

MANAGED CARE ENTITY (MCE) – SERVICES PROVIDED – ATTACHMENT C

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|---------------|-----|-------------|--|
| Provider Name | | MCE Name | |
| Tax ID Number | NPI | Medicaid ID | |

Complete this form when the provider is not contracted to render all ODM-enrolled specialties. All contracted specialties must be included with the provider's ODM enrollment

Provider agrees to provide services as enumerated below**Hospital Services (Provider Types 01 And 02)**

| | | |
|--|---|--|
| <input type="checkbox"/> General Hospital (001) | <input type="checkbox"/> Pharmacy (700) | <input type="checkbox"/> IHBT - Intensive Home Based Treatment (847) |
| <input type="checkbox"/> LTACH (Long Term Care Acute Hospital) (002) | <input type="checkbox"/> 340B PHARMACY (701) | <input type="checkbox"/> QBHE - Qualified Behavioral Health Entity – Child (992) |
| <input type="checkbox"/> Cancer Hospital (003) | <input type="checkbox"/> Home Infusion (702) | <input type="checkbox"/> QBHE - Qualified Behavioral Health Entity – Adult (993) |
| <input type="checkbox"/> Rehabilitation Hospital (004) | <input type="checkbox"/> DME Supplier, Basic (760) | <input type="checkbox"/> QBHE - Qualified Behavioral Health Entity - Adult/Child (994) |
| <input type="checkbox"/> Children's Hospital (005) | <input type="checkbox"/> ORCB Licensed DME Supplier (761) | <input type="checkbox"/> Qualified Entity (4QE) |
| <input type="checkbox"/> Major Teaching Hospital (006) | <input type="checkbox"/> Orthotics and Prosthetics (762) | <input type="checkbox"/> CANS Assessor (ORC) |
| <input type="checkbox"/> Distinct Part Psychiatric Unit (007) | <input type="checkbox"/> Ambulance Services (820) | <input type="checkbox"/> MRSS - Mobile Response and Stabilization Service (ORM) |
| <input type="checkbox"/> Critical Access Hospital (010) | <input type="checkbox"/> Ground Ambulance (821) | |
| <input type="checkbox"/> Hospital High-Cost Carve-Out (011) | <input type="checkbox"/> Fixed-Wing Air Ambulance (822) | |
| <input type="checkbox"/> IMD (018) | <input type="checkbox"/> Rotary-Wing Air Ambulance (823) | |
| <input type="checkbox"/> Non-IMD (019) | <input type="checkbox"/> Water Ambulance (824) | |
| <input type="checkbox"/> ODA Waiver (480) | <input type="checkbox"/> Wheelchair Van (830) | |

Psychiatric Residential Treatment Facility (Provider Type 03)

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|---|--|
| <input type="checkbox"/> Psychiatric Residential Treatment Facility (030) | <input type="checkbox"/> CANS Assessor (ORC) |
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Federally Qualified Health Center (FQHC) and Rural Health Clinic (RHC) Services (Provider Types 12 And 05)

| | | |
|---|--|---|
| <input type="checkbox"/> Acupuncture (023) | <input type="checkbox"/> FQHC Dental (122) | <input type="checkbox"/> FQHC Vision (127) |
| <input type="checkbox"/> RHC Medical and Behavioral Health (050) (also includes covered services rendered by a dietitian or pharmacist) | <input type="checkbox"/> FQHC Behavioral Health (123) | <input type="checkbox"/> FQHC Chiropractic (128) |
| <input type="checkbox"/> FQHC Medical (121) (also includes covered services rendered by a dietitian or pharmacist) | <input type="checkbox"/> FQHC Physical Therapy And/Or Occupational Therapy (124) | <input type="checkbox"/> FQHC Transportation (129) |
| | <input type="checkbox"/> FQHC Speech Therapy and Audiology (125) | <input type="checkbox"/> ODA Waiver (480) |
| | <input type="checkbox"/> FQHC Podiatry (126) | <input type="checkbox"/> 340b Pharmacy (701) |
| | | <input type="checkbox"/> Benefit Support Services (853) |
| | | <input type="checkbox"/> Qualified Entity (4QE) |

Registered Dietician Nutritionist (Provider Type 07)

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| <input type="checkbox"/> Dietitian (070) |
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Doula (Provider Type 09)

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|--------------------------------------|
| <input type="checkbox"/> Doula (090) |
|--------------------------------------|

Free standing birth center (Provider Type 11)

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|---|
| <input type="checkbox"/> Free Standing Birth Center (110) |
|---|

Optometrist/Ocularist/Optician and Eyeglass Services (Provider Types 15, 35, 75)

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|--|--|---|
| <input type="checkbox"/> Eyeglass Lab Services (015) | <input type="checkbox"/> Optometry (350) | <input type="checkbox"/> Solo Practice Optician (750) |
|--|--|---|

Other Accredited Home Health Agency (Provider Type 16)

| | | |
|--|---|--|
| <input type="checkbox"/> Other Accredited Home Health Agency (160) | <input type="checkbox"/> ODM Waiver Out-Of-Home Respite (456) | <input type="checkbox"/> DD Waiver and Nursing (492) |
| <input type="checkbox"/> ODM Otherwise Accredited Home Health Agency (161) | <input type="checkbox"/> ODM Waiver Emergency Response Services (457) | <input type="checkbox"/> HCBS Assisted Living (740) |
| <input type="checkbox"/> ODM Waiver Adult Day Health Center (452) | <input type="checkbox"/> Community Integration (458) | <input type="checkbox"/> Home Maintenance/Chore (45a) |
| <input type="checkbox"/> ODM Waiver Adaptive/Assistive Devices (453) | <input type="checkbox"/> Community Transition (459) | <input type="checkbox"/> Specialized Medical Equipment, Supplies and Devices (45S) |
| <input type="checkbox"/> ODM Waiver Home Delivered Meals (455) | <input type="checkbox"/> ODA Waiver (480) | <input type="checkbox"/> Vehicle Modifications (45V) |
| | <input type="checkbox"/> DODD Waiver (490) | |

Managed Care Organization Only (Provider Type 19)

| | | |
|---|---|--|
| <input type="checkbox"/> MCO Provider Only (Managed Care Organization Provider) (190) | <input type="checkbox"/> OhioRISE (OHR) | <input type="checkbox"/> CANS Assessor (ORC) |
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Physician/Osteopath (Provider Type 20)

