



P.O. Box 2100  
Frankfort, KY 40602  
Phone: 1-800-807-1232

Dear Kentucky Medicaid Provider:

HP Enterprise Services, in conjunction with the Kentucky Department for Medicaid Services, would like to invite you to join us for our Spring Seminar. This seminar is designed to offer providers instruction and assistance with billing claims to Kentucky Medicaid. Each session will include a comprehensive reference listing, billing scenarios, and a Q&A session. Additionally, these sessions will include presentations by the Regional Nurse Consultants regarding the KenPAC program in the applicable sessions.

The sessions will be held according to specific provider types. If you have obtained a new Kentucky Medicaid provider number that begins with a 71, please refer to your provider type. Morning sessions begin promptly at 9:00am. The session should conclude at 11:00am. The afternoon session will begin at 1:30pm and conclude by 3:30pm. Please refer to the following pages to see what time your session will be held.

**All attendees are required to print the workshop packet materials. The packet materials will be available beginning March 29, 2010 on the [www.kymmisis.com](http://www.kymmisis.com) website under the Provider Relations\Workshop heading. Please note: The workshop materials will not be provided at the workshop site.**

Please complete the enclosed form and email your date/time selection to [kymmisisprovidersvp@exsc01.exch.hp.com](mailto:kymmisisprovidersvp@exsc01.exch.hp.com) ; or fax it to (502) 209-3246.

Your prompt response will be greatly appreciated as we anticipate a large number of providers in attendance and want to be sure we can accommodate everyone. For further questions contact Provider Inquiry at 800-807-1232 Please do not contact the facilities for questions or directions. Directions to the facilities are located at [www.kymmisis.com](http://www.kymmisis.com). Click on Provider Relations\Workshop.

## **KENTUCKY MEDICAID PROVIDER SEMINARS LOCATIONS**

**Jenny Wiley State Park Convention Center**  
75 Theater Court Prestonsburg, KY 41653  
April 7 and April 8, 2010

**Kentucky Dam State Park Convention Center**  
113 Administration Drive Gilbertsville KY 42044  
April 14 and April 15, 2010

**Hope Community Church**  
5930 US HWY 127 South Frankfort KY 40601  
April 20, April 21 and April 22, 2010

**Holiday Inn University Plaza**  
1021 Wilkinson Trace Bowling Green, KY  
April 27 and April 28, 2010

**Fern Valley Hotel and Conference Center**  
2715 Fern Valley Road Louisville, KY 40213  
May 4 and May 5, 2010

**Please mark the session you will attend and the number of staff attending:**

<b>Jenny Wiley, April 7, 2010</b>		
Provider Group	Time	Number of Staff Attending
Hospital (PT 01), Mental Hospital (PT 02), PRTF(PT 04) , DPU (PT 92, 93)	<b>Session A</b> April 7, 2010 9:00 am – 11:00 am	
Dental(PT 60)	<b>Session B</b> April 7, 2010 9:00 am – 11:00 am	
Hospice (PT 44)	<b>Session C</b> April 7, 2010 9:00 am– 11:00 am	
Physicians (PT 64/65), Advanced Registered Nurse Practitioners(PT 78), Physician Assistant (PT95)	<b>Session D</b> April 7, 2010 1:30 pm – 3:30 pm	
Durable Medical Equipment (PT90)	<b>Session E</b> April 7, 2010 1:30 pm – 3:30 pm	
Transportation (PT 55)	<b>Session F</b> April 7, 2010 1:30 pm – 3:30 pm	

<b>Jenny Wiley, April 8, 2010</b>		
Provider Group	Time	Number of Staff Attending
Nursing Facility, Intermediate care Facilities PT (12)	<b>Session G</b> April 8, 2010 9:00 am – 11:00 am	
Home Health (34), Model Waiver II (PT 41) HCB Waiver (PT 42)	<b>Session H</b> April 8, 2010 9:00 am – 11:00 am	
Supports for Community Living (PT 33), Adult Brain Injury(PT 17), Adult Day Care( PT 43), Consumer Directed Option	<b>Session I</b> April 8, 2010 9:00 am – 11:00 am	
Certified Primary Care (PT31), Rural Health (PT 35)	<b>Session J</b> April 8, 2010 1:30 pm – 3:30 pm	
EPSDT(PT 45)	<b>Session K</b> April 8, 2010 1:30 pm – 3:30 pm	

