

# How Do I Do It?

## A Resource Guide for Fee-for-Service Provider Enrollment - NY Medicaid

I need to.....	How do I do it?	I need more information.
.....change my name on my Medicaid enrollment file	<p><b>Practitioners:</b> Send an e-mail to <a href="mailto:providerenrollment@health.ny.gov">providerenrollment@health.ny.gov</a>. Include your NPI, new name, and the State in which your license was issued (e.g., New York State). <b>Group Practices:</b> Send an e-mail to <a href="mailto:providerenrollment@health.ny.gov">providerenrollment@health.ny.gov</a>. Include your NPI and new name. <b>Licensed entities:</b> Mail a copy of your updated license to: eMedNY, PO Box 4610, Rensselaer, NY 12144-4610.</p>	<p>Questions? Contact eMedNY at 800-343-9000.</p>
.....report a change of ownership	<p>Visit the <b>Provider Enrollment page</b> at <a href="http://www.eMedNY.org">www.eMedNY.org</a> and navigate to your profession/organization type. Complete the Enrollment Form and be sure to check the "<b>Change of Ownership</b>" box.</p>	<p>Questions? Contact eMedNY at 800-343-9000.</p>
.....report new managing employees, board members or others with a control interest	<p>Visit the Provider Enrollment page at <a href="http://www.eMedNY.org">www.eMedNY.org</a> and navigate to your profession/organization type. The appropriate <b>Disclosure Form</b> is found within the box titled "<b>Additional forms which may be required to complete your enrollment.</b>"</p>	<p>Questions? Contact eMedNY at 800-343-9000.</p>
.....change the address where Medicaid <b>correspondence</b> is sent	<p>Visit the <b>Provider Enrollment page</b> at <a href="http://www.eMedNY.org">www.eMedNY.org</a> and navigate to your profession/organization type. The Change of Address form link is found within the yellow highlight.</p>	<p>Questions? Contact eMedNY at 800-343-9000.</p>
.....change the address where <b>Medicaid checks are sent</b>	<p>Visit the <b>Provider Enrollment page</b> at <a href="http://www.eMedNY.org">www.eMedNY.org</a> and navigate to your profession/organization type. The Change of Address form link is found within the yellow highlight.</p>	<p>Questions? Contact eMedNY at 800-343-9000.</p>
.....add or delete a <b>service</b> address	<p>Most providers can complete the Change of Address form to add or delete a <b>service</b> address (see information above for address changes). Be sure to follow the "additional instructions based on provider type." However, address changes for <b>institutional providers</b> can only be made by the State licensing/approving agency.</p>	<p><b>Institutional providers</b> can e-mail <a href="mailto:providerenrollment@health.ny.gov">providerenrollment@health.ny.gov</a> All other providers should contact eMedNY at 800-343-9000.</p>
.....find out if I am actively enrolled	<p><b>Practitioners</b> should visit: <a href="https://www.emedny.org/info/opra.aspx">https://www.emedny.org/info/opra.aspx</a> and search to see if you are enrolled (both OPRA and non-OPRA enrollment). <b>Groups, businesses and institutional providers</b> should contact eMedNY at 800-343-9000.</p>	<p>Questions? Contact eMedNY at 800-343-9000.</p>