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|---|---|---|
| <input type="checkbox"/> Acupuncture (023) | <input type="checkbox"/> Dermatologic Surgery (253) | <input type="checkbox"/> Pediatric Emergency Medicine (323) |
| <input type="checkbox"/> Physician/Osteopath Individual (200) | <input type="checkbox"/> Dermatology (254) | <input type="checkbox"/> Pediatric Infectious Disease (327) |
| <input type="checkbox"/> General Practice (201) | <input type="checkbox"/> Dermatopathology (Pathology) (255) | <input type="checkbox"/> Pediatric Nephrology (328) |
| <input type="checkbox"/> General Surgery (202) | <input type="checkbox"/> Diabetes (256) | <input type="checkbox"/> Pediatric Ophthalmology (329) |
| <input type="checkbox"/> Allergy & Immunology (203) | <input type="checkbox"/> Diagnostic Radiology (257) | <input type="checkbox"/> Pediatric Orthopedics (330) |
| <input type="checkbox"/> Anesthesiology (204) | <input type="checkbox"/> Endocrinology/Diabetes & Metabolism (258) | <input type="checkbox"/> Pediatric Otolaryngology (331) |
| <input type="checkbox"/> Otolaryngology (205) | <input type="checkbox"/> Epidemiology (259) | <input type="checkbox"/> Pediatric Pathology (332) |
| <input type="checkbox"/> Cardiology (206) | <input type="checkbox"/> Facial Plastic Surgery (261) | <input type="checkbox"/> Pediatric Pulmonology (333) |
| <input type="checkbox"/> Family Practice (207) | <input type="checkbox"/> Foot & Ankle, Orthopedics (262) | <input type="checkbox"/> Pediatric Radiology (334) |
| <input type="checkbox"/> Gastroenterology (208) | <input type="checkbox"/> General Preventive Medicine (263) | <input type="checkbox"/> Pediatric Rheumatology (335) |
| <input type="checkbox"/> Internal Medicine (209) | <input type="checkbox"/> Geriatric Psychiatry (264) | <input type="checkbox"/> Pediatric Surgery (336) |
| <input type="checkbox"/> Neurology (210) | <input type="checkbox"/> Hand Surgery (265) | <input type="checkbox"/> Pediatric Urology (337) |
| <input type="checkbox"/> Neurological Surgery (211) | <input type="checkbox"/> Head & Neck Surgery (266) | <input type="checkbox"/> Physical Medicine & Rehabilitation (338) |
| <input type="checkbox"/> Obstetrics & Gynecology (212) | <input type="checkbox"/> Hematology (267) | <input type="checkbox"/> Plastic Surgery (339) |
| <input type="checkbox"/> Psychiatric (213) | <input type="checkbox"/> Hepatology (268) | <input type="checkbox"/> Proctology (340) |
| <input type="checkbox"/> Pulmonary Disease (214) | <input type="checkbox"/> Immunology (269) | <input type="checkbox"/> Psychoanalysis (341) |
| <input type="checkbox"/> Pediatric (215) | <input type="checkbox"/> Maxillofacial Surgery (273) | <input type="checkbox"/> Public Health & Gen Preventive Med (342) |
| <input type="checkbox"/> Geriatric (216) | <input type="checkbox"/> Internal Medicine/Pediatrics (274) | <input type="checkbox"/> Pulmonary Critical Care Medicine (343) |
| <input type="checkbox"/> Cardiovascular Surgery (217) | <input type="checkbox"/> Maternal & Fetal Medicine (275) | <input type="checkbox"/> Radioisotopic Pathology (344) |
| <input type="checkbox"/> Hematology/Oncology (218) | <input type="checkbox"/> Maxillofacial Radiology (276) | <input type="checkbox"/> Radiology (345) |
| <input type="checkbox"/> Gynecology (219) | <input type="checkbox"/> Medical Toxicology (Emer. Medicine) (277) | <input type="checkbox"/> Reproductive Endocrinology (346) |
| <input type="checkbox"/> Oncology (220) | <input type="checkbox"/> Medical Toxicology (Pediatrics) (278) | <input type="checkbox"/> Rheumatology (347) |
| <input type="checkbox"/> Surgical Oncology (221) | <input type="checkbox"/> Medical Toxicology (Prevent. Medicine) (279) | <input type="checkbox"/> Selective Pathology (348) |
| <input type="checkbox"/> Radiation Oncology (222) | <input type="checkbox"/> Musculoskeletal Oncology (281) | <input type="checkbox"/> Spinal Cord Injury (349) |
| <input type="checkbox"/> Gynecological Oncology (223) | <input type="checkbox"/> Neonatal-Perinatal Medicine (282) | <input type="checkbox"/> Sports Medicine (Emer. Med.) (351) |
| <input type="checkbox"/> Emergency Medicine (224) | <input type="checkbox"/> Nephrology (283) | <input type="checkbox"/> Sports Medicine (Family Practice) (352) |
| <input type="checkbox"/> Addiction Medicine (226) | <input type="checkbox"/> Neurology/Diag Rad/ (284) | <input type="checkbox"/> Sports Medicine (Internal Medicine) (353) |
| <input type="checkbox"/> Addiction Psychiatry (227) | <input type="checkbox"/> Neuropathology (285) | <input type="checkbox"/> Sports Medicine (Orthopedic Surgery) (354) |
| <input type="checkbox"/> Adult Reconstructive Orthopedics (228) | <input type="checkbox"/> Neuroradiology (286) | <input type="checkbox"/> Sports Medicine (Pediatrics) (355) |
| <input type="checkbox"/> Allergy (229) | <input type="checkbox"/> Nuclear Medicine (287) | <input type="checkbox"/> Infectious Disease (356) |
| <input type="checkbox"/> Anatomic Pathology (230) | <input type="checkbox"/> Nuclear Radiology (288) | <input type="checkbox"/> Surgical Critical Care (Surgery) (357) |
| <input type="checkbox"/> Anatomic/Clinical Pathology (231) | <input type="checkbox"/> Nutrition (289) | <input type="checkbox"/> Thoracic Surgery (358) |
| <input type="checkbox"/> Cardiothoracic Surgery (232) | <input type="checkbox"/> Obstetrics (290) | <input type="checkbox"/> Transplant Surgery (359) |
| <input type="checkbox"/> Cardiovascular Disease (233) | <input type="checkbox"/> Occupational Medicine (291) | <input type="checkbox"/> Trauma Surgery (361) |
| <input type="checkbox"/> Child & Adolescent Psychiatry (234) | <input type="checkbox"/> Ophthalmology (292) | <input type="checkbox"/> Unspecified (362) |
| <input type="checkbox"/> Child Neurology (235) | <input type="checkbox"/> Orthopedic Surgery (293) | |
| <input type="checkbox"/> Clin. & Lab. Dermatological Imm. (236) | <input type="checkbox"/> Orthopedic Surgery Of The Spine (294) | |
| <input type="checkbox"/> Clin. & Lab. Immunology (Pediatrics) (237) | | |

