

STEP 1: Pre-application Qualifications

To qualify to provide services for the E&D waiver an agency will need to be currently established. By Division of Medicaid (DOM) standards, this means an agency must have been providing this service for at least one (1) year to clients who pay privately, out-of-pocket, or through their private insurance. The agency must also be located in a non-residential office/facility.

For full details on this, review the Quality Assurance Standards (QAS) for the service type provided by the agency. These can be found in the links below.

Personal Care Services: <https://medicaid.ms.gov/wp-content/uploads/2019/01/PCS-Quality-Assurance-Standards.pdf>

In-Home Respite Services: <https://medicaid.ms.gov/wp-content/uploads/2019/01/IHR-Quality-Assurance-Standards.pdf>

Adult Daycare Services: <https://medicaid.ms.gov/wp-content/uploads/2019/01/Adult-Day-Care-Quality-Assurance-Standards.pdf>

It is also very important to review the requirements in the current Administrative Codes, linked below.

[Administrative Code \(ms.gov\)](#) Part 200, General Provider Information

[Administrative Code \(ms.gov\)](#) Part 208 Home & Community Based Services (HCBS), Long Term Care

STEP 2: Virtual Provider Orientation

If the agency meets all requirements linked above, proceed to step 2, the Virtual Provider Orientation. This orientation gives additional information on the services provided and the process for submitting a proposal packet. There is a test following the orientation, so please allow time for focus and attention as the presentation is reviewed.

STEP 3: Proposal Submission

Upon successful completion of the Orientation test, our office will provide your agency with a Certificate of Completion as well as access to the Proposal Packet. The certificate must be submitted with the proposal, along with documentation that shows the agency meets all the requirements presented in the QAS, Administrative Codes, and Virtual Orientation. Please note, if the proposal is denied, it will not be returned so it is important to keep copies of all documents.

Virtual Site-visits will be scheduled with all provider types to ensure your office or facility location meets DOM standards before the review of your documentation begins.

If an application is submitted to provide Adult Daycare Services, an on-site visit will be scheduled to view the facility.

If the proposal is approved, an approval letter will be sent with instructions to continue to step 4.

STEP 4: Provider Enrollment Application

The final step is to submit an application for Provider Enrollment to Gainwell. Be advised, this step may take a while, so patience is appreciated. They may request additional information from your agency to be submitted to them. Once Gainwell has finished their credentialing process, the application will be forwarded to Provider Enrollment for processing.

If you have any questions, please reach out to HCBS Provider Relations by emailing hcbsproviders@medicaid.ms.gov.

Thank you for your interest in providing services for E&D Waiver participants.