

Enrollment Application Training

Agency Provider Quick Reference Guide

Document Overview

Congratulations on your decision to become a Medicaid provider! This guide provides an overview of the enrollment process and application requirements for **agency providers**. Helpful tips related to the application process are also included.

Application Enrollment Steps



Step 1: Choose Agency Type

You must become certified or accredited **prior to beginning your application**. When submitting your application, select your agency type based on the certification or accreditation you have received. Note that agency type affects the services your agency can provide.



MEDICARE CERTIFIED HOME HEALTH AGENCY – TYPE 60

Medicare Certified Home Health Agencies are certified through Medicare. You must be enrolled in the Provider Enrollment, Chain, and Ownership System (PECOS). Make sure your application information matches the information in PECOS.

Medicare Certified Home Health Agencies can provide personal care and nursing services. Additionally, they can provide home health aide services to assist individuals with transitioning back to an independent home setting.



OTHER ACCREDITED HOME HEALTH AGENCY – TYPE 16

Other Accredited Home Health Agencies are certified by one of the below organizations. Documentation must be submitted with your application.

To learn about certification, see the organization websites:

- [The Joint Commission](#)
- [Hospice & Home Health Accreditation Services](#)
- [Accreditation Commission for Health Care](#)

Other Accredited Home Health Agencies can provide personal care and nursing services.

Step 2: Complete Application Documents

The following documents are required to complete your application. To ensure a smooth application process, make sure that you have the required information before beginning your application. A training video is also available [here](#).

Document Checklist



NATIONAL PROVIDER IDENTIFIER (NPI)

This number is required to complete your application and bill for services.

- If you do not have an NPI you can request one [here](#).



W-9

Your W-9 should be filled out completely, signed, and dated. You should apply with your Federal Employer Identification Number (FEIN) rather than a social security number.

- Ensure that all information matches your application exactly.



AGENCY OWNERSHIP INFORMATION

List all owners with 5% or greater interest in your company and include all managing employees in the ownership section of your application.

- This section of your application needs the effective date for owners and managing employees, their social security numbers, dates of birth, and titles.
- If you are applying as a Medicare Certified Home Health Agency, the information in your ownership section needs to match what is listed for your agency in PECOS.



ELECTRONIC VISIT VERIFICATION (EVV) AGENCY TRAINING CERTIFICATE

EVV training is required to complete your application and bill for services.

- EVV training can be completed by any employee of your agency.
- You can find instructions to register for and complete EVV training [here](#).



BACKGROUND CHECK

A background check is required for your application. The Ohio Department of Medicaid will email a letter to you that indicates which employees are required to complete a background check and how to do so.

- **Do not** complete background checks before submitting your application.



STANDARDIZED CREDENTIALING FORM PART B

For Medicare Certified Home Health Agencies, the completed credentialing form is required for your application. Please note that this form is also used for commercial providers, and you may disregard the list of documents on the form.

Step 3: Submit Your Application

Submit your application online through Provider Network Management (PNM), formerly the MITS system.

- Click [here](#) to access the application.
- Your documents can be uploaded to your application, faxed to (614) 386-1344, or emailed to ohprovidermaintenance@pcgus.com.

Application Tips

BE CERTIFIED

Before submitting your application, you must first become certified as a Medicare Certified Home Health Agency or receive accreditation through another accrediting organization.

BE CLEAR

Ensure the copies of your documents are clear and easy to read. Copies, photocopies, photos, and/or scanned images are all acceptable.

BE CONSISTENT

Make sure that your company name, address, Federal Employer Identification Number, and other information are entered on your application exactly as they appear on your submitted documents. Double check that everything is entered correctly!

BE CAREFUL

Forgetting to sign and date your documents can cause unnecessary delays. Check all your forms for places to sign, date, and initial. Incomplete documents will be returned to you and will cause delays in processing your application.

Step 4: Check Your Status

You should receive an application status update in the PNM Dashboard 2-5 business days after submission. This update will indicate if any additional information or documentation is needed to complete your application. To keep your application moving forward, send requested documents and information by the due date indicated. Delays could result in having to reapply.

Step 5: Receive Provider Number

CONGRATULATIONS! Once your enrollment application has been processed, you are ready to begin a rewarding and fulfilling career in Medicaid home and community-based services.

You will receive an email with your enrollment welcome letter that includes your provider number and instructions for completing your new provider training, which is designed to help you understand your role and responsibilities as a provider. New providers are required to complete this training within 90 days of the date listed on the letter.

Step 6: Support Your Journey

Our team is excited to support you and provide resources to ensure your success. Visit our [website](#) to view resources available to agency providers, including:

- Live training to meet annual continuing education (CE) requirements.
- A Provider Toolkit containing necessary forms.
- An online tool to help you locate individuals in need of services in your area, called PCG Match.
- Monthly email informational bulletins that highlight continuing education (CE) courses, other training and mentorship opportunities, PCG Match system capabilities, and OAC rule updates.

CONGRATULATIONS ON YOUR ENROLLMENT AS A MEDICAID PROVIDER!

Still have questions about enrollment? Interested in learning more about available resources? Contact us to speak with an enrollment specialist or visit our website for additional enrollment information and materials!



(877) 908-1746
Monday – Friday, 7:30-5:30 PM ET



<https://ohiohcbcs.pcgus.com>