USER GUIDE FOR RECERTIFICATION

Please contact us if you have any questions during this process. Natosha Frost/Provider Support Specialist/<u>nfrost@westcondd.org/</u>937-726-5276

Note: There is a non-refundable application fee of \$125 for Independent Providers. The fee must be paid with a credit card or electronic check at the same time as application submission.

To start the Recertification process, you will start in the PNM system (Medicaid) and then be routed to PSM (DODD) to complete the application.

1. To begin, navigate to the Provider Network Management (PNM) system by using the access link (<u>https://ohpnm.omes.maximus.com/OH_PNM_PROD/Account/Login.aspx</u>), enter your OH|ID User ID, and Click **Next.**



2. You will be redirected to the OH|ID login page. Log in with your username and password. Click Log in.

Ohio's Digital	OH ID Identity. One State. One Account.
Register once,	use across many State of Ohio websites Create Account
Log In	
OHID	
Password	ø
	Log in
Forgot OH ID?	? Forgot password? Get login help

3. Check the box next to Yes, I have read the agreement, and WAIT.

Ter	ms
	Whoever knowingly, or intentionally accesses a computer or computer system without authorization or exceeds the access to which that person is authorized, and by means of such access, obtains, alters, damages, destroys, or discloses information, or prevents authorized use of the information operated by the State of Ohio, shall be subject to such penalties allowed by law. All activities on this system may be recorded and/or monitored. Individuals using this system expressly consent to such monitoring and evidence of possible misconduct or abuse may be provided to appropriate officials. Users who access this system consent to the provisions of confidentiality of the information being accessed, but have no expectation of privacy while using this system.
	In the event that an unauthorized user is able to access information to which they are not entitled, the user should immediately contact the site administrator.
	Yes, I have read the agreement
	Cancel



WARNING: DO NOT click the "Cancel" button at the bottom of the terms window. This will log you out of PNM/PSM, and you will need to start the login process over from the beginning. Once you have checked the box next to "Yes, I have read the agreement," you must WAIT until PNM loads.

4. The PNM landing page will load.

Ohio		*	Prov	ider Network Ma	nager	nent Medicaid Hor	ne Learning C	ontact Fee S	Sched	de .							💄 Boba	Fett	🖰 Log out		_	
My Providers	s	select Provider	Pen	ding Agent Req	uests	Account Administr	ation DD Account	Administration													New Pro	ovider
Reg ID		Provider		Status		Provider Type	NPI	Medicaid ID		Specialty		DD Contract Num	per DD Facility Numbe	r Lo	cation		Effective Date	s	Submit Date		Revalidation Date	Due
	T.	C	т	Al		T	T		T	Al	51	Т	Т	1		T.		т		T		T
<u>541274</u>		DAGOBAH YODA	4.	Complete		38 - NON- AGENCY NURSE - - RN OR LPN	1193482118	0109982		PDN/ODM WAIVER REGISTERED NURSE		8190237					07/18/14		07/18/14		02/15/22	

5. From the PNM landing page, click **Reg ID** or provider name of the application/profile you wish to access.

Ohio		*	Provi	ider Network Ma	nager	nent Medicals	Home	Learning Co	ontact Feel	Schedu	*							💄 Bob	e Fett	OLogost			
My Provide	n 5	elect Provider	Pen	ding Agent Req	vests	Account Adm	nistrat	ion DO Account	Administration													New Pro	ovider 7
Reg ID		Provider		Status		Provider Type	,	NPI	Medicaid ID		Specialty		0D Contract Num	ber	DD Facility Number	Location	8 A - 1	Effective Det	•	Suberit Date		Revalidation Date	D.e
	Ŧ		Ŧ	Al	1		r I	Ŧ		٣	N	U		1	T		T		Ŧ		Ŧ	_	T
541274		DAGOBAI YODA	H.	Complete		38 - NON- AGENCY NUR - RN OR LPN	¥۰	1193482118	0109982		FDN/ODM WAVER REGISTERED NURSE		8190237					07/18/14		07/18/14		02:15:22	

6. The Provider Management Home screen will appear. Click the **plus (+) sign** next to Enrollment Actions.

Ohio '	Provider Network Manage	ment Medicaid Home L	Learning Centast I	'ee Sehodule		💄 Sobs Ferri 🖱 Log ourt
Provider Managemen Registration Information	t Home					
Provider Name DAGOBAH, YODA		Nedicald ID 0109962	Effective Date 02/01/2022	Revalidation Due Date 02/01/2027	Term Date	
DODD Certification Start Date 02/01/2022	DODD Certification End Date 12/31/2299	DODD Contract Number 8190237				
Manage Application						
Enrolment Actions	+ inrollment Action	n Selections:				
Programs	+ Program Selectio	ne:				
Self Service	+ Self Service Sele	ctions.				
My Current and Previous Applica	tions					
Reg ID Enrollment A	ction Program	Application Id	PNM Applica	tion Status 0	Other Agency Application Status	00 Legal Status Status Da
1 Carlos and 1 Car		and the first second	and the second			

7. Click **Begin DODD Enrollment Profile Update** (if no current DODD applications are open) or **Continue DODD Enrollment Profile Update** (if at least one DODD application is open) in the expanded options.

