

Participant Direction

PROVIDER APPLICATION USER GUIDE

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Welcome!

This document was created to help applicants navigate the participant direction provider application process.

Participant direction is a voluntary service option available to individuals on Ohio's PASSPORT and MyCare Waiver Programs. Participant direction recognizes the individual knows their needs best and is designed to give individuals more choice and control over how, when, and from whom they receive their services.

In participant direction, the individual recruits and hires their provider independent from a personal care service agency. The person the individual hires becomes certified through the Ohio Department of Aging (ODA) instead of becoming employed through an ODA certified personal care service agency. The individual is the employer, and the provider is the employee. The individual is responsible for recruiting, hiring, firing, managing, evaluating provider performance, keeping employer records, and setting the provider's work schedule. The individual can designate a representative of their choice to assist with some or all their employer responsibilities.

Two service options fall under participant direction. This includes Choices Home Care Attendant Service (C-HCAS) and Consumer Directed Personal Care Service (CD-PCS):

Choices Home Care Attendant Service (C-HCAS)

C-HCAS is the most used participant direction service. The provider can assist the individual with tasks such as money management, activities of daily living (ADLs) such as bathing, dressing, feeding, toileting, etc., instrumental activities of daily living (IADLs) such as grocery shopping, meal preparation, managing transportation, house cleaning, etc., escort and transportation, errands outside the home, homemaking, home maintenance, and chores. The individual sets the provider's hourly wage

with the help of their case manager or waiver service coordinator. The provider can transport the individual under C-HCAS if they show proof of an active driver's license and general liability vehicle insurance.

Consumer-Directed Personal Care Service (CD-PCS)

The provider can assist the individual with tasks such as activities of daily living (ADLs) such as bathing, dressing, feeding, toileting, etc., instrumental activities of daily living (IADLs) such as grocery shopping, meal preparation, managing transportation, house cleaning, etc., errands outside the home, and homemaking. The provider has an hourly pay rate set by the state. The provider cannot transport the individual as a task under CD-PCS.

A person may apply to become a participant direction provider with or without an individual identified to work for. If the applicant already has an individual identified to work for, the individual should discuss this with their case manager or waiver service coordinator as soon as possible. It is important the case manager or waiver service coordinator is aware of the individual's interest in participant direction.

The provider's application is one step in the participant direction enrollment process. An applicant cannot be paid for providing care until they are an ODA certified provider, have an individual identified to work for, the participant direction enrollment process is finished in its entirety, and a start date is set by the individual's case manager or waiver service coordinator.

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Definition Guide:

ODA = Ohio Department of Aging

ODM = Ohio Department of Medicaid

PAA = PASSPORT Administrative Agency

Individual = the PASSPORT/MyCare Waiver recipient. Often referred to as consumer or member.

Case Manager = employed at the PAA who plans, coordinates, monitors, evaluates, and authorize services for PASSPORT recipients.

Waiver Service Coordinator = responsible for developing the waiver service plan and procuring providers and equipment to address identified needs and goals to assure health, safety, and welfare for MyCare recipients.

OHID = State system that offers a single-entry point to state agency systems. Must have an OHID to access any state agency system.

PNM = The Ohio Department of Medicaid provider front-door system. This is the OHID system where every provider must begin their provider application.

PCW = ODA's provider application. From PNM, the applicant will be transferred to PCW to continue the application process. NPI = National Provider Identifier.
This is a unique 10-digit identification number issued to health care providers in the United States by the Centers for Medicare and Medicaid Services.

Contact Information:

For questions/concerns that cannot be answered here, contact the individual's case manager, waiver service coordinator, or provider team. They will do their best to provide support and assistance. If unsure who to contact:

- ➤ PASSPORT consumers or providers can contact 1-866-243-5678 or <u>find the PASSPORT administrative agency</u> to be connected to the appropriate PAA.
- ➤ MyCare members can contact the appropriate MyCare plan, and providers can contact the appropriate provider resource.

For questions/concerns about PNM or OHID, contact ODM at:

- **1-800-686-1516**
- > IHD@medicaid.ohio.gov

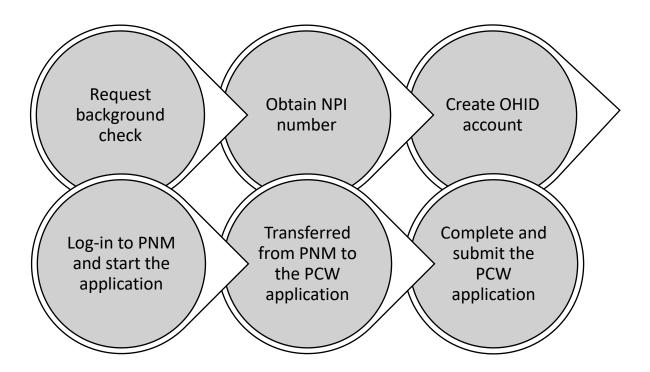
For questions/concerns about the PCW application, contact the ODA provider certification team at:

- 1-877-632-7827 or 614-466-9848
- Provider_Enrollment@age.ohio.gov

Information and Resources:

- > PNM Provider Page
- > PNM Online tutorials
- PNM Resources
- Medicaid's Ohio Self
 Direction
- > ODA C-HCAS Provider Certification
- > ODA CD-PCS Provider Certification
- ➢ ODA's PASSPORT Participant Direction

Application Process Quick Overview:

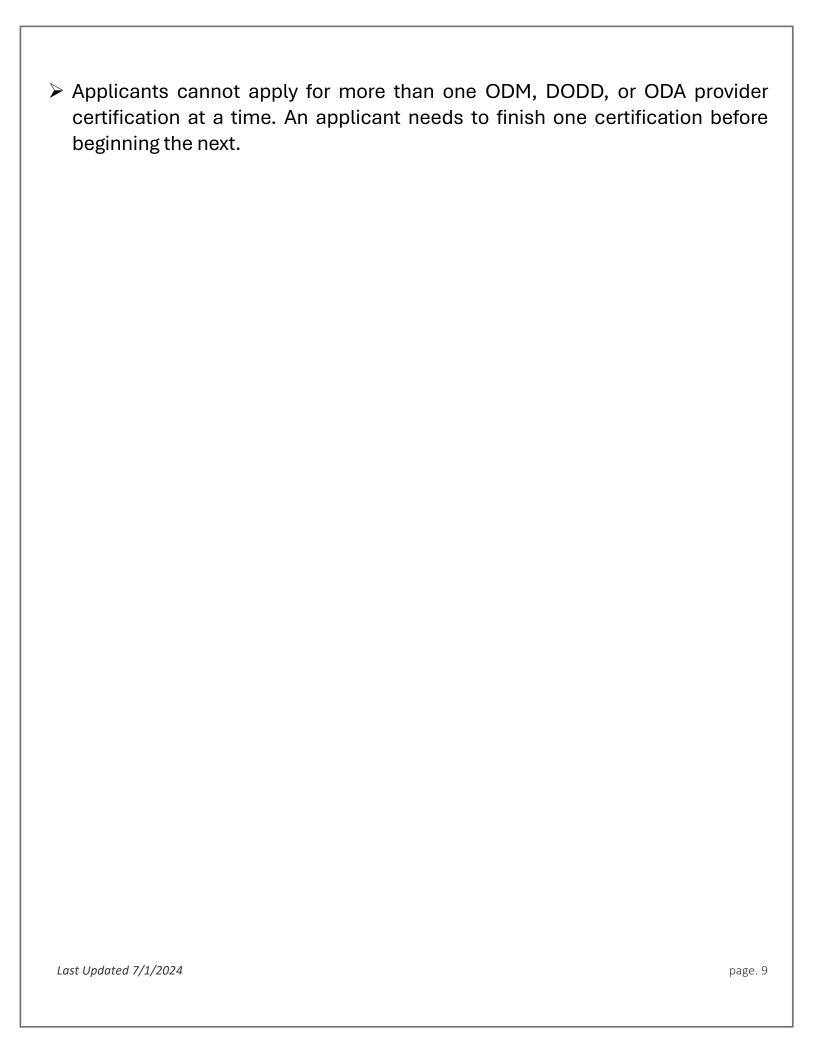


General Tips, Tricks, and Suggestions:

- ➤ The applicant should keep log-in information and ID numbers in an easily accessible safe place. Important ones include:
 - Email log-in information
 - OHID log-in information
 - PNM log-in information (this is the same as the OHID log-in)
 - OHID number (<u>Locating your OHID number after creating account</u>)
 - Reg ID (assigned when initially applying in PNM)
 - Tax ID (this is the applicant's social security number)
 - NPI number
 - Application ID number (assigned after applying in PCW)
 - Medicaid number (assigned when the applicant receives their provider certification from ODA)

- > Every part of this process is completed online. The applicant must have access to a computer and the internet.
- ➤ There are two documents that need to be printed, signed, scanned, and uploaded to the PCW application. The applicant must have access to a printer and scanner or a smart phone to do this.
- ➤ The applicant must have an email address to complete this process. If they do not already have one, some free options include:
 - Gmail
 - Yahoo
 - Microsoft Outlook
- Use a desktop computer for this process instead of a mobile device (cell phone, tablet, etc.).
- ➤ Do not switch between different desktops if stopping and resuming the application. If you start the PNM or PCW on one desktop and pause the application, resume the application on the same desktop you were using.
- ➤ It is recommended the applicant completes the PNM and PCW applications when they are started.
- ➤ When working in the PNM and PCW application systems, it is suggested the applicant open the <u>Google Chrome</u> web browser on a desktop computer and then:
 - Open an incognito window by clicking the three vertical dots in the top right-hand corner of the browser and then clicking "New Incognito window."

- Clear out cookies by clicking the three vertical dots at the top right-hand corner of the browser and then selecting," Settings," "Privacy and security," "Clear browsing data," and "Clear data."
- ➤ The applicant must use their legal name throughout this process. <u>Do not</u> use nicknames.
- ➤ Before starting, the applicant should first determine if they are applying as a Choices Home Care Attendant Service (C-HCAS) provider or a Consumer Directed Personal Care Service (CD-PCS) provider. This will be the first question on the PCW application.
- ➤ Information entered in PNM must be correct before moving forward. This includes social security number, legal name, birthdate, email address, etc. Double check all information is correct before moving forward. If incorrect information is entered, it will significantly delay this process, as it may require the withdrawal of the application and the applicant starting over with applying.
- ➤ When starting the PCW application, there is a cost at the top of the page geared towards agency applicants. This cost does NOT apply to participant direction applicants. There is no application fee for C-HCAS and CD-PCS applicants.
- ➤ PCW is also a Department of Developmental Disabilities (DODD) system, so an applicant may see DODD in areas of PCW.
- ➤ Updates about the status of the PCW application will come via email. The applicant should check their email including the spam/junk folder regularly.



Application Document Requirements:

The following documents are required to be submitted with the applicant's PCW application. These documents will need to be uploaded in the PCW application. PCW will not allow the applicant to submit the application until the required documents are uploaded in the system. Additional documents may be requested during the certification process.

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.

eral law requires that an NPI be used to ntify providers on any standard transaction ch as a claim) for health care services. Since wer services are paid in part using federal dicaid funds, you must obtain an NPI and wide it in your application. You may obtain an NPI number at as://nppes.cms.hhs.gov/#/. Tis required for C-HCAS but is done through Fiscal Management Service (FMS) as the re's Alt EVV vendor. Therefore, applicants are required to complete EVV training prior to lying for their ODA provider certification. EVV
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required document upload field in the lication. C-HCAS applicants can upload a ement saying "EVV training is not required at lication."
the live or have lived outside of Ohio anytime he past five consecutive years, you are uired to submit an FBI background check. original should be forwarded to the client plan to serve, and a copy sent to the Ohio eartment of Aging. If you do not have an widual already identified to work for, the inal can be sent to the Ohio Department of ag. BCI&I REASON CODE 173.41 ONLY.
ODA's <u>Provider BCI Instructions</u> web page nore information on background checks.
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☐ Ohio BCI Background Check

You are required to obtain a criminal record check (BCI) at time of application. The original should be forwarded to the individual you plan to serve, and a copy sent to the Ohio Department of Aging. If you do not have an individual already identified to work for, the original can be 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.

