



*You will need:*

- *Your NPI Number (if you have one, otherwise see Part 1.A)*
- *Your State License Number*
- *Your employer's (District or Co-op) NPI Number*

## **PART 1.A: ACQUIRING YOUR NPI NUMBER**

**Note: If you already have an NPI number (and know it), you can skip to PART 2. If you have an NPI number but don't know it, see PART 1.B.**

Navigate to <http://nppes.cms.hhs.gov/#/>

1. Click *Create or Manage an Account*
  - a. Click OK
2. Click Accept
3. Click Create Account Now
4. Enter:
  - a. Email address (twice)
  - b. CAPTCHA text
5. Click Continue
6. Enter:
  - a. User ID
  - b. Password
  - c. Confirm password
  - d. Security questions/answers
7. Click Continue
8. Enter:
  - a. First Name
  - b. Last Name
  - c. Business Phone
  - d. Date of Birth
  - e. Social Security Number
  - f. Personal Phone
  - g. Home Address
  - h. City
  - i. State
  - j. Postal Code
9. Click Continue

10. If prompted, choose to use Standardized Address

### **PART 1.B: IF AN ACCOUNT IS ALREADY PRESENT (BUT YOU DON'T KNOW YOUR NPI NUMBER)**

Call **866-484-8049** for live help in accessing your account.

1. Voice prompt number one: Enter 1
2. Voice prompt number two: Enter 4 (I and A – Identity & Access)

### **PART 2: IMPACT ACCOUNT CREATION PROCESS (This part takes about 30 minutes)**

Navigate to <http://impact.illinois.gov>

1. Click Create New Account
2. Choose Service Provider/Billing Agent
3. Click Next
4. Enter:
  - a. First Name
  - b. Last Name
  - c. Email (twice)
  - d. Phone
  - e. Verification Question
5. Click I Agree
6. Click Next
7. Enter:
  - a. User ID
  - b. Password (twice)
  - c. Secret Questions (four)
8. Click Create Account
9. Click Login to your account

### **PART 3: IMPACT APPLICATION**

1. Click Request Application Access
2. Click the Illinois state logo
3. Under Step 2, click IMPACT
4. Click Request Access
5. Click I Accept on the next page
6. Click I Agree
7. Confirm basic information
8. Enter:
  - a. First Name
  - b. Last Name
  - c. Date of Birth

- d. Street Address
- e. City
- f. State
- g. ZIP code
- h. Last 4 digits of Social Security Number
9. Answer the questions about accounts you may have had
  - a. This is to verify your identity and is a soft credit report. It will not have any impact on your credit score.
10. Click Logout

#### **PART 4: IMPACT APPLICATION, CONTINUED**

1. Log in
2. Click IMPACT under Applications
3. Click New Enrollment
4. Choose Regular Individual/Sole Proprietor or Rendering/Service Provider
5. Click Submit
6. Click Step 1: Provider Basic Information
7. Enter Basic Info:
  - a. First Name
  - b. Last Name
  - c. Social Security Number
  - d. Date of Birth
  - e. Applicant Type (Rendering/Service Only)
  - f. NPI Number
  - g. Contact Email (enter at least one)
  - h. Home Address
  - i. City (enter below OTHER)
  - j. County (enter below OTHER)
  - k. State
  - l. Country
  - m. Click Validate Address
8. Click Finish
9. **Record your Application ID for future reference/troubleshooting**
10. Click OK

#### **PART 5: ADD SPECIALTIES**

1. Click Step 2: Add Specialties
2. Click Add
3. Choose your provider type
4. Choose your specialty
  - a. Note: No need to enter a subspecialty
5. Enter today's date in Start Date

6. Leave End Date blank
7. Click OK
8. Click Primary Specialty
9. Choose the appropriate specialty
10. Click Save
11. Click Close

**Note: For this application process, CLOSE equals Save & Close. You must click CLOSE on each step in order for the information to save and the application to advance to the next step.**

#### **PART 6: ASSOCIATE A BILLING PROVIDER**

1. Click on Step 3: Associate Billing Provider
2. Click Add
3. Type: NPI
4. Enter your district's NPI number under ID
5. Enter today's date under Start Date
6. Leave End Date blank
7. Click Confirm Provider
  - a. You should see your district/co-op appear beside Provider Name
8. Click OK
9. Click Close

#### **PART 7: ADD LICENSES/CERTIFICATIONS/OTHER**

1. Click Step 4: Add License/Certification/Other
2. Click Add
3. Choose **State Professional License** under License/Certification/Other Type
4. Enter
  - a. State
  - b. License Number
  - c. Effective Date (today's date)
5. Click Confirm License/Certification/Other
6. Click OK
7. Click Close

**Note: It's okay to skip Step 5: Add Provider Controlling Interest/Ownership Details**

#### **PART 8: TAXONOMY DETAILS**

1. Click Step 6: Add Taxonomy Details
2. Click Add
3. Click on 'Click here for taxonomy list'
4. Search for appropriate taxonomy
  - a. Speech therapy: **235Z00000X**

- b. School Psychologist: **103TS0200X**
  - c. **Note: 0 = zero**
5. Enter appropriate taxonomy code in Taxonomy Code field
  - a. Note: Field is case sensitive
6. Enter today's date in Start Date
7. Click Confirm Taxonomy
8. Click OK
9. Click Close

**Note: It's okay to skip Step 7: Associate MCO Plan**

#### **PART 9: CHECKLIST**

1. Click Step 8: Complete Enrollment Checklist
2. Answer the list of questions
  - a. Note: Most or all questions will be answered with "No"
3. Click Save
4. Click Close

#### **PART 10: SUBMIT ENROLLMENT APPLICATION FOR APPROVAL**

1. Click Step 9: Submit Enrollment Application for Approval
2. Under Final Submission, click Next
3. Check the box to agree
4. Click Submit Application
5. Be patient – the page loads slowly. Confirmation will say application has been successfully submitted to the state
6. REMINDER: **Write down your application number for troubleshooting purposes**