

MMIS Job Aid—Revalidation on POSC

Section 6401 of the Affordable Care Act (ACA) established a requirement for Medicare and Medicaid to revalidate enrollment information for all enrolled providers, regardless of provider type, under new enrollment screening criteria at least every five years. MassHealth began its revalidation initiative in March 2014.

This job aid describes how to update a Provider Profile via the MassHealth Provider Online Service Center (POSC) for revalidation.

In conjunction with the POSC, specific documents must be submitted with an original signature in order for an update to be made to your specific provider file.

Please write your Provider ID number and Service Location at the top of the documents before mailing them.

These items include

- Federally Required Disclosures form (PE-FRD)
www.mass.gov/eohhs/docs/masshealth/provider-services/forms/pe-frd.pdf
- Electronic Funds Transfer Enrollment/Modification Form (EFT-1) if you are currently receiving a paper check.
www.mass.gov/eohhs/docs/masshealth/provider-services/forms/eft-1.pdf
- Massachusetts W-9 Form, if you are changing your legal address, remittance address, or check-mailing address.
www.mass.gov/eohhs/docs/masshealth/ma-w9.pdf

All documents that require an original signature must be sent to the following address.

**MassHealth Provider Revalidation Unit
P.O. Box 121205
Boston, MA 02112-1205**

BEFORE YOU START REVALIDATION ON POSC

Review your MassHealth provider file and update any information that is not current or complete. If after the review of the information in your provider file you determine that **all information is already accurate (nothing needs to be changed)**, go directly to the **Attestation panel**. Complete the form and click **Submit**.

Follow the order of the panels listed in this job aid, starting with the Legal Entity panel and finishing with the Attestation panel. It is critical that after the review of your provider file you submit the Attestation Panel in order for your revalidation to be deemed complete. Note that these requirements may differ by your Provider Type, so read the entire Job Aid before accessing the POSC.

If changes need to be made on any panel, complete the required fields and click the “Add” or “Update” button only if it appears on the panel. Using the left-hand navigation menu, proceed to the next panel. **DO NOT CLICK “SUBMIT” UNTIL YOU REACH THE ATTESTATION PANEL.**

SKIP the following panels:

- **Change Ownership and Control Information** panel
- **Trading Partner Profile Information** panel

Some POSC panels can be reviewed and updated ONLY by certain provider types.

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Please review the grid below carefully.

Name of the Panel	Provider Type to Review and Update
Provider Information	Providers with a DEA number
Personal Information	Group practices and primary care providers
Covering Practitioners	Primary care providers
Affiliation	Individual providers affiliated with (a) hospital(s)
License Information	Providers required to have a license to enroll with MassHealth

Please Note: Changes are not immediately available for review. Modifications will not appear at the portal panel until they are reviewed and approved.

Access Update Your MassHealth Profile

From the MassHealth Provider Online Service Center home panel:

1. Click **Manage Provider Information**.
2. Click **Maintain Profile**.
3. Click **Update Your MassHealth Profile**.
4. Click on **Log In** and enter your user name and password

Access the Legal Entity Panel

The Legal Entity panel is the home page for the Update Your MassHealth Profile panels.

1. Verify the information presented on the panel.
2. If changes are necessary, please update the appropriate fields.
3. **DO NOT click Submit.**
4. Using the left-hand navigation menu, click on the next panel to review or update.

Please Note: You must submit the **Massachusetts W-9 form** if you wish to change your legal address. The completed form must contain an original signature and must be sent to the following address.

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Access and Change Ownership and Control Information

PLEASE SKIP THIS PANEL.

Instead, you must complete the **Federally Required Disclosures** form. Please see www.mass.gov/eohhs/docs/masshealth/provider-services/forms/pe-frd.pdf.

The completed form must contain an original signature and must be sent to the following address.

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Access and Update Trading Partner Profile Information

PLEASE SKIP THIS PANEL.

Access and Update Provider Information

Please review this panel **ONLY** if you have a DEA number.

From the **Steps** panel:

- Click **Provider Info**.

Under **Provider Detail**:

1. Review the information. If there are errors or omissions, enter the correct information.
2. Click **Update** save the changes.