**Contact Name/Phone Number**  
**Email Address/Provider Number**


**Please mark the session you will attend and the number of staff attending:**

<b>Kentucky Dam, April 14, 2010</b>		
Provider Group	Time	Number of Staff Attending
Hospital (PT 01), Mental Hospital (PT 02), PRTF(PT 04) , DPU (PT 92, 93)	<b>Session A</b> April 14, 2010 9:00 am – 11:00 am	
Dental(PT 60)	<b>Session B</b> April 14, 2010 9:00 am – 11:00 am	
Hospice (PT 44)	<b>Session C</b> April 14, 2010 9:00 am – 11:00 am	
Physicians (PT 64/65), Advanced Registered Nurse Practitioners(PT 78), Physician Assistant (PT95)	<b>Session D</b> April 14, 2010 1:30 pm – 3:30 pm	
Durable Medical Equipment (PT90)	<b>Session E</b> April 14, 2010 1:30 pm – 3:30 pm	
Transportation (PT 55)	<b>Session F</b> April 14, 2010 1:30 pm – 3:30 pm	

<b>Kentucky Dam, April 15, 2010</b>		
Provider Group	Time	Number of Staff Attending
Nursing Facility, Intermediate care Facilities PT (12)	<b>Session G</b> April 15, 2010 9:00 am – 11:00 am	
Home Health (34), Model Waiver II (PT 41) HCB Waiver (PT 42)	<b>Session H</b> April 15, 2010 9:00 am – 11:00 am	
Supports for Community Living (PT 33), Adult Brain Injury(PT 17), Adult Day Care( PT 43), Consumer Directed Option	<b>Session I</b> April 15, 2010 9:00 am – 11:00 am	
Certified Primary Care (PT31), Rural Health (PT 35)	<b>Session J</b> April 15, 2010 1:30 pm – 3:30 pm	
EPSDT(PT 45)	<b>Session K</b> April 15, 2010 1:30 pm – 3:30 pm	

**Contact Name/Phone Number**  
**Email Address/Provider Number**


Please mark the session you will attend and the number of staff attending:

Hope Community Church, April 20, 2010		
Provider Group	Time	Number of Staff Attending
Hospital (PT 01), Mental Hospital (PT 02), PRTF(PT 04) , DPU (PT 92, 93)	<b>Session A</b> April 20, 2010 9:00 am – 11:00 am	
Dental(PT 60)	<b>Session B</b> April 20, 2010 9:00 am – 11:00 am	
Hospice (PT 44)	<b>Session C</b> April 20, 2010 1:30 pm – 3:30 pm	
Physicians (PT 64/65), Advanced Registered Nurse Practitioners(PT 78), Physician Assistant (PT95)	<b>Session D</b> April 20, 2010 1:30 pm – 3:30 pm	

Hope Community Church, April 21, 2010		
Provider Group	Time	Number of Staff Attending
Durable Medical Equipment (PT90)	<b>Session E</b> April 21, 2010 9:00 am – 11:00 am	
Transportation (PT 55)	<b>Session F</b> April 21, 2010 9:00 am – 11:00 am	
Nursing Facility, Intermediate care Facilities PT (12)	<b>Session G</b> April 21, 2010 1:30 pm – 3:30 pm	
Home Health (34), Model Waiver II (PT 41) HCB Waiver (PT 42)	<b>Session H</b> April 21, 2010 1:30 pm – 3:30 pm	

Hope Community Church, April 22, 2010		
Supports for Community Living (PT 33), Adult Brain Injury(PT 17), Adult Day Care( PT 43), Consumer Directed Option	<b>Session I</b> April 22, 2010 9:00 am – 11:00 am	
Certified Primary Care (PT31), Rural Health (PT 35)	<b>Session J</b> April 22, 2010 9:00 am – 11:00 am	
EPSDT(PT 45)	<b>Session K</b> April 22, 2010 1:30 pm – 3:30 pm	

