



DECEMBER 2021

KMAP GENERAL BULLETIN 21250

Provider Application Fee Change - 2022

Per the Centers for Medicare and Medicaid Services (CMS) final rule 6028-F, state Medicaid programs must collect an application fee for new provider applications, re-enrollments (revalidations), and reactivations.

The following providers are exempt from the application fee:

- Individual providers, nonphysician practitioners, or groups
- Providers who are enrolled with Medicare
- Providers who paid the application fee to either Medicare or another state Medicaid plan
- Applicable provider types indicated in the matrix on the following page

The application fee for 2022 will be \$631. Payment must be made in the form of a check or money order to the State of Kansas – Medicaid. This amount will go into effect for any application received on and after January 1, 2022.

The enrollment fee must be paid for each provider type. The matrix on the following page indicates the application fee requirements by provider type.

Note: To waive the application fee, enrollment with or payment to Medicare must be verified through the Provider, Enrollment, Chain and Ownership System (PECOS) by the fiscal agent.

If an application fee is required and the appropriate payment is not included or is not in an acceptable format, the paperwork will be returned to the provider requesting proper payment.

The application fee will not be refunded in the event the application or revalidation is denied.

The application fee is waived during the Covid-19 public health emergency. Please reference [General Bulletin 20151](#) for more information.

KMAP

[Kansas Medical Assistance Program](#)

- [Bulletins](#)
- [Manuals](#)
- [Forms](#)

Customer Service

- 1-800-933-6593
- 7:30 a.m. - 5:30 p.m.
Monday - Friday

Provider Type	Owe an application fee?	
	Individual	Business
1 Hospital	NA	Yes
2 Ambulatory Surgical Center	NA	Yes
3 Custodial Care Facility	NA	Yes
4 Rehabilitation Facility	NA	Yes
5 Home Health Agency	NA	Yes
6 Hospice	NA	Yes
7 Capitation Provider	NA	No
8 Clinic Maternity/Early Childhood Intervention/Family Planning Clinic	NA	No
8 Clinic RHC/FQHC	NA	Yes
9 Advance Practice Nurse	No	No
10 Mid-level Practitioner	No	No
11 Mental Health Provider	No	Yes (Business) No (Group)
12 Local Education Agency	NA	Yes
13 Public Health Agency	NA	No
14 Podiatrist	No	No
15 Chiropractor	No	No
17 Therapist	No	No
18 Optometrist	No	No
19 Optician	No	No
20 Audiologist	No	No
21 Targeted Case Management	No	Yes
22 Hearing Aid Dealer	NA	Yes
23 Nutritionist	No	No
24 Pharmacy	NA	Yes
25 Durable Medical Equipment	NA	Yes
26 Transportation Provider	No	Yes
27 Dentist	No	No
28 Laboratory	NA	Yes
29 X-Ray Clinic	NA	Yes
30 Renal Dialysis Center	NA	Yes
31 Physician	No	No
42 Teaching Institution	NA	Yes
45 QMB	No	No
53 Head Start Facility	NA	Yes
54 Screening Providers	NA	Yes
55 Home Community Based Services	No	Yes
56 WORK	No	No (Agency or Non-agency)
70 Data Access Entity	No	No

Revised 12.2021