

The Ohio Department of Medicaid

Focus on the **INDIVIDUAL** rather than the business of managed care

We want to do better for the people we serve

Purpose: This document serves as a central repository for Points of Contact (POC) which Care Coordination Entity (CCE) staff and other community care coordinators can reach out to for general questions, and/or begin the process of gaining access to the Managed Care Entity (MCE) care coordination portal(s).

MCEs, please provide at least one POC for the areas below. POCs should understand the program or member population and be able to facilitate the linkage between the member and individual care coordinators. These contacts should be reviewed and updated quarterly in accordance with the Provider Agreement (Appendix P). Email this document to CareManagement@medicaid.ohio.gov for changes to the POCs listed below.

Check out our helpful [resources and information](#) for all things related to the Ohio Medicaid Managed Care program.

MCE Name:

Date:



Ohio Homecare Waiver + Managed Care

Medicaid home- and community-based services

Name 1:

Email 1:

Name 2:

Email 2:



ODA Waiver + Managed Care

Department of Aging home- and community-based services

Name 1:

Email 1:

Name 2:

Email 2:

Website:



Voluntarily Enrolled DODD HCBS Waiver

Department of Developmental Disabilities Home and Community Based Services

Name 1:

Email 1:

Name 2:

Email 2:



SRSP + MCO

Specialized Recovery Services Program

Name 1:

Email 1:

Name 2:

Email 2:



HOME Choice

Helping Ohioans Move, Expanding Choice

Name 1:

Email 1:

Name 2:

Email 2:



IMS Administrators

Incident Management System

Name 1:

Email 1:

Name 2:

Email 2:



Justice-Involved Programs

Pre-release, community linkage, and the addiction treatment program

Name 1:

Email 1:

Name 2:

Email 2:



OhioRISE- Aetna/CMEs

Resilience through Integrated Systems and Excellence

Name 1:

Email 1:

Name 2:

Email 2:



Comprehensive Primary Care

Patient-centered medical home program

Name 1:

Email 1:

Name 2:

Email 2:



PCSA/Title IV-E Court

Public children services agency

Name 1:

Email 1:

Name 2:

Email 2: