• Introduction to IMPACT and Key Terms
• Application Process
• Resuming an Application
• Starting a New Application
• The Business Process Wizard (BPW)
• Completing the Application using BPW
• Reviewing Submitted Application
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• IMPACT is a multi-agency effort to replace Illinois’ 30-year-old Medicaid Management Information System (MMIS) with a web-based system that meets federal requirements, is more convenient for providers and increases efficiency by automating and expediting state agency processes.

• Key Terms:
  – Individual Rendering/Servicing Provider: A provider who does not bill Medicaid directly and who prescribes or refers items or services through a Group, Facility, Agency, Organization or Individual Sole Proprietor.
  – Billing Provider: A provider who submits claims and/or receives payment for an Individual provider.
  – MCO Plan: Health care plans that provide health care through a provider network. Sister Agencies will also be listed as an MCO. A sister agency is also known as a State Agency or a Waiver provider.
  – New Enrollment: A new provider who needs to enroll in IMPACT.
  – Revalidation: A provider previously enrolled in MMIS whose information was transferred to IMPACT. An Application ID was received by mail.

• Enrollment Timeline:
  – Individual providers will need to enroll or revalidate in IMPACT starting in August 2015.
Application Process

Step 1: Provider Basic Information
Step 2: Add Specialties
Step 3: Associate Billing Provider
Step 4: Add Licenses and Certifications
Step 5: Add Ownership Details
Step 6: Add Taxonomy Details
Step 7: Associate MCO Plan
Step 8: Complete Enrollment Checklist
Step 9: Submit Enrollment for Approval

Pressing this button on any screen will bring you back to this menu.

Pressing any of the buttons below will skip to that step of the presentation

Shortcut to Step: 1 2 3 4 5 6 7 8 9
• After completing the sign-on, click on **IMPACT Provider Enrollment**.

• In regards to completing an application, there are two options: New Enrollment or Resuming an application.
To resume (or revalidate) an application, click on **Track Application**.
The application number was either mailed out on a yellow card (revalidation) or sent to the listed email address (In-process application).

Enter the Application ID for the application you want to access.
After entering the ID number, click **Submit**.
This process will then go directly to the Business Process Wizard (BPW).
If completing a new application, click on **New Enrollment**.

- Use the radio buttons to select your enrollment type (Typical vs. Atypical), then click on **Submit** in the lower left corner.
Start New Application
(Step 1: Basic Provider Information)

Please complete all fields. At a minimum, all fields with an * are required.

- **Applicant Type** will need to be selected from the drop down and it drives the rest of the application.
- Click **Validate Address** after street address and zip code have been entered.
- After all the information has been entered click **Finish**.
• Application ID: systematically generated.
• Name: should reflect name from Basic Information.
• 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 6-digit system generated random number
  – Example: 20130514412598
• Application IDs are valid for 30 calendar days; applications must be completed and submitted to the state for review during this 30 day period or the application will be DELETED.
• The application ID will be used to access the application before submission to the state for review and will be used to track the status of your submitted application until it is marked approved.
• After documenting the ID number click **OK**.
Using the Business Process Wizard (BPW)

The BPW serves as the “Control Center” of the application.

<table>
<thead>
<tr>
<th>Step</th>
<th>Required</th>
<th>Start Date</th>
<th>End Date</th>
<th>Status</th>
<th>Step Remark</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step 1: Provider Basic Information</td>
<td>Required</td>
<td>05/21/2013</td>
<td>08/21/2013</td>
<td>Complete</td>
<td></td>
</tr>
<tr>
<td>Step 2: Add Specialties</td>
<td>Required</td>
<td></td>
<td></td>
<td>Incomplete</td>
<td></td>
</tr>
<tr>
<td>Step 3: Associate Billing Provider</td>
<td>Required</td>
<td></td>
<td></td>
<td>Incomplete</td>
<td></td>
</tr>
<tr>
<td>Step 4: Add License/Certification/Other</td>
<td>Optional</td>
<td></td>
<td></td>
<td>Incomplete</td>
<td></td>
</tr>
<tr>
<td>Step 5: Add Provider Controlling Interest/Ownership Details</td>
<td>Optional</td>
<td></td>
<td></td>
<td>Incomplete</td>
<td></td>
</tr>
<tr>
<td>Step 6: Add Taxonomy Details</td>
<td>Optional</td>
<td></td>
<td></td>
<td>Incomplete</td>
<td></td>
</tr>
<tr>
<td>Step 7: Associate MCO Plan</td>
<td>Optional</td>
<td></td>
<td></td>
<td>Incomplete</td>
<td></td>
</tr>
<tr>
<td>Step 8: Complete Enrollment Checklist</td>
<td>Required</td>
<td></td>
<td></td>
<td>Incomplete</td>
<td></td>
</tr>
<tr>
<td>Step 9: Submit Enrollment Application for Approval</td>
<td>Required</td>
<td></td>
<td></td>
<td>Incomplete</td>
<td></td>
</tr>
</tbody>
</table>

