

Mike DeWine, Governor Kim Hauck, Director

Provider Services Management (PSM)

User Guide for Certification

October 1, 2022

Department of Developmental Disabilities Division of Information Technology Services 30 East Broad Street, 12th Floor Columbus, Ohio 43215



10/1/2022

Table of Contents

About Provider Services Management (PSM)	2
Enrollment Action Options	2
Accessing PNM	2
Accessing PSM from PNM	4
For New Providers	4
For Returning Users	8
Using PSM	
Accessing applications and supplementals	
Provider Dashboard	
Address	
Services	
Billing Service Codes	
Voluntary Withdrawal	
Certification History Information	
Medicaid Information	
Sanction History	
User Associations	
Provider Features	
Tips for using PNM and PSM	
Logging in	
Switching between PNM and PSM	19
DODD links	
Contact Information	19
Communicate Button	
Contacts	20

About Provider Services Management (PSM)

In 2022, Provider Services Management (PSM) was updated to create a more streamlined service system for DODD providers to apply for and manage certifications. While the functionality of PSM is largely the same as before, the layout and how it is organized has changed significantly. This user guide leads you through the process of accessing PSM (Provider Network Management (PNM) Module) and using the system for certification.

Enrollment Action Options

This chart gives a basic overview of the steps you will be performing throughout the process of enrollment, as well as the order in which to take those steps.

Begin ODM Enrollment Profile Update	Begin DODD Enrollment Profile Update	Enrollment Begin DODD Enrollment Profile Add ODA Servic Update Update	Edit Key Provider Identifiers	Request Disenrollment
 Begin ODM application Make changes to the addresses except Billing and Payment 	 Route to PSM Provider Home Complete any DODD contract update (Billing and Payment Addresses) Add DODD certification to an SSA provider 	ess to the except Payment Addresses) - Add DODD cortract update (Billing and Payment Addresses) - Add DODD cortification to an SSA provider	• ODM changes	• Removal of MPN/Medicaid ID and all certifications

Accessing PNM

To access the Provider Services Management (PSM) application, you must first log in to the Provider Network Management (PNM) module. You must also have a valid OHID User ID and be an authorized user of the Ohio Department of Administrative Services (DAS) and the Department of Developmental Disabilities (DODD) services.



PSM Certification User Guide

10/1/2022

 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.





If you do not have an OH|ID User ID, click the **Don't have an Account?** link below the "Next" button. If you can't remember your User ID, use the **Forgot User ID?** link.

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

Ohio's Digital Identity. One Sta	ate. One Account.
Create Account	
Log In	
OH ID	



PSM Certification User Guide

10/1/2022

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





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.

O h	io	A	Provider Net	work Managei	nent Medic	aid Home	Learning C	Contact Fee	Schedule		💄 Bo	ba Fett එ
My Provide	rs Pending	Agent Reques	ts Account	Administratio	n DD Accou	nt Administrati	ion				Ν	ew Provider ?
Reg ID	Provider	Status	Provider Type	NPI	Medicaid ID	Specialty	DD Contract Number	DD Facility Number	Location	Effective Date	Submit Date	Revalidation Due Date
T	T	×	T	Т	Т	~	Т	T	Т	T	Т	T
No providers f	ound											

Accessing PSM from PNM

For New Providers

1. From the PNM landing page, click **New Provider?** in the top right-hand corner.

	Wy Provide	rs Pending	Agent Reque	sts Account	Administ	tration	DD Accou	Int Administrat	tion					lew Provider	?
Re	g ID	Provider	Status	Provider Type	NPI		Medicaid ID	Specialty	DD Contract Number	DD Facility Number	Location	Effective Date	Submit Date	Revalidatio Due Date	ו
	T	T	~	Т		т	T	~	Т	Т	Т	T	Т		•
								-	-	-	-			-	