Please Note: To advance to the next panel without making a change, click **Cancel Item**.

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Access and Change the Mailing Address

From the **Steps** panel:

- Click **Address Type**.

Under **List of Address Types**:

1. Verify the information presented on the panel.
2. If changes are necessary, please update the appropriate fields as follows.
 - a. Click the **Address Type** that you want to change.
 - b. Enter your new mailing address in the **Address Line 1** field.
3. Click **Update** to save your changes and move to the next panel.

Please Note: If you wish to apply your change to all addresses (i.e. DBA, check mailing, and remittance), please check off the box at the bottom of the panel, **Apply the Change to All of the Locations**.

Please Note: You must submit the **Massachusetts W-9 form** if you wish to change your **remittance** or **check-mailing address**. The completed form must contain an original signature and must be sent to the following address.

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Access and Change the Medicare Information

From the **Steps** panel:

1. Click **Medicare Info**.
2. Verify the accuracy of the information presented on the panel. If there are errors or omissions, please update.
3. If you are a newly enrolled Medicare provider and wish to add your Medicare information to the provider profile, please use instructions below.

Under **List of Medicare Numbers**:

1. Click **New Item**.
2. Select **Part B** from the **Parts** drop-down list.
3. Enter the date in the **Effective Date** field.
4. Enter the date in “day/month/year” format in the **End Date** field. You can manually enter the dates instead of using the calendar.
5. Click **Add** to save the changes.

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Access and Add a New Certification

From the **Steps** panel:

1. Click **Certification**.
2. Verify the accuracy of the information presented on the panel. If there are errors or omissions, please update.
3. If you wish to add a new certification, please use instructions listed below.

Under **List of Certifications**:

1. Click **New Item**.
2. Enter the certification number in the **Certification Number** field.
3. Select the certifying agency from the **Agency Name** drop-down list.
4. Enter the date in the **Effective Date** field.
5. Enter the date in “day/month/year” format in the **End Date** field.
6. Click **Add** to save the changes.

Access and Update Service Locations

From the **Steps** panel:

1. Click **Service Locations**.
2. Verify the accuracy of the information presented on this panel. If there are errors or omissions, please update.
3. If you are enrolled with more than one location and need to add one or several of them, please use instructions below.

Under **List of Locations**:

1. Select a service location in which information is to be updated.
2. Click **Update** to save any changes and move to the next panel.

Please Note: This will need to be done for each **Service Location** to be updated.

Access and Update Billing Intermediary Information

From the **Steps** panel:

1. Click **Billing Intermediary**.
2. Verify the accuracy of the information presented on the panel. If there are errors or omissions, please update.
3. If you have more than one billing intermediary and wish to add a new one to the list, please use instructions below.

Under **List of Billing Intermediaries**:

1. Select **New Item**.
2. Enter updated information.
3. Click **Update** to save the changes.

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Please Note: You may not assign an end-date to an old billing intermediary. Instead, you must add a new billing intermediary by selecting an approved MassHealth billing agency from the drop-down menu.

Access and Update Personal Information

Please review and update this panel **ONLY** if you are a **Group Practice** or a **Primary Care Clinician**.

From the **Steps** panel:

- Click **Personal Info**.

Under **Personal Detail**:

1. Review the information. If there are errors or omissions, enter the correct information
2. Click **Update** to save the changes.

Access and Update Certified Specialty Information

From the **Steps** panel:

1. Click **Certified Specialty Info**.
2. Verify the accuracy of the information presented on the panel. If there are errors or omissions, please update.
3. If you have more than one specialty, and you wish to add one or more, please use instructions below.

Under **List of Certified Specialties**:

1. Click **New Item**.
2. Select **Certified Specialty** from the drop-down list.
3. Enter the new date in the **Effective Date** field.
4. Enter the date in “day/month/year” format in the **End Date** field.
5. Click **Add** to save the changes.

Access and Update Information Specialty

From the **Steps** panel:

1. Click **Information Specialty Info**.
2. Verify the accuracy of the information presented on the panel. If there are errors or omissions, please update.
3. If you wish to add a new informational specialty, please use instructions listed below.