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|---|---|---|
| <input type="checkbox"/> Clin. & Lab. Immunology (Internal Med.) (238) <input type="checkbox"/> Aca Primary Care (Attestation Required) (239) <input type="checkbox"/> Clinical Cardiac Electrophysiology (241) <input type="checkbox"/> Clinical Cytogenetics (242) <input type="checkbox"/> Clinical Lab. Immunology (Allerg & Imm) (243) <input type="checkbox"/> Clinical Pharmacology (246) <input type="checkbox"/> Colon & Rectal Surgery (247) <input type="checkbox"/> Critical Care Med. (Neurological Sur.) (248) <input type="checkbox"/> Critical Care Med.(Anesthesiology) (249) <input type="checkbox"/> Clinical Neurophysiology (244) <input type="checkbox"/> Clinical Pathology (245) <input type="checkbox"/> Critical Care Med. (Internal Med.) (251) <input type="checkbox"/> Cytopathology (252) | <input type="checkbox"/> Orthopedic Trauma (295) <input type="checkbox"/> Osteopathic Manipulative Medicine (296) <input type="checkbox"/> Otolaryngology/Neurotology (297) <input type="checkbox"/> Pain Medicine (298) <input type="checkbox"/> Palliative Medicine (299) <input type="checkbox"/> Pediatric Allergy (320) <input type="checkbox"/> Pediatric Cardiology (321) <input type="checkbox"/> Pediatric Critical Care Medicine (322) <input type="checkbox"/> Pediatric Endocrinology (324) <input type="checkbox"/> Pediatric Gastroenterology (325) <input type="checkbox"/> Pediatric Hematology/ Oncology (326) | <input type="checkbox"/> Urology (363) <input type="checkbox"/> Vascular & Interventional (364) <input type="checkbox"/> Vascular Surgery (365) <input type="checkbox"/> Immunopathology (470) <input type="checkbox"/> Dual Licensed Dentist and Licensed Md/Do. (555) <input type="checkbox"/> Data 2000 Waiver Practitioners (704) <input type="checkbox"/> DME Supplier, Basic (760) <input type="checkbox"/> ORCB Licensed DME Supplier (761) <input type="checkbox"/> Orthotics And Prosthetics (762) <input type="checkbox"/> Non-Institutional High-Cost Drug (HCD) <input type="checkbox"/> OhioRISE (OHR) <input type="checkbox"/> Cans Assessor (ORC) |
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Professional Medical Group (Provider Type 21)

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|--|--|---|
| <input type="checkbox"/> Professional Medical Group (021) <input type="checkbox"/> OhioRISE (OHR) | <input type="checkbox"/> 340B Pharmacy (701) <input type="checkbox"/> OhioRISE Care Management Entity (ORE) | <input type="checkbox"/> Qualified Entity (4QE) |
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Acupuncturist (Provider Type 23)

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| <input type="checkbox"/> Acupuncture (023) |
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Physician Assistant (Provider Type 24)

| | |
|---|--|
| <input type="checkbox"/> Acupuncture (023) <input type="checkbox"/> Physician assistant (240) <input type="checkbox"/> Data 2000 waiver practitioners (704) | <input type="checkbox"/> Non-Institutional High-Cost Drug (HCD) <input type="checkbox"/> OhioRISE (OHR) <input type="checkbox"/> CANS Assessor (ORC) |
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Non-Agency Personal Care Aide (Provider Type 25)

| | |
|---|---|
| <input type="checkbox"/> ODM Waiver Non-Agency Personal Care Aide (250) <input type="checkbox"/> Community Transition (459) <input type="checkbox"/> ODA Waiver (480) <input type="checkbox"/> DODD Waiver (490) | <input type="checkbox"/> HCBS assisted living (740) <input type="checkbox"/> Home Maintenance/Chore (45A) <input type="checkbox"/> OhioRISE (OHR) |
|---|---|

Non-Agency Home Care Attendant (Provider Type 26)

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|--|--|
| <input type="checkbox"/> ODM waiver non-agency home care attendant (260) <input type="checkbox"/> community transition (459) <input type="checkbox"/> ODA waiver (480) | <input type="checkbox"/> DODD Waiver (490) <input type="checkbox"/> HCBS Assisted Living (740) <input type="checkbox"/> Home Maintenance/Chore (45A) |
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Chiropractor (Provider Type 27)

| | | |
|---|--|---|
| <input type="checkbox"/> Acupuncture (023) <input type="checkbox"/> Mechanotherapy (272) | <input type="checkbox"/> Chiropractic Services (270) <input type="checkbox"/> General Dentistry (300) | <input type="checkbox"/> Chiro-Mechanotherapy (271) |
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Medicaid School Program (Provider Type 28)

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|--|--|
| <input type="checkbox"/> Medicaid School Program (280) | <input type="checkbox"/> DODD Waiver (490) |
|--|--|

Dental Services (Provider Type 30, 31)

| | | |
|--|--|--|
| <input type="checkbox"/> Acupuncture (023) <input type="checkbox"/> General Dentistry (300) <input type="checkbox"/> Endodontics (302) <input type="checkbox"/> Oral Surgery (303) <input type="checkbox"/> Orthodontics (304) | <input type="checkbox"/> Pediatric Dentistry (305) <input type="checkbox"/> Periodontics (306) <input type="checkbox"/> Prosthodontics (307) <input type="checkbox"/> Other (308) <input type="checkbox"/> Professional Dental Group (309) | <input type="checkbox"/> Selective Pathology (348) <input type="checkbox"/> Dual Licensed Dentist and Licensed MD/DO. (555) |
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Podiatry (Provider Type 36)

