Provider Enrollment
Electronic Signature Instructions
The electronic signatures portion of the Provider Enrollment on the Portal (PEP) process helps providers and provider administrators save time and avoid deficiencies that may occur when physically signing and mailing required documents.

Providers can opt out of this step if they prefer not to e-sign required documentation or they do not have the capability to do so. They can then continue their enrollment application in PEP and provide required documents via mail.

Providers who elect to e-sign documents should remember that these documents are legally binding and there may be some limitations to upload sizes and which documents can and cannot be e-signed.

It is the responsibility of the provider administrator to ensure that all documents are signed, electronically or not, and provided to TMHP in a timely manner. Providers can only submit online applications and use electronic signatures after they have activated a TMHP User Account and a Portal ID. Instructions for activating an account are available in the TMHP Portal Security Provider Training Manual.

Assign the Agreements for Electronic Signature

The Provider Administrator must assign the agreements to the enrolling provider so that they can be signed electronically. The following enrollment agreements can be e-signed:

- The Electronic Funds Transfer (EFT) Agreement
- The HHSC Medicaid Provider (Traditional Medicaid) Program Agreement
- The Provider Agreement with the Health and Human Services Commission (HHSC) for Participation in the Children with Special Health Care Needs (CSHCN) Services Program
- The HHSC Medicaid Provider Agreement (THSteps Dental) Agreement
- The HHSC Medicaid Ordering or Referring Provider Agreement

1) Acknowledge that the application is complete, then indicate whether electronic signatures will be used to complete the application, or not.
2) Users who selected “Yes” in the previous step will enter the Portal User ID for each agreement in the “User ID of Authorized Signatory” field. PEP will assign each agreement to the designated Portal User ID.

3) Click **Validate Portal User ID(s)** to validate the Portal User IDs.
4) PEP will list the designated Portal User IDs and their email addresses. Click **Activate Agreement for E-Signature button** to forward the agreement for the providers’ electronic signatures.

5) TMHP will send the providers an email titled “Signature Required for Texas State Health-Care Program Agreements.” The email will prompt them to log in to the TMHP portal with their Portal User ID and e-sign their agreements.
Accept and Sign the Agreements

When the Provider Administrator assigns the agreements to the provider, the provider must log in to PEP with a Portal User Account.

1) Once logged into My Account, click **Administer a Provider Enrollment Transaction**.

2) Click **View Existing Transactions**.
3) In the “Link to Agreement” column, click the link to e-sign the agreement through Adobe Echo Sign.

<table>
<thead>
<tr>
<th>Agreements</th>
<th>Name of Authorized Signatory</th>
<th>User ID of Authorized Signatory</th>
<th>Email</th>
<th>Status</th>
<th>Link to Agreement</th>
</tr>
</thead>
<tbody>
<tr>
<td>EFT Agreement</td>
<td>[Name]</td>
<td>[ID]</td>
<td>[Email]</td>
<td>[Status]</td>
<td>[Link to Agreement]</td>
</tr>
<tr>
<td>HHSC Medicaid Agreement</td>
<td>[Name]</td>
<td>[ID]</td>
<td>[Email]</td>
<td>[Status]</td>
<td>[Link to Agreement]</td>
</tr>
</tbody>
</table>

Activate Agreement for E-Signatures

4) If the designated provider decides they do not want to e-sign, after clicking on the Link to Agreement in Step 3, they would click the Option drop-down box and select, “I will not e-sign”.

Options:
- I will not e-sign
- Clear document data

HHSC Medicaid Provider Agreement

As a condition for participation as a provider under the Texas Medical Assistance Program (Medicaid), the provider (Provider) agrees to comply with all terms and conditions of this Agreement.