See ODA's *Provider BCI Instructions* web page for more information on background checks.

All supporting documents must be uploaded in the application except the BCI and/or FBI Background Check. The system will not allow you to submit your application until you have uploaded your required documentation.

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

Application Process:

1. Obtain an NPI number:

- If an applicant already has an NPI number, it is important they do <u>NOT</u> create a new one. The applicant will use their existing NPI.
 - Visit the <u>NPPES NPI Registry</u> to search for an existing NPI.
- Apply for an NPI number on the <u>NPPES webpage</u>.
 - Use this <u>How to Apply for an NPI Online</u> guide to apply for an NPI number if needed.
 - Use this <u>Taxonomy Guide</u> to complete the <u>Taxonomy</u> section of the application. At minimum, use code 3747P1801X.
 - Once the application is completed the applicant will receive their new NPI number in approximately 24 hours through email.

2. Create an OHID account:

- Create a new OHID account on the Create OHID Account webpage.
 - Use <u>Creating OHID Account for PNM</u> guide for creating an OHID account if needed.
 - If an applicant has an existing OHID account, it is important they do NOT create a new one. The applicant will use their existing OHID account for the next step. If the applicant has an existing OHID and creates a new one, this will significantly delay the application process.
 - If the applicant does not know what their OHID log-in is or is unsure if they have an OHID log-in, they will need to contact ODM at 1-800-866-1516 or IHD@medicaid.ohio.gov.

3. Log in to PNM:

- Go to the PNM website and log in using the OHID log-in information.
 - Use <u>PNM Initial Log-In</u> guide if needed.

4. Start the PNM application:

- Once the applicant is logged into PNM, start the PNM application using the instructions in the <u>ODA Provider Enrollment Applications</u> document. Follow instructions for <u>Provider Information (Individual)</u>.
 - If the "New Provider?" button is not showing per step 1 on page 7, contact ODM at 1-800-866-1516 or IHD@medicaid.ohio.gov.
 - The PNM application will expire in 10 days if not completed. It is very important it is completed within this deadline.
 - To return to an incomplete PNM application, follow the instructions on the <u>ODA Provider Enrollment Applications</u> document.
- 5. Complete and submit the PCW application:
 - The applicant has 90 days to complete and submit the PCW application. Any application not completed within 90 days of submission is closed as incomplete.
 - To return to an incomplete PCW application, follow instructions on the <u>ODA Provider Enrollment Applications</u> document.
- 6. Submitted application goes to ODA's certification team for review:
 - Once ODA's certification team begins to review the application, the applicant will receive emailed updates about the application. It is important the applicant responds promptly.
 - Once the application is reviewed and considered accurate and complete, a notification is sent to the PAA.
- 7. The individual and applicant move forward in the next step of the participant direction enrollment process.

Website Guide:

Welcome Section:

- PASSPORT: https://aging.ohio.gov/care-and-living/get-help/home-and-community-care/passport-1
- MyCare: https://medicaid.ohio.gov/families-and-individuals/citizenprograms-and-initiatives/mycareohio/mycare-ohio

Contact Information Section:

- <u>Find the PASSPORT Administrative Agency:</u> https://aging.ohio.gov/find-services?serviceParam=PASSPORT%20Administrative%20Agency%20 (Medicaid%20programs)
- MyCare plan: https://medicaid.ohio.gov/families-andindividuals/citizen-programs-and-initiatives/mycareohio/mycare-ohio
- MyCare provider resource: https://medicaid.ohio.gov/resources-for-providers/managed-care/provider-mcp-resources

Information and Resources Section:

