

Important Reminder and Updates: Enrollment of Dependently Licensed and BH Paraprofessional Practitioners in MITS

This MITS Bits was originally issued January 31, 2018. It is being re-issued with some updates to the information.

It is time for Ohio behavioral health (BH) agencies (Medicaid provider types 84 and 95) to begin enrolling dependently licensed and BH paraprofessional practitioners in Ohio Medicaid and affiliating them with employing/contracting community behavioral health agencies. The process for doing this will be very similar to the process used to enroll independently licensed practitioners as outlined in the [MITS BITS released on April 19, 2016](#).

Beginning with dates of services July 1, 2018, Medicaid behavioral health claims will no longer require the U modifiers to identify these types of practitioners. Instead, claims will be required to contain the National Provider Identifier (NPI) for these practitioners in the rendering field of the claim. See Appendix A below for tips on selecting a National Plan and Provider Enumeration System (NPPES) taxonomy code for behavioral health paraprofessionals.

The practitioners listed in the chart below must be actively **enrolled** with Ohio Medicaid and **affiliated** with their employing/contracting agencies **by July 1, 2018 in order for claims to process**. The chart includes the documentation that must be provided with the application for each category of practitioner.

*****Please note: claims for services between January 1, 2018 and June 30, 2018 should not include these practitioners' NPIs in the rendering field. Claims are currently being denied because these practitioners' NPIs are reported on claims.**

Appendix B identifies some of the common reasons why applications are returned for additional information. Questions regarding the enrollment of dependently licensed and BH paraprofessional staff may be sent to MEDICAID_PROVIDER_UPDATE@medicaid.ohio.gov or by calling 1-800-686-1516 and choosing option 2.

Multi-credentialed/paraprofessional practitioners

If a practitioner has more than one credential/paraprofessional recognition, please include a comment in the Notes section of MITS enrollment application indicating what additional credential/paraprofessional recognition is held. Paraprofessionals have the ability to select a primary, a secondary or multiple secondary specialties. Be certain to upload the necessary documentation for each license/certificate.

Qualified Mental Health Specialist (QMHS) vs. QMHS +3 clarification

- The QMHS +3 MITS specialty type (961) should be selected for those individuals with only high school diploma or equivalent **and** three years of relevant experience. If the individual has a high school diploma but lacks three years of relevant experience, they should enroll as QMHS (960).
- Individuals who hold a Bachelor's or Master's degree should enroll as the QMHS MITS specialty type (960) even if they have three years of relevant experience.
- Individuals who hold an Associate's degree **and** have three years of relevant experience may select either specialty.

- For select codes, indicate the QMHS level of education using the appropriate H modifier on the claim in addition to their individual practitioner NPI.

IMITS PROVIDER TYPE	PROVIDER	IMITS SPECIALTY TYPE	DOCUMENTATION NEEDED FOR ENROLLMENT
37 – Social Work	Licensed Independent Social Worker	370	<ul style="list-style-type: none"> • W9
37 – Social Work	Licensed Social Worker	371	<ul style="list-style-type: none"> • W9 • Copy of License
37 – Social Work	Social Worker Trainer	372	<ul style="list-style-type: none"> • W9 • Copy of license or documentation of training or certification
37 – Social Work	Social Worker Assistant	373	<ul style="list-style-type: none"> • W9 • Documentation of training or certification
42 - Psychology	Licensed Psychologist	420	<ul style="list-style-type: none"> • W9
42 - Psychology	Board Licensed School Psychologist	421	<ul style="list-style-type: none"> • W9
42 - Psychology	Psychology Trainee	422	<ul style="list-style-type: none"> • W9 • Documentation of training or certification
42 - Psychology	Psychology Assistant	423	<ul style="list-style-type: none"> • W9 • Documentation of training or certification
42 - Psychology	Psychology Intern	424	<ul style="list-style-type: none"> • W9 • Documentation of training or certification
47 - Clinical Counseling	Licensed Professional Clinical Counselor	474	<ul style="list-style-type: none"> • W9
47 - Clinical Counseling	Licensed Professional Counselor	471	<ul style="list-style-type: none"> • W9 • Copy of License
47 - Clinical Counseling	Counselor Trainee	472	<ul style="list-style-type: none"> • W9 • Documentation of training or certification
52 - Marriage and Family Therapy	Licensed Independent Marriage and Family Therapist	520	<ul style="list-style-type: none"> • W9
52 - Marriage and Family Therapy	Licensed Marriage/Family Counselor	521	<ul style="list-style-type: none"> • W9 • Copy of License
52-Marriage and Family Therapy	Marriage Family Counselor Trainee	522	<ul style="list-style-type: none"> • W9 • Copy of License
54 - Chemical Dependency	Licensed Independent Chemical Dependency Counselor	540	<ul style="list-style-type: none"> • W9

