# ORP Frequently Asked Questions (FAQs)

**1. Why is Ohio Medicaid requiring Ordering, Referring, and Prescribing Providers (ORP Providers) to enroll as Ohio Medicaid providers?**

This is being done in order to comply with program integrity provisions of the Affordable Care Act (ACA), specifically section 6401 which is found in the Code of Federal Regulations: 42 CFR § 455.410(b): "The State Medicaid agency must require all ordering or referring physicians or other professionals providing services under the State plan or under a waiver of the plan in the fee-for-service program to be enrolled as participating Medicaid providers." As a result, ORP providers will undergo a screening process to improve program integrity and reduce fraud, waste and abuse. This screening process includes a review of federal exclusion lists and other databases that would prohibit an excluded healthcare professional from being associated with Medicare or Medicaid.

**2. What are the requirements for ORP?**

There are three basic requirements:
- The physician or non-physician practitioner who wrote the order, referral or prescription must be enrolled as either a Medicaid billing provider or as an ORP-only (non-billing) provider and their NPI and NAME must be included on claims submitted to the department.
- The provider's NPI must be for an individual physician or non-physician practitioner (not an organizational NPI).
- The physician or non-physician practitioner must be of a specialty type that is eligible to order, refer, or prescribe.

**3. Does the Ohio Department of Medicaid have a list of provider types that are eligible to be ORP providers?**

Currently, the list of eligible OPR Providers includes:
- Licensed Doctors of Medicine/Osteopathy – (Provider Type 20)
- Licensed Doctors of Chiropractic – (Provider Type 27)
- Licensed Doctors of Dental Medicine/Surgery- (Provider Type 30)
- Licensed Doctors of Podiatric Medicine- (Provider Type 36)
- Licensed Doctors of Optometry- (Provider Type 35)
- Licensed Physician Assistants- (Provider Type 24)
- Licensed Nurse Practitioners- (Provider Type 72)
- Licensed Clinical Nurse Specialists- (Provider Type 65)
- Licensed Certified Nurse Midwifes- (Provider Type 71)
- Licensed Clinical Psychologists- (Provider Type 42)

*Note: Organizational providers are prohibited from ordering, referring, or prescribing medications.*

**4. I am currently enrolled as an active provider with Ohio Medicaid. Do I need to enroll as an ORP provider?**

No. Providers already enrolled as active Medicaid billing providers do not need to enroll again as an ORP provider.

**5. Why should I enroll as an ORP Provider?**

Enrollment as an ORP Provider will allow you to receive reimbursement for covered services and supplies that you order, prescribe or refer for your patients. If you do not enroll by July 1, 2014, these same rendering providers will NOT receive reimbursement.

**6. Is there a cost to enroll as an ORP provider?**

No.

**7. How does an ORP provider enroll with Ohio Medicaid?**

Individuals who wish to enroll as an ORP only provider will be able to do so by using the Ohio MITS web portal, however, the enrollment application for ORP providers is currently under development.  The ORP application will be available beginning in January, 2014.  If an ORP provider decides to become a paid provider in the future, they must return to the Ohio MITS portal and submit a new application as a paid provider.

**8. If I am strictly an ORP provider (ORP only) and not able to bill the department, why do I have to accept the terms of the Ohio Medicaid provider agreement and provide my electronic signature?**

All providers – regardless of their billing status – are required to sign an Ohio Medicaid provider agreement. By doing so, such providers agree to the terms and conditions described therein.

**9. Will I need to obtain a National Provider Identifier (NPI)?**

Yes. As providers of health care services, ORP providers are required to obtain and share their NPI with payers. If an ORP provider does not already have an NPI, they can obtain one from the following website:
https://npiregistry.cms.hhs.gov/NPPESRegistry/NPIRegistryHome.do

**10. What if the provider is enrolled with another state's Medicaid program? Will the provider need to enroll in all states in which he or she provides service?**

Yes. Enrollment in another state's Medicaid program does not exempt an ORP provider from the requirement to enroll with Ohio Medicaid. It is not uncommon for providers from other states to write orders and prescriptions for Ohio Medicaid recipients. The requirement for ORP providers to enroll in Medicaid programs is found in 42 CFR 455.410 and Section 1866(j) of the Social Security Act.

