



Department of Medicaid

Mike DeWine, Governor
Jon Husted, Lt. Governor

Maureen M. Corcoran, Director

TO: Contracted Medicaid Managed Care Plans
Contracted MyCare Ohio Plans

FROM: Roxanne Richardson, Deputy Director of Managed Care
Office of Managed Care

DATE: October 6, 2020

SUBJECT: Medicaid Enrollment of Group Practices

Under 42 C.F.R. 438.602 all providers who currently contract with or wish to contract with a Medicaid managed care plan (MCP) must be enrolled with the Ohio Department of Medicaid (ODM). This includes any practitioner or group practice that bills for or renders services. ODM requires professional medical groups to be enrolled as outlined below.

MCP's must outreach to their network providers to encourage ODM enrollment. If the provider does not enroll with ODM, after three outreach attempts, the MCP may deny claims for services for failure to adhere to the regulation noted above. Ultimately, a provider may be removed from the MCP's network for failure to enroll with ODM.

Ohio Medicaid Process for Screening and Enrolling a Professional Medical Group

The Ohio Department of Medicaid's process to verify and screen all providers of professional medical group services is based on federal and state requirements that include the following general guiding principles:

- The name of the group must match the name associated with the National Provider Identifier (NPI) in the National Plan and Provider Enumeration System (NPPES).
- The address of the group must match the NPI address as issued by NPPES.
- Each group NPI must be enrolled separately to ensure each NPI has a unique Medicaid ID, with the following exceptions:
 - Hospitals may have more than one NPI associated with a single Medicaid ID; and
 - Providers working only under a single case agreement are not required to enroll.
- If the NPI covers multiple locations, providers must add those as Alternate Service Locations in our current system.
- Screen for ownership and managing employee disclosures. The Ownership panel in MITS must include managing employees and all individuals with 5% or more ownership in that provider.
- All the individual health care practitioners (physicians, physician assistants, advance practice nurses etc.) that will work for that group and be identified as a rendering provider on the group's claims, must be screened and enrolled individually with Ohio Medicaid. They will each have their own Medicaid provider ID.
- The professional medical group must identify at least 2 or more active individual providers who are to be linked/affiliated with the group. Instructions on affiliating practitioners can be found here: <https://medicaid.ohio.gov/Portals/0/Providers/Enrollment%20and%20Support/Grp-Link-Instruct.pdf>.
- The individual who signs the Provider Agreement must be listed in the Ownership Panel as an owner or Managing Employee, disclosing the required information for screening.

50 W. Town Street, Suite 400
Columbus, Ohio 43215
medicaid.ohio.gov

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