Podiatry (360) DME Supplier, Basic (760) Orthotics and Prosthetics (762)

Social Work (Provider Type 37)

| | | | |
|---|---|--|--|
| <input type="checkbox"/> Licensed Independent Social Worker (370) | <input type="checkbox"/> Licensed Independent Chemical Dependency Counselor (540) | <input type="checkbox"/> Clinical Counselor – Independent (47I) | <input type="checkbox"/> Paraprofessional – HS/GED (96H) |
| <input type="checkbox"/> Licensed Social Worker (371) | <input type="checkbox"/> Multi-Dependent/Other Licensure (699) | <input type="checkbox"/> Clinical Counselor – Licensed Dependent (47L) | <input type="checkbox"/> Paraprofessional – Master (96M) |
| <input type="checkbox"/> Social Worker Trainee (372) | <input type="checkbox"/> HCBS Assisted Living (740) | <input type="checkbox"/> Chemical Counselor – Assistant (54A) | <input type="checkbox"/> Paraprofessional - Care Management Specialist (9CS) |
| <input type="checkbox"/> Social Worker Assistant (373) | <input type="checkbox"/> Qualified MH Specialist (960) | <input type="checkbox"/> Chemical Counselor – Independent (54I) | <input type="checkbox"/> Paraprofessional - QMHS+3 (9Q3) |
| <input type="checkbox"/> Multi-Independent Licensure (399) | <input type="checkbox"/> Care Management Specialist (962) | <input type="checkbox"/> Chemical Counselor - III (5TH) | <input type="checkbox"/> Paraprofessional – QMHS (9QM) |
| <input type="checkbox"/> Community Transition (459) | <input type="checkbox"/> Medicare Exempt (995) | <input type="checkbox"/> Chemical Counselor - II (5TW) | <input type="checkbox"/> OhioRISE (OHR) |
| <input type="checkbox"/> Licensed Professional Clinical Counselor (474) | <input type="checkbox"/> Social Worker – Assistant (37A) | <input type="checkbox"/> Paraprofessional-Bachelors (96B) | <input type="checkbox"/> CANS Assessor (ORC) |
| <input type="checkbox"/> ODA waiver (480) | | | |

Non-Agency Nurse Rn or LPN (Provider Type 38)

| | | |
|--|---|--|
| <input type="checkbox"/> RN- Private Duty Nursing (380) | <input type="checkbox"/> DD Waiver and Nursing (492) | <input type="checkbox"/> Chemical Counselor - iii (5TH) |
| <input type="checkbox"/> PDN/ODM Waiver Registered Nurse (381) | <input type="checkbox"/> Multi-Dependent/Other Licensure (699) | <input type="checkbox"/> Chemical Counselor - ii (5TW) |
| <input type="checkbox"/> LPN - Private Duty Nursing (382) | <input type="checkbox"/> HCBS Assisted Living (740) | <input type="checkbox"/> Paraprofessional – Bachelors (96B) |
| <input type="checkbox"/> PDN/ODM Waiver Licensed Practical Nurse (383) | <input type="checkbox"/> Social Worker - Independent (37I) | <input type="checkbox"/> Paraprofessional - HS/GED (96H) |
| <input type="checkbox"/> Behavioral Health RN (384) | <input type="checkbox"/> Social worker – Licensed Dependent (37I) | <input type="checkbox"/> Paraprofessional – Master (96M) |
| <input type="checkbox"/> Behavioral Health LPN (385) | <input type="checkbox"/> Nurse - LPN (Marker) (38L) | <input type="checkbox"/> Paraprofessional - Care Management Specialist (9CS) |
| <input type="checkbox"/> Pre-Natal Postpartum Nurse Home Visitor (386) | <input type="checkbox"/> Nurse - Registered (Marker)(38R) | <input type="checkbox"/> Paraprofessional - QMHS+3 (9Q3) |
| <input type="checkbox"/> Multi-Independent Licensure (399) | <input type="checkbox"/> Clinical Counselor – Independent (47i) | <input type="checkbox"/> Paraprofessional – QMHS(9QM) |
| <input type="checkbox"/> Community Transition (459) | <input type="checkbox"/> Clinical Counselor – Trainee (47T) | <input type="checkbox"/> Cans Assessor (ORC) |
| <input type="checkbox"/> ODA Waiver (480) | <input type="checkbox"/> Chemical Counselor - Assistant (54a) | |
| <input type="checkbox"/> DODD Waiver (490) | <input type="checkbox"/> Chemical Counselor – Independent (54I) | |

Physical Therapy (Provider Type 39)

Acupuncture (023) Physical Therapy (391) Medicare exempt (995)

Speech Therapy (Provider Type 40)

Speech Language Pathology/Therapy (400) Medicare Exempt (995)

Occupational Therapy (Provider Type 41)

Acupuncture (023) Occupational Therapy (410) Medicare Exempt (995)

Psychology (Provider Type 42)

| | | |
|---|---|--|
| <input type="checkbox"/> Multi-Independent Licensure (399) | <input type="checkbox"/> Psychology trainee (422) | <input type="checkbox"/> Multi-dependent/other licensure (699) |
| <input type="checkbox"/> Licensed psychologist (420) | <input type="checkbox"/> Psychology assistant (423) | <input type="checkbox"/> Medicare exempt (995) |
| <input type="checkbox"/> Board licensed school psychologist (421) | <input type="checkbox"/> Psychology intern (424) | <input type="checkbox"/> OhioRISE (OHR) |
| | | <input type="checkbox"/> CANS Assessor (ORC) |

Audiology (Provider Type 43)

Audiology (430) Medicare Exempt (995)

Hospice Provider (Provider Type 44)

Hospice (440)

