



MARYLAND
Department of Health

**Addendum Cover Page for Maryland
Medical Assistance Program Application
FACILITY/ORGANIZATION
PT 53 Pediatric Nursing/Home Health Aide Services Agency**

If you have questions, please contact the Provider Enrollment Helpline at **1-844-4MD-PROV (1-844-463-7768)**
Monday – Friday from 7am – 7pm.

All providers are required to use the electronic Provider Revalidation and Enrollment Portal, or ePREP (eprep.health.maryland.gov) for enrollment, information updates, provider affiliations and revalidations.

THIS ADDENDUM IS FOR INFORMATIONAL PURPOSES ONLY

Within ePREP, click “N/A” in the “Addenda/Supporting Documents” section within the application’s “Additional Information” section, under “Practice Information”.

*You must attend the Division of Nursing Services’ (DONS) Provider Applicant Training before enrollment approval. You will be contacted by the DONS regarding when the next training session will be held upon receipt of your application. If you have any questions regarding the enrollment process you may direct them to mdh.pdnpreauthorization@maryland.gov or call 410-767-1448.

*In order to enroll as a Pediatric Nursing/Home Health Aide Services Agency your Residential Services Agency license must be **Level Three: Complex Care (care provided by RN, LPN and RN Supervision of Aides)** issued by the Office of Health Care Quality.

Please visit health.maryland.gov/ePREP for more information about ePREP