Check list prior to submitting an Assisted Living application

* Do you have access to the Provider Network Module PNM portal?
	+ This would include having the log-in credentials assigned/shared to the appropriate party i.e., the Administrator or person who creates the account shares the access information with the CFO.
		- If you do not have access only ODM can assist with resolving this issue. They can be reached at 1-800-686-1516 the ODM (Ohio Department of Medicaid Integrated Help Desk) for additional assistance.
* Do you know who needs to receive all communication for the application and their contact information/email?
	+ The primary email listed will receive status updates, requests for documentation, etc.
* Do you know the ownership percentages for all owners of your organization?
* Do you have the names and driver’s licenses, and a list of all states each lived in over the past five years on hand for all owners with more than 5% ownership stake?
	+ If there is no owner with 5% or more ownership stake a managing employee must be named who will ultimately hold legal responsibility for the provider. They will need to produce a driver’s license or ID card, BCI and FBI report if applicable.
	+ If you are a trust, someone must still be listed who will have to provide the items required by owner(s) or managing employee(s).

Informational update - All BCI and FBI if applicable reports must be requested through the Ohio Attorney General’s office. Please do not send fingerprint cards and payment to ODA as we do not process fingerprints. We received complete reports from the Attorney General’s office which can be reached with questions or report status updates at 877-224-0043.

* Have you requested BCI reports for all owners with more than 5% ownership stake (or managing employee if no owner exists with 5% or more ownership stake) using the required Assisted Living code 3721.121 and mailed directly to the Ohio Department of Aging, 30 East Broad Street, 22nd Floor, Columbus, OH 43215?
* Did any owner(s) or a managing employee(s) lived outside of Ohio in the past five years? If yes, an FBI report is required using the Assisted Living code 37121.121. Please note if you provide us with a driver’s license from another state issued in the last five years, we will require the FBI report.
* If FBI reports are applicable, have they been requested and mailed directly to the Ohio Department of Aging, 30 East Broad Street, 22nd Floor, Columbus, OH 43215?
* Have you obtained an Assisted Living NPI number as required in [OAC 5160-1-17](https://codes.ohio.gov/ohio-administrative-code/rule-5160-1-17)?
	+ Each location must have their own NPI number.
* Have you familiarized yourself with the following Assisted Living rules?
* Please have the most recent Ohio Department of Health survey ready to submit. If it is a new purchase, submit the current ODH survey on file from the previous owner.