Waivered Services Organization (Provider Type 45)

| | | |
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| <input type="checkbox"/> ODM Waiver Non-Agency Personal Care Aide (250) <input type="checkbox"/> ODM Waiver Supplemental Transportation (451) <input type="checkbox"/> ODM Waiver Adult Day Health Center (452) <input type="checkbox"/> ODM Waiver Adaptive/Assistive Devices (453) <input type="checkbox"/> ODM Waiver Home Modifications (454) <input type="checkbox"/> ODM Waiver Home Delivered Meals (455) <input type="checkbox"/> ODM Waiver Out-Of-Home Respite (456) | <input type="checkbox"/> ODM Waiver Emergency Response Services (457) <input type="checkbox"/> Community Integration (458) <input type="checkbox"/> Community Transition (459) <input type="checkbox"/> ODA Waiver (480) <input type="checkbox"/> DODD Waiver (490) <input type="checkbox"/> DD Waiver and Nursing (492) <input type="checkbox"/> DODD Financial Management Service (495) <input type="checkbox"/> HCBS Assisted Living (740) <input type="checkbox"/> Recovery Mgmt. Services Vendor (845) <input type="checkbox"/> Supported Employment (851) | <input type="checkbox"/> Peer Services (852) <input type="checkbox"/> Benefit Support Services (853) <input type="checkbox"/> Home Maintenance/Chore (45A) <input type="checkbox"/> Specialized Medical Equipment, Supplies and Devices (45S) <input type="checkbox"/> Vehicle modifications (45V) <input type="checkbox"/> OhioRISE FMS (Financial Management Services) (FMS) <input type="checkbox"/> OhioRISE (OHR) <input type="checkbox"/> OhioRISE Care Management Entity (ORE) <input type="checkbox"/> OhioRISE Waiver Out of Home Respite (ORR) |
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Ambulatory Surgery Center (ASC) (Provider Type 46)

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| <input type="checkbox"/> Ambulatory Surgery Center (466) |
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Clinical Counseling (Provider Type 47)

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|--|--|--|---|
| <input type="checkbox"/> Licensed Independent Social Worker (370) <input type="checkbox"/> Multi-Independent Licensure (399) <input type="checkbox"/> Licensed Professional Counselor (471) <input type="checkbox"/> Counselor Trainee (472) <input type="checkbox"/> Licensed Professional Clinical Counselor (474) <input type="checkbox"/> Multi-Dependent/Other Licensure (699) <input type="checkbox"/> Medicare Exempt (995) | <input type="checkbox"/> Social Worker – Independent (37I) <input type="checkbox"/> Social Worker - Licensed Dependent (37I) <input type="checkbox"/> Social Worker – Trainee (37T) <input type="checkbox"/> Psychology – Intern (42I) <input type="checkbox"/> LMFT – Independent (52I) <input type="checkbox"/> LMFT – Licensed Dependent (52I) | <input type="checkbox"/> Chemical Counselor – Assistant (54A) <input type="checkbox"/> Chemical Counselor – Independent (54I) <input type="checkbox"/> Chemical Counselor – III (5TH) <input type="checkbox"/> Chemical Counselor – II (5TW) <input type="checkbox"/> Paraprofessional – Bachelors (96B) <input type="checkbox"/> Paraprofessional – HS/GED (96H) <input type="checkbox"/> Paraprofessional – Master (96M) | <input type="checkbox"/> Paraprofessional - Care Management Specialist (9CS) <input type="checkbox"/> Paraprofessional – Qmhs+3 (9Q3) <input type="checkbox"/> Paraprofessional – QMHS (9QM) <input type="checkbox"/> OhioRISE (OHR) <input type="checkbox"/> Cans Assessor (ORC) |
|--|--|--|---|

Clinic (Provider Type 50)

| | | |
|--|---|--|
| <input type="checkbox"/> Acupuncture (023) <input type="checkbox"/> General Dentistry (300) <input type="checkbox"/> ODJFS Waiver Home Delivered Meals (455) <input type="checkbox"/> ODA Waiver (480) <input type="checkbox"/> DODD Waiver (490) <input type="checkbox"/> Primary Care Clinic (500) <input type="checkbox"/> Public Health Department Clinic (501) <input type="checkbox"/> Outpatient Rehabilitation Clinic (502) <input type="checkbox"/> Family Planning Clinic (503) <input type="checkbox"/> Language/Audiology Clinics (504) | <input type="checkbox"/> Professional Optometry School Clinic (505) <input type="checkbox"/> Professional Dental School Clinic (506) <input type="checkbox"/> Radiology Services (507) <input type="checkbox"/> Pharmacy (700) <input type="checkbox"/> 340B Pharmacy (701) <input type="checkbox"/> Home Infusion (702) <input type="checkbox"/> DME Supplier, Basic (760) <input type="checkbox"/> ORCB Licensed DME Supplier (761) <input type="checkbox"/> Orthotics and Prosthetics (762) <input type="checkbox"/> Benefit and Support Services (853) | <input type="checkbox"/> Specialized Medical Equipment, Supplies and Devices (45S) <input type="checkbox"/> Qualified Entity (4QE) <input type="checkbox"/> OhioRISE (OHR) <input type="checkbox"/> CANS Assessor (ORC) <input type="checkbox"/> OhioRISE Care Management Entity (ORE) |
|--|---|--|

Marriage and Family Therapy (Provider Type 52)

| | | |
|--|---|--|
| <input type="checkbox"/> Licensed Independent Social Worker (370) <input type="checkbox"/> Multi-Independent Licensure (399) <input type="checkbox"/> Licensed Professional Clinical Counselor (474) <input type="checkbox"/> Licensed Independent Marriage And Family Therapist (520) Licensed Marriage/Family Counselor (521) | <input type="checkbox"/> Marriage/Family Counselor Trainee (522) <input type="checkbox"/> Multi-Dependent/Other Licensure (699) <input type="checkbox"/> Medicare Exempt (995) <input type="checkbox"/> Chemical Counselor - Assistant (54A) <input type="checkbox"/> Chemical Counselor - Independent (54I) <input type="checkbox"/> Chemical Counselor - III (5TH) <input type="checkbox"/> Chemical Counselor – II (5TW) | <input type="checkbox"/> Paraprofessional – Bachelors (96B) <input type="checkbox"/> Paraprofessional - Hs/Ged (96H) <input type="checkbox"/> Paraprofessional – Master (96M) <input type="checkbox"/> Paraprofessional - Care Management Specialist (9CS) <input type="checkbox"/> OhioRISE (OHR) <input type="checkbox"/> CANS Assessor (ORC) |
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Chemical Dependency (Provider Type 54)

