



Wyoming Medicaid

IRS W-9

The State Auditor's policy is to accept only the most current published version of the [IRS W-9 \(Rev. 10-2018\)](#) Form. **Original documentation is currently required for the voided check and bank letters. If sending in a voided check or bank letter, a W-9 must accompany it. Faxed or emailed W-9s will be accepted.**

- [IRS W-9 \(Rev. 10-2018\)](#) Form is available on the [SAO website](#).
- All W-9's submitted on outdated forms will be returned unprocessed.
- Electronic or stamped signatures are NOT accepted

Voided Check Requirements:

- Original check, printed by your financial institution
- No temp checks are accepted
- Must include name and address
- Must have no alterations to the check beyond the written "VOID"

Bank Letter Requirements:

- On Bank Letterhead
- Dated within one (1) year
- Account name must match what is listed on the W9
- Account and Routing Numbers
- Account type – Checking or savings (not ACH or EFT)
- Original Signature of bank representative

When 1099's Are Returned, Medicaid Payments Are Held

ALL PAY-TO PROVIDERS

In preparation of the State Auditor's mailing of the 1099 Forms in January 2021, it is imperative for pay-to providers' addresses to be correct with the SAO and Medicaid.

1099 Forms will not be forwarded by the Post Office and when returned to the SAO as undeliverable your Medicaid payments will be placed on hold until an [IRS W-9 \(rev. 10-2018\)](#) Form is completed and processed.

PAY-TO PROVIDERS

- Did you have a change of address in 2020?
 - No - No action required
 - **Yes - Action may be required**

- Did you complete the IRS W-9 Form at the time of the address change?
 - **No - Action is required**
 - Yes - No action required
- If action is required DO NOT DELAY!
 - Only the [IRS W-9 \(rev. 10-2018\) Form](#) will be accepted, all other versions will be returned unprocessed.
 - Complete and mail the form to:

Wyoming Medicaid
Attn: Enrollment
PO Box 667
Cheyenne, WY 82003-0667

NOTE: Behavioral Health/DD providers (taxonomy 251C00000X), to avoid delays mail your completed W-9 Form to the address above BUT also notify the Behavioral Health Division of your new address.

[Unsubscribe](#)

Be sure to add wycustomersvc@conduent.com to your address book to ensure the proper delivery of your Wyoming Medicaid updates and weekly payment summary information.

Wyoming Medicaid, Provider Relations, PO Box 667, Cheyenne, WY 82003

Please do not reply to this email with any customer service issues. Specific account inquiries will not be read. For assistance, contact Provider Relations at 1-800-251-1268

<https://wymedicaid.portal.conduent.com/>

Deployment Information:

- Deployment Date: 11/13/20
- Deployment Time: 10:30 AM
- Audience: All Providers