



Department of Medicaid

Mike DeWine, Governor
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TO: Contracted Medicaid Managed Care Plans
Contracted MyCare Ohio Plans

FROM: Matthew Hobbs
Office of Managed Care

DATE: May 28, 2021 (*revised October 22, 2021*)

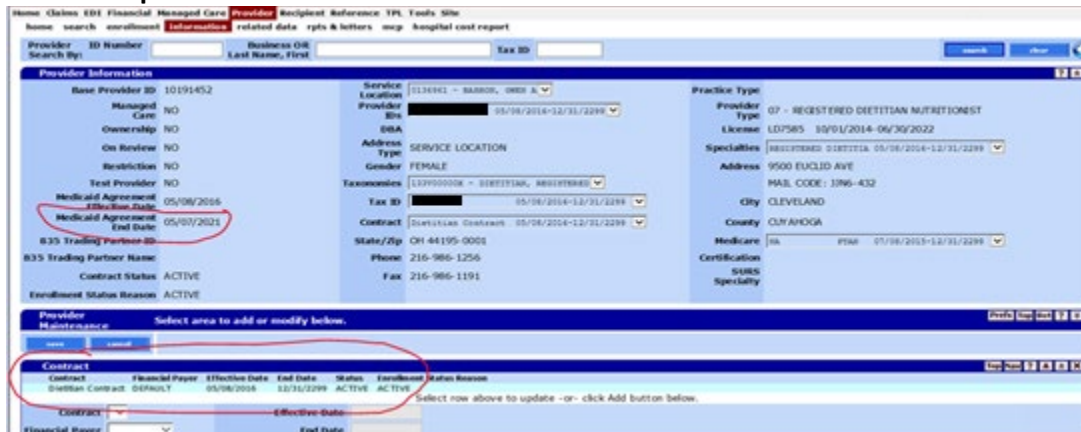
SUBJECT: Provider Revalidation Waiver – Revised

This correspondence serves as a notification to Medicaid managed care plans (MCPs) and MyCare Ohio plans (MCOPs) that the Ohio Department of Medicaid (ODM) is providing additional clarification on Medicaid Handbook Transmittal Letter (MHTL) No. 3334-20-05¹. This guidance document provides additional clarification to MCPs and MCOPs regarding valid provider termination reasons during the public health emergency.

Provider Revalidation Waiver

Effective March 6, 2020, ODM initiated the provider revalidation waiver due to the COVID-19 Public Health Emergency (PHE). Under this waiver, no provider will be made inactive by ODM due to a failure to revalidate. MCPs and MCOPs should evaluate provider contracts and not the Medicaid agreement end date to determine if a provider is currently eligible (see MITS screenshots and examples below). During the duration of the PHE, the Medicaid agreement end date will not be updated.

MITS Example 1: Active Provider – Provider not terminated due to revalidation waiver.



¹ <https://medicaid.ohio.gov/static/Providers/Enrollment+and+Support/Provider-Revalidation-Waiver.pdf>

MIT S Example 2: Inactive Provider – Provider terminated due to failure to revalidate (pre-Covid-19 PHE).

The screenshot displays a provider's profile with the following key information:

- Provider Information:** Base Provider ID: 010045062, Service Location: 0445361 - O'NEAL, PATRICK J, DBA: CLEVELAND CLINIC, Address: SERVICE LOCATION, Gender: MALE, Taxonomics: 204401238 - ROBERT - TACTICAL ROBERT, Tax ID: 02/08/1980-12/31/2299, Contract: Independent Laborte01/07/2019-12/31/2299, State/Zip: OH 44195-0001, Phone: 216-966-1256, Fax: 216-966-1191.
- Practice Type:** OTHER, Provider Type: 20 - PHYSICIAN/OSTEOPATH INDIVIDUAL, License: 35043824 09/08/1979-04/01/2020, Specialties: GENERAL ROBERT 02/09/1980-12/31/2299, Address: 9500 EUCLID AVE, MAIL CODE 564, City: CLEVELAND, County: CUYAHOGA, Medicare: PDM 10/28/2013-12/31/2299, Certification: SURS, Specialty: .
- Contract Table:**

Contract	Financial Payer	Effective Date	End Date	Status	Enrollment Status Reason
Independent Laborte	DEFAULT	02/09/1980	01/06/2019	ACTIVE	ACTIVE
Independent Laborte	DEFAULT	01/07/2019	12/31/2299	INACTIVE	FAILURE TO RE-VALIDATE
Physician Contract	DEFAULT	02/09/1980	01/06/2019	ACTIVE	ACTIVE
Physician Contract	DEFAULT	01/07/2019	12/31/2299	INACTIVE	FAILURE TO RE-VALIDATE

Below is a Provider Master File (PMF) example identifying the same information as depicted in the MITS screenshots above. These examples show selected fields. PMF Example 1 is from the full file, showing the Medicaid agreement end date for Provider 0136961 is within the period of the PHE waiver and they have an active contract enrollment status (see green highlighted information). Also included in PMF Example 1 is Provider 0445361 with a Medicaid agreement end date *before* the PHE waiver and an inactive contract enrollment status (see red highlighted information).

