Becoming an agency provider

# **Review the Steps for Becoming an Agency Provider on DODD**

# <https://dodd.ohio.gov/wps/portal/gov/dodd/providers/certification-recertification/3become-provider-agency>

# **Learn About Provider Certification and the Services your Agency will Provide**

<https://dodd.ohio.gov/wps/portal/gov/dodd/forms-and-rules/rules-in-effect/administrative-rules-list>

5123:2-2-01 – Provider Certification

The rules for all the services available can be found on this page as well

# **Create your Provider Account with DODD**

<https://dodd.ohio.gov> Click the login icon on the top right and then click Create New Account

After signing up, you will receive a series of emails. Follow those instructions to get your account set up finalized, and once it is final, your account will be active.

**Make sure you WRITE DOWN and/or REMEMBER the email address and password you used to create your account AND your DODD Account Username and Password**

# **Gather the Required Documentation**

**FOR THE AGENCY CEO**

* Verification of Age- Birth Certificate (Agency CEO must be 21 or older)
* High School Diploma / GED
* Either a Bachelor’s Degree from an accredited university or college **OR** 4 years of full time paid work experience as a supervisor of services for individuals with DD
* At least 1 year of paid work experience in services to individuals with DD with the responsibility for personnel matters, supervision of employees, program services and financial management
* State Identification – Valid Driver’s License or other government issued photo ID
	+ If your current address does not match the address on your ID, you must submit proof of residency (i.e. utility bill)
* Social Security Card
* Current BCII (Background Check)
	+ Must get an FBI check as well **if** have not been a resident of Ohio for the previous 5 consecutive years
* Verification of training- DODD Agency Provider Orientation
* Electronic Visit Verification (EVV) Training Certificate **(only applicable if providing Homemaker Personal Care and/or IO Waiver Nursing)**

**FOR THE AGENCY**

* Certificate from the Secretary of State verifying the Agency’s status
* IRS letter verifying Employer Identification Number
* BWC Employer Identification Number
* Must be current with payroll taxes, workman’s compensation premiums and unemployment compensation premiums
* Submit proof of staff (must have at least 1 employee in addition to the CEO)
* Evidence of comprehensive general liability insurance of at least $500,000
* Disclose the name, country of birth, date of birth and social security number of any person owning a 5% or more interest in the agency
* State of Ohio Supplier ID Number (see below for details)
* Submit written policies and procedures that address the agency’s management practices in:
	+ Person Centered Planning and Self Determination
	+ Confidentiality of Individual’s Records
	+ Management of Individual’s Funds
	+ Incident Reporting and Investigation
	+ Individual’s satisfaction with services delivered
	+ Internal monitoring and evaluation procedures to improve services delivered
	+ Supervision of staff
	+ Staff training plan
	+ Annual written notice to each employee explaining the conduct for which one may be placed on the Abuser Registry and setting forth the requirement for each employee to notify the agency in writing if they are ever formally charged with, convicted of, or plead guilty to any of the offenses listed in the Revised Code within fourteen days after the date of the charge, conviction or plea

**\*Additional Policies may be required depending on services selected to provide\***

# **Background Check FYI**

All applicants must complete a BCII Background Check. FBI Checks are required if you have lived outside of Ohio in the last 5 years.

Ensure the proper code is being used: BCII – 5123.169 FBI- 5126.28

Results must be send **directly to** DODD:

DODD

Office of Provider Certification

30 E. Broad Street, 13th Floor

Columbus, Ohio 43215

# **State of Ohio Supplier ID Number FYI**

New State of Ohio suppliers must first register online with the Ohio Office of Budget and Management (OBM) using the Supplier Self-Registration module of the Ohio Administrative Knowledge System (OAKS). Go to www.supplier.obm.ohio.gov and click ‘Register a New Account’. To complete this process, you need access to a printer as well as a scanner. The registration process will take approximately 15 minutes to complete.

You need your bank account information. You will also be prompted to fill out a W-9 (link provided at the website)

Once you are assigned a Supplier Number, you will need to upload a copy of an email or screenshot of your account showing your name and assigned Supplier Number in the document upload.

# **Complete the Application**

Login to your account on http://dodd.ohio.gov/Pages/default.aspx by using the login button towards the top right of the screen.

Click Applications on the top of the page then on the right select PSM-portal from the menu to begin the application

The application is not considered complete until all required documentation is submitted and the application fees have been paid

**HELPFUL HINT:** When you are gathering your documentation, scan and upload them to your computer as PDF files, and name the file what it is (ex. Driver’s License, Social Security Card, etc.). It will make uploading the documents easier. Do not scan them as one file, scan each item separately.

# **Application Fees**

The application fee is non-refundable. It must be paid with a credit card or electronic check.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Initial Certification** | **Renewal Certification** | **Add Service(s) during Certification** |
| **Small Agency**Serves 50 or less individuals | $800 | $800 | $75 |
| **Large Agency**Serves 51 or more individuals | $1600 | $1600 | $150 |

There is also a Medicaid Application Fee of $586.00 that is in addition to the fees listed above

# **What happens after the Application is submitted?**

Once DODD receives your completed application, application fee, and the background check, your application will be reviewed.

If your application requires additional information, DODD will contact you via email to let you know. If you fail to submit the needed information within the time line, you application will expire, and you will have to start over again.

The Department of Medicaid will complete a site visit to ensure the setting meets all of the requirements.

Once you are a certified provider, you will receive your certification letter.

Send that to your county board and let them know you are interested in providing services.

# **Additional Training**

**Within 30 days of initial certification**

New Provider Agency CEO Training

**Within 60 days of initial certification**

Training related to:

Service Documentation, Billing for Services, Internal Compliance Programs, Rights of Individuals, Requirements of Rule 5123:2-17-02

# **For More Information- Contacts**

Butler County Board of DD

Provider Relations Coordinator – Lee Ann Emmons

5645 Liberty-Fairfield Rd

Hamilton, OH 45011

(513) 785-2876

laemmons@butlerdd.org

DODD- <http://dodd.ohio.gov> OR 1.800.617.6733, press 3 for certification questions