Enrollment Actions	Enrollment Action Selections: Dean OCM Enrolment Profile Lockee Earch DOOC Enrolment Profile Lockee Add CDA Senerge Edit New Provider Membern Becaust Enventment	
Programe	Program Selections	
Self Service	+ Solf Santon Selections	



Don't see the "Begin/Continue DODD Enrollment Profile Update" option? Make sure that your revalidation date is updated.

If you do not have the option your recertification window may not be open or you need to have PNM add this option. Call 1-800-617-6733 Opt 4 for assistance.

At this point PNM should redirect you to PSM. You will start off on the **Provider Dashboard**.

Provider Dashboard	Provider Home				
Address	Previder Demographi	is.			
Services	Certification Ex	piration:	06/07/2023	Certification Status:	Active
Billing Service Codes	Provider Name:		Alfred E. Neuman	Sanction Status:	None
	Contract Numb	er:	1234587	Certification Span:	1/1/2022 - 1/1/2000
Voluntary Withdraw	Provider Type:		Agency	Supplier Id:	
Certification History	SSN/TIN:		11223333		
Information	+ Designation Typ	pe:	Provider		
Medicaid Information	Address:		1 Main St, Akron, OH 44301		
Sanction History	Phone:		5556675309		
	Emailt				
User Associations	Edit Email and P	hone Number			
Provider Features	E Plana select the	opplication you wish to have			
	Please select the	application you wish to bee	gin.		
	Cortification Applica	dione Demographic Application	15		
	Certification Appl	ications			
	Withdraw Service Create application View Fees View Fees that are	 b allow active providers to withdra owed or history on fees already pa 	w Services to active certification.		

From here, you can access **Certification Applications**. If it is time to recertify the top option will be the recertification application. Click on it.

You will then be taken to the Pending Certification Applications Screen.

1. To access the application from the beginning of the application, click the **Application Number** directly.

2. To access the application from where you left off when you were last editing the application, click the **Status** of the application.

3. To access supplementals, click the Supplemental Status name directly.

Δ		Provider Dashboard 💄 Fett, Boba 🔸
	Pending Certification Applications	
	Show 10 v estiles.	Search
0	Application Number Provider Name Designation Type Provider Type Application Type Application Type Contract# Stan Date Submitted Date Provider Type Approv. Application Type Application Type October Stan Date Submitted Date Stan Date Stan Date Submitted Date Provider Provider Approv. Application Type Application Type Application Type October Stan Date Stan Stan Date St	Status :: Legal Status :: Sarplemental Status :: Draft NiA
	Shawing 1 to 1 of t ensies	Poevicus 1 Nest

After clicking the Application Number PSM will take you to the application.