| | | |
|--|--|--|
| <input type="checkbox"/> Multi-Independent Licensure (399) <input type="checkbox"/> Licensed Professional Clinical Counselor (474) <input type="checkbox"/> Licensed Independent Chemical Dependency Counselor (540) <input type="checkbox"/> Chemical Depend Counselor III (541) <input type="checkbox"/> Chemical Depend Counselor II (542) <input type="checkbox"/> Chemical Dependency Counselor Assistant (543) <input type="checkbox"/> Multi-Dependent/Other Licensure (699) <input type="checkbox"/> Qualified MH Specialist (960) <input type="checkbox"/> Qualified MH Specialist 3 (961) <input type="checkbox"/> Care Management Specialist (962) | <input type="checkbox"/> Medicare Exempt (995) <input type="checkbox"/> Social Worker – Assistant (37A) <input type="checkbox"/> Social Worker – Independent (37I) <input type="checkbox"/> Social Worker - Licensed Dependent (37I) <input type="checkbox"/> Social Worker - Trainee (37T) <input type="checkbox"/> Nurse - LPN (Marker) (38I) <input type="checkbox"/> Nurse - Registered (38R) <input type="checkbox"/> Psychology – Assistant (42A) <input type="checkbox"/> Clinical Counselor - Independent (47I) <input type="checkbox"/> Clinical Counselor - Licensed Dependent (47I) <input type="checkbox"/> Clinical Counselor - Trainee (47T) | <input type="checkbox"/> LMFT - Independent (52I) <input type="checkbox"/> LMFT - Licensed Dependent (52I) <input type="checkbox"/> Paraprofessional – Bachelors (96B) <input type="checkbox"/> Paraprofessional - HS/GED (96h) <input type="checkbox"/> Paraprofessional – Master (96M) <input type="checkbox"/> Paraprofessional - Care Management Specialist (9CS) <input type="checkbox"/> Paraprofessional - Peer Recovery Supporter (9pr) <input type="checkbox"/> Paraprofessional - Qmhs+3 (9Q3) <input type="checkbox"/> Paraprofessional - QMHS (9QM) <input type="checkbox"/> OhioRISE (OHR) <input type="checkbox"/> Cans Assessor (ORC) |
|--|--|--|

Waivered Services Individual (Provider Type 55)

| | | |
|--|---|--|
| <input type="checkbox"/> ODM Waiver (450) <input type="checkbox"/> ODM Waiver Supplemental Transportation (451) <input type="checkbox"/> ODM Waiver Adaptive/Assistive Devices (453) <input type="checkbox"/> ODM Waiver Home Modifications (454) | <input type="checkbox"/> ODM Waiver Home Delivered Meals (455) <input type="checkbox"/> Community Transition (459) <input type="checkbox"/> ODA Waiver (480) <input type="checkbox"/> DODD Waiver (490) <input type="checkbox"/> HCBS Assisted Living (740) | <input type="checkbox"/> Home Maintenance/Chore (45A) <input type="checkbox"/> Specialized Medical Equipment, Supplies and Devices (45S) <input type="checkbox"/> Vehicle Modifications (45V) <input type="checkbox"/> OhioRISE (OHR) |
|--|---|--|

Dialysis Centers (Provider Type 59)

| |
|---|
| <input type="checkbox"/> ESRD Dialysis Clinic (590) |
|---|

Medicare Certified Home Health Agency (Provider Type 60)

| | | |
|--|---|--|
| <input type="checkbox"/> Other Accredited Home Health Agency (160) <input type="checkbox"/> ODM Otherwise Accredited Home Health Agency (161) <input type="checkbox"/> ODM Waiver (450) <input type="checkbox"/> JFS Adult Day Health (452) <input type="checkbox"/> ODM Waiver Adaptive/Assistive Devices (453) | <input type="checkbox"/> ODJFS Waiver Emergency Response System (457) <input type="checkbox"/> Community Integration (458) <input type="checkbox"/> Community Transition (459) <input type="checkbox"/> ODA Waiver (480) <input type="checkbox"/> DODD Waiver (490) <input type="checkbox"/> DD Waiver and Nursing (492) | <input type="checkbox"/> Medicare Certified Home Health Agency (600) <input type="checkbox"/> Medicare Certified Home Health Agency JFS Waiver Services (601) <input type="checkbox"/> HCBS Assisted Living (740) <input type="checkbox"/> Home Maintenance/Chore (45A) <input type="checkbox"/> Specialized Medical Equipment, Supplies And Devices (45S) <input type="checkbox"/> Vehicle Modifications (45v) |
|--|---|--|

Clinical Nurse Specialist (Provider Type 65)

| | | |
|--|--|---|
| <input type="checkbox"/> Acupuncture (023) <input type="checkbox"/> Psychiatric (213) <input type="checkbox"/> Pediatric (215) <input type="checkbox"/> Geriatric (216) <input type="checkbox"/> Oncology (220) <input type="checkbox"/> RN- Private Duty Nursing (380) <input type="checkbox"/> PDN/ODM Waiver Registered Nurse (381) <input type="checkbox"/> Pre-Natal Postpartum Nurse Home Visitor (386) <input type="checkbox"/> Community Transition (459) <input type="checkbox"/> ODA Waiver (480) | <input type="checkbox"/> DODD Waiver (490) <input type="checkbox"/> DD Waiver and Nursing (492) <input type="checkbox"/> Clinical Nurse Specialist (650) <input type="checkbox"/> Adult Health (651) <input type="checkbox"/> Palliative Care (652) <input type="checkbox"/> Acute Care (653) <input type="checkbox"/> Data 2000 Waiver Practitioners (704) <input type="checkbox"/> HCBS Assisted Living (740) <input type="checkbox"/> DME Supplier, Basic (760) | <input type="checkbox"/> ORCB Licensed Dme Supplier (761) <input type="checkbox"/> Orthotics And Prosthetics (762) <input type="checkbox"/> Psych (996) <input type="checkbox"/> Non-Institutional High-Cost Drug (HCD) <input type="checkbox"/> OhioRISE (OHR) <input type="checkbox"/> Cans Assessor (ORC) |
|--|--|---|

Anesthesia Assistant Individual (Provider Type 68)

