



Frequently Asked Questions: Medicaid School Program For Independent Practitioners Seeking to Provide Medicaid School Program (MSP) Services

OHIO DEPARTMENT OF MEDICAID

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This FAQ document was created to offer guidance for individual therapy practitioners who intend to refer therapy services in the school setting as authorized in Ohio Revised Code (ORC) 5162.366, and House Bill 89 (HB89). ORC 5162.366 and HB89 gave referring authority to Occupational Therapists (OTs), Physical Therapists (PTs), Speech-Language Pathologists (SLPs), and Audiologists for the purpose of referring therapy services covered under MSP. The guidance and legislation was designed to satisfy a mandate passed down from the Centers for Medicare and Medicaid Services (CMS) which instructed Ohio to comply with section 42 CFR 440.110 of the US Code.

In order to refer for MSP services, the Practitioner must enroll with the Ohio Department of Medicaid (ODM) and have an active Medicaid provider agreement in place for dates of service beginning July 1, 2017. The Medicaid provider agreement is a document that all providers sign with the Ohio Department of Medicaid. However, by signing the provider agreement, the referring therapist, will be working within their scope of practice, and is not expected to be responsible for billing for MSP services. The school district is still the provider of record for MSP reimbursement purposes.

Additional provider information can be found at <http://medicaid.ohio.gov/> or by clicking on the following link: <http://medicaid.ohio.gov/PROVIDERS.aspx>. Step-by-Step enrollment guidance is also available here: [Step-by-step instructions for Therapist enrollment](#).

How will these changes affect OTs, PTs, SLPs, and Audiologists?

- Any individual practitioner, who refers a service for a Medicaid covered individual under MSP must be listed as the referring provider on the MSP claim that is submitted to ODM. To be recognized as a valid referring provider on the claim, the individual practitioner must be enrolled with Ohio Medicaid as an active provider. Although the school will always be the billing provider, if the therapist made a referral for a therapy services, the National Provider Identifier (NPI) of the referring therapist will be required on the claim submitted by the MSP provider for Medicaid reimbursement.

How do I enroll with Ohio Medicaid as an OT, PT, SLP, or Audiologist?

- To enroll as an individual practitioner, you must complete the standard Medicaid provider application through the provider enrollment portal on ODM's website which can be accessed by clicking on the following link:
<https://portal.ohmits.com/Public/Providers/Enrollment/tabId/44/Default.aspx>.

- Individual practitioners are encouraged to start the provider enrollment application as soon as possible to ensure claim payment is not disrupted. To ensure no delays in processing, provide all required information at the time of application.
- To complete the enrollment application, you must provide the following:
 - Social Security Number (SSN)
 - National Provider Identifier (NPI)
 - Professional license number with the issue date and expiration date
 - Medicare Provider ID (if applicable)
 - An upload or mailed copy of IRS form W-9. This form may be downloaded from the IRS Website: <https://www.irs.gov/uac/about-form-w9>.
- When an incomplete application is submitted to ODM, it will be returned to the applicant with a request to provide the missing information.

Is there a fee associated with completing the application?

- No. There is no application fee for individual practitioners, nor is there a fee to complete a renewal application.

If therapist are not MSP billing providers, why must the IRS W-9 form be completed?

- ODM's provider enrollment process requires all applicants to submit a W-9 form with the application. This form is collected for all provider types as a signed statement attesting that the social security number or tax identification number that is being used, actually belongs to the applicant. The W-9 form is not submitted to the IRS and it is maintained in ODM's secure provider management system.
- Signing and submitting a W-9 does not mean that a provider will automatically receive an IRS 1099 at the end of the year. Only billing providers who have received more than \$600 in payments from ODM will receive a 1099. Individual therapy practitioners who only work for an MSP provider (school district) do not directly bill Medicaid for MSP services and therefore will never receive a 1099. In MSP, the schools and/or school districts are the only billing providers.

When declaring ownership type, does a therapist who wishes to enroll as an MSP provider have to respond to the "Sole Proprietor" designation?

- The designation of "Sole Proprietorship" is used by ODM solely for the provider enrollment application process to differentiate types of providers, as various individuals and entities use this application to enroll as Ohio Medicaid providers. The identification of "Sole Proprietor" is only used to tell ODM that an individual person is applying to be an Ohio Medicaid provider. This designation does not imply that the provider is operating an independent business. In many cases, this is the only option under ownership type that is applicable to an individual provider as opposed to an organizational provider that can have multiple options for ownership type.

- When completing the “Ownership Type” field of the application, each practitioner should decide which option most closely describes their designation. In most cases therapist will respond with “Sole Proprietorship.” By selecting this designation on the application, it does not, in and of itself, incur a responsibility for the applicant to affirm to be a sole proprietor in terms of business ownership. The designation also does not require the applicant to pay additional business expenses, nor or to purchase additional business, malpractice, or health care liability insurance.
- This information is not being used in any other legal context, and the designation will not be reported to any of the following: Internal Revenue Service, the Ohio Department of Taxation, the Ohio Secretary of State, any city tax office in the state of Ohio, or any other business licensing entity.

The provider application ask therapists to affirm that they do not provide services to Medicare beneficiaries. How should a therapist answer this question if he or she works in a nursing home on the weekends or during the summer at which time they provide services to Medicare beneficiaries?

- When answering the “Medicare Participation Exemption” question, therapists should consider whether they will ever provide services to Medicare beneficiaries outside of the MSP setting. If so, leave this box unchecked, which serves as an indication that you are not exempt from Medicare participation.
- Check the box – if you will only render services under MSP and do not work in any other settings where you would potentially serve Medicare beneficiaries.
- Leave the box unchecked – If