

Practitioner Enrollment Reminders

PRACTITIONER ENROLLMENT

In recent months, Ohio Department of Medicaid (ODM) Provider Enrollment has had to return many of the Medicaid practitioner applications due to errors or missing information. Here are tips about how to correct the most common errors:

- Qualified Mental Health Specialist (QMHS) +3
 - If applying for a QMHS +3, the application requires that the following language must be written on company letterhead and signed by the applicant's supervisor and submitted along with the Medicaid provider application:
"I attest that _____ (insert name of applicant) has a minimum of 3 years of behavioral health work experience."
- Missing National Provider Identifier (NPI)
 - The applicant's NPI is missing from the application. Having an NPI is CRITICAL to obtaining Medicaid provider enrollment. The applicant's Medicaid provider agreement CANNOT PRECEDE the date of their NPI being issued. So if any employees have not gotten an NPI, do this ASAP!
 - See the MITS Bits [HERE](#) (and also on page 4 of this MITS Bits) which gives instructions about how to apply for an NPI through use of the National Plan & Provider Enumeration System (NPPES) website: <https://nppes.cms.hhs.gov/#/>.
- Listing the agency's Tax ID number instead of the social security number (SSN) of the applicant.
 - Federal and state laws require ODM to collect SSNs of all practitioners applying for enrollment in the Medicaid program, and all information provided on the application is kept secure and confidential.
- Signing the "W-9" form that must accompany the application.
 - This is also a federal and state requirement. However, please note that the applicant will not incur any tax liability by submitting a signed "W-9". Medicaid payment for BH agency employees goes to the agency, not the individual employees.

Provider agencies and their employees are urged to continue submitting Medicaid provider applications. ODM provider enrollment staff are working evenings and weekends to keep up with the incoming Medicaid provider applications from employees of BH agencies. Please watch closely for return email messages indicating that there might be missing or incomplete information in the application and respond as soon as possible.

Rendering Practitioner NPI, Enrollment in Medicaid, and Affiliation Effective July 1, 2018

Beginning with dates of service July 1, 2018, Medicaid behavioral health claims must include the National Provider Identifier (NPI) for the rendering practitioners listed in the chart below in the rendering field of the claim. These

practitioners must be actively enrolled with Ohio Medicaid and affiliated with their employing/contracting agencies effective July 1, 2018, in order for claims to process efficiently. **Please take a few moments to review your agency in MITS and ensure providers are enrolled and affiliated accurately.**

Claims for services will deny if:

- **The rendering practitioner’s NPI is not included on the claim,**
- **The rendering practitioner is not enrolled with ODM, and**
- **The rendering practitioner is not affiliated with their agency.**

When claims are denied due to the reasons listed above, managed care plans will work with provider agencies to correct claims. The Ohio Department of Medicaid’s Rapid Response Team (BH-Enroll@medicaid.ohio.gov) will also continue to be available to assist providers with correcting claims denials.

MITs Provider Type	Practitioner	MITs 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"> • 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, any college 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 (See page 1 of this MITS Bits) • 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

Getting a National Provider Identifier (NPI)

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://www.findacode.com/pdf.html?id=taxonomy-codes-2018-180>. 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
- 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.

Enrolling practitioners with the Ohio Department of Medicaid through MITS

Attached you will find step by step directions on how to enroll and affiliate providers who have an NPI in MITS. Questions regarding the enrollment of dependently licensed and BH paraprofessional staff may be sent to MEDICAID_PROVIDER_UPDATE@medicaid.ohio.gov or calls can be made to 1-800-686-1516 and choosing option 2.

An application will be returned when all required information is not included. This will result in a longer application processing time. When this occurs and the applicant has made the necessary corrections to their application, please email a request to revisit the application. Send the request to ODM’s Provider Enrollment mailbox at: Medicaid_Provider_Update@Medicaid.Ohio.gov. See the tips below for common provider enrollment errors to avoid.

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.

Common Errors in Medicaid Provider Enrollment

DO include 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.

DO upload an 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.

Do ensure the practitioner's name on Medicaid application matches 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.

DO affiliate 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.

DO include proof of employment and employer attestation of work experience.

- 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.