54-Chemical Dependency	Chemical Dependency Counselor III	541	<ul style="list-style-type: none"> • W9 • Copy of License
54 - Chemical Dependency	Chemical Dependency Counselor II	542	<ul style="list-style-type: none"> • W9 • Copy of License
54-Chemical Dependency	Chemical Dependency Counselor Assistant	543	<ul style="list-style-type: none"> • W9 • Documentation of training or certification
96 – Para-Professionals	Qualified Mental Health Specialist	960	<ul style="list-style-type: none"> • Documentation of highest level of education (HS diploma or equivalent, Associate’s, Bachelor’s, or Master’s degree) • Proof of employment • W9
96 – Para-Professionals	Qualified Mental Health Specialist +3	961	<ul style="list-style-type: none"> • HS diploma or equivalent • Proof of employment • Employer attestation on at least 3 years of experience • W9
96 – Para-Professionals	Care Management Specialist	962	<ul style="list-style-type: none"> • HS diploma or equivalent • Proof of employment • W9
96 – Para-Professionals	Peer Recovery Supporter	963	<ul style="list-style-type: none"> • HS diploma or equivalent • Proof of employment • Ohio issued “Statement of Certification” as a peer recovery supporter • W9
96 – Para-Professionals	IPS-SE	964	<ul style="list-style-type: none"> • HS diploma or equivalent • Proof of employment • IPS-SE Employee Training Verification Statement • W9

[Appendix A – Tips on selecting a taxonomy code on the NPPES site:](#)

NPIs can be obtained by visiting the **National Plan & Provider Enumeration System (NPPES) website:** <https://nppes.cms.hhs.gov/#/> and creating an application under “Create a New Account”.

In cooperation with the National Uniform Code Committee (NUCC), the American Medical Association (AMA) has developed and maintains the *Health Care Provider Taxonomy* code list, a nationally accepted, HIPAA-compliant taxonomy code list for health care providers. The most current version is posted here: https://content.findacode.com/files/documents/taxonomy-codes/taxonomy_171.pdf. Included here is a description for each taxonomy.

In choosing the taxonomy code we suggest that paraprofessionals review the following categories:

- *Behavioral Health and Social Service Providers, or*
- *Other Service Providers*

Taxonomy codes are self-selected by the health care practitioner and describe the health care provider’s work activities plus any required education, licensure and/or certifications. For example:

- Case manager (taxonomy code 171M00000X) is “a person who provides case management services and assists an individual in gaining access to needed social, educational, and/or other services.”, etc.
- Peer specialist (taxonomy code 175T00000X) is an “individual certified to perform peer support services through a training process defined by a government agency, such as...a state mental health department/certification/licensing authority.”

Practitioners such as qualified mental health workers may not find their practitioner type on the list of the *Health Care Provider Taxonomy codes*. If this is the case, they may choose a taxonomy code that links to the work of the organization that employs them. For example:

- Mental health clinic, including a community mental health center (taxonomy code 261QM0801X), or
- Community/behavioral health agency (taxonomy code 251S00000X).

Qualified Mental Health workers are encouraged to review the activity descriptions for the taxonomy code associated with their employer. If that information is not available, the worker can access the NPPES system and search the database using the provider’s National Provider Identifier where the taxonomy code will be found.

Appendix B – Common reasons applications are returned for additional information

The following are some of the more common reasons why an application would be returned for additional information.

Not Including the Practitioner's Social Security Number and Date of Birth on the Application

- Some applicants are listing their agency's Employer Identification Number (EIN) instead of their own Social Security Number (SSN). The practitioner's SSN and birth date are required on Medicaid provider applications by federal and state law. This error causes increased processing time for applications.

Failing to Upload a Signed Internal Revenue Service W-9 form Signed and Dated by the Individual Applicant

- Failure to upload this documentation along with a Medicaid practitioner application will cause delays in processing. The W-9 is only used to verify the SSN that was provided on the application and is not used for claims.

The Practitioner's Name on Medicaid Application Does Not Match NPPES

- NPPES is the source of health care provider NPI numbers. If the practitioner's name has changed since their NPI assignment, they can go to the NPPES site and update their registration name.

Not Affiliating Enrolled Practitioners with their Employing Agencies

- Agency affiliation should be performed by the practitioner employee during the application process. The practitioner employee needs the agency Medicaid ID in order to complete the affiliation as part of the application process.

Proof of Employment and Employer Attestation

- Paraprofessionals are required to provide proof of employment and, in some cases, employer attestation of 3 years' employment. This documentation must be on agency letterhead and signed by an agency representative.