**11. How does the Medicaid provider who is rendering the service know the NPI of the ORP providers? Once the provider knows the NPI of the ORP provider, how can they tell if the ORP provider is enrolled in the Ohio Medicaid program?**

It is ultimately the responsibility of the Medicaid billing provider to obtain the NPI of the ORP provider and to confirm that the ORP provider is enrolled in Ohio Medicaid. Each provider must develop its own internal processes to ensure the enrollment requirement is met.

Currently, Ohio Medicaid has a list of enrolled billing providers.  This list is available on the internet at: https://portal.ohmits.com/Public/Public%20Information/Search%20Provider%20Directory/tabId/61/Default.aspx.   In the coming months, Ohio Medicaid will have a list of all providers (billing providers and ORP providers) on the secure MITS Provider Portal.

**12. If a claim is denied because the ORP provider was not enrolled as a provider in the Ohio Medicaid program, can the ORP provider enroll retroactively?**

Yes. Ohio Medicaid permits retroactive enrollments for providers up to 12 months prior to the date of enrollment. This is done on the condition that the enrolling provider is appropriately licensed and the enrollment complies with program integrity provisions established by Ohio Medicaid. Once the ORP provider is enrolled, the denied claim can be resubmitted by the billing provider for payment as long as the resubmission occurs within 365 days from the date of service.

**13. Do claims submitted to Ohio Medicaid Managed Care Organizations have to follow the ORP requirement?**

No. Medicaid Managed Care Organizations are exempt from this regulation.

**14. If the provider NPI and name  shown on the claim is not a provider enrolled in Ohio Medicaid, when will claim denials begin?**

Since the enrollment of ORP providers is a new requirement, there will be a phase-in period of at least six months before any claims are denied.  During this phase-in period, billing providers will receive a notification on their Remittance Advice every time a claim is submitted and the ORP provider is not enrolled with Ohio Medicaid.

**15. Upon enrollment, am I required to list each location where I perform ORP services?**

Yes.

**16. If a provider has applied to be an ORP only provider and has received an Automated Tracking Number (ATN) from the Ohio MITS provider enrollment system – but has not been officially notified of enrollment in the Ohio Department of Medicaid – can the provider order, refer or prescribe services for a Medicaid consumer and will the rendering provider be paid?**

Yes. However, the application for enrollment must pass the MITS provider screening process. Once the ORP provider enrolls, the provider may choose to be retroactively enrolled for up to 365 days from the submission date of the application. (This is contingent on the provider being appropriately licensed and the additional screening requirements being met.)

**17. If Ohio Medicaid is a secondary or tertiary payer to commercial insurance, will the claim be accepted without the NPI and NAME of the enrolled ordering, referring, or prescribing provider?**

No. The ORP requirement also applies if Medicaid is being billed as secondary/tertiary to commercial insurance.

**18. Are Medicare crossover claims subject to the ORP requirement?**

Yes. Medicare crossover claims are also subject to the ORP requirement.

**19. If I currently order, refer, or prescribe services to Medicaid consumers and I am not enrolled in the Ohio Medicaid program, but would like to enroll as a billing provider, do I have to enroll as an ORP-only Medicaid provider first?**

No. Providers who currently order, refer, or prescribe items or services for Medicaid consumers may enroll as a billing provider by accessing the Ohio MITS Provider Enrollment Portal at: https://portal.ohmits.com/public/Providers/Enrollment/tabid/44/Default.aspx

**20. Some charity-care providers, who are not enrolled as Ohio Medicaid providers, provide services to Medicaid consumers in areas where access to services is limited. Can Medicaid continue to pay for prescriptions and other services ordered by non-enrolled charity-care providers?**

No.  While these charity-care providers are an important and valued part of the health care safety net, they are still required to enroll with the Ohio Medicaid program in order to continue ordering, referring, and prescribing services for Medicaid consumers.

**21. If an Ohio Medicaid enrollee is out-of-state and receives services in an emergency room or hospital, can the hospital services or prescriptions or orders written by the out-of-state provider be reimbursed by Ohio Medicaid?**

Claims for hospital services must contain the NPI and NAME of the attending provider and the attending provider must be enrolled in the Ohio Medicaid program for the hospital services to be reimbursed by the department.  Likewise, the claim for the prescription or ordered item must contain the NPI and the NAME of the ordering or prescribing provider, and the ordering or prescribing provider must be enrolled in the Medicaid program in order for the prescription or order to be reimbursed by the department.  .

**22. Who should I contact if I have questions regarding enrollment in the Ohio Medicaid program?**

Contact the Ohio Medicaid Provider Services Bureau at 1-800-686-1516.