Contact Name/Phone Number  
Email Address/Provider Number


**Please mark the session you will attend and the number of staff attending:**

<b>Bowling Green, April 27, 2010</b>		
Provider Group	Time	Number of Staff Attending
Hospital (PT 01), Mental Hospital (PT 02), PRTF(PT 04) , DPU (PT 92, 93)	<b>Session A</b> April 27, 2010 9:00 am – 11:00 am	
Dental(PT 60)	<b>Session B</b> April 27, 2010 9:00 am – 11:00 am	
Hospice (PT 44)	<b>Session C</b> April 27, 2010 9:00 am– 11:00 am	
Physicians (PT 64/65), Advanced Registered Nurse Practitioners(PT 78), Physician Assistant (PT95)	<b>Session D</b> April 27, 2010 1:30 pm – 3:30 pm	
Durable Medical Equipment (PT90)	<b>Session E</b> April 27, 2010 1:30 pm – 3:30 pm	
Transportation (PT 55)	<b>Session F</b> April 27, 2010 1:30 pm – 3:30 pm	

<b>Bowling Green, April 28, 2010</b>		
Provider Group	Time	Number of Staff Attending
Nursing Facility, Intermediate care Facilities PT (12)	<b>Session G</b> April 28, 2010 9:00 am – 11:00 am	
Home Health (34), Model Waiver II (PT 41) HCB Waiver (PT 42)	<b>Session H</b> April 28, 2010 9:00 am – 11:00 am	
Supports for Community Living (PT 33), Adult Brain Injury(PT 17), Adult Day Care( PT 43), Consumer Directed Option	<b>Session I</b> April 28, 2010 9:00 am – 11:00 am	
Certified Primary Care (PT31), Rural Health (PT 35)	<b>Session J</b> April 28, 2010 1:30 pm – 3:30 pm	
EPSDT(PT 45)	<b>Session K</b> April 28, 2010 1:30 pm – 3:30 pm	

**Contact Name/Phone Number**  
**Email Address/Provider Number**


**Please mark the session you will attend and the number of staff attending:**

<b>Louisville, May 4, 2010</b>		
Provider Group	Time	Number of Staff Attending
Hospital (PT 01), Mental Hospital (PT 02), PRTF(PT 04) , DPU (PT 92, 93)	<b>Session A</b> May 4, 2010 9:00 am – 11:00 am	
Dental(PT 60)	<b>Session B</b> May 4, 2010 9:00 am – 11:00 am	
Hospice (PT 44)	<b>Session C</b> May 4, 2010 9:00 am – 11:00 am	
Physicians (PT 64/65), Advanced Registered Nurse Practitioners(PT 78), Physician Assistant (PT95)	<b>Session D</b> May 4, 2010 1:30 pm – 3:30 pm	
Durable Medical Equipment (PT90)	<b>Session E</b> May 4, 2010 1:30 pm – 3:30 pm	
Transportation (PT 55)	<b>Session F</b> May 4, 2010 1:30 pm – 3:30 pm	

<b>Louisville, May 5, 2010</b>		
Provider Group	Time	Number of Staff Attending
Nursing Facility, Intermediate care Facilities PT (12)	<b>Session G</b> May 5, 2010 9:00 am – 11:00 am	
Home Health (34), Model Waiver II (PT 41) HCB Waiver (PT 42)	<b>Session H</b> May 5, 2010 9:00 am – 11:00 am	
Supports for Community Living (PT 33), Adult Brain Injury(PT 17), Adult Day Care( PT 43), Consumer Directed Option	<b>Session I</b> May 5, 2010 9:00 am – 11:00 am	
Certified Primary Care (PT31), Rural Health (PT 35)	<b>Session J</b> May 5, 2010 1:30 pm – 3:30 pm	
EPSDT(PT 45)	<b>Session K</b> May 5, 2010 1:30 pm – 3:30 pm	

**Contact Name/Phone Number**  
**Email Address/Provider Number**