Application tips to keep in mind

* + Owner’s name(s) – needs to be a person
	+ Secretary of State – app should be an exact match
	+ W-9 must be completed, signed, dated and the information must match the application entries i.e. name, Tax ID number, and address.
	+ Double check key identifiers entered,
	+ Units must be identified by a number or letter and the units being requested must all be found on the floor plan. Please note the Residential Care Facility RCF license issued by the Ohio Department of Health speaks to the number of individuals. While the unit sheet will count each unit as one even if it has the potential to hold two individuals.
	+ A copy of the current policy for Employee Dishonesty or Property Damage Insurance to others must be submitted. This requirement can be fulfilled by a dishonesty, crime, surety, or business services bond. It must cover both intentional and unintentional damage and should not specifically list to rented premises only unless it applies (please double check policy exclusions).
	+ HCBS tool is a required form all questions must have an answer and if you feel the answer requires explanation please add it under the remediation section. For example, if you state you are attached to a Nursing Facility, we will want to learn more about the separation and connections between the AL and NF.
* You are now ready to go to PNM to start the application, here is some helpful information!
	+ To start the process, you will want to come to [this page](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fohid.ohio.gov%2Fwps%2Fportal%2Fgov%2Fohid%2Fhome%2Fhome&data=05%7C02%7CKRobertson%40age.ohio.gov%7Cdb8bde4c1ab246217d6a08dd150a33b3%7C50f8fcc494d84f0784eb36ed57c7c8a2%7C0%7C0%7C638689855766576814%7CUnknown%7CTWFpbGZsb3d8eyJFbXB0eU1hcGkiOnRydWUsIlYiOiIwLjAuMDAwMCIsIlAiOiJXaW4zMiIsIkFOIjoiTWFpbCIsIldUIjoyfQ%3D%3D%7C0%7C%7C%7C&sdata=IN5ne0jtdoUn2FTFbKBQgxUF1BtQFoB4GDVVtx5CD98%3D&reserved=0) and press the “Create OH|ID Account” to begin. Once this is completed, you will start your ODA application on the Ohio Department of Medicaid Provider page [here](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fohpnm.omes.maximus.com%2FOH_PNM_PROD%2FProcess%2FGroupReview.aspx&data=05%7C02%7CKRobertson%40age.ohio.gov%7Cdb8bde4c1ab246217d6a08dd150a33b3%7C50f8fcc494d84f0784eb36ed57c7c8a2%7C0%7C0%7C638689855766588213%7CUnknown%7CTWFpbGZsb3d8eyJFbXB0eU1hcGkiOnRydWUsIlYiOiIwLjAuMDAwMCIsIlAiOiJXaW4zMiIsIkFOIjoiTWFpbCIsIldUIjoyfQ%3D%3D%7C0%7C%7C%7C&sdata=MX%2B3kvQBocjFNAbEbF3%2Fh67zfmyG45zvQXn7BshVILo%3D&reserved=0) to become a provider and will be driven to the ODA application once demographics are completed. I strongly suggest you view the online [tutorials](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fmedicaid.ohio.gov%2Fresources-for-providers%2Fnextgeneration-pnm%2Fonline-tutorials-for-providers&data=05%7C02%7CKRobertson%40age.ohio.gov%7Cdb8bde4c1ab246217d6a08dd150a33b3%7C50f8fcc494d84f0784eb36ed57c7c8a2%7C0%7C0%7C638689855766599753%7CUnknown%7CTWFpbGZsb3d8eyJFbXB0eU1hcGkiOnRydWUsIlYiOiIwLjAuMDAwMCIsIlAiOiJXaW4zMiIsIkFOIjoiTWFpbCIsIldUIjoyfQ%3D%3D%7C0%7C%7C%7C&sdata=Ywjr67pFsCKQ3Qg4VZ83OiezyR%2FzqbHxkcc4RAuVjxQ%3D&reserved=0) and [reference](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fohpnm.omes.maximus.com%2FOH_PNM_PROD%2FResources.aspx&data=05%7C02%7CKRobertson%40age.ohio.gov%7Cdb8bde4c1ab246217d6a08dd150a33b3%7C50f8fcc494d84f0784eb36ed57c7c8a2%7C0%7C0%7C638689855766611965%7CUnknown%7CTWFpbGZsb3d8eyJFbXB0eU1hcGkiOnRydWUsIlYiOiIwLjAuMDAwMCIsIlAiOiJXaW4zMiIsIkFOIjoiTWFpbCIsIldUIjoyfQ%3D%3D%7C0%7C%7C%7C&sdata=xE5LMwBuE95z0xcEFdrBpQPVAnYM9lCgrE6WbPuiDPY%3D&reserved=0) guides on the ODM Provider Network Module [page](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fmedicaid.ohio.gov%2Fresources-for-providers%2Fnextgeneration-pnm%2Fnextgeneration-pnm&data=05%7C02%7CKRobertson%40age.ohio.gov%7Cdb8bde4c1ab246217d6a08dd150a33b3%7C50f8fcc494d84f0784eb36ed57c7c8a2%7C0%7C0%7C638689855766623746%7CUnknown%7CTWFpbGZsb3d8eyJFbXB0eU1hcGkiOnRydWUsIlYiOiIwLjAuMDAwMCIsIlAiOiJXaW4zMiIsIkFOIjoiTWFpbCIsIldUIjoyfQ%3D%3D%7C0%7C%7C%7C&sdata=vNmjWS2APLEQcyZ97NkMkGDRonqEqVJCDyKhvTtmNtM%3D&reserved=0) before you begin your application. [Provider Network Module (PNM)](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fohpnm.omes.maximus.com%2FOH_PNM_PROD%2FProcess%2FGroupReview.aspx&data=05%7C02%7CKRobertson%40age.ohio.gov%7Cea06c421476b404b9fd608dd0b2a5187%7C50f8fcc494d84f0784eb36ed57c7c8a2%7C0%7C0%7C638678999052509255%7CUnknown%7CTWFpbGZsb3d8eyJFbXB0eU1hcGkiOnRydWUsIlYiOiIwLjAuMDAwMCIsIlAiOiJXaW4zMiIsIkFOIjoiTWFpbCIsIldUIjoyfQ%3D%3D%7C0%7C%7C%7C&sdata=o9zt23KZ2DsUNzraE372zE9bwMWbAO%2F%2FzSO7L4LUUII%3D&reserved=0) is a single front door system for the Ohio Department of Medicaid, Department of Developmental Disabilities, and the Ohio Department of Aging provider applications. Please feel free to call 1-800-686-1516 the ODM (Ohio Department of Medicaid Integrated Help Desk) for additional assistance.