- **Required**: Steps listed as *Optional* may change to *Required* based upon previous steps.
- **Dates**: Entered by the system; *Start Date* is the date each step is opened, the *End Date* is the date each step is completed.
- **Status**: When a step is completed the *Status* will be updated to *Complete*; answering some checklist questions may change a prior step’s status back to *Incomplete*.
- **Remarks**: *Remarks* are systematically generated throughout the enrollment process.
• Once you have documented your Application ID, you have completed Step 1: **Provider Basic Information**. The system will place the current date in the **End Date** field and will place **Complete** in the corresponding **Status** field.
• **Steps 1 and 2** must be completed before attempting any of the later steps.
• Click on Step 2: **Add Specialties** to continue completing your application.

![Business Process Wizard - Provider Enrollment (Individual). Click on the Step # under the Step Column.](image)
Step 2: Add Specialties

- Click the *Add* button in the upper left corner.
Step 2: Add Specialties

- Select your **Provider Type** from the drop down.
- Select your **Specialty** from the drop down.
Step 2: Add Specialties

- Once the Provider Type and the Specialty are selected, the Subspecialties will populate at the bottom of the screen in the *Available Subspecialties* box.
- The Provider must choose at least one Available Subspecialty (or No Subspecialty) if multiple selections are available.
- If only one choice is available, the system will preselect that selection.
- Once all desired selections are moved to the *Associated Subspecialties* box, click *OK* in the bottom right corner.
If you have another Specialty/Subspecialty to enter click the Add button in the top left corner and repeat the previous steps.

When all the specialties/subspecialties have been entered, click Primary Specialty to designate one of the listed Specialties as Primary.
Step 2: Add Specialties

- Choose the **Primary Specialty** for this enrollment from the drop down menu.
- Choose the appropriate radio icon to select board certified or not.
- Complete the **Start Date** field. Leave **End Date** blank.
- When all information has been entered, click on **Save** then **Close**.
Step 2: Add Specialties

- When all the Specialty information has been entered, click on Close to return to the BPW.
You have completed Step 2: **Add Specialties**. The system will place the current date in the **End Date** field and will place **Complete** in the corresponding **Status** field.

- Click on Step 3: **Associate Billing Provider** to continue your application.
Step 3: Associate Billing Provider

- Click **Add** to associate to a Billing Provider.
Step 3: Associate Billing Provider

- Once all information has been entered, click on **Confirm Provider** and verify the correct **Provider Name** is displayed.
- Click **OK** when you are finished.
Step 3: Associate Billing Provider

- Click **Add** and repeat the process as necessary.
- If there are no other Billing Providers to add, click on **Close** to return to the BPW.
You have completed Step 3: **Associate Billing Provider**. The system will place the current date in the **End Date** field and will place **Complete** in the corresponding **Status** field.

Click on Step 4: **Add Licenses and Certifications** to continue your application.
Step 4: Add Licenses/Certifications/Other

- Click on the **Add** button to begin adding Licenses and Certifications.
Click the drop down menu next to License/Certification Type to select your License/Certification, then enter the License/Certification Number and Effective Date in the appropriate fields. Leave the End Date field blank.

After all information is entered, click on Confirm License/Certification.

Clicking this button will result in the License/Certification being validated and update the Valid Flag to Yes if it is verified to be authentic.

Click Ok.
If any additional Licenses/Certifications, click on the Add button in the top left corner and repeat the steps.

Click Close once all Licenses/Certifications have been entered to return to the BPW.
You have completed Step 4: **Add Licenses and Certifications**. The system will place the current date in the *End Date* field and will place *Complete* in the corresponding *Status* field.

Click on Step 5: **Add Ownership Details** to continue your application.
Step 5: Controlling Interest/Ownership

- It is required that ownership of 5% or more in any other Medicaid/Medicare entity be entered.
- To enter Ownership details in another Medicaid/Medicare Entity, click on **Add Other Owned Entity**.
Step 5: Controlling Interest/Ownership

Please complete all fields. At a minimum, all fields with an * are required.

- After entering the street address and zip code, click **Validate Address**.
- When all information is complete, click **OK**.
- Repeat these steps to add ownership in another Medicaid/Medicare Entity.
Step 5: Controlling Interest/Ownership

- To enter ownership details in another entity, click **Add Other Owned Entity** and repeat the previous steps.
- When all ownership details have been entered, click on **Close**.
• You have completed Step 5: *Add Ownership Details*. The system will place the current date in the *End Date* field and will place *Complete* in the corresponding *Status* field.
• Click on Step 6: *Add Taxonomy* to continue your application.