PSM Certification User Guide

10/1/2022

2. Use the **Click here for more application types...** button to show the DODD applications.

Terrioved and you will have to h	e-start the process from the beginning of	the application."		
Standard application Order	na Deferring Drescribing Change of Ope	rator MCD Single Case		ALC CONTRACTOR AND A CONTRACTOR
Use this application if you are applying to U	≣ Ohio ↑	Provider Network Management Medicaid Hom	e Learning Contact Fee Schedule	L Boba Fett 🔿 Log ou
or institutional provider to provide fee-for- service for the State Medicaid program.				
	"Please note that you	have 10 days to complete your	application. After 10 days, yo	our information will be
Select	removed and you will	have to re-start the process from	m the beginning of the applic	ation."
Click here for more application types	Standard application	Ordering, Referring, Prescribing	Change of Operator	MCP Single Case
	Use this application if you are applying to become a new individual, group, facility,	Use this application if you are applying solely for the purpose of Ordering, Referring	Use this option if you want to initiate a Change of Operator for Skilled Nursing	Use this application if you are entering into a Single Case agreement with a
	or institutional provider to provide fee-for- service for the State Medicaid program.	or Prescribing.	Facility or Intermediate Care Facility for individuals with intellectual disabilities.	Managed Care Plan.
	Salart	Salart	Relat	5104 B
	Less			
	Medicaid Waiver (ODM)	Medicaid Waiver (ODA)	Medicaid Waiver (DODD)	Non-Medicaid DODD
	Use this application if you are applying to	Use this application if you are applying to	. Use this application if you are applying to	Use this application if you are applying
	become a Waiver Provider with Ohio	become a Waiver Provider with Ohio	become a Waiver Provider with Ohio	for one or more of the following options;



Providers who have any application open with a sister state agency will be unable to access the DODD links.

3. Click **Select** at the bottom of the appropriate DODD application tile (Medicaid Waiver (DODD) or Non-Medicaid DODD).



4. Confirm the Application Type and Waiver Type and select whether you are an **Independent** or **Agency** provider.





Note

Department of Developmental Disabilities Division of Information Technology Services

PSM Certification User Guide

5. Fill in all the relevant fields and click **Save**.

Independent	Provider	Ohio 🔶 P	rovider Network Management Medicaid Home Lea	arning Contact
Application Type	warver	Agency Pro	vider	
Waiver Type	Medicaid Waiver (DODD)	Application Type	Waiver	Change
Category*	Independent			
Provider Type*		Warver Type	Medicaid Waiver (DODD)	
you a nurse with a valid nursing license?	○ Yes ○ No	Category*	Agency	Change
First Name*		Provider Type"	L	
Middle Name		Name of Business Entry	Business Name as it appears on your IRS Assignment letter	
Last Name*		Tax ID Type*	• EIN O SSN	
Tax ID Type*	○ EIN 💿 SSN	Tax ID*		
Tax ID*		DD Contract Number (If Applicable)		
NPI*		Zip Code*		
DD Contract Number (If Applicable)		Zip Code Extension*		
Gender*	○ Female ○ Male ● Unknown		Save Canc	el
Date of Birth*				
Zip Code*				
Zip Code Extension*				

Starting in October 2022, all new providers wishing to become Medicaid providers will be required to provide their National Provider Identifier (NPI) number. If the NPI you enter does not match the registered Business Entity or Provider name, you will not be able to proceed with the application.

6. Once your NPI number has been validated, a new field named "Taxonomy" will appear. Use the **dropdown menu** to select the appropriate taxonomy. Click **Save**.

Ohio *	Provider Network Management	Medicaid Home	Learning	Contact
Taxonomy is required.				
Application Type	e Waiver			<u>Change</u>
(Waiver Type	e Medicaid Waiver (DODD)			
Category	* Agency			Change
Provider Type			~]
Name of Business Entity				
	Business Name as it appears on your I	RS Assignment letter		
Tax ID Type				
Tax ID				
NPI				
DD Contract Number (If Applicable)			
Zip Code				
Zip Code Extension				
Taxonomy	•		×	
		Save	Cance	1

7. Click Save and Submit.



8. A notification will appear. Wait until the connection to PSM is made (this may take a few seconds).

Please wait while your information and session are being transferred to another Ohio Agency in order to complete your application.	

9. Select IOP (if it appears).





PSM Certification User Guide

10/1/2022

10. You will be redirected to the DODD Apps login system. Wait while the page loads and connects you to PSM. This may take a few seconds.

Chio Department of Developmental Disabilities	
Welcome Wilson, Jessica !!	
Please wait while we connect to your account(s)	



Once you enter PSM, there's no direct way to return to PNM. For admins who need to frequently switch between the two, it is best to open a second browser tab after accessing PSM and logging in to PNM. When you make updates in PSM, refresh your PNM browser tab to see the changes.

11. The PSM landing page will load. Pending Certification Applications will display.

	Constant Con									
Show 10 v entries									Search:	
Application Number	Provider Name	Designation Type	Provider Type/ Entity Type	Application Type	Contract #	Start Date	Submitted Date	Status 🛛	Legal Status	Supplemental Status
PROV-APP-123456	Yoda Dagobah, MD, LLP	Provider	Agency	Initial		08/25/2022		Draft		N/A

For Returning Users

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

Reg ID Provider	Status	Provider Type	NPI	Medicaid ID	Specialty	DD Contract Number	DD Facility Number	Location	Effective Date	Submit Date		Revalidation D Date
T	Al	T	T	т	Al E	T	т	T		т	T	
541274 DAGOBAI YODA	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



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

Provider Name DAGOBAH YODA		Medicaid ID 0109982	Effective Date	Revalidation Due Date	Term Date	
			Service 2	VER PECES		
DODD Certification Start Date 02/01/2022	DODD Certification End Date 12/31/2299	DODD Contract Number				
Enrollment Actions	+ Enrollment Action	n Selections:				
Programs	+ Program Selectio	ons:				



The "Programs" option is currently under development and will be available at a later date. The "Self Service" option contains links to useful ODM information.

3. 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.

Dravidas Nama		Madaaid ID	Effective Date	Revelidation Due Date	Tarras Data	
DAGOBAH, YODA		0109982	02/01/2022	02/01/2027	Herm Date	
DODD Certification Start Date 02/01/2022	DODD Certification End Date 12/31/2299	DODD Contract Number 8190237				
Manage Application						
Enrollment Actions	Enrollment Action	a Selections: nroliment Profile.Update				
Programs	+ Program Selection	ons:				
Self Service	+ Self Service Sele	ections:				

Note

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



4. The PSM landing page will load. **Contracts** will display at the top, and **Pending Certification Applications** will display below.

Contracts											
Show 10 v entries										Search:	
Contract# []	Name		Provider Type	Certification Statue		Sanction Status	11 0	ertification Start		Certification End	
541274	Yoda Dagobah, MD, LLP		Agency	Voluntarily Withdra	ati	Voluntarily Withdrawn		07/24/2016		05/16/2019	
Showing 1 to 1 of 1 entries										Previous 1 1	lext
Showing 1 to 1 of 1 entries Pending Certification Apple	cations									Previous 1	Vext
Showing 1 to 1 of 1 entries Pending Certification Appl Show 10 • entries	cations									Previous 1 1 Search	Vext
Showing 1 to 1 of 1 entries Pending Certification Appl Show 10 entries Application Number 11	cations Provider Name	1 Designation Type	Provider Type/Entity Type	Application Type Co	estract # 11 Start Date	11 Submitted Date i	St	stus	Legal Statu	Previous 1 1 Search II Supplemental Status	Vext



Supplementals will now be accessed through a link under the **Supplemental Status** located on the far right-hand side of the application row. Click the link there to access any supplementals.

Using PSM

Accessing applications and supplementals

Once you have logged in through PNM and have accessed PSM, you will be able to use the functions in PSM.

- 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.

										Provider Dashboard
Pending Certification Ap	plications									
Show 10 🗸 entries									Search:	
Application Number	Provider Name	Designation Type	Provider Type/ Entity Type	Application Type	Contract #	Start Date 🗊	Submitted Date	Status 🔲	Legal Status	Supplemental Status
PROV-APP-123456	Yoda Dagobah, MD, LLP	Provider	Agency	Initial		08/25/2022	2	Draft		N/A
Showing 1 to 1 of 1 entries										Previous 1 Next

Provider Dashboard

Once you have accessed your application in PSM, you will start off on the Provider Dashboard. From here, you can access Certification Applications or Demographic Applications. Use the tabs near the bottom of the page to access either one.

Department of Developmental Disabilities Division of Information Technology Services Ohio **PSM** Certification 10/1/2022 User Guide **Provider Home** Provider Dashboard 🔒 🔒 Address -Certification Expiration: 06/07/2023 Certification Status: Active Provider Name: Sanction Status: Alfred E. Neuman -None Contract Number: 1234567 Certification Span: 1/1/2022 - 1/1/2099 Voluntary Withdraw -Provider Type: Supplier Id: Agency 11223333 SSN/TIN: Certification History + Designation Type: Provider 1 Main St, Akron, OH 44301 Address: 5558675309 Phone: Email: 1 User Associations Edit Email and Phone Number Ξ Please select the application you wish to begin. Certification Applications Demographic Applications Certification Application Withdraw Services Create application to allow active providers to withdraw Services to active certification **View Fees** View Fees that are owed or history on fees already paid.

Certification Applications

Under the Certification Applications tab, you can **add services**, **withdraw services**, and **view fees** by clicking the links.

Certification Applications	Demographic Applications	
Certification Applications		
Add Services	active providers to add Consists to active continentias	
Create application to allow	active providers to add Services to active certification.	
Create application to allow	active providers to withdraw Services to active certification.	
View Fees		



If it is within 90 days of the recertification span, you will not be able to add services in PSM.

Demographic Applications

Within the Provider Dashboard, click on the Demographic Applications tab, to update your demographic information. Click the links under the Demographic Applications tab to perform the functions listed below.

Ohio

Department of Developmental Disabilities Division of Information Technology Services

- Update your name
- Update your address (billing and payment addresses only; all other addresses must be updated through the Self Service Portal in PNM)
- Update your CEO (DOO) or CEO Designee (DOOD)
- **Update ownership** (this application is only for agency providers; it must be completed when there is a change in ownership of the agency)
- Add a designation (this is used to add another DODD layer to your Reg ID; for example: a non-Medicaid Waiver Provider adding Medicaid waiver services; a Medicaid Waiver Provider adding a Licensee; or an Operator/Licensee adding a Provider (Medicaid or non-Medicaid waiver services
- send **notices to DODD** (such as criminal history reports, related parties, professional registrations/certification licensees, and bankruptcy information)
- View fees





If it is within 90 days of the recertification span, you will not be able to access Demographic Applications within PSM.

Address

Click on the **Address** tab in the PSM menu to view your address information (billing and payments only). Click the **Provider Address** and **Secondary Contacts** tabs to view and confirm all of your address information.

Ohio Depa Divisi	rtment of Develo on of Informatio	opmental D on Technolc	Disabilities Disgy Services		PSM Certifico User G	ation 10/1	/2022
Provider Dashboard 🔒	Provider Address Information		0				
Address	Provider Demographics						
Services /=	Certification Expiration:	06/07/2023		Certification Status:	Active		
Billing Service Codes 🛛 🔊	Provider Name:	Alfred E Newm	an	Sanction Status:	None		
	Contract Number:	1234567		Certification Span:	06/08/2020) - 06/07/2023	
Voluntary Withdraw	Provider Type:	Agency		Supplier Id:			
Certification History	SSN/TIN:	11223333					
Information +	Designation Type:	Provider					
Medicaid Information	Address:	1.Main St. Akro	n, OH 44301				
Sanation History	Phone:	558675309					
	Email:	fakeemail@noe	mail.com				
User Associations	Edit Email and Phone Number						
Provider Features Z	Provider Address Secondary Contacts						
	Primary Service Address V	1	Last Name Newmon				
	AddressLine1 1 Mair City County FRA Phone 1 Fax 1	n St. Akron, OH 44301 NKLIN	State Email fakeemail@noema Phone 2 Fax 2	OH ail.com	Zip	43125	
	Contact Name						

Note

All other addresses must be updated through PNM.



Services

Click on the Services tab in the PSM menu to view your services. Use the tabs on the lower right-hand side to access the following functions: Provider Services, Service Locations, Service Span History, Certification Span History, and Add-On Rates.

Click the blue **Edit** button next to each field to make changes.