Assisted Living Rules and Resources to review:

* + [OAC 173-39-02.16 Assisted Living](https://codes.ohio.gov/ohio-administrative-code/rule-173-39-02.16)
	+ [OAC 5160-1-06.5 rates](https://codes.ohio.gov/ohio-administrative-code/rule-5160-1-06.5)
	+ [OAC 173-39-03.1 Federal heightened scrutiny of provider settings with institutional characteristics](https://codes.ohio.gov/ohio-administrative-code/rule-173-39-03.1)
	+ [OAC 173-39-03.2 Changes of ownership interest or organizational](https://codes.ohio.gov/ohio-administrative-code/rule-173-39-03.2)
	+ [Residential Care Facility OAC 3701-16](http://codes.ohio.gov/oac/3701-16)
	+ [ODH Residential Care Facilities - Assisted Living Resource page](https://odh.ohio.gov/know-our-programs/residential-care-facilities-assisted-living/resources)
	+ [Chapter 3701-13 - Ohio Administrative Code | Ohio Laws BCI rules for Assisted Living](https://codes.ohio.gov/ohio-administrative-code/chapter-3701-13)
	+ [ODH Residential Care Facility - Assisted Living](https://odh.ohio.gov/know-our-programs/residential-care-facilities-assisted-living/residentialcarefacilitiesassistedliving)
	+ [Home and Community-Based Settings requirements and links](https://aging.ohio.gov/agencies-and-service-providers/certification/Requirements-for-Home-and-Community-Based-Settings-1)
	+ [NPPES](https://nppes.cms.hhs.gov/#/)
	+ [PNM System Administrator Change Request Form](https://dam.assets.ohio.gov/image/upload/medicaid.ohio.gov/Resources/Publications/Forms/ODM10304Fillx.pdf)
	+ [Changing Provider Administrators - Quick Reference Guide](https://ohpnm.omes.maximus.com/OH_PNM_PROD/pages/ShowFiles.aspx?mode=inline&FileName=QRG%20-%20Changing%20Provider%20Administrators.pdf)
	+ [PNM Provider Registration Portal - Resources](https://ohpnm.omes.maximus.com/OH_PNM_PROD/Resources.aspx)
	+ [[OAC 5160-1-17](https://codes.ohio.gov/ohio-administrative-code/rule-5160-1-17)](https://codes.ohio.gov/ohio-administrative-code/rule-5160-1-17)
	+ [[HCBS tool](https://codes.ohio.gov/ohio-administrative-code/rule-5160-1-17)](https://codes.ohio.gov/ohio-administrative-code/rule-5160-1-17)

BCI instructions for out of state applicants. Please see comprehensive instruction for obtaining the BCI, when out of state [here](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Faging.ohio.gov%2Fagencies-and-service-providers%2Ftraining%2Fbci-instructions%23InstructionsforIndividualsOutsideofOhio&data=05%7C02%7CKRobertson%40age.ohio.gov%7C436b5b90a2d2454396e508dd1550bec9%7C50f8fcc494d84f0784eb36ed57c7c8a2%7C0%7C0%7C638690158742365201%7CUnknown%7CTWFpbGZsb3d8eyJFbXB0eU1hcGkiOnRydWUsIlYiOiIwLjAuMDAwMCIsIlAiOiJXaW4zMiIsIkFOIjoiTWFpbCIsIldUIjoyfQ%3D%3D%7C0%7C%7C%7C&sdata=z7o6aGcMqh0cXTVGOVtEfLEkzifUbqxLiDva8Fl31rg%3D&reserved=0).

