Choices Home Care Attendant Checklist

Below is a list of documents required to be submitted with your certification application. Additional documentation may be requested during the certification process. Be sure to review the list of documentation on the upload screen in the online application.

Document	Description
☐ Copy of valid Driver's License or State issued photo ID	A copy of at least one of the following current valid government-issued photographic identification cards: Driver's License, State of Ohio identification card, or U.S. permanent residence card.
☐ W-9 Form	This form will automatically be completed and available to download for signature during the online application process.
☐ Copy of Social Security Card	Copy of a valid social security card.
☐ Proof of Residency	Acceptable documentation includes valid driver's license; notification of registration as an elector; a copy of an officially filed federal or state tax form identifying the applicant's permanent residence; any other documentation the responsible entity considers acceptable showing evidence the applicant has been a resident of Ohio for the past five years.
☐ Non-Disclosure Statement	This form will be available to download for signature during the online application process.
☐ EVV Training Certificate	Electronic Visit Verification (EVV) is used by caregivers for some home and community-based services to document the time services begin and end. EVV is required for C-HCAS. ODA had decided to use an alternate EVV vendor (ALT EVV vendor). The vendor is our current Fiscal Management Service (FMS). Because of this choice, applicants are not required to complete EVV training prior to applying for their ODA provider certification. However, EVV is a required document upload during the application process for ODA's application. To ensure a smooth experience, C-HCAS applicants can upload a sheet of paper with a statement such as "EVV training is not required at application". This allows the system to account for the required documents, without the applicant having to take the training beforehand.
☐ NPI Registration	Federal law requires that an NPI be used to identify providers on any standard transaction (such as a claim) for health care services. Since waiver services are paid in part using federal Medicaid funds, you must obtain an NPI and provide it in your application. You may obtain your NPI number at https://nppes.cms.hhs.gov/#/.

Document	Description
☐ Ohio BCI Background Check	You are required to obtain a criminal record check (BCI) at time of application. The original should be forwarded to your client you plan to serve, and a copy sent to the Ohio Department of Aging. Please contact the Ohio Attorney General's office at 877-224-0043 for a location nearest you. You may not submit a criminal record check from a previous employer. **BCI&I REASON CODE: 173.27; 173.38; 3701.881; 5123.081; or 5123.169 ONLY.**
☐ FBI Background Check	If you live or have lived outside of Ohio anytime in the past five consecutive years, you are required to submit an FBI background check. The original should be forwarded to the client you plan to serve, and a copy sent to the Ohio Department of Aging. **BCI&I REASON CODE 173.41 ONLY.**

To submit required documentation:

- All supporting documents must be uploaded in the application. The system will not allow you to submit your application until you have uploaded your required documentation.

- **Send BCI and/or FBI Background Check to:**
  Ohio Department of Aging
  Provider Certification
  30 E Broad St., 22nd Floor
  Columbus, Ohio 43215-3414

Revised 7.1.2024