Provider **requires** addenda and supporting documents to be attached to this application.

Select [Addenda/Supporting Documents](#) to select the required addenda and supporting documents. Once you have completed the required attachments select the Add button.

Add

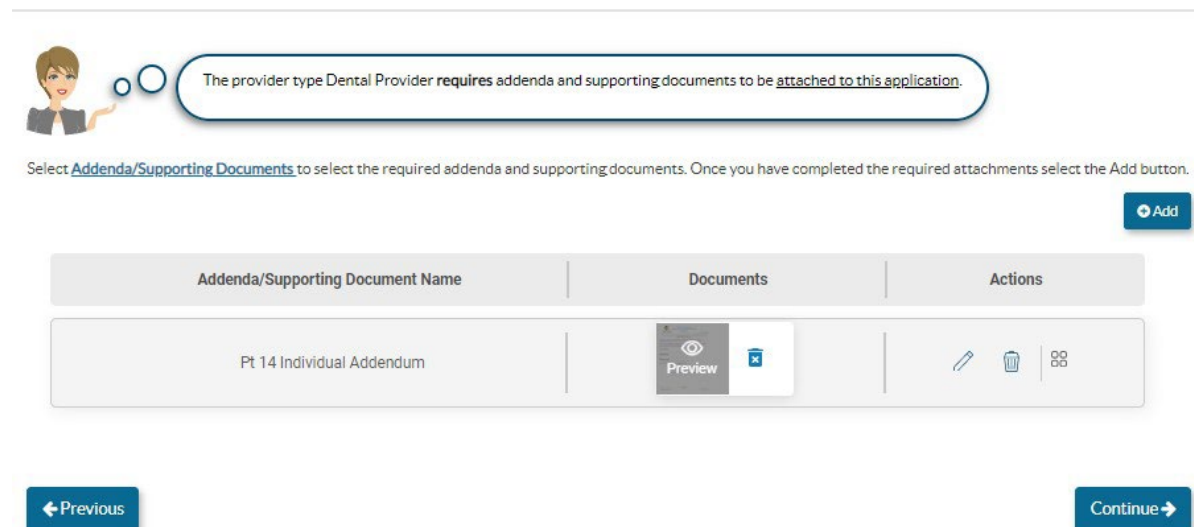
Addenda/Supporting Document Name	Documents	Actions
Pt 14 Individual Addendum		  

Previous





Continue

As with any attached document, there is an option to preview the attachment prior to “Submitting” the application to ensure it is correct.

The document can be reviewed by hovering over the attached document and clicking on “Preview”. This will open the document for review. (See below)

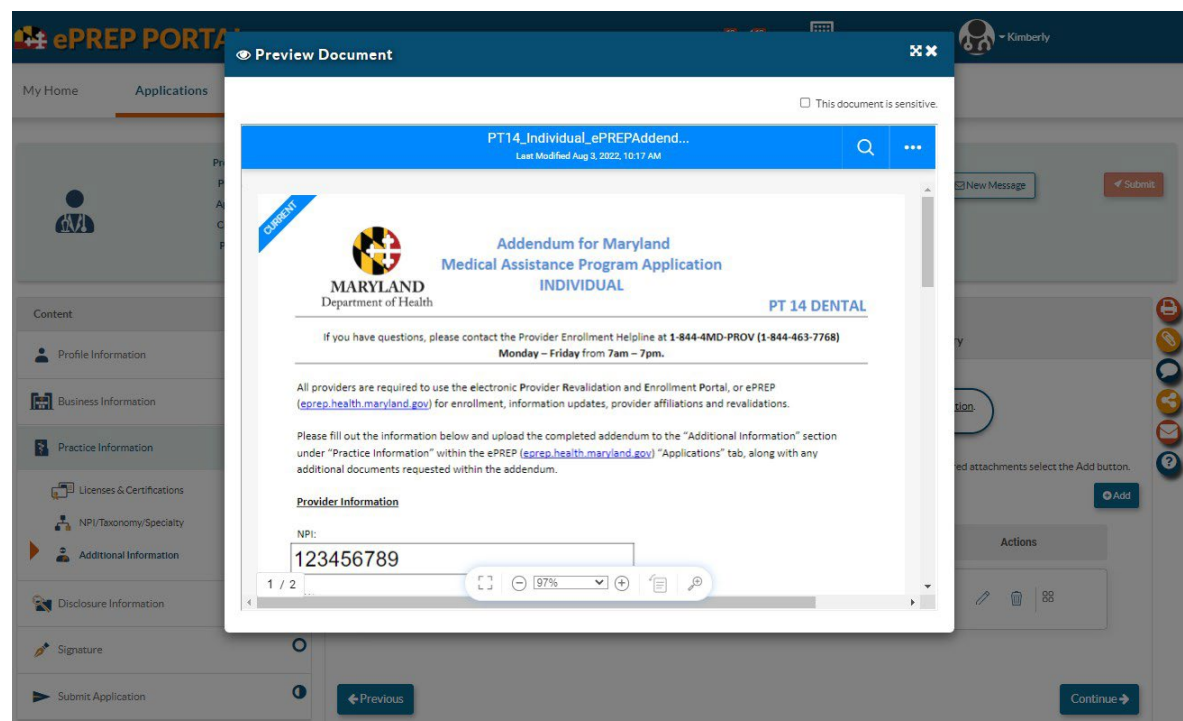


The screenshot shows a user interface for the ePREP application. At the top, a notification bubble with a cartoon character icon states: "The provider type Dental Provider requires addenda and supporting documents to be attached to this application." Below this, a message reads: "Select [Addenda/Supporting Documents](#) to select the required addenda and supporting documents. Once you have completed the required attachments select the Add button." An "Add" button is located to the right. Below the message is a table with three columns: "Addenda/Supporting Document Name", "Documents", and "Actions". The table contains one row with the document name "Pt 14 Individual Addendum". In the "Documents" column, there is a "Preview" button with an eye icon and a document icon. The "Actions" column contains icons for editing, deleting, and a grid icon. At the bottom of the interface, there are "Previous" and "Continue" buttons.

Addenda/Supporting Document Name	Documents	Actions
Pt 14 Individual Addendum		  

This is what the “Preview Document” looks like. In this example you can see they have successfully attached an Individual PT 14 Dental Addendum.

They may now complete the rest of their application and submit.



The screenshot shows a "Preview Document" window. The document title is "PT14_Individual_ePREPAddend..." and it was last modified on Aug 3, 2022, at 10:17 AM. The document content includes the Maryland Department of Health logo, the title "Addendum for Maryland Medical Assistance Program Application INDIVIDUAL", and a section for "PT 14 DENTAL". It provides contact information for the Provider Enrollment Helpline at 1-844-4MD-PROV (1-844-463-7768) and states that all providers are required to use the electronic Provider Revalidation and Enrollment Portal, or ePREP, for enrollment, information updates, provider affiliations and revalidations. The document also includes a section for "Provider Information" with a field for "NPI:" containing the value "123456789". The document is displayed in a preview mode with a toolbar at the bottom showing page navigation and zoom controls.