DSCC IMPACT GUIDE FOR ATYPICAL PROVIDERS

This document provides general information about completing the IMPACT provider enrollment application and updating the IMPACT enrollment record as needed. A provider must enroll in IMPACT before submitting claims. Failure to enroll accurately can lead to issues with the payment process.

IMPACT

IMPACT is a multi-agency effort to replace Illinois' 40-year-old Medicaid Management Information System (MMIS). This web-based system aims to meet federal requirements, be more convenient for providers and increase efficiency by automating and expediting state agency processes.

ENROLLMENT PROCESS SPECIFIC TO DSCC PROVIDERS

The University of Illinois Chicago's Division of Specialized Care for Children (DSCC), under an agreement with the Illinois Department of Healthcare and Family Services (HFS), operates the Home Care Program. The Home Care Program serves participants enrolled in the Home and Community-Based Services Waiver for Those Who are Medically Fragile Technology Dependent (MFTD). HFS has directed our organization to ensure that all MFTD providers become fully enrolled in the IMPACT system.

More information is available on our website at https://dscc.uic.edu/impact-information-and-resources/ or on the HFS website at www.illinois.gov/hfs/impact/Pages/default.aspx.

ADDITIONAL LINKS AND ASSISTANCE

Below are links that may be helpful when learning about the IMPACT enrollment process. There are also contact phone numbers for general questions about ILogin user accounts, login issues, application approval, or the IMPACT system.

DSCC Website
IMPACT Information and Resources: https://dscc.uic.edu/impact-information-and-resources/

HFS IMPACT Website
Website: https://hfs.illinois.gov/impact.html

IMPACT System
Website: https://IMPACT.illinois.gov

General IMPACT or Enrollment Process
Email: IMPACT.Help@Illinois.gov
Phone: (877) 782-5565 (select option 1)

ILogin User Account
Email: DoIT.Okta.Support@Illinois.gov

Login Issues
Email: IMPACT.Login@illinois.gov

IMPACT System
Contact the DSCC IMPACT Specialist
jlmorell@uic.edu, (800) 322-3722, ext. 1744

TERMS FOR ATYPICAL PROVIDERS

Application ID
A system-generated number that a provider must use to locate their enrollment or track their application in the system.

Atypical Provider
A provider who is delivering services to Medicaid clients that are not considered to be health care services. Examples of atypical providers reimbursed by the Medicaid Waiver program are electrical, exterminators, generator, home/vehicle modifications, and transportation. Even if these atypical providers submit HIPAA transactions, they still do not meet the HIPAA definition of health care and should not receive an NPI number.

Atypical Individual Provider
A Sole Proprietor or Rendering/Services provider who is not required to obtain an NPI to enroll in the IMPACT system.

Atypical Agency Provider
A facility, agency, or organization that is not required to obtain an NPI.

Comptroller
The state agency that certifies the validity of a Taxpayer Identification Number (TIN) as reported by the provider. All TINs must be certified by the Comptroller prior to enrollment into IMPACT.

New Enrollment
A new provider who must enroll in the IMPACT system.

Tax Identification Number (TIN)

Tax number registered by the Office of the Comptroller, which may be either a Social Security Number (SSN) or a Federal Tax Identification Number (FEIN). This number is used for tax purposes in the United States and may be assigned by the Social Security Administration or by the Internal Revenue Services (IRS).

ENROLLMENT PROCESS FOR ATYPICAL PROVIDERS

Before starting the enrollment application, ensure a Certified W-9 is on file with the Comptroller's office.

Any provider who will receive state/federal funds directly from the Comptroller for services provided to Medicaid clients must have a certified W-9 on file with the State Comptroller's Office. The only time the provider must submit a new W-9 to the Comptroller is when there has been a TIN or Payee Name change. If there has been a DBA Name change or change in address, the provider does not need to submit a new W-9. Any change must be updated in the IMPACT system.

Set up an account with IMPACT

Step 1: Set up an account with IMPACT. This is also called the "Single-Sign On process." To do this, go to https://impact.illinois.gov. Click "Register for a New Account".

Step 2: Activate the ILogin Account. On the ILogin activation email, click on the Activate Account button and complete the requested information.