Address	Provider Demographi	CS		
Services 🗲	Certification Ex	piration:	06/07/2023	
Billing Service Codes	Provider Name:		Alfred E Net	wman ····
	Contract Number	er:	1234567	
Voluntary Withdraw	Provider Type:		Agency	
Certification History	SSN/TIN:		111223333	
Information +	Designation Typ	be:	Provider	
Medicaid Information	Address:		101101 Mai	n St, Akron, OH 44301
Sanction History	Phone:		5558675309)
	Email:		none@noen	nail.com
User Associations	Edit Email and P	hone Number		
Provider Features X				
	Provider Services	Service Locations	Service Span History	Certification Span History
	Dravidar Sanisas			
	Provider Services			
	Serv	vice Name		Counties
	Edit	DD V	Vaiver Nursing	ADAMS, ALLEN,
	Edit	Homemaker Person	al Care (HPC) Transportat	ion ADAMS, ALLEN,

Note

If it is within 90 days of the recertification span, you will not be able to add any services.



PSM Certification User Guide

10/1/2022

Billing Service Codes

Clicking the Billing Service Codes tab in the PSM menu, you will be able to view all of the billing codes associated to your current contracted services.

Address	Provider Demographics				
Services 🖆	Certification Expiration:	06/07/2023	Certification Status:		Active
Billing Service Codes 📎	Provider Name:	Alfred E Newman	Sanction Status:		None
	Contract Number:	1234567	Certification Span:		06/08/2020 - 06/07/2023
Voluntary Withdraw	Provider Type:	Agency	Supplier Id:		1234567
Certification History	SSN/TIN:	11223333			
Information +	Designation Type:	Provider			
Medicaid Information	Address:	1 Main St. Akron, OH 44301			
Sanction History 1	Phone:	3308675309			
	Email:	none@noemail.com			
User Associations	Edit Email and Phone Number				
Provider Features X	Provider Billing Service Codes				
	Community Respite				
	Name		Billing Code	Effective Date	Expiration Date
	Community Respite - Partial Day: I/O		ARD	06/08/2020	06/07/2023
	Community Respite - 15 minute unit: I/O		ARF	06/08/2020	06/07/2023

Voluntary Withdrawal

Click the **Voluntary Withdrawal** tab in the PSM menu to withdraw your full DODD certification.

Address	Provider Demographics			
Services 🗲	Certification Expiration:	06/07/2023	Certification Status:	Active
Dilling Capitas Cadas	Provider Name:	Alfred E Newman	Sanction Status:	None
Billing Service Codes 🖤	Contract Number:	1234567	Certification Span:	06/08/2020 - 06/07/2023
Voluntary Withdraw	Provider Type:	Agency	Supplier Id:	1234567
Certification History	SSN/TIN:	11223333		
Information +	Designation Type:	Provider		
Medicaid Information	Address:	1 Main St. Akron, OH 44301		
Sanction History	Phone:	3308675309		
	Email:	none@noemail.com		
User Associations	Edit Email and Phone Number			

Note

This process removes the DODD certification. It does not remove ODM or ODA certifications.



PSM Certification User Guide

10/1/2022

Certification History Information

The Certification History Information tab in the PSM menu allows you to review the following: Application History, Communication History, Document View, and Certification Notification. Use the tabs near the bottom right-hand side of the screen to access these views.

Provider Dashboard	A	Provider Service	S				
Address		Provider Demographic	S				
Services Billing Service Codes	*	Certification Exp Provider Name: Contract Numbe	iration:	06/07/2023 Alfred E Newn 1234567	an	Certification Status: Sanction Status: Certification Span:	Active None
Voluntary Withdraw		Provider Type:		Agency		Supplier Id:	
Certification History Information	+	SSN/TIN: Designation Type	E :	11223333 Provider			
Medicaid Information		Address:		1 Main St. Akr	on, OH 44301		
Sanction History	1	Phone: Email:		558675309 fakeemail@no	email.com		
User Associations	-	Edit Email and Ph	one Number				
Provider Features	R	Application History	Communication History	Document View	Certification Notification		
		Provider Applicatio	n History				
			PROV-APP- Status: Completed Legal Status:	1		Provider Name: . Provider Type: Agen Application Type: Service Change - Wi Tax I/c Created On: 08/06/20	cy thdrawal Service(s) 121

Medicaid Information

The **Medicaid Information** tab in the PSM menu lets you review your Medicaid information (if applicable). This includes your Medicaid ID (formerly known as your Medicaid Provider Number), your NPI, your Provider Type, and your Reg ID.