1. Getting Started. Read and Click Continue.

And in case of the Article and	1 modeline) #164	Q Boy Character) Minerey) Biter	
Getting Started						
Processes of an electron to pages Dealithine, COCC, o expering a Autor and haar to page or be objected by pages of the properties of the and safety according to the and safety according to the analysis of the Base State according to the the same shafe of the safety according to the safety according to the safety of the safety according to the safety of the safety of the safety of the of the safety of the safety of the safety of the s	and the comparent distribution range to write the one DOCE comparent part of the real bits an address aparent discussment part of off reads to be address part approximation. The EOE backs growth there is a strange of the test part of the test part of Code. TECH 108: The consent of the test part of Code. TECH 108: The consent part by the test part of the test part of the test part of the part application relations. The application of part application is discussed part of the test part of a application and the compared parts in part of parts application and the compared parts in the test part of the count for a registrate action with the total of parts and duty. The parts are black decision? Once an and the registrate a black decision? Once and duty.	employed individuals, to be presented or provide experience providers of searching, the bioloking of an part of your total applications. Integrate the provide the constraint directly there the China on the constraint directly there the con- tent and on the China on the constraints the biological section of the CCC is the state. The china of the China of the China of the china the constraints of the CCC is the state. The biology around a first the China of the china the china of the China of the china of the china of the china of the CCC is the state.	or approximate the second the health of or approximate and associated the provided and the observations of charappendiates using provide the second or address of the health of one of the second or address of the health of the then "He shared origit, Any RCI ap- end discussion dation is recognized on the proor application of the address of the table to approve the baseling of the opposed to applied the opposed on another in the table applied of the applied on a most distance to applied of a copy of an another applied to applied of a copy of an another applied to applied of the applied on a most distance to applied on a copy of an another applied to applied to apply of an another applied to applied to apply of an another applied to applied to applied to apply of an another applied to applied to appl	et allely a dynamic accuracy and a second accuracy and accuracy and accuracy and contrast provide and official to the origin and the second accuracy and accuracy and the second accuracy accuracy and the second accuracy accuracy and the second accuracy accur	na hrongel fran Unite Department of De- termination (COI) adatata fran Tota Davies, at Marca Valla da adatata franciska international da franciska (COI adatata international da adatatata da adatatatatatatatatatatatata	Hanna (BMI) Kina (BMI) Kina Alla to there at the span (77.2) A to that if all an able (unride) a rituation to
attantion .		and the second second second				
Application/ Provider Type	Autority Children	Research (2 Years)	Service Change	p - Add Additional Service		
Application Provide Type Telepositien April Trad	Rollind (2 Yearro) 9425-09 9425-19	Personal (2 Years) 8125-00 9400-00	Service Chang 625.05 575.05	p -Mil Allitional Service		
Application Provider Type Independent Approp Total Approp Large	Selfiel (2 Years) 5125-00 5251-00 5130-00 51-001-00	Forward (2 Nates) 8125 00 9200 00 92100 00	Service Cherg 5/5.00 5/5.00 1/00.00	n Add Additional Service		
Application Provider Type Independent Agency Small Agency Large Contry Exect Large	Reliad (2) Yeare) 51(2):00 82(0):00 81(0):00 81(0):00 81(0):00 81(0):00	Ferroread (2 Years) 8125 89 8101 35 21 801 80 21 801 80 21 802 80	Territor Cheng 525.00 575.00 1110.00 1110.00	n Add Additional Service		
Application Provide Type Integration Agency Small Agency Large Courty Roset Large Courty Faver Large CONIFier	Rollind (2 Yourn) 5125-05 5126-05 51-061-05 51-081-05 51-081-05 51081-05	Fernand (2 Tane) 5125-00 900 30 21,000 30 11-001 30	Service Chang 575.07 57	n Add Additional Service		
Application Provide Type Integrated Agency Small Agency Large County Front Large COUNTING	Ratioal (2) Yearing 5125-05 8201-05 821-021 821-021 821-021 821 8248-05 9248-05	Research (2 Years) 57(2)-00 9800 00 12-000 00 12-000 00 12-000 00	Bentiles Chang 825.66 975.60 8768.50 8768.50 8768.50	n Add Antificiael Service		

2. Demographics. Fill out your address then click the green Save and Continue box. If your home, billing, mailing, and alternative address are the same you can click each box and

the system will prefill each section with your address.

Restored Streets	R rest	2 dimension	- Birrent) 894	Lowest .
C CONTRACTOR CONTRACTOR					
Version					And in case of the local diversion of the loc
Contraction of the Contraction o					Provide 1
Provent San B					And a second second
Comparison (B)					
Contraction of the local distance of the loc					
Construction of the local division of the lo					1 () () () () () () () () () (
Contraction (Second Seco					- There is a first state
Search for Cauling Convergencies Information					
Texas Security Render."	Taxa of State		-		
			Control Inc.		
free/band	Mathematical		Last Barry		
Canada -	Taxa of Taxas		Social Investigation		
		14			
(notified)	Sec. of Sec.		Contra et Bale		
		+		+	
1 mil	for all the only therefore the	100			
				-	
State State Streements				the set of the set of the	

3. Services. This screen should populate with all the services that you are already certified to provide. Click Save and Continue.

Note: the services you provide will determine what documentation you will need to upload into the application.

