

Become an Independent Provider (IP)

Independent providers are self-employed persons who directly provide services to people with developmental disabilities. **Keep in mind, independent providers are responsible for completing their own billing and paying taxes, this is considered self-employment.** (Please consult your tax accountant for more information about taxes.) As a provider you cannot employ someone else to provide services on your behalf.

Independent providers are not employees of the State of Ohio, DODD, County Boards of Developmental Disabilities or WestCON. Independent providers cannot employ someone else to provide services on their behalf. Independent Providers are subject to rules and regulations in accordance with section 5123.045 of the Revised Code. All Rules and Regulations can be found on [DODD's Forms & Rules Site](#)¹

There may be 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.

IP Qualifications

- Be at least 18 years of age.
- Have a valid social security number.
- Have the ability to read, write, and understand English.
- Have a high school diploma or GED certificate.
- A valid driver license or other government issued photo identification.

Items that will need to be uploaded into your application:

- Birth Certificate
- High school diploma **or** general education development (GED) certificate **or** College transcripts/degree
- Valid driver's license **or** other government-issued photo identification
- Social security card (*independent providers must be certified under their Social Security number*)
- A signed and dated W-9. Click [here](#)² to obtain a W-9.
- CPR and First Aid Training Certifications
- Training Certificate(s) (*See steps below for where to complete training.*)

A Background check must be completed before you submit your application.

This can be performed by WestCON, a local Sherriff Station, or click [here](#)³ to find a WebCheck location near you.

Request that the criminal records check results be sent directly to:

Provider Certification
Ohio Department of Developmental Disabilities
30 East Broad Street, 13th Floor
Columbus, OH 43215

- If you have not been a resident of Ohio for the last 5-years, you must obtain a BCII and an FBI report.
- **The code for the BCII is 5123.169. The code for the FBI is 5126.28**

¹ <https://dodd.ohio.gov/providers/initial-renewal-certification/1become-an-independent-provider>

² <https://www.irs.gov/pub/irs-pdf/fw9.pdf>

³ <https://www.ohioattorneygeneral.gov/Business/Services-for-Business/WebCheck/Webcheck-Community-Listing>

Steps to Complete Before Submitting Your Application

1. **Create an email account that is designated for your new business.** The email address must be kept on file with Ohio Department of Developmental Disabilities. Any changes to this account must be updated.

If you are creating a new email address it needs to be active before DODD will allow you create an OHID.

If you already have an email established for your new business, proceed to the next step.

New Email: _____ Password: _____

2. **[Create an OH ID Account](#)**⁴ Click the link to go to ohid.ohio.gov and click “Create OHID Account”. Answer the questions, verify your email address and set up your OHID.

If you receive the message “Account Not Created” please email ITSCallCenter@dodd.ohio.gov.

Once your OHID is set up, you will need to sign in using your new credentials and request access to the following applications in the “App Store”.

Click on “App Store”, finding the required applications listed below, click “request access”, then agree to terms and conditions. Once all applications are added they will then be saved into your “My Apps”.

- My DODD – DODD’s website where you will find MyLearning and later access billing.
- Supplier Portal – You will set up your direct deposit here and then be able to view paystubs later.
- Provider Network Management – Medicaid site where you will start your application.

OH|ID Account Username: _____ Password: _____

**Please keep your user ID and password, you will need this every time you sign in to do anything going forward. **

3. **Obtain a Supplier/Payee ID** Sign into your OHID and access the “Supplier Portal” located in My Apps. After opening the app you will be directed to the Ohio Pays website, click “Log In”. After signing in click “New Payee Registration” and “Yes” to become the “administrator for the payee”.

If you receive an error, or are not directed to Ohio Pays go right to Ohio Pays website here:

<https://ohiopays.ohio.gov/>

You will need the following items to set up your direct deposit: your social security number, primary address information that matches your banking record, routing and account number for the account that you would like to have your direct deposit sent to, and you may be requested to upload a voided check.

If your registration is auto approved, you will find your Payee ID on the “Find My Business” file, Save a Copy to upload in your application.

If your registration was not auto approved, you will be notified by email within 7 – 10 business days. Keep a copy of the email from the State of Ohio that shows your 10-digit Supplier/Payee ID #. This email will need to be uploaded into your application.

