



ALL Prescribing Providers Must Register With Ohio Medicaid ASAP!

Please read this if you are a prescriber or your agency uses prescribers!

YOU MUST ENROLL AS AN “ORP PROVIDER” EVEN THOUGH:

1. The community Medicaid services you provide are billed by the OhioMHAS certified provider agency for whom you work.
2. You are listed in the Medicaid psychiatrist prior authorization exemption list.
3. You are enrolled with Ohio Medicaid but haven’t billed within the past 24 months. (Providers are routinely disenrolled who don’t bill within a 24 month period.)

WITHIN THE NEXT MONTH, THE OHIO DEPARTMENT OF MEDICAID WILL BEGIN TO DENY CLAIMS FOR PRESCRIPTIONS WRITTEN BY PRESCRIBERS NOT ACTIVELY ENROLLED WITH OHIO MEDICAID. This could cause serious consequences for your patients.

This action is due to the Affordable Care Act requirement that all prescribers serving Medicaid patients MUST register – BY NAME AND NPI - as an ACTIVELY BILLING PROVIDER or an “ORDERING, REFERRING OR PRESCRIBING” (ORP) provider.” An “ORP provider” is simply one who does not bill for services to Medicaid enrollees and is not listed in the Ohio Medicaid provider directory.

Using your MITS web portal landing page, providers can search to see if your prescribers are enrolled as “ORP providers.” The search function is located under the provider tab. Here is a screen shot:

The screenshot shows a navigation menu with the following items: Super User, Providers (highlighted), Account, Claims, Eligibility, Prior Authorization, Reports, Publications, demographic maintenance, 1099 information, provider faq, mits days report, correspondence, self attestation, and ordering/referring/prescribing search (highlighted). Below the menu is a search form titled "Ordering/Referring/Prescribing Search" with the following fields: Ordering Provider NPI, Ordering Provider Last Name, First, MI (with a separate box for the last part of the name), and *Date of Service. There are "search" and "clear" buttons at the bottom right of the form.

If prescribers are not found using this search function, **go to the Ohio Department of Medicaid web site and register as an “Ordering, Referring or Prescribing provider.”** Enrollment is quick and easy and ORP provider enrollments will be processed by the Ohio Department of Medicaid’s provider enrollment center within a few days. See the attached pages for instructions.

To prevent interruptions in client access to needed prescription medications agencies should work with your prescribers to make sure they are enrolled with Ohio Medicaid.

Questions can be directed to the Ohio Medicaid Provider Call Center, 1-800-686-1516.

Enrollment - Microsoft Internet Explorer provided by ODJFS

https://portal.ohmits.com/public/Providers/Enrollment/tabid/44/Default.aspx

File Edit View Favorites Tools Help

Google Search Share More >> Sign In

Enrollment

Ohio Department of Medicaid

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Wednesday 07/23/2014 3:07:48 PM

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enrollment enrollment tracking search long-term care account setup

Ohio Department of Medicaid

Instructions Welcome to the online Provider Enrollment/Revalidation process.

I need to enroll as a provider to bill Ohio Medicaid

I need to revalidate my current Medicaid provider number

I need to enroll for the sole purpose of Ordering, Referring, or Prescribing (ORP Provider)

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Go to Medicaid provider enrollment screen at Ohio Department of Medicaid.

Select "I need to enroll for the sole purpose of Ordering, Referring or Prescribing (ORP provider)"

Enrollment - Microsoft Internet Explorer provided by ODJFS

https://portal.ohmits.com/public/Providers/Enrollment/tabid/44/Default.aspx

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Enrollment

I need to enroll as a provider to bill Ohio Medicaid

I need to revalidate my current Medicaid provider number

I need to enroll for the sole purpose of Ordering, Referring, or Prescribing (ORP Provider)

You are about to begin an application to enroll with the Ohio Department of Medicaid for the sole purpose of ordering, prescribing or referring (ORP Provider).

Please Note: You will NOT receive any Medicaid reimbursement as an ORP provider. If you are already an Ohio Medicaid provider, you DO NOT need to enroll as an ORP provider.

See [FAQ for ORP Providers](#) for information about who can enroll and other important information.