vices			
unus Sarvica Croug			
lahan & Nan Walihan Banvilan () an Walihan sanvilans anlij ()			
unne Service Calegory			
and the			
Employment Services	Adaptive Includingy and	Environmental Multiluations	
Transportation Services	- Professional Services		
IT Community Incomes - Communities Vehicles (2017) the risks (10)	10 cth-Orecartheripeute in	An extend (10).7 Service 🖗	
# monumental Ferrarial Call (HPC) Transportation 0	12 CTI-Daniel Lanet Specializ	ed Directs/Transports Inter-entroped 252	F Sermar, Ø
C Inst-Medical Transportation - Commercial Missage D	12 (Th-Specialized General Th	angeuits belovertariset (SE),F Service,	
U tas-Motor Transpiration-Commercial Top 0	40.00 Harver Survey @		
11 Non-Medical Transportation-Trap 🖤	C Parcinet Strand Inte	eaneri (361/ Secreta) 🔍	
II Han Medical Transportation - Minage D	III totaqueter Salvases Ø		
U HPC Transpolation Commencet 0	17 Motory Warnagement 🗣		
	C Parkspart/ prov Datetty	Association Counseling 2007 Dennie 9	
	Contraction of the second seco	research 101, month A	
	R Have foreig Drepher	paneta O	
Nutrition and Meal Services	- Honesiaker and Personal	Care Services	
	If transmeter therease Care	0	
	Of Competency Role Model	context @	
	W manetoning @		
	W Parkspart Deschel 1912		
Respile or Long Terre Care Services	+ Ashalt Day Services		

4. More Information. Answer all questions that are not prefilled for you.

I County Server	Assistant	2 B 1000	Cites Manda	a second	7 #1ed	
		22222	1 M 1 M 1			
ore information						~
hologen						
a Homemaker Plansrol Car	a (HPC) provider, you must provide a r	offeet alabament to arrange substitut	a coverage, if recessary, only from a provider of	orifled by 0000 and as identified in	the ISP O	-
Taxa .						
one a MDC (Measily Basily	on Estateliar Bastens?					
Yes I'No						-
you an EDGE (Encouraging	Dresh, Gords and Epily/Invite	a7				
Yes This			100 100 100 100 100			-
First carrierity in Nave you in	ren team an employer or employee at a team, at another 00000 certified agent	er approxy serving individuals with the	interval and w DOCD cartified ecency			
pitcherie a family member of	As provides or has provided services	to 0000 to a developmentally disk	ind person? "Polative" applies to your current	a gover spore		
Yes, I do have a velotive who	tokes cartified. ONs. I do not have a	water area and a settled				_
c you have a business associ	ate(s), who are or same cartified to pro-	ide services through the Ohio Depar	tment of Developmental Divebilities (D000)/1			
visit fairs received ping highly	nal Provider Identifier (NPI) member als	nere report & frame	Ander Haussell			_
MPI Number						
uns had a maximum National 7	Number Mentilier (NET) number stame	consid if here				_
NPI Namber						
100						
Bernill .						-
the all the languages you take	at orts		Navi Date			
-bas-			219520199	100		
E wit Date						
End Date 219/2018						

5. Upload the required documents. Then click Save and Continue.

Note: You may be asked to upload the following documents: 2-hour required annual training, 6-hour training, current CPR and First Aid, Driver License, Updated W-9 (signed and dated). If you are billing for transportation, you will also need an updated Driver Abstract and a copy of your auto insurance card.

Occananto					
These documents	rts are required in order to b r application.	e at Chis Medicald Provider, a	of you carried become cartified with pour tee	is submitted these documents to the department. You must scan and upload the documents have to proceed with	
SCR Backgrout the Department SCR Code: 51	nd Chardis cannot be spliced I to receive the document. W 23,168	ied to the Department. They mus Ren requesting your BCR, please	t be mailed descrip from the DCI office to b a use the following code for your reason for	ta Ohio Department el Quealopmentel Okubilities. Thio proceso can tales up to 36 days, se pisase altos ensegñ time lo gespileted	
-	or BCI set is its falseing	address (set) (Cits will be acc	spled Brough Die mally		
The Ohio Depa Attention Prov 10 E. Broad So S20: Floor Colorithon, Oh Mex Rie ster B	artiment of Devolupionistic) Alter Contification text No. 45215 Init for optical in 75 MD an	Onadollitien d allematike Die typen ann olee	den på jog jy ig og til d	<i></i>	
	that all Required Documents	s have a corresponding Docume	ert Upload accept the BCR and PID, as lister		
Annual Training O Cover Rights Training O Down Rights Training O Tord And O Provid A and Intervations converge With O Toward and Intervations converge				BCT final growth Check Core Core Core Core Core	
	Choose a file to U	land	Channe Film No file chosen		
By children Ta	are below to move forward in	your application, you are indic	ding that all listed required documentation is	s submitted in the Documents Uploaded with the exception of any background check(s)	
		Required Document		Document Name	
(inter	Debra	Driver's License			
fam	Dates	CPR			
dana .	Debte	First Aid			
View	Dakes	Client Rights Training	1		
-	Concession of the second	Annual Workshop			

6. Pay the Certification Fee. You should be redirected to pay the fee with a credit card or electronic check. If the system does not load the screen go back to PSM home page and click the red box "Fee Payment Information"

Note: Your application is not complete until you pay the fee and get the "application successful screen".