Go to the Ohio Attorney General’s website at [https://www.ohioattorneygeneral.gov/Files/Forms](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.ohioattorneygeneral.gov%2FFiles%2FForms&data=05%7C02%7CKRobertson%40age.ohio.gov%7C436b5b90a2d2454396e508dd1550bec9%7C50f8fcc494d84f0784eb36ed57c7c8a2%7C0%7C0%7C638690158742389857%7CUnknown%7CTWFpbGZsb3d8eyJFbXB0eU1hcGkiOnRydWUsIlYiOiIwLjAuMDAwMCIsIlAiOiJXaW4zMiIsIkFOIjoiTWFpbCIsIldUIjoyfQ%3D%3D%7C0%7C%7C%7C&sdata=zVk7ETtKZAfB%2Fen1RgJP%2Fg3wOoVKpd8jNESlpXbO99c%3D&reserved=0) and under BCI Criminal Records and Background Checks, print the fingerprint card you need. Fingerprints can be rolled onto the card by the agency that performs this service in your area.

For additional information or assistance, please visit the [Ohio Attorney General’s website](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.ohioattorneygeneral.gov%2Fbackgroundcheck&data=05%7C02%7CKRobertson%40age.ohio.gov%7C436b5b90a2d2454396e508dd1550bec9%7C50f8fcc494d84f0784eb36ed57c7c8a2%7C0%7C0%7C638690158742405108%7CUnknown%7CTWFpbGZsb3d8eyJFbXB0eU1hcGkiOnRydWUsIlYiOiIwLjAuMDAwMCIsIlAiOiJXaW4zMiIsIkFOIjoiTWFpbCIsIldUIjoyfQ%3D%3D%7C0%7C%7C%7C&sdata=stC07PUXEyVVGohei91BJ5XeeWtyVOU1EIZ1N4XuJAY%3D&reserved=0).

Out-of-state background checks can take up to 4 to 6 weeks. If you are in Ohio before licensure, print these instructions and go to an Ohio WebCheck® location which will be a much faster process.

**Ohio Bureau of Criminal Identification and Investigation** **contact information**: Call BCI if your criminal records checks have taken longer than 30 days to be received by ODA at 877-224- 0043 between the hours of 8 a.m. – 4:30 p.m.

Owners who have lived outside of Ohio in the last 5 years, an FBI criminal records check is also required for owners with 5% or more ownership and/or managing employees. If you are an agency provider, assisted living provider or individual/participant-directed provider applying for several certifications at one time, only one FBI results report is needed.  The instructions are [here.](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.ohioattorneygeneral.gov%2FFiles%2FForms%2FForms-for-BCI-Criminal-Records-and-Background-Chec%2FBackground-Check-Forms%2FFBI-fingerprint-card&data=05%7C02%7CKRobertson%40age.ohio.gov%7C436b5b90a2d2454396e508dd1550bec9%7C50f8fcc494d84f0784eb36ed57c7c8a2%7C0%7C0%7C638690158742419387%7CUnknown%7CTWFpbGZsb3d8eyJFbXB0eU1hcGkiOnRydWUsIlYiOiIwLjAuMDAwMCIsIlAiOiJXaW4zMiIsIkFOIjoiTWFpbCIsIldUIjoyfQ%3D%3D%7C0%7C%7C%7C&sdata=snIT9Lr4A7ERbQ48ZWaq9Q4BWXt5CIDwpq%2B86%2BpEnW4%3D&reserved=0)

Please ensure you use 3721.121 for both your BCI and FBI report and have them sent to the Ohio Department of Aging, Attn. Provider Certification, 30 East Broad St., 22nd Fl, Columbus Ohio 43215-3414.  For the entire process please visit our website and review the [CriminaI Background sections](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Faging.ohio.gov%2Fagencies-and-service-providers%2Ftraining%2Fbci-instructions&data=05%7C02%7CKRobertson%40age.ohio.gov%7C436b5b90a2d2454396e508dd1550bec9%7C50f8fcc494d84f0784eb36ed57c7c8a2%7C0%7C0%7C638690158742433831%7CUnknown%7CTWFpbGZsb3d8eyJFbXB0eU1hcGkiOnRydWUsIlYiOiIwLjAuMDAwMCIsIlAiOiJXaW4zMiIsIkFOIjoiTWFpbCIsIldUIjoyfQ%3D%3D%7C0%7C%7C%7C&sdata=7Ede3ztsh1PLClDlWzwiHcoAkVV21irLHk7K6B0JruY%3D&reserved=0).

Provider BCI Instructions

Instructions for completing a background check.

If it reaches the point, it has been 30 business days since the most recent request, or you learn from the AG’s office they were mailed, and 10 business days have passed please let us know then we may be able to help request an email copy.