PMF Example 1

SAK_PROV	ID_PROVIDER_M CAID_1	DTE_EFF_MCD AGREEMENT	DTE_END_MCD AGREEMENT	CDE_ENROLL STATUS_1	DTE_EFF_ENROL LMENT_1
382685	0136961	05/08/2016	05/07/2021	AC	05/08/2016
38027	0445361	02/09/1980	01/06/2019	IN	01/07/2019

PMF Example 2 is from the contract records on the PMF, showing Provider 0136961 has an active contract status with a future end date of 12/31/2299 (see green highlighted information). Also included in PMF Example 2 is Provider 0445361 with an inactive contract status with an effective date of 1/7/2019 (before the revalidation waiver was in effect; see red highlighted information).

PMF Example 2

SAK_PROV	ID_PROVIDER	DTE_EFFECTIVE	DTE_END	DTE_INACTIVE	CDE_ENROLL STATUS	CDE_ENROLL REASON
000382685	0136961	05/08/2016	12/31/2299	12/31/2299	AC	15
000038027	0445361	02/09/1980	01/06/2019	01/07/2019	AC	15
000038027	0445361	02/09/1980	01/06/2019	01/07/2019	AC	15
000038027	0445361	01/07/2019	12/31/2299	12/31/2299	IN	31
000038027	0445361	01/07/2019	12/31/2299	12/31/2299	IN	31

Valid Provider Terminations during PHE

ODM is providing additional clarification related to terminations that are not protected under the PHE exclusions. The table below outlines valid reasons an ODM provider contract could be terminated during the PHE.

ENROLLMENT STATUS REASON	DESCRIPTION/MEANING	PROVIDER ACTION
License/Certification Revoked	Board Action Taken on License	Provider must resolve with the board before re-applying with ODM. Must go through ODM compliance review to verify re-enrollment eligibility.
License Suspend - License Board	Board Action Taken on License	Provider must resolve with the board before re-applying with ODM. Must go through ODM compliance review to verify re-enrollment eligibility.
Inactivity For 24 Months or More	Provider Has Failed to Appear on a Claim For 24 Months or More.	If termination occurred within 30 days, then provider can email request to be reactivated (falls within the 30 day ongoing fed web checks). If termination occurred over 30 days ago then provider will need to reapply (rescreened).
License Certification – Not Renewed	Provider’s license not renewed	If applicable, provider would need to reactivate license with the board and then reapply with ODM.
Failure to Revalidate	Provider failed to complete/submit revalidation application	Any provider whose Medicaid enrollment date ended prior to the beginning of the PHE (March 6, 2020).
Provider not enrolled	Provider has no historical or current Medicaid enrollment by MPN, NPI, or TIN. Direct provider back to ODM.	Enroll: The provider needs to apply to ODM in MITS.
Provider inactive for any reason before PHE (3/6/21)	Plan validates the provider has no active contracts and the MPN is inactive	Re-enroll: Provider must re-apply to ODM to re-enroll or submit the revalidation application if one has been generated in MITS. If needed, the provider can call the ODM Provider Enrollment Hotline (1-800-686-1516) to determine the cause of termination.
Provider inactive for any reason other than failure to revalidate during PHE	Plan validates reason for inactivity is not failed to revalidate.	Re-enroll: Provider must re-apply to ODM and re-enroll.
Provider NPI is inactive but provider reports MPN is active	Plan validates provider has active contracts and MPN. Plan should notify ODM if MPN is active but all associated NPIs are inactive	NPI update to ODM: Provider must email ODM at: Medicaid.Provider.Update@medicaid.ohio.gov . to update their NPI on their active MITS profile.

<p>Provider location or other demographic details do not match with the plans' record</p>	<p>Plan verifies alternative locations that might be registered in MITS or group affiliations that might identify service locations.</p> <p>Plan validates NPI is not the same one known to ODM.</p>	<p>Demographic update in MITS: Providers can update demographics in MITS. There is a tutorial available here: https://medicaid.ohio.gov/wps/portal/gov/medicaid/resources-for-providers/billing/mits_online_tutorials/web-portal-fundamentals.</p> <p>NPI update to ODM: Provider must email ODM at: Medicaid_Provider_Update@medicaid.ohio.gov. to update their NPI on their active MITS profile.</p>
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Questions regarding this memo should be sent to ManagedCarePolicy@medicaid.ohio.gov.