Home & Community Based Services (HCBS) Elderly & Disabled Waiver Step-by-Step Enrollment Process Guide

STEP 1: Pre-application Qualification

To qualify to provide services for the E&D waiver an agency:

- Must be currently established with an EIN issued by the IRS. By Division of Medicaid (DOM) standards, this means an agency must have been providing services for at least one (1) year to clients who pay privately, out-of-pocket, or through their private insurance.
- Must reside in an office with a physical address in the State of Mississippi that is not located in or on the grounds of a personal residence for a minimum of six (6) months prior to enrollment and maintain an active business privilege tax license.
- Must be registered with the MS Secretary of State Office.
- Must have a roster of qualified personnel necessary to provide authorized services.

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

<u>Administrative Code</u> Part 200: General Provider Information

<u>Administrative Code</u> Part 208: Home & Community Based Services (HCBS), Long Term Services & Supports

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 of proposal submission. There is a test following the orientation, so please allow time for focus and attention as the presentation is reviewed.

STEP 3: Part 208 Training

This training is an overview of the provider requirements for the E&D Waiver Home and Community Based Services and the Admin Code updates effective 06/01/2025. Here you will review the training for the specific service type you provide and will be applying for. You must attest that the training has been completed by an individual authorized to represent the agency during an audit to receive the training certificate.

Link to Part 208 Provider Training: HCBS Waiver Providers - Mississippi Division of Medicaid

STEP 4: Proposal Submission

Upon successful completion of the Orientation Test and Part 208 Training, you will receive a Certificate of Completion for the Virtual Provider Orientation and Part 208 Training as well as access to the proposal

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submission links. The certificates must be uploaded and submitted with the proposal, along with other required documentation to verify the agency does meet the requirements presented in the Virtual Orientation, Part 208 Training, and the Administrative Codes. Please note that you will not be able to submit the proposal without the required documents. The proposal will be logged in and reviewed in the order received to determine if additional information/documents are needed. Incomplete applications will be denied. Any documentation suspected of being falsified will be reported to the Medicaid Fraud Unit.

STEP 5: Submission of Supporting Documents

Once the proposal and required documentation has been reviewed from step 4, your agency will receive an email requesting additional information/documentation to complete the review. If an application is submitted to provide Adult Day Care Services, a site visit will be scheduled to view the facility and a virtual visit will be completed for Personal Care Services and In-Home Respite Services. If the proposal is approved, an approval letter will be sent with instructions to continue to step 6.

STEP 6: 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 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 team by emailing HCBS-providers@medicaid.ms.gov. Thank you for your interest in providing services for E&D Waiver participants.