Payee ID # _____

The supplier/payee number and a copy of the “Business File” screen (or email approval) showing your Payee ID will be uploaded to your application

⁴ <https://ohid.ohio.gov/wps/portal/gov/ohid/create-account/create-account>

4. **Register for an [NPI Number](#)**⁵. Create an account with [nppes.cms.hhs](https://nppes.cms.hhs.gov/#/) and then request an NPI number. You will initially be directed to create a Username and Password before you can apply. Create an account by clicking on “Create or Manage and Account” Once account is created you will then be redirected to another screen and click “Register for NPI”, you will sign in and register for the NPI.

HELPFUL HINTS: Taxonomy Information: You will have to choose at least one Taxonomy (Provider Type) Many providers will choose HPC: 3747P1801X or for Shared Living 253Z0000X.

Once submission is complete you will receive a tracking number, this is not your NPI #. You will receive an email in 24 hours to 10 business days with your NPI number.

Username: _____ Password: _____
NPI #: _____

5. **Complete the “Independent Provider Initial Training”** Sign into your OHID and access the “MyDODD” app located in My Apps **or** to attend the training in-person, click this [link](#)⁶ to check out the trainings offered by The Academy which are FREE to Independent Providers.

A copy of the certification or your transcripts will be uploaded into your application

6. **Sign up for Health & Welfare alerts** and other communications through the DODD. Click here to [subscribe](#)⁷.

7. **Obtain your CPR & First Aid certification.** Training must be administered by American Red Cross or equivalent agency and **must include an in-person skills assessment** completed with an approved trainer.

- a) Find an [American Red Cross](#)⁸ training near you or to access FREE CPR & First Aid trainings **or**
b) Click this [link](#)⁹ to check out the *FREE* trainings offered by The Academy.

A copy of the certification will be uploaded into your application

8. **Register and Complete EVV Training** Click this [link](#)¹⁰ to **register** for the training online through Sandata.

Applicants for Shared Living (OSL) do not need to complete this training.

If you do not have an account, you will need to click “sign up”. Complete the Profile Form as follows: Agency Name = Non Agency User; Agency ID # = leave blank; Medicaid ID # = 999999999; Provider # = 999999999; Select a Role = AgencyAdmin/Manager; Select a State = Ohio; Choose “Non-Agency EVV” Submit.

Click “Dashboard and take the “Mastering Your Learning” training and then the “Ohio Department of Medicaid Sandata EVV Required Training – Non-Agency”.

Username: _____ Password: _____

A copy of the certification will be uploaded into your application

9. **If applying to provide transportation services**, the following additional documentation will need gathered:

- a) a driver’s abstract from the BMV. An official copy can be obtained at your local BMV. Click [here](#)¹¹ then click on “Types of BMV Records” for directions and location.

⁵ <https://nppes.cms.hhs.gov/#/>

⁶ <https://westconco.org/calendar/>

⁷ <https://dodd.ohio.gov/your-family/all-family-resources/subscribe>

⁸ <http://www.redcross.org/ux/take-a-class>

⁹ <https://westconco.org/calendar/>

¹⁰ https://www.sandatalearn.com/learners/sign_in

¹¹ <https://bmv.ohio.gov/more-record-types.aspx>

- b) proof of current driver's insurance. Declaration page or current id card from your current auto insurance policy with your name and dates of service.

Note: Driver's abstract cannot be obtained more than 14 days prior to application submission.

These items will be uploaded into your application

If you have all steps above complete and items saved, you are ready to submit your application!!

10. Submit Application Sign into your OHID and access the "Provider Network Management" module located in My Apps or directly by using this link: [PNM system¹²](#). Follow all screen prompts. You will need to choose "Provider Administrator" Then when you are at the "Provider Home Page" click on "New Provider?" Find the application for "Medicaid Waiver (DODD)" (it should be orange). Fill out all the information about yourself. After hitting 'Save and Submit' you will be redirected to DODD's website, PSM, to complete your application. (See Quick Reference Guide)

- Most providers will select the following services in PSM: Homemaker Personal Care (HPC), Participant Directed HPC (PDHPC), Informal Respite, Residential Respite, Shared Living (if you are providing services for someone who lives with you) and HPC and/or NMT transportation.

***Please note that you have 10 days to complete your application once started. After 10 days, your information will be removed, and you will have to re-start the processing from the beginning of the application. ***

Please contact us if you have any questions during this process.



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<https://westconocog.org/>



¹²

https://ohpnm.omes.maximus.com/OH_PNM_PROD/Account/Login.aspx?fbclid=IwAR1j7_V2kLRUTQUyBa1I4Nc1BcQz42XeeePvNjreS5lHoT4uVuOa7QrRuk&fs=e&s=cI