Services 🚈	Certification Expiration:	06/07/2	023	c	ertification Status:	Active	
Dilling Service Coder	Provider Name:	ACME (Cartoon Service	s S	anction Status:	None	
	Contract Number:	123456	7	c	ertification Span:	06/08/2020 - 0	6/07/2023
Voluntary Withdraw	Provider Type:	Agency		s	upplier ld:		
	CONTRAC	112223	333	-			
Information History	55N/11N.						
	Designation Type:	Provide	r				
Medicaid Information 🗎	Address:	1011 Ma	nin st Akron, OF	44301			
Sanction History	Phone:	3308675	5309				
	Email:	noemai	@noemail.com				
User Associations	Edit Email and Phone Numbe	ч					
Provider Features 🛛 🖄	Medicaid Waiver Information						
	Provider Medicaid Information	- Active Providers					
	MITS Contract	Medicaid ID	NPI	Medicaid ProviderType	Reg ID	Start Date	End Date
	10	1234567		16	55555	3/30/2021	12/31/2299
	LV1	1234567					
				16	55555	3/30/2021	12/31/2299
	SELF	1234567		16 16	55555	3/30/2021 3/30/2021	12/31/2299 12/31/2299
	SELF	1234567		16 16	55555	3/30/2021 3/30/2021 5/4/2022	12/31/2299 12/31/2299 12/30/2299
	SELF	1234567		16 16	55555	3/30/2021 3/30/2021 5/4/2022	12/31/2299 12/31/2299 12/30/2299
	SELF Provider Medicaid Information	1234567 - Inactive Providers		16 16	55555	3/30/2021 3/30/2021 5/4/2022	12/31/2299 12/31/2299 12/30/2299
	SELF Provider Medicaid Information MITS Contract	- Inactive Providers Medicald ID	NPI	16 16 Medicald ProviderType	55555 55555 Reg ID	3/30/2021 3/30/2021 5/4/2022 Start Date	12/31/2299 12/31/2299 12/30/2299 End Date
	SELF Provider Medicaid Information MITS Contract IO	- Inactive Providers Medicald ID 1234567	NPI	16 16 Medicaid ProviderType 45	55555 55555 Reg ID 55555	3/30/2021 3/30/2021 5/4/2022 Start Date 6/8/2020	12/31/2299 12/31/2299 12/30/2299 End Date 3/29/2021
	SELF Provider Medicald Information MIT's Contract IO SELF	1234567 1234567 Medicaid ID 1234567 1234567 1234567	NPI	16 16 Medicaid ProviderType 45 45	55555 55555 Reg ID 55555 55555	3/30/2021 3/30/2021 5/4/2022 Start Date 6/8/2020 6/8/2020	12/31/2299 12/31/2299 12/30/2299 End Date 3/29/2021 3/29/2021



PSM Certification User Guide

Sanction History

Under the **Sanction History** tab in the PSM menu, you will find all current and previous sanction information.