Under **List of Information Specialties**:

1. Click **New Item**.
2. Select **Informational Specialty** from the drop-down list.
3. Enter the new date in the **Effective Date** field.
4. Enter the date in “day/month/year” format in the **End Date** field.
5. Click **Add** to save the changes.

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Access and Add License Information

Please review the panel **ONLY** if you are required to have a license to participate with MassHealth.

From the **Steps** panel:

1. Click **License Info**.
2. Verify the accuracy of the information presented on the panel.
3. If there are errors or omissions (i.e. you need to update the license expiration date), please update as follows.
 - a. Review the license number in the **License Number** field. If the number is incorrect, you must add a new license.
 - b. Enter the new date in the **Expiration Date** field.
 - c. Select the state in the **State** field.
4. Click **Add** to save the changes.

Access and Update Covering Practitioners

Please review the panel **ONLY** if you are a **Primary Care Provider**.

From the **Steps** panel:

1. Click **Covering Practitioners**.
2. Verify the accuracy of the information presented on the panel. If there are errors or omissions, please update.
3. If you need to add a covering practitioner to your provider profile, please use instructions below.

Under **List of Practitioners**:

1. Click **New Item**.
2. Click **Search**.
3. Enter the practitioner name in the **Practitioner Name** field.
4. Click **Add** to save the changes.

Access and Update Group Practice Information

Please review **ONLY** if you are a **Group Practice Provider**.

From the **Steps** panel:

1. Click **Group Practice Info**.
2. Verify the accuracy of the information presented on the panel. If there are providers listed on the panel that no longer practice as part of your group, please take the time to assign an end-date to them on the page.
3. If you need to remove a group practice, add an **End Date**. Do not click **Remove**.
4. If you need to add a new provider to the list, please use instructions below.

Under **List of Servicing Providers**:

1. Click **New Item**.
2. Enter the provider name in the **Provider Name** field.
3. Enter the address in the **Address** field.

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4. Select **Provider Type** from the drop-down list.
5. Click **Add** to save the changes.

Access and Update Professional Affiliation Panel

Please review the panel **ONLY** if you are an individual provider affiliated with a hospital.

From the **Steps** panel:

1. Click **Professional Affiliation**.
2. Verify the accuracy of the information presented on the panel. If there are errors or omissions, please update.
3. If you need to add a new affiliation, please use instructions below.

Under **List of Affiliations**:

1. Click **New Item**.
2. Select the **Type** (Hospital, HLHC, or CHC) from the drop-down list.
3. Click **Select**. Choose the hospital or business from the drop-down menu.
4. Enter the new date in the **Effective Date** field.
5. Click **Update** to save the changes.

Access and Upload Attachments

From the **Steps** panel:

- Click **Attachments**.

Under **List of Attachments**:

- Click **New Item**.

Under **Attach and Send Files**:

1. From the **Document Type** drop-down menu, select the **PEC – Recredentialing Application** as a document type.
2. Click **Browse**.
3. Select the document to upload.
4. Click **Add / Upload** to add the document to the provider file.

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Access and Update Attestation Panel

Please make sure you have reviewed and updated all the necessary information in your provider profile **BEFORE** submitting this panel.

From the **Steps** panel:

1. Click **Attestation**.
2. Enter information required:
 - **Name**
 - **Date**
 - **Title**
3. Click **Submit** to save the changes.

Please Note: Changes are not immediately available for review. Modifications will not appear at the portal panel until they are reviewed and approved. The status of the update can be reviewed in the **Inquire Profile Update Status** panel under the **Provider Services** menu of options.

Documents that do not require an original signature must be uploaded for revalidation via the POSC. This list of required documents is posted on the MassHealth Provider Revalidation web page at

www.mass.gov/eohhs/provider/insurance/masshealth/provider-enrollment/provider-revalidation.html

REMEMBER: All documents that require an original signature (PE-FRD, EFT, and MA W-9) must be sent to the following address.

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If you have any questions about the information in this job aid, please contact the MassHealth Customer Services Center at 1-800-841-2900 or e-mail your inquiry to providersupport@mahealth.net.