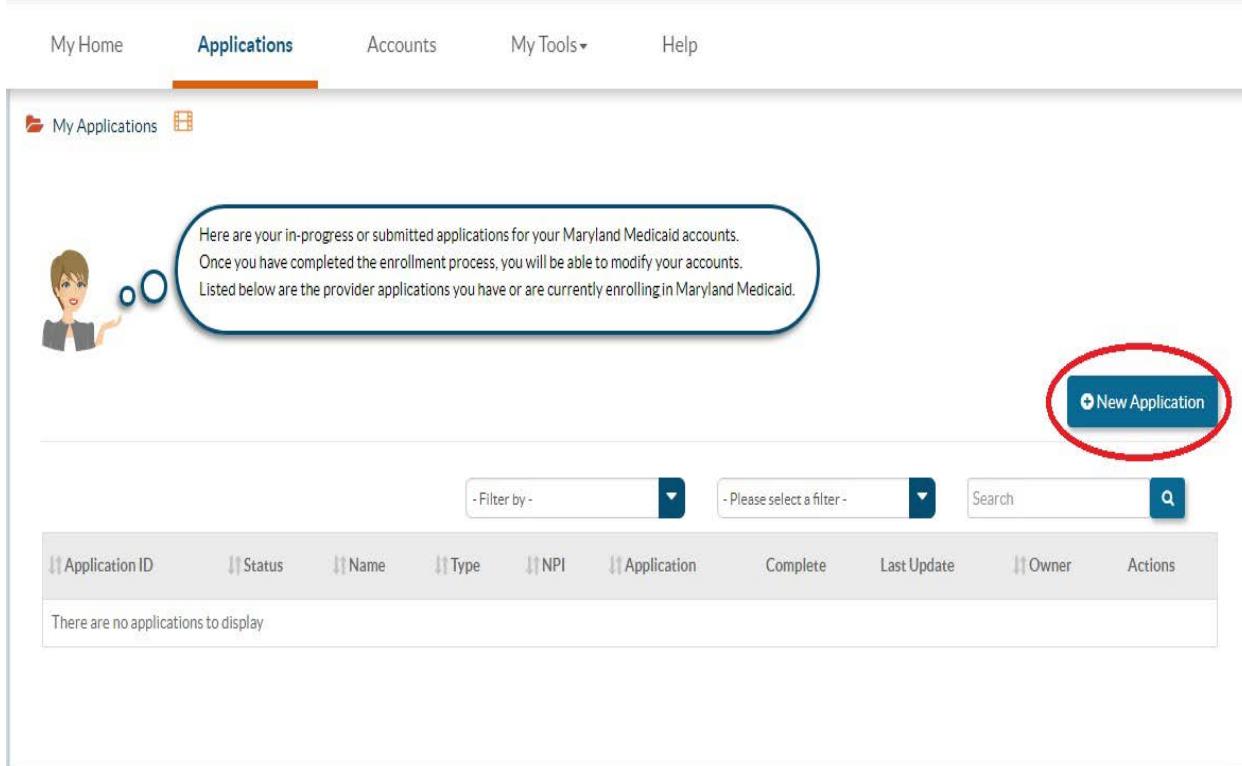


Instructions for Updating Service Address

These instructions are for any provider who is currently enrolled with Maryland Medicaid and wants to change their service address, or the location where they render services to participants. Because Maryland Medicaid treats service address changes as new enrollments, a provider must submit a new application in order to change their service address. **Please note:** This requirement does not apply to changes in correspondence or pay-to addresses. To change either of those addresses, please submit a supplemental application.

Please follow the steps below to create a new application and update your service location.

1. Log into ePREP and select your business profile..
2. Select the Applications tab. Select the New Application button.



The screenshot shows the ePREP application interface. At the top, there is a navigation bar with links for 'My Home', 'Applications' (which is highlighted in blue), 'Accounts', 'My Tools', and 'Help'. Below the navigation bar, there is a header with a 'My Applications' section and a 'New Application' button. A callout box with a blue border and a white background contains the text: '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.' To the left of this text is a small icon of a person with a speech bubble. Below the header, there is a search bar with filters for 'Application ID', 'Status', 'Name', 'Type', 'NPI', 'Application', 'Complete', 'Last Update', 'Owner', and 'Actions'. A message at the bottom of the search area says 'There are no applications to display'. The 'New Application' button is located in the top right corner of the main content area, and it is circled with a red line.

3. Select the third option, “I’m new to Maryland Medicaid, and I want to create a new application”. Next, select the practice type that applies to you. In the example below, the provider is a facility, clinic, health care organization or waiver provider. Select Continue.