Provider Dashboard	1	Sancti	on His	tory																
Address 🗐	i.	Provide	er Demog	raphics																
Services 🗲	,	Ce	ertificatio	n Expiratio	1:			06/07/2023				C	ertification !	Status:			Active			
Billing Service Codes 🛛 🥎	>	Pr	ovider N	ame:				Alfred E Newman			s	Sanction Status:			None	None				
Voluntary Withdraw		Co	ontract N	umber:				1000cm			c	ertification :	Span:			06/08/2	020 - 06/07/20	23		
Certification History		SS	Provider Type: SSN/TIN:						Agency 11223333			Ĩ					123450	/		
Information +		De	signatio	n Type:				Provider	Provider											
Medicaid Information	1	Ac	idress:					Main St. Akron, OH 44301												
Sanction History		Ph	none:					558675309 fakeemail@noemail.com												
User Associations		Ed	nall: lit Email a	and Phone N	umber															
Provider Features Z	C				2011-12/5															
		Provide	er Susper	isions And R	evocation	s														
		Service	County	Start End Date Dat	e Status	ls State Wide?	A Services Per County?	Adjudication Date	Appeal Hearing Date	All Services Per County?	Is ODM Suspension?	ls Propos Denied	Is State al Wide ? Service?	Created On	Notification Sent	Proposal Date	Proposal Denied Date	Proposal Notification Sent	Revocation Date	Proposal End Date C
		4																		
		Provide	er Propos	al Sanction I	listory															
		Adjudica	ation Dat	te Adjud	cation N	otification	n Sent	Appeal Heari	ing Date	Comme	nts/Notes Is	Proposa	I Denied?	Proposa	I Date Pro	posal Deni	ed Date	Proposal No	tification Sen	t Created

User Associations

Under the User Associations tab of the PSM menu, you will find any additional contracts linked to the user.

Provider Dashboard	A	User Associations			
Address		Provider Demographics			
Services	1	Certification Expiration:	06/07/2023	Certification Status:	Active
Billing Service Codes	~	Provider Name:	Alfred E Newman	Sanction Status:	None
		Contract Number:	564567	Certification Span:	06/08/2020 - 06/07/2023
Voluntary Withdraw	•	Provider Type:	Agency	Supplier Id:	1234567
Certification History		SSN/TIN:	11223333		
Information	+	Designation Type:	Provider		
Medicaid Information		Address:	1 Main St. Akron, OH 44301		
Sanction History	1	Phone:	558675309		
	-	Email:	fakeemail@noemail.com		
User Associations	4	Edit Email and Phone Number			
Provider Features	X	Associated Contracts			
		Contract#	Name	Provider Type	
		1234567	Manny UAT	Independent	
		3141592	Moe UAT	Independent	
		7675675	Curly UAT	Independent	

Ohio

Department of Developmental Disabilities Division of Information Technology Services

Provider Features

The **Provider Features** tab of the PSM menu allows you to apply to update the following: **Features**, **Agency Contact**, and **Service Description**. Use the links under **Profile Application Types** to start the applications.



Tips for using PNM and PSM

Here are some good points to remember when using PNM and PSM.

Logging in

If you attempt to log in but receive an error, open an Incognito Window in Chrome, and log in from the new window that opens.



itscallcenter@dodd.ohio.gov

Ohio

Department of Developmental Disabilities Division of Information Technology Services

Switching between PNM and PSM

- Once you enter PSM, there is no direct route (i.e. a link) to go back to PNM. To return to PNM, you must open a new window and log back in to PNM.
- Admins often need to go back and forth between PNM and PSM. To do so, it is best to open a second browser tab after accessing PSM and logging in to PNM. When you make updates in PSM, refresh your PNM browser tab to see the changes.

DODD links

Providers who have any application open with a sister state agency will be unable to access DODD links.

Contact Information

Communicate Button

To communicate directly with a certification staff member at any time, use the **Communicate** button located throughout PSM (example below shows the Communicate button as it appears in the Supplemental Application). Click the button to open a new communication window. Type in your questions, and a support member should contact you soon.



This feature keeps a record of all communications, so you can easily find answers to previous questions you've had. When a certification staff member has responded, you will receive a notification email letting you know



that the response has arrived. You will also see a small number on the Communicate button itself, letting you know how many unread responses you have.

Contacts

For other questions, website and email information for both DODD and ODA are as follows.

DODD Provider Certification

Website - <u>www.DODD.Ohio.Gov</u>

DODD Waiver Providers – <u>Provider.Certification@dodd.ohio.gov</u>

DODD Licensure Development – <u>Licensuredevelopmentapps@dodd.ohio.gov</u>

ODA Provider Certification

Website - www.aging.ohio/certification-changes

ODA Provider Certification – <u>Provider_Inquiry@age.ohio.gov</u>

PNM contact information Ohio Department of Medicaid

Phone Number ODM Integrated Help Desk (IHD) - 1-800-686-1516

Email - IHD@medicaid.ohio.gov