![Business Process Wizard (BPW)](image)
Step 6: Add Taxonomy Details

- To enter taxonomy details click on **Add**.
Step 6: Add Taxonomy Details

- If the code is known, enter the **Taxonomy Code** and the **Start Date**.
- **End Date**: Leave blank. This can be updated at a later time.
- Click on **Confirm Taxonomy** and verify **Description** is populated correctly.
- Click on **OK** to finalize the submission.
• If code is not known, click on the ▶ to the right of the box to access The National Uniform Claim Committee Taxonomy Code list. This will open a web browser window.
• At least one of the Taxonomy Codes entered in IMPACT must be the Taxonomy Code registered with the National Plan and Provider Enumeration System (NPPES).
Step 6: Add Taxonomy Details

- In the web browser window that opens will be a list of provider types.
- Click + next to the appropriate provider type for your enrollment.
Step 6: Add Taxonomy Details

- Click on the + next to the appropriate profession listed under the heading which you previously selected.
Step 6: Add Taxonomy Details

- Click on the + next to the appropriate profession listed under the heading which you previously selected.
- Make a note of the **Taxonomy Code** that is correct for your area of practice.
- Click on the X button in the upper right corner to close the National Uniform Claim Committee webpage.
• Enter the **Taxonomy Code** and the **Start Date**.
• Leave **End Date** blank. This can be updated at a later time.
• Click on **Confirm Taxonomy** and verify **Description** is populated correctly.
• Click on **OK** to finalize the submission.
Repeat the steps by clicking on the **Add** button for any additional Taxonomy Codes that need to be entered.

Otherwise, click on the **Close** button in the upper left corner.
• You have completed Step 6: **Add Taxonomy**. The system will place the current date in the **End Date** field and will place **Complete** in the corresponding **Status** field.
• Click on Step 7: **Associate MCO** to continue your application.
Step 7: Associate MCO Plan

- Click **Add** to associate a MCO plan for which there is a current valid contract.
- Specific MCO plans can be added only once to the application.
- Sister Agencies will also be listed as an MCO Plan. A sister agency is also known as a State Agency or a Waiver provider.
Step 7: Associate MCO Plan

• Enter a Plan ID and Association Start Date.
• End Date: Leave Blank.
• Click Confirm/Search Plan to confirm the plan ID or to search for the plan.
• Verify the Plan Name populated correctly, then click OK.
• If the MCO is not known, click on Confirm/Search Plan to search for a plan.
Step 7: Associate MCO Plan

- Use the **Filter By** drop down and enter desired information to filter the available MCO plans.
- When the desired MCO plan is located, click on the checkbox next to the that line then, click **Select**.
Step 7: Associate MCO Plan

• Verify the MCO Plan information populated correctly.
• Click **OK**.
Step 7: Associate MCO Plan

- Click **Add** and repeat the previous steps to associate to an additional MCO Plan.
- If all MCO Plans have been entered, click **Close** to return to the BPW.
You have completed Step 7: **Associate MCO**. The system will place the current date in the **End Date** field and will place **Complete** in the corresponding **Status** field.

Click on Step 8: **Complete Enrollment Checklist** to continue your application.
Step 8: Complete Enrollment Checklist

- All questions must be answered either **Yes** or **No** and comments made if directed to do so, if a Checklist item does not apply, select **No** as the answer.
- After all of the questions have been answered and comments made, click on the **Save** button in the upper left corner followed by clicking on the **Close** button.
• You have completed Step 8: *Complete Enrollment Checklist*. The system will place the current date in the *End Date* field and will place *Complete* in the corresponding *Status* field.
• Click on Step 9: *Submit Enrollment Application* to continue your application.
• Click *Next* to confirm that all of the information that you have submitted as a part of the application is accurate.
• Read through all of the terms and conditions.
• Check the box certifying that you agree to the Terms and Conditions.
• Then select **Submit Application**.
• The below message will appear advising that the application has been submitted to the state for review. The application number can be used through the track application option after sign-on to check the status of the application.
• Click **OK** on the message box.
You have completed Step 9: *Submit Enrollment Application*. The system will place the current date in the *End Date* field and will place *Complete* in the corresponding *Status* field.
• For more information regarding IMPACT, please visit http://www.illinois.gov/hfs/impact/Pages/AboutIMPACT.aspx

• Check out the definitions of common terms at http://www.illinois.gov/hfs/impact/Pages/Glossary.aspx
Questions and Answers

• FAQ’s can be found at http://www.illinois.gov/hfs/impact/Pages/faqs.aspx to help resolve common questions and problems when submitting applications.

• General questions regarding IMPACT can be addressed to:
  ➢ Email: IMPACT.Help@Illinois.gov
  ➢ Phone: 1-877-782-5565