[Provider BCI Instructions | Department of Aging](https://aging.ohio.gov/agencies-and-service-providers/training/bci-instructions#WhoNeedstoCompleteaBackgroundCheck)

The Centers for Medicare and Medicaid Services (CMS) has approved a critical access rate increase for the assisted living waiver with an effective start date of July 1, 2024.

The Ohio Department of Aging (ODA) and Ohio Department of Medicaid (ODM) are updating existing rules to include the critical access rate. We strongly encourage you to review the updates to both rules.

ODA’s rule can be found here: [OAC 173-39-02.16](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.registerofohio.state.oh.us%2Fpdfs%2F173%2F0%2F39%2F173-39-02%2416_PH_RV_A_RU_20240520_1633.pdf&data=05%7C02%7CKRobertson%40age.ohio.gov%7C1ad74ef68cfc4a9ef63108dce868f99b%7C50f8fcc494d84f0784eb36ed57c7c8a2%7C0%7C0%7C638640784765820990%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C0%7C%7C%7C&sdata=mC5u%2BVmi26lhT%2BeIiM7n63qXSJWcQ%2FwCd%2F40XZTB0dU%3D&reserved=0). This rule discusses how a provider qualifies for the memory care service and critical access rate and what steps they need to take to verify they qualify for the rate.

ODM’s rule can be found here: [OAC 5160-1-06.5](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.registerofohio.state.oh.us%2Fpdfs%2F5160%2F0%2F1%2F5160-1-06%245_PH_OF_A_APP1_20240416_1008.pdf&data=05%7C02%7CKRobertson%40age.ohio.gov%7C1ad74ef68cfc4a9ef63108dce868f99b%7C50f8fcc494d84f0784eb36ed57c7c8a2%7C0%7C0%7C638640784765838330%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C0%7C%7C%7C&sdata=uAZAge8edsZIFtwyT5%2BODqrGq4diS2MeizKseFA3jy0%3D&reserved=0). This rule outlines the assisted living rates, including the new critical access rate of $145. The billing code will be T2031U2.

If you pursue the critical access rate this YouTube link will help you  [https://youtu.be/3hWQOUDYdsQ](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fyoutu.be%2F3hWQOUDYdsQ&data=05%7C02%7CKRobertson%40age.ohio.gov%7C1ad74ef68cfc4a9ef63108dce868f99b%7C50f8fcc494d84f0784eb36ed57c7c8a2%7C0%7C0%7C638640784765850211%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C0%7C%7C%7C&sdata=kGghhNKt4SESc4fASu5vljjnJL1NL5yv0uDz7hyYU%2Fw%3D&reserved=0) know how to complete the attestation and tool.

[How new assisted living applicants apply for Memory Care Services | Department of Aging (ohio.gov)](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Faging.ohio.gov%2Fsee-news-and-events%2FProvider%2BMemos%2Fprovider-memo-mar-26-24-2&data=05%7C02%7CKRobertson%40age.ohio.gov%7C1ad74ef68cfc4a9ef63108dce868f99b%7C50f8fcc494d84f0784eb36ed57c7c8a2%7C0%7C0%7C638640784765862319%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C0%7C%7C%7C&sdata=Sbrc8IzZMe9MVH%2FU2wVCetlN0bifpxzdX6y0SpVxYtM%3D&reserved=0)

Please note, you may only bill for the memory care rate if you serve an assisted living waiver individual(s) with a documented diagnosis of any form of dementia on the Person-Centered Services Plan provided by the Case Manager.

Current rates [**OAC 5160-1-06.5**](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fcodes.ohio.gov%2Fohio-administrative-code%2Frule-5160-1-06.5&data=05%7C02%7CKRobertson%40age.ohio.gov%7C1ad74ef68cfc4a9ef63108dce868f99b%7C50f8fcc494d84f0784eb36ed57c7c8a2%7C0%7C0%7C638640784765874050%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C0%7C%7C%7C&sdata=zup8RHiVJNJVerQfbpjMTuaxGgtNo4tpelBx7%2BQrdPA%3D&reserved=0)**:**

* Base assisted living service billing code: T2031U1
* Base assisted living service rate: $130/day
* Memory care assisted living service billing code: T2031U3
* Memory care assisted living service rate: $155/day

The ODA point of contact for Assisted Living waivers is Meredith Finley mfinley@age.ohio.gov 614-753-7310.

