

Member Transfer Guidelines



Direction for Boards

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In July of 2017, the Ohio Department of Mental Health and Addiction Services retired the operations of MACSIS. Prior to the sunset of MACSIS, Boards transitioned their information management systems to one of three new systems: Gosh, SHARES and SmartCare. On May 26, 2018, the Ohio Department of Mental Health and Addiction Services implemented a change to how the MITS Matched Claim Extract was created, by pulling information from Boards submitted Reverse Extracts instead of MACSIS. Because of this change in how the Extract is being developed, there are overlapping member enrollment spans between boards. On June 4, 2018, a communication was sent out to all Boards explaining the changes, and requesting that Boards validate their members that had overlapping spans on the bd_removed_BBB_CCYYMMDD file.

It has recently been discovered several claims still appear on the Overlap Report. This has resulted in a drastic decrease in claims appearing on the Boards' MITS Extract, and also a decrease in information available in the Data Mart.

In order to increase access to Medicaid data to all Boards, we are suggesting that all Boards follow the Member/ Claims Transfer Guidelines.

- I. Enrollment/Membership Transfer Communication Protocol
 - a. There will be times in which a county (County "A") is in need of taking over membership rights from another county (County "B"). Once County "A" has determined that a client is now a resident of their county, County "A" can assume responsibility for that client.
 - b. County "A" must then properly notify County "B" that they have assumed membership responsibility for the client.
 - c. County "B" must then send a record in the reverse member extract where the closure date (the DENRLDATE field) is the day before County "A" is assuming responsibility. Without this step, the individual will remain on the overlap report and neither board will receive claims for the individual in their MITS extract.