

New Provider Enrollment Questions and Answers

How do I enroll as an Ohio Medicaid Provider?

If you are reading this document, you have come to the right place. In order to become an Ohio Medicaid Provider, you must complete a web-based electronic application. Ohio does not accept paper applications. Our web-based provider application is designed to walk you through the steps in order to submit all the information that the Ohio Medicaid program needs to enroll you as a new provider.

How do I begin?

First, you should review the "[Enrolling Provider Checklist](#)" for a list of the documents you will need to submit as a part of your application. After you have reviewed the necessary documents, you should return to the main screen. From the main screen, you will need to select one of the buttons at the bottom of the screen. If this is your first visit to this website, you should select "new application."

On the next screen you will be asked to select your Enrollment Type, Action Request and Provider Type. If you are a doctor, nurse or an individual that wants to provide services to someone living in their own home, you should select "individual practitioner." The system will then ask you to select the appropriate action request and provider type. Your selection of "Provider Type" response is extremely important. If you are unsure of what provider type to request, you should contact the Enrollment/Revalidation Hotline at 1-800-686-1516 for additional information.

After you have entered your basic demographic information, the system will issue you an Application Tracking Number (ATN). You should record this ATN immediately, because it will serve as your secure key to return to your application or to track it through the enrollment process.

The web-based application will take you through a series of screens depending on your provider type. Be sure to read and answer the questions correctly. Whoever knowingly and willfully makes false statements or representations on this application may be prosecuted under applicable federal or state laws.

Once you have completed the application, the system will provide information regarding next steps. Your next steps could include uploading or submitting additional documentation necessary for enrollment. Failure to submit the documents as required could cause your application to not be processed and you will have to begin the process all over again.

Note: In order to prevent possible system errors due to internet browser variance please complete the application in all CAPS.

What if I lose or forget my Application Tracking Number (ATN)?

If you lose or forget your ATN, do not start a new application. You should contact the

Enrollment/Revalidation Hotline at 1-800-686-1516 and they will be able to look up your ATN.

How long does it take for my application to be processed?

The time it takes to process an application depends on the number of applications submitted. There is no magic formula in determining how soon or how long it will take to process your application. The best way to ensure that your application is processed timely, is to complete it correctly and submit all of the necessary documents as required. Errors on your application or missing documents will cause your application to be rejected and place it back at the rear of the work queue.

Who has to have a National Provider ID (NPI)?

All health care providers are required to have an NPI. The only exception to this rule is for those providers who are non-medical or atypical. Atypical providers are not required to have an NPI. Atypical providers are mostly waiver providers like personal care aides, home modification providers, home delivered meals, non-emergency transportation provider, and so forth. If you are unsure you can call the Enrollment/Revalidation hotline at 1-800-686-1516.

Do I submit my Social Security Number (SSN) or my Employer Identification Number (EIN)?

Individual providers must submit their SSN. In addition all organizational providers must provide the SSN, date of birth and birth place of all individuals that own 5 percent or more of an organization or that have a controlling interest, Organizational providers are also required to disclose the same information of managing employees. (See Provider disclosure requirement – [OAC 5160-1-17.3](#))

If you are an individual practitioner that will be practicing and billing under a “group” practice you must still provide your SSN on the application and not the group FEIN.

Note: A Social Security Number (SSN) is required by State and Federal law of all individuals applying to obtain a Medicaid provider number. Entering an invalid SSN or entering a FEIN in the place of a SSN may result in the rejection of your application.

I am an Individual Practitioner, what is my ownership type?

Individual Practitioners should select “sole proprietor” from the pull-down menu.

Is there an application fee?

Yes, organizational provider types will be required to pay a fee. The fee applies to organizational providers only; it does **not** apply to individual providers and practitioners or practitioner groups. The fee is a federal requirement described in 42 CFR 455.460 and in [OAC 5160-1-17.8](#). The fee is currently \$560 per application and is not refundable.

The fee will not be required if the enrolling organizational provider has paid the fee to either

Medicare or another state's Medicaid program within the past five years. However, Ohio Medicaid will require that the enrolling organizational providers submit proof of payment with their application. (See [OAC 5160-1-17.8](#))

Why do I have to pay a Medicare and/or Medicaid enrollment application fee?

Section 6401(a) of the Affordable Care Act (ACA) requires a fee to be imposed on each "institutional provider of medical or other items or services and suppliers." The fee is to be used to cover the cost of program integrity efforts including the cost of screening associated with provider enrollment processes, including those under section 1866(j) and section 1128J of the Social Security Act.

How do I pay my application fee?

Organizational providers that are required to pay a fee will be able to make a secure on-line payment while completing their application. The payment must be made by credit card (Discover Card, MasterCard or Visa). Other types of payment will not be accepted. Providers will not be able to complete the application until the fee is paid or proof of previous payment is provided.

How do I check on the status of my application?

Once an application has been submitted, you can go to the [Medicaid Provider Portal](#) to check the status. Select the "[enrollment tracking search](#)" link.

How will I be notified once I have been enrolled as a provider?

Once a provider is enrolled, they will be sent an email confirmation. This will be sent to the email that was provided during the application process.

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