Anesthesia Assistant Individual (680)

Pharmacist (Provider Type 69)

Pharmacist (690)

Pharmacy (Provider Type 70)

| | | |
|---|--|--|
| <input type="checkbox"/> Pharmacy (700) | <input type="checkbox"/> ODM Waiver Adaptive/Assistive Devices (453) | <input type="checkbox"/> ORCB Licensed DME Supplier (761) |
| <input type="checkbox"/> 340B Pharmacy (701) | <input type="checkbox"/> ODA Waiver (480) | <input type="checkbox"/> Orthotics And Prosthetics (762) |
| <input type="checkbox"/> Home Infusion Pharmacy (702) | <input type="checkbox"/> DODD Waiver (490) | <input type="checkbox"/> Specialized Medical Equipment, Supplies and Devices (45S) |
| <input type="checkbox"/> LTC Pharmacy (703) | <input type="checkbox"/> DME Supplier, Basic (760) | |

Nurse Midwife (Provider Type 71)

| | |
|--|---|
| <input type="checkbox"/> Nurse Midwife (710) | <input type="checkbox"/> Community Transition (459) |
| <input type="checkbox"/> HCBS Assisted Living (740) | <input type="checkbox"/> Oda Waiver (480) |
| <input type="checkbox"/> DME Supplier, Basic (760) | <input type="checkbox"/> Dodd Waiver (490) |
| <input type="checkbox"/> Acupuncture (023) | <input type="checkbox"/> Dd Waiver and Nursing (492) |
| <input type="checkbox"/> RN- Private Duty Nursing (380) | <input type="checkbox"/> Non-Institutional High-Cost Drug (HCD) |
| <input type="checkbox"/> PDN/ODM Waiver Registered Nurse (381) | |
| <input type="checkbox"/> Pre-Natal Postpartum Nurse Home Visitor (386) | |

Nurse Practitioner (Provider Type 72)

| | | |
|--|--|---|
| <input type="checkbox"/> Nurse Practitioner (720) | <input type="checkbox"/> Pre-Natal Postpartum Nurse Home Visitor (386) | <input type="checkbox"/> DME Supplier, Basic (760) |
| <input type="checkbox"/> Acupuncture (023) | <input type="checkbox"/> Community Transition (459) | <input type="checkbox"/> ORCB Licensed DME Supplier (761) |
| <input type="checkbox"/> Cardiology (206) | <input type="checkbox"/> ODA Waiver (480) | <input type="checkbox"/> Orthotics And Prosthetics (762) |
| <input type="checkbox"/> Family Practice (207) | <input type="checkbox"/> DODD Waiver (490) | <input type="checkbox"/> Medicare Exempt (995) |
| <input type="checkbox"/> Obstetrics & Gynecology (212) | <input type="checkbox"/> DD Waiver and Nursing (492) | <input type="checkbox"/> Psych (996) |
| <input type="checkbox"/> Psychiatric (213) | <input type="checkbox"/> Adult Health (651) | <input type="checkbox"/> Social Worker - Independent (371) |
| <input type="checkbox"/> Pediatric (215) | <input type="checkbox"/> Palliative Care (652) | <input type="checkbox"/> Non-Institutional High-Cost Drug (HCD) |
| <input type="checkbox"/> Geriatric (216) | <input type="checkbox"/> Acute Care (653) | <input type="checkbox"/> OhioRISE (OHR) |
| <input type="checkbox"/> Oncology (220) | <input type="checkbox"/> Data 2000 Waiver Practitioners (704) | <input type="checkbox"/> Cans Assessor (ORC) |
| <input type="checkbox"/> Gynecological Oncology (223) | <input type="checkbox"/> HCBS Assisted Living (740) | |
| <input type="checkbox"/> Neonatal-Perinatal Medicine (282) | | |
| <input type="checkbox"/> Rn- Private Duty Nursing (380) | | |
| <input type="checkbox"/> PDN/ODM Waiver Registered Nurse (381) | | |

Certified Registered Nurse Anesthetist Individual (Provider Type 73)

Anesthesia CRNA (730) DME Supplier, Basic (760)

Home and Community Based ODA Assisted Living (Provider Type 74)

Community Transition (459) ODA Waiver (480) HCBS Assisted Living (740)

Optician/Ocularist (Provider Type 75)

Solo Practice Optician (750) Optical Company (751)

Durable Medical Equipment Supplier (Provider Type 76)

| | |
|---|--|
| <input type="checkbox"/> ODM Waiver Adaptive/Assistive Devices (453) | <input type="checkbox"/> DME Supplier, Basic (760) |
| <input type="checkbox"/> ODM Waiver Home Modifications (454) | <input type="checkbox"/> ORCB Licensed DME Supplier (761) |
| <input type="checkbox"/> ODM Waiver Emergency Response Services (457) | <input type="checkbox"/> Orthotics and Prosthetics (762) |
| <input type="checkbox"/> ODA Waiver (480) | <input type="checkbox"/> Specialized Medical Equipment, Supplies and Devices (45S) |
| <input type="checkbox"/> DODD Waiver (490) | <input type="checkbox"/> Vehicle Modifications (45V) |

Health Maintenance Organization (Provider Type 77)

| | |
|--|---|
| <input type="checkbox"/> Health Maintenance Organization (770) | <input type="checkbox"/> Aged, Blind, Disabled (ABD) (771) |
| <input type="checkbox"/> Modified Adjusted Gross Income (MAGI) (772) | <input type="checkbox"/> MyCare Ohio (773) <input type="checkbox"/> MLTSS (774) |

Enhanced Care Management (Provider Type 78)

Enhanced Care Management (780)

Independent Diagnostic Testing Facility (Provider Type 79)

| | |
|---|--|
| <input type="checkbox"/> Professional Medical Group (021) | <input type="checkbox"/> Mammography Supplier (791) |
| <input type="checkbox"/> Independent Diagnostic Testing Facility (IDTF) (790) | <input type="checkbox"/> Freestanding Radiation Treatment Center (792) |

Independent Laboratory (Provider Type 80)

Independent Laboratory (800) Qualified Entity (4QE)

Portable X-Ray Supplier (Provider Type 81)

Portable X-Ray Services (815)