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.....sign-up for Electronic Funds Transfers (EFT)	Visit the <b>Provider Enrollment Maintenance page</b> at www.eMedNY.org and choose the EFT Authorization Form or <a href="#">click here</a> .	Questions? Contact eMedNY at 800-343-9000.
.....notify Medicaid that I have a collaborating or supervising physician	Visit the <b>Provider Enrollment page</b> at www.eMedNY.org and navigate to your profession/organization type. The collaborating or supervising form is found in the box titled, " <b>Additional forms which may be required to complete your enrollment.</b> "	Questions? Contact eMedNY at 800-343-9000.
.....end/terminate my enrollment with the Medicaid Program	Send a letter to eMedNY, PO Box 4610, Rensselaer, NY 12144-4610, which includes your NPI (if appropriate) and a contact name and telephone number for questions. When your file has been closed, you will receive a notification letter.	Questions? Contact eMedNY at 800-343-9000.
.....add specialties to my Medicaid enrollment file	Visit the <b>Provider Enrollment page</b> at www.eMedNY.org and navigate to your profession/organization type. The <b>Application as a Specialist form (eMedNY-490301)</b> is found within the box titled " <b>Additional forms which may be required to complete your enrollment.</b> " The form can also be accessed by <a href="#">clicking here</a> .	Questions? Contact eMedNY at 800-343-9000.
.....enroll or re-enroll in the NYS Medicaid Program	Visit the <b>Provider Enrollment page</b> at www.eMedNY.org and navigate to your profession/organization type. Complete the Enrollment Form and be sure to check the appropriate box: <b>New Enrollment</b> or <b>Reinstatement/ Reactivation</b> .	Questions? Contact eMedNY at 800-343-9000.
.....associate my enrollment with a group practice	Visit the <b>Provider Enrollment page</b> at www.eMedNY.org and navigate to your profession/organization type. The <b>Request for Medicaid Participation as a Group Member form (eMedNY-610202)</b> is found within the box titled " <b>Additional forms which may be required to complete your enrollment.</b> " The form can also be accessed by <a href="#">clicking here</a> .	Questions? Contact eMedNY at 800-343-9000.
.....disassociate my enrollment with a group practice	Send a letter to eMedNY, PO Box 4610, Rensselaer, NY 12144-4610, which includes your name, your NPI, the NPI of the group from which you are disassociating, and a contact name and telephone number for questions.	Questions? Contact eMedNY at 800-343-9000.

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.....revalidate my enrollment after I receive a letter to do so	Visit the <b>Provider Enrollment page</b> at www.eMedNY.org and navigate to your profession/organization type. Complete the Enrollment Form and be sure to check the " <b>Revalidation</b> " box.	Questions? Contact eMedNY at 800-343-9000.
....recertify my Electronic Transmitter Identification Number (ETIN)	If you've misplaced the ETIN Certification Form mailed to you, visit the <b>Provider Enrollment Maintenance page</b> at www.eMedNY.org and choose the <b>Certification Statement/Instructions for Existing ETINs</b> . You can also <a href="#">click here</a> to access the form.	Questions? Contact eMedNY at 800-343-9000.
.....request a new ETIN	Visit the <b>Provider Enrollment Maintenance page</b> at www.eMedNY.org and choose the <b>Provider Electronic/Paper Transmitter Identification Number (ETIN) form</b> . You can also <a href="#">click here</a> to access the form.	Questions? Contact eMedNY at 800-343-9000.
.....update my license	Most licenses issued by the NYS Education Department are updated automatically. If you need to send a copy of your license to Medicaid, please mail it to: eMedNY, PO Box 4610, Rensselaer, NY 12144-4610 . <b>Be sure your NPI is on your license.</b>	Questions? Contact eMedNY at 800-343-9000.
.....notify Medicaid that I am a member of a group with <b>no</b> private practice?	Visit the <b>Provider Enrollment page</b> at www.eMedNY.org and navigate to your profession/organization type. The <b>Provider Change Form (Practitioners in Groups) (eMedNY-426801)</b> is found within the box titled " <b>Additional forms which may be required to complete your enrollment.</b> " You can also <a href="#">click here</a> to access the form.	Questions? Contact eMedNY at 800-343-9000.
.....submit an application that requires a fee, however the NPI listed on the application is already enrolled with an active NYS Medicaid provider number, do I need to pay the fee again?	No. Visit the Provider Enrollment page at www.eMedNY.org and navigate to the Provider Enrollment Tab, scroll down and choose Application Fee, then choose The Application Fee Exemption Form (EMEDNY-520101) making sure to check off letter D.	Questions? Contact eMedNY at 800-343-9000.