Your participation as an ORP Provider will allow billing Medicaid providers to receive reimbursement for covered services and supplies that you order, prescribe or refer for your patients. If you want to be reimbursed for providing Medicaid services, please change your selection at the top to "I need to enroll as a provider to bill Ohio Medicaid."

If you have made the correct selection, please complete each of the steps in the enrollment process. Please click the "new application" button to start a new Provider Enrollment application or click the "continue application" button to continue with an existing application. When you have completed all the steps, please click on the "submit" button to submit the application for processing.

For instructions on completing the enrollment application please click on the question mark (?) in the title bar.

If you are currently an ORP provider and wish to make a change to your address, please login to the secured portal and select the Demographic Maintenance Tab.

Your application will be saved for three days. At Midnight on the third day, applications that have not been submitted will be deleted from the system.

IMPORTANT - An Application Tracking Number (ATN) will be assigned to you. This number is necessary for accessing the status of submitted applications and for continuing an application that was not finished. Please write the number down and keep it for your records **PRIOR TO EXITING.**

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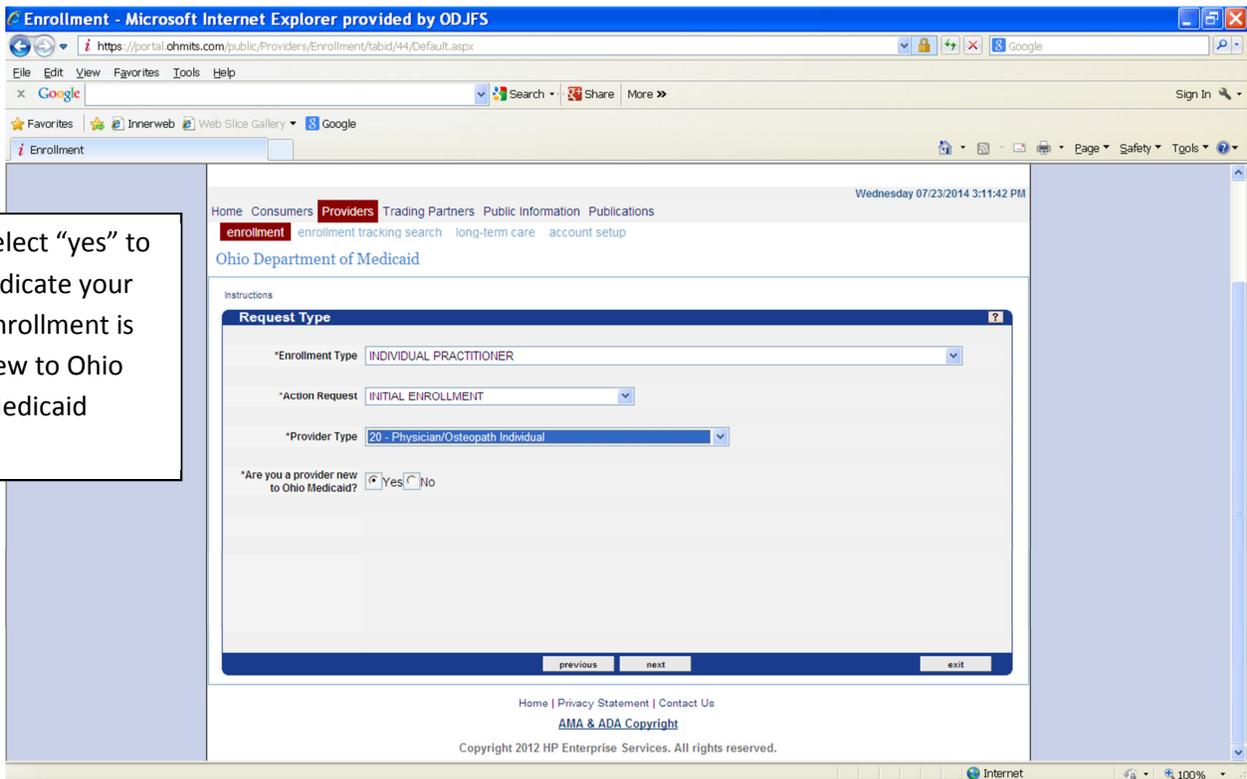
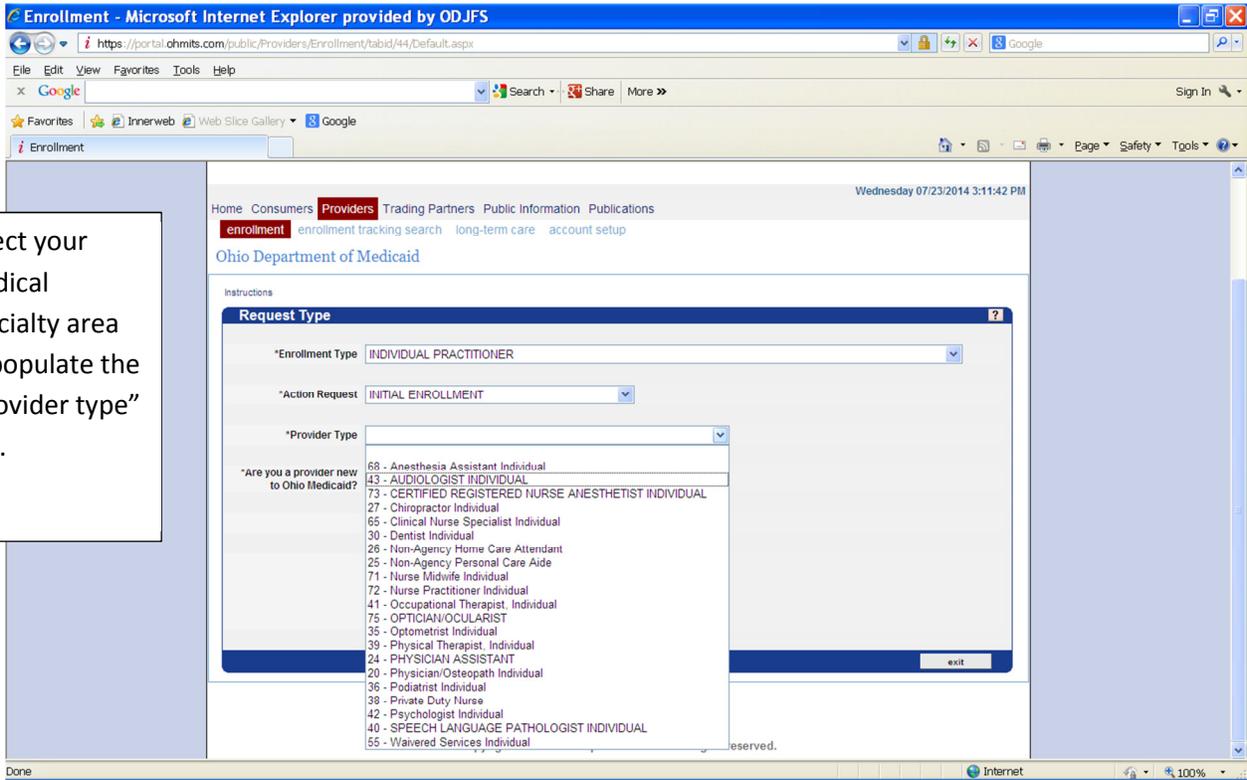
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Read the text & see FAQs.

Enrolling as an ORP provider will assure that prescriptions you write will be paid for by Ohio Medicaid when filled.

Choose "New Application"



Enrollment - Microsoft Internet Explorer provided by ODJFS

https://portal.ohmits.com/public/Providers/Enrollment/tabid/44/Default.aspx

The following messages were generated:
The NPI entered is invalid

Identifying Information

*Individual Last Name ABLE

*First, MI MARCIA

Medicare Type

Medicare Provider Number

Previous Medicaid Provider Number

Certification Number

*Ownership Type OTHER (UNDEFINED NON-FED. GOV'T ENTITY)

*Title/Degree (As appears on license) DR

*SSN 123456789

*Gender FEMALE

*Date of Birth 01/01/1978

Place of Birth

*Country UNITED STATES

*City COLUMBUS

*State (enter NA if not applicable) OH

*NPI 1234567891

*NPI Verified? Yes No

*License Number 123456

*License Type MEDICAL BOARD

*License Issue Date 01/01/2003

*License Expiration Date 01/02/2013

previous next exit

Internet 100%

Fill in the identifying information.

Not sure what they do for ownership type...