Step 3: Now you can log into the ILogin Dashboard. All the applications that you have access to will appear on the screen. Click on the "HFS Impact Registration" application to begin the Identity Proofing process.

Step 4: After Identify Proofing is successful, click on Continue to IMPACT and then click on IMPACT to start the provider enrollment application. Click on New Enrollment.

Step 5: Start the application to get an Application ID#.

More information is available on our website at https://dscc.uic.edu/impact-information-and-resources/ or on the HFS website at www.illinois.gov/hfs/impact/Pages/default.aspx.

ENROLLMENT TYPE

An atypical provider delivers services that are not health care. Examples of atypical providers are families requesting travel reimbursement and environmental modification providers (e.g., electrical, exterminator, generator, home/vehicle modifications, transportation). Atypical providers are not required to obtain an NPI to enroll in IMPACT.

An atypical provider's enrollment type (individual or agency) is dependent on how they are certified with the Comptroller's office. They must enroll in IMPACT with the SSN or EIN certified.

The steps required to complete the application is based on the enrollment type selected. The information below is for the required steps only.

PROVIDER BASIC INFORMATION

Atypical individuals and agencies are required to enter basic information. The required fields are dependent on whether the provider is an individual or agency.

Applicant Type
Atypical individuals must select Atypical Individual/Sole Proprietor.

National Provider Identifier (NPI)
Atypical providers are not required to have an NPI since they deliver services that are not considered to be health care services.

LOCATIONS

Providers must enter their Primary Practice, Pay to and Correspondence addresses. The same address may be used for all three types. After entering the first address, the provider can copy this address to the other types.

SPECIALTY/SUB-SPECIALTY/TAXONOMY

Provider Type
The provider must select the Provider Type for the services they will deliver.

- Atypical Individuals are Social Services – AI.
- Atypical Agencies are Social Services – AA.

Specialty/Sub-Specialty
A provider's specialty and sub-specialty are required. The provider must select those that apply to the services provided. It is important for this information to be correct to prevent claims from being rejected.

- Atypical Individuals are Environmental Modification – AI/No sub-specialty.
- Atypical Agencies are Environmental Modification – AA/No sub-specialty.

Taxonomy Code
A taxonomy code is **not required** for atypical providers.

MODE OF CLAIM SUBMISSION/EDI EXCHANGE

This step is not applicable for Atypical Individuals. Atypical Agencies must select any of the six options to indicate how they wish to process claims.

PROVIDER CONTROLLING INTEREST/OWNERSHIP DETAILS

Atypical Individuals must enter Individual/Sole Proprietor or Managing Employee. Atypical Agencies must enter at least one Managing Employee and one other Ownership type. The total Percentage Owned must not exceed 100 percent.

ENROLLMENT CHECKLIST

All questions must be answered either Yes or No and comments entered when required. If a checklist item does not apply, select No.

SUBMIT ENROLLMENT APPLICATION FOR APPROVAL

Submit the application to the state for review.

RESUMING OR CHECKING THE STATUS OF AN EXISTING APPLICATION

The system will generate an application ID after the successful completion of the Basic Information screen. The application number is a 14-digit number that has the following components:

- The system date in YYYYYMMDD format
- A six-digit system generated random number
- Example: 20191007736159

Write this number down or save it. You will need this number to access your application before submitting it to the state for review. You will also need it to track the status of your submitted application until it is approved. If you do not have this number, you cannot access your application.

Application IDs are valid for 30 calendar days. All applications must be completed and submitted for review during this 30-day period, or the application will be deleted. If your application is deleted, you will have to start a new one.

It is the provider's responsibility to always keep their IMPACT application up to date. Failing to keep information in the IMPACT system current may affect provider enrollment and the claiming process.

To update the information in the IMPACT system, a provider must complete a modification. An example of a modification that an atypical provider must complete is updating their location and ownership information.

Note: A provider does not need to submit a new W-9 to the Comptroller's office for a change in address.

After completing the needed modification, the provider must complete the Submit Modification Request for Review step. If the provider does not complete this step, the modification(s) will not be submitted for approval. It typically takes four to six weeks for the application's approval.

Providers must complete all modifications at the same time. If a modification is submitted, the provider will not be able to complete additional modifications until the first modification is approved.

A provider may notify DSCC after completing a modification for it to be reviewed before being submitted.