

**Aetna Better Health® of Kansas**  
9401 Indian Creek Parkway, Suite 1300  
Overland Park, KS 66210



# **Aetna Better Health® of Kansas**

## Contracting and Credentialing Process

Aetna Better Health of Kansas thought it would be helpful to present a brief outline of the KMAP Enrollment process and the subsequent Aetna Better Health contracting and credentialing workflow. This bulletin will share a synopsis of the process, which should help provide a better understanding of the steps followed when contracting a new group or facility or when affiliating a new individual to your practice.

### INTRODUCTION:

The State of Kansas requires providers who wish to serve members under the Kansas Medical Assistance Program first enroll through the KMAP Provider Enrollment Wizard. Group provider entities must be enrolled first, and once the group application is approved then each individual provider can be enrolled using the “IG” (Individual Within a Group) application and also choosing to associate with the appropriate group(s). Importantly through this enrollment process, the provider will also have the option to choose which Managed Care Organization (MCO) with whom they would like to participate.

Upon completion of these steps through KMAP, and if ABH of Kansas has been selected as a participating MCO, the KMAP enrollment application and associated documents are forwarded to the health plan. This information is downloaded and reviewed by a credentialing specialist to determine if the application enrollment type is appropriate and if the documents supplied are complete and date current.

Based on the application enrollment type that is received, there might be several additional steps necessary to fully complete the process. Below are several scenarios depending on the contracting and/or credentialing status of the application that is received, and the type of enrollment involved. To provide additional clarity along these lines, ABH of Kansas “*contracts*” at the group/facility/entity level, however “*credentials*” at the practitioner level.

### **Scenario:**

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**An Individual within a group (IG) application is received for an existing contracted entity:**

- If an IG enrollment application is received requesting affiliation with an ABH contracted entity and the IG applicant has not been previously credentialed with ABH of Kansas, the credentialing analyst will assign to the credentialing team to begin the full credentialing process. This process can take 45-60 days and upon completion a credentialing letter will be generated.
- If the application is for an individual that has previously been fully credentialed with ABH of Kansas, the credentialing analyst will assign the application to our configuration team to affiliate the provider with this contracted group entity. This process can take approximately 30 business days to complete and a network participation confirmation letter will be generated.

**An application is received for a new group practice, facility, or other entity:**

- If the application received is for a new group practice, facility, or other entity which has not previously *contracted* with ABH, a contract manager will be assigned to reach out to the entity and facilitate the review, completion, and return of the required signed contract. Once received, the plan will review, countersign, and share back with the new entity.
- Working in tandem with the outreach outlined above for the signed contract for this new entity, any applications received for an "IG" ( Individual Within a Group) that are tied to this new entity will also be reviewed by the credentialing team while awaiting receipt of the signed contract.
  - a) If the application is for an IG that has not been fully credentialed with ABH of Kansas, the credentialing analyst will assign to the credentialing team to begin the full credentialing process. This can take up to 45-60 days and upon completion a credentialing letter will be generated.
  - b) If the application is for an IG that has previously been fully credentialed with ABH of Kansas, the credentialing analyst will assign the application to the configuration team to affiliate the provider with the new group entity. This process can take up to 30 business days to complete and a network participation confirmation letter will be generated.

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If you are involved in the process of adding an individual to your existing practice and need to check the status of the affiliation based on the above steps, please reach out to the [Provider Experience](#) team.

**LINKS TO KMAP ENROLLMENT PROCESS BULLETINS:**

[KMAP Bulletin 19115 Managed Care Rule Provider Enrollment](#)

[KAMP Bulletin 20098 Enrollment Types, NPI Requirements, and MCO Contracting Request Form Notification](#)

[KMAP Provider Enrollment Wizard](#)

**Application Types**

Individual Enrollment Requirements	<p>Individuals must enroll.</p> <p>Providers who work for a practice or group should ensure that the group/practice is enrolled. These individual providers must enroll as an individual within a group (IG) and associate to the appropriate group(s)/practice(s).</p> <p>Individuals who own their own private practice and do billing under their Type 1 National Provider Identifier (NPI) will need to enroll as an Individual (I).</p> <p>Individuals with a Type 2 NPI (business) and a Type 1 NPI (individual) will need to enroll their Type 2 NPI as a Group, enroll their Type 1 NPI as an Individual within a Group, and associate to their Type 2 NPI which will be the billing provider.</p>
Group and Facility Enrollment Requirements	<p>Providers enrolling as a group or facility must enroll each service location independently. A service location is defined as a permanent, staffed, physical address that provides services on a daily basis.</p>

**Questions?**

If you have general questions about this communication, please contact our Provider Experience Department:

By Phone: **1-855-221-5656**

By Email: [providerexperience\\_ks@aetna.com](mailto:providerexperience_ks@aetna.com)

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