Start Application Business Structure NPI Provider Type

Nice to see you again, Jodie!
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 →](#)

4. On the Business Structure page, select which option best fits you as a health care provider. In the example below, the provider is an Other Health Care Organization, but you will see different options depending on which practice type you selected. If you selected “I’m an individual health care practitioner” or “I’m a Group or FQHC health care practice” in Step 3, you will see different business structure options and you should select the option that applies to you. Select Continue.

Start Application Business Structure NPI Provider Type

Great! Now select the business structure which best fits you as a health care Organization, Institution, Clinic or Facility.

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

Facility

Other Health Care Organization

Waiver Provider

Once you have made your choice, select [Continue](#).

[← Previous](#) [Continue →](#)

5. Next, ePREP will ask you to enter the National Provider Identifier (NPI) you want to use for the application. Once you enter your 10-digit NPI and select the Verify button, ePREP will confirm your NPI is associated with an existing Maryland Medicaid account. You'll see a dropdown menu appear, and ePREP will ask you to select the option that best describes the application you'd like to create. Select the first option, "My practice opened a new service location" (Screenshot 5a). This selection will yield a table of your Maryland Medicaid accounts associated with the NPI entered. Select any account to update and click Continue (Screenshot 5b).

a)

Start Application Business Structure NPI Provider Type

Okay, you have chosen Resource for your application. Please enter your Type 2 National Provider Identifier (NPI) that you want to use for this application, and select Verify.

National Provider Identifier (NPI)

Verify

The NPI you entered is associated with an existing Maryland Medicaid account

Please select the option that best describes the application you'd like to create

[Please select an option]
[Please select an option]
My practice opened a new service location
I want to add a new provider type to an existing service location
I want to make changes to my Maryland Medicaid account

If you do not currently have an account with Maryland Medicaid. Check the NPI you entered. If it is correct, Please contact Maryland Medicaid for more information.

When you have entered and verified your NPI, select Continue.

← Previous **Continue →**

b)

The NPI you entered is associated with an existing Maryland Medicaid account

Please select the option that best describes the application you'd like to create

My practice opened a new service location

The NPI you entered is associated with an existing Maryland Medicaid account.

Which account would you like to use?

Select	Account ID	Provider Name	Provider Type	NPI	Service Address
<input checked="" type="radio"/>	800022766	SUNRISE MEDICAL LABORATORIES INC	Laboratory	1376587113	250 MILLER PLACE, HICKSVILLE-NY, 11801-1826

If you do not currently have an account with Maryland Medicaid. Check the NPI you entered. If it is correct, Please contact Maryland Medicaid for more information.

When you have entered and verified your NPI, select Continue.

← Previous **Continue →**

6. Once you've initiated the new application, fill in any blank fields and attach any required documents. The circles on the left hand side of the application screen indicate whether or not a section is complete. Empty or only half-full circles indicate a field is incomplete.

Since you are already enrolled in Maryland Medicaid, ePREP will pre-populate many of the fields throughout the application. However, you will still need to fill in some fields and upload attachments to complete the application. If you intend to make any other supplemental updates to your account at this time, such as updating a license or any disclosure information, you may do so in this application.

Content Expand All

Getting Started ●

Business Information ●

- Business Profile ●
- Contact Person ●
- Addresses ●
- Logistics ●

Practice Information ●

Disclosure Information ●

Rendering Provider Affiliations ●

Signature ●

Submit Application ●

Business Address ● Pay-to Address ● Mailing Address ● Summary ●

Your Maryland Medicaid account is based on the location where health care services will be provided. As you type, a suggested address will appear that can auto-fill the rest of the form for you. Remember that a P.O. box cannot be used as a service address.

View Address

Street ✓

Ste./Apt. # ✓

City ✓

State/Province ✓

County ✓

ZIP Code/Postal Code ✓

Is this service location ADA (American Disabilities Act) accessible?

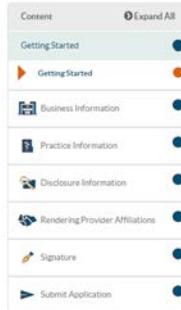
Yes No

Does this service location have TTY capability?

Yes No

← Previous Continue →

7. Once all the blue circles on the left hand side of the application screen are full, you are ready to submit your application! Please note you will need to read and sign the Maryland Medicaid Provider Agreement. Additionally, if you disclosed any Managing Employees, Owners, or Controlling Agents (MOCAs) on the application, one of them will need to sign the application in order to submit. For instructions regarding ePREP's e-signature requirements, please visit health.maryland.gov/ePREP.



8. After the application is submitted, you can track its status by checking the applications tab in ePREP. When the application is approved, you will receive an enrollment approval letter through ePREP.