1. ALL PROVIDERS
1.1 Agreement and documents constituting Agreement.

The current Texas Medicaid Provider Procedures Manual (Provider Manual) may be accessed via the internet at www.tmhp.com. Provider has a duty to become educated and knowledgeable with the contents and procedures contained in the Provider Manual. Provider agrees to comply with all of the requirements of the Provider Manual, as well as all state and federal laws governing or regulating Medicaid, and provider further acknowledges and agrees that the provider is responsible for ensuring that all employees and agents of the provider also comply. Provider agrees to acknowledge HHSC’s provision of enrollment process and authority to make enrollment decisions as found in Title 1, Part 15, Chapter 352 of the Texas Administrative Code. Provider is specifically responsible for ensuring that the provider and all employees and agents of the Provider comply with the requirements of Title 1, Part 15, Chapter 373 of the Texas Administrative Code, intended to waste, abuse and fraud, and provider acknowledges and agrees that the provider and its principals will be held responsible for violations of this agreement through any acts or omissions of the provider, its Employees, and its agents. For purposes of this agreement, a principal of the provider includes all owners with a direct or indirect ownership or control interest of 5 percent or more, all corporate officers and directors, all limited and non-limited partners, and all shareholders of a legal entity, including a professional corporation, professional association, or limited liability company. Principals of the provider further include managing employee(s) or agents who exercise operational or managerial control or who directly or indirectly manage the
5) All of the required fields must be completed for each agreement. Portal Users will not be able to proceed to the next field if the required fields have not been completed. Multiple agreements may be displayed. Each agreement will have a separate link and must be signed individually. All of the agreements must be completed before the application is submitted.

**Agreement Example:**

As a condition for participation as a provider under the Texas Medicaid Assistance Program (Medicaid), the provider (Provider) agrees to comply with all terms and conditions of this Agreement.

1. ALL PROVIDERS
   1.1 Agreement and documents containing Agreement.

   The current **Texas Medicaid Provider Procedures Manual (Provider Manual)** may be accessed via the internet at www.tmhp.com. Provider has a duty to become educated and knowledgeable with the content and procedures contained in the Provider Manual. Provider agrees to comply with all of the requirements of the Provider Manual, as well as all state and federal laws governing or regulating Medicaid, and provider further acknowledges and agrees that the provider is responsible for ensuring that all employees and agents of the provider also comply. Provider agrees to acknowledge HHSC’s provisions of enrollment processes and authority to make enrollment decisions as found in Title 1, Part 15, Chapter 302 of the Texas Administrative Code. Provider is specifically responsible for ensuring that the provider and all employees and agents of the Provider comply with the requirements of Title 1, Part 15, Chapter 302 of the Texas Administrative Code, related to enrollees, enrollees, and enrollee, and provider acknowledges and agrees that the provider and its principals will be held responsible for violations of this agreement through any action or omission of the provider, its employees, and its agents. For purposes of this agreement, a principal of the provider includes all persons with a direct or indirect ownership or control, in whole or in part, of 5 percent or more, all corporate officers and directors, all limited and non-limited partners, and all shareholders of a legal entity, including a professional corporation, professional association, or limited liability company. Principals of the provider further includes managing employees or agents who exercise operational or managerial control or who directly or indirectly manage the conduct of day-to-day operations.

1.3 State and Federal regulatory requirements.
   1.3.1 By signing this agreement, Provider certifies that the provider and its principals have not been excluded, suspended, debarred, revoked or any other means of enforcement is in accordance with Title XIX of the Social Security Act or the condition of exclusions.

6) Click **Click to sign** to submit e-signature.

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I agree to the Terms of Use and Consumer Disclosure of this document **Click to sign**
7) Signees will type their name in the **Type Signature** window, and click **Apply**.

![Type Signature window](image)

8) The “Enrollment Agreement confirmation” page will display all of the completed and signed agreements. Click **Download a copy** button to view or save a copy of the agreement.

![Download a copy button](image)

9) Close the Adobe EchoSign page, and the e-sign status in the associated PEP application will change from **Sent** to **Signed**.

![Signature and Attachments](image)
Attaching Files to the Application

Providers can attach and submit their supporting documents, regardless of whether they would like to e-sign or not.

The following conditions apply:

• All attachments must be saved and uploaded as Portable Document Format (PDF) files.
• Each attachment has a maximum file size of 2 megabytes, and the total size of all of the attached PDFs cannot exceed 20 megabytes.
• If the required documents are not attached to the online application, the provider must mail or fax the documents to TMHP as specified in the “Provider Enrollment” section of the Texas Medicaid Provider Procedures Manual.

Once all attachments have been uploaded, click I Accept to submit the application. The application cannot be modified after clicking the “I Accept” button.

System Requirements

Internet Explorer 11 should be used to access applications on the TMHP website. TMHP recommends Google Chrome or Mozilla Firefox for providers that use a computer operating system that is not compatible with Internet Explorer 11, such as Microsoft Edge. Adobe Acrobat 10.0 or a more recent version is also needed.