Basic timeline of application process expectations

* You complete your application in ODA’s PCW system, this is accessed through the single front door [Provider Network Module (PNM)](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fohpnm.omes.maximus.com%2FOH_PNM_PROD%2FProcess%2FGroupReview.aspx&data=05%7C02%7CKRobertson%40age.ohio.gov%7Cea06c421476b404b9fd608dd0b2a5187%7C50f8fcc494d84f0784eb36ed57c7c8a2%7C0%7C0%7C638678999052509255%7CUnknown%7CTWFpbGZsb3d8eyJFbXB0eU1hcGkiOnRydWUsIlYiOiIwLjAuMDAwMCIsIlAiOiJXaW4zMiIsIkFOIjoiTWFpbCIsIldUIjoyfQ%3D%3D%7C0%7C%7C%7C&sdata=o9zt23KZ2DsUNzraE372zE9bwMWbAO%2F%2FzSO7L4LUUII%3D&reserved=0).
* Pay the fee to ODM and submit the application.
* The application will then be reviewed by ODA with priority status within a week and before BCI and FBI if applicable reports arrive.
* ODA will provide you with a list of outstanding items. During this part of the review process the timeline will be driven by your responsiveness and the arrival of all BCI and FBI reports if applicable for all required parties.
	+ All initial emails will be sent to the primary email on the application. If additional parties should be included, please proactively inform ODA at Provider\_enrollment@age.ohio.gov as soon as you submit your application. You can also email any new or additional documents needed for the application to this email.
* If you have ordered all BCI and FBI reports if applicable in advance, it will greatly reduce the timelines as the reports can take 4-6 weeks to receive and at times there are errors, and then new copies must be obtained.
* If you have followed our checklist and pre-ordered BCI and applicable FBI reports, sent in all the documents and driver’s licenses of owners etc. then you will have fast and active engagement of what is needed with priority review and frequent updates from the reviewers. If those items are addressed promptly this process can move fast wherein everything ODA needs is obtained, and we will send your application to the PAA to conduct a pre-cert review.
* The PAA will then have 60 days to schedule and conduct a pre-certification review. You will be required to show readiness to provide the services requested, have staff hired with their BCI and FBI reports if applicable obtained, training complete etc. Based upon the review you may have to provide additional materials, plans of correction, or evidence of compliance to the PASSPORT Administrative Agency PAA. Prompt submission of requested items will reduce the timeline and ensure it doesn’t have to be extended. If you are responsive and provide everything needed a recommendation should be submitted to ODA within the 60-day timeframe.
* After the PAA provides ODA, their recommendation is typically processed within 2 business days to ODM.
* Once in ODM’s queue we cannot control the time required for them to review and assign or link a Medicaid number. If there are no technical issues it is typically processed in 10 business days.
* After ODM finishes their step, it comes back to ODA for final set up in our information management system and closing out your application in our system Footprints which typically occurs within 2 business days.
* After that is complete you need to work with the PAA again to sign the provider agreement, set up payments, and provide anything else that is needed before starting to provide services.
* Annual reviews will be conducted by the local PAA.

PNM contact information

[[PNM PROVIDER REGISTRATION PORTAL - RESOURCES](https://ohpnm.omes.maximus.com/OH_PNM_PROD/Resources.aspx)](https://ohpnm.omes.maximus.com/OH_PNM_PROD/Resources.aspx)

[[CHANGING PROVIDER ADMINISTRATORS - QUICK REFERENCE GUIDE](https://ohpnm.omes.maximus.com/OH_PNM_PROD/pages/ShowFiles.aspx?mode=inline&FileName=QRG%20-%20Changing%20Provider%20Administrators.pdf)](https://ohpnm.omes.maximus.com/OH_PNM_PROD/pages/ShowFiles.aspx?mode=inline&FileName=QRG%20-%20Changing%20Provider%20Administrators.pdf)

[[PNM SYSTEM ADMINISTRATOR CHANGE REQUEST FORM](https://dam.assets.ohio.gov/image/upload/medicaid.ohio.gov/Resources/Publications/Forms/ODM10304Fillx.pdf)](https://dam.assets.ohio.gov/image/upload/medicaid.ohio.gov/Resources/Publications/Forms/ODM10304Fillx.pdf)