- PNM Provider Page: https://medicaid.ohio.gov/resources-for-providers/nextgeneration-pnm/nextgeneration-pnm
- <u>PNM Online tutorials:</u> https://medicaid.ohio.gov/resources-for-providers/nextgeneration-pnm/online-tutorials-for-providers
- PNM Learning Resources:
 https://ohpnm.omes.maximus.com/OH_PNM_PROD/Resources.aspx
- <u>ODA C-HCAS Provider Certification:</u> https://aging.ohio.gov/agenciesand-service-providers/certification/individual-provider-choices-homecare-attendant-1
- ODA CD-PCS Provider Certification: https://aging.ohio.gov/agenciesand-service-providers/certification/individual-provider-consumerdirected-personal-care-provider-1

- PASSPORT Participant Direction: https://aging.ohio.gov/care-and-living/get-help/home-and-community-care/passport-participant-direction
- General Tips, Tricks, and Suggestions Section:
 - Locating your OHID number after creating account:
 https://managedcare.medicaid.ohio.gov/static/PNM/QRG/QRG+-+Finding+Your+OHID.pdf
 - Gmail: https://support.google.com/mail/answer/56256?hl=en
 - Yahoo: https://login.yahoo.com/account/create?.intl=us&.lang=en-US&src=ym&activity=mail-direct&pspid=159600001&.done=https%3A%2F%2Fmail.yahoo.com%2Fd&specId=yidregsimplified&done=https%3A%2F%2Fmail.yahoo.com%2Fd
 - Microsoft Outlook: https://outlook.live.com/owa/
 - Google Chrome:

https://www.google.com/chrome/bsem/download/en_us/?brand=VDK B&ds_kid=43700052784036214&gclid=a632f08a4b9e1fc33ba9941171 04897d&gclsrc=3p.ds&utm_source=bing&utm_medium=cpc&utm_ca mpaign=1605158%20%7C%20Chrome%20Win11%20%7C%20DR%2 0%7C%20ESS01%20%7C%20NA%20%7C%20US%20%7C%20en%20%7C%20Desk%20%7C%20SEM%20%7C%20BKWS%20-%20EXA%20%7C%20Txt%20%7C%20Bing_Top%20KWDS&utm_term= google%20chrome&utm_content=Desk%20%7C%20BKWS%20-%20EXA%20%7C%20Txt_Google%20Chrome_Top%20KWDS&gclid=a 632f08a4b9e1fc33ba994117104897d&gclsrc=3p.ds

- Application Document Requirements
 - NPI number search: https://nppes.cms.hhs.gov/%23/

 <u>Provider BCI Instructions</u>: https://aging.ohio.gov/agencies-andservice-providers/training/bciinstructions#WhoNeedstoCompleteaBackgroundCheck

Application Process Section:

- NPI number search: https://npiregistry.cms.hhs.gov/search
- Apply for an NPI number: https://nppes.cms.hhs.gov/#/
- Creating OHID Account for PNM Guide:

https://ohpnm.omes.maximus.com/OH_PNM_PROD/pages/Download File.aspx?catId=Learning&mode=inline&id=b7e740f7-4062-4cc4-a23c-e442c6f76e21

• Taxonomy Guide:

https://medicaid.ohio.gov/static/Providers/Enrollment+and+Support/Taxonomy_guide_for_ODA_waiver_providers_final.pdf

• Create a new OHID account:

https://ohid.ohio.gov/wps/portal/gov/ohid/create-account

• Creating OHID Account for PNM:

https://ohpnm.omes.maximus.com/OH_PNM_PROD/pages/Download File.aspx?catId=Learning&mode=inline&id=b7e740f7-4062-4cc4-a23c-e442c6f76e21

• PNM Log-In:

https://ohpnm.omes.maximus.com/OH_PNM_PROD/Account/Login.aspx

• PNM Initial Log-In Guide:

https://ohpnm.omes.maximus.com/OH_PNM_PROD/pages/Download File.aspx?catId=Learning&mode=inline&id=cde48671-6400-4658-a9b8-a3b21f86ad4c

ODA Provider Enrollment Applications:

https://dam.assets.ohio.gov/image/upload/managedcare.medicaid.ohio.gov/PNM/DRG/ODA%20Provider%20Desk%20Reference%20Guide.pdf