Transportation Services (Provider Types 82 (Ambulance), 83 (Wheelchair Van))

| | | |
|---|---|--|
| <input type="checkbox"/> ODM Waiver Supplemental Transportation (451) | <input type="checkbox"/> Ambulance Services (820) | <input type="checkbox"/> Rotary-Wing Air Ambulance (823) |
| <input type="checkbox"/> ODA Waiver (480) | <input type="checkbox"/> Ground Ambulance (821) | <input type="checkbox"/> Water Ambulance (824) |
| <input type="checkbox"/> DODD Waiver (490) | <input type="checkbox"/> Fixed-Wing Air Ambulance (822) | <input type="checkbox"/> Wheelchair Van (830) |

Ohio Department of Mental Health Provider (Provider Type 84)

| | | |
|---|--|--|
| <input type="checkbox"/> 340B Pharmacy (701) | <input type="checkbox"/> IHBT - Intensive Home-Based Treatment (847) | <input type="checkbox"/> QBHE - Qualified Behavioral Health Entity – Adult (993) |
| <input type="checkbox"/> ODMH Community Health Agency (840) | <input type="checkbox"/> Supported Employment (851) | <input type="checkbox"/> QBHE - Qualified Behavioral Health Entity – Adult/Child (994) |
| <input type="checkbox"/> Community Mental Health Medical Services (841) | <input type="checkbox"/> Peer Services (852) | <input type="checkbox"/> Qualified Entity (4QE) |
| <input type="checkbox"/> Community Mental Health Professional Medicare Crossovers (842) | <input type="checkbox"/> QBHE - Qualified Behavioral Health Entity - Child (992) | <input type="checkbox"/> OhioRISE Care Management Entity (ORE) |
| <input type="checkbox"/> ACT (846) | <input type="checkbox"/> OhioRISE (OHR) | <input type="checkbox"/> MRSS - Mobile Response and Stabilization Service (ORM) |
| | <input type="checkbox"/> CANS Assessor (ORC) | <input type="checkbox"/> OhioRISE Waiver Out of Home Respite (ORR) |

DODD Targeted Case Management (Provider Type 85)

MRDD Targeted Case Management (850)

Nursing Facility (Provider Type 86)

| |
|--|
| <input type="checkbox"/> ODJFS Waiver Out of Home Respite (456) |
| <input type="checkbox"/> ODA Waiver (480) |
| <input type="checkbox"/> Dual Certified Skilled Nursing Facility (860) |
| <input type="checkbox"/> NF Vent Dependent 1 - has different Rev center Codes defined for enhanced rates (862) |
| <input type="checkbox"/> Dual Certified Religious Non-medical Health Care (865) |
| <input type="checkbox"/> NF Vent Weaning 1 (867) |

State Operated ICF-MR (Provider Type 88)

ODM Waiver Out-Of-Home Respite (456) ODA Waiver (480) DODD Waiver (490)

Non-State Operated ICF-MR (Provider Type 89)

| | |
|---|--|
| <input type="checkbox"/> ODM Waiver Out-Of-Home Respite (456) | <input type="checkbox"/> ODA Waiver (480) |
| <input type="checkbox"/> DODD Waiver (490) | <input type="checkbox"/> OhioRISE Waiver Out of Home Respite (ORR) |

State of Ohio Department Agency (Provider Type 93)

| | |
|---|---|
| <input type="checkbox"/> ODA (Ohio Department of Aging) (930) | <input type="checkbox"/> DODD (Ohio Department of Developmental Disabilities) (934) |
| <input type="checkbox"/> DODD (Ohio Department of Developmental Disabilities) (931) | <input type="checkbox"/> DYS (Ohio Department Of Youth Services) (935) |
| <input type="checkbox"/> ODMH (Ohio Department of Mental Health) (932) | <input type="checkbox"/> Ohio Department Of Medicaid (ODM) (936) |
| <input type="checkbox"/> ODADAS (Ohio Department of Alcohol and Drug Addiction) (933) | <input type="checkbox"/> ODRC - Ohio Department of Rehab And Correction (937) |
| | <input type="checkbox"/> Qualified Entity (4QE) |

OMHAS Certified/Licensed Treatment Program (Provider Type 95)

| | | |
|--|--|---|
| <input type="checkbox"/> 340B Pharmacy (701) | <input type="checkbox"/> SUD Residential Facility (954) | <input type="checkbox"/> Qualified Entity (4QE) |
| <input type="checkbox"/> ODADAS Certified/Licensed Treatment Program (950) | <input type="checkbox"/> Peer Recovery Services (955) | <input type="checkbox"/> OhioRISE (OHR) |
| <input type="checkbox"/> ODADAS Methadone Program (951) | <input type="checkbox"/> QBHE - Qualified Behavioral Health Entity – Child (992) | <input type="checkbox"/> CANS Assessor (ORC) |
| <input type="checkbox"/> ODADAS MARP Program (952) | <input type="checkbox"/> QBHE - Qualified Behavioral Health Entity - Adult (993) | <input type="checkbox"/> OhioRISE Care Management Entity (ORE) |
| <input type="checkbox"/> Opioid Treatment Program (953) | <input type="checkbox"/> QBHE - Qualified Behavioral Health Entity - Adult/Child (994) | <input type="checkbox"/> MRSS - Mobile Response and Stabilization Service (ORM) |

Paraprofessionals (Provider Type 96)

| | | |
|--|---|--|
| <input type="checkbox"/> Chemical Dependency Counselor Assistant (543) | <input type="checkbox"/> Peer Recovery Supporter (963) | |
| <input type="checkbox"/> Multi-Dependent/Other Licensure (699) | <input type="checkbox"/> IPS-SE (964) | |
| <input type="checkbox"/> Qualified MH Specialist (960) | <input type="checkbox"/> Paraprofessional - BACHELORS (96B) | <input type="checkbox"/> Paraprofessional - QMHS+3 (9Q3) |
| <input type="checkbox"/> Qualified MH Specialist 3 (961) | <input type="checkbox"/> Paraprofessional - HS/GED (96H) | <input type="checkbox"/> Paraprofessional – QMHS (9QM) |
| <input type="checkbox"/> Care Management Specialist (962) | <input type="checkbox"/> Paraprofessional - Master (96M) | |
| | <input type="checkbox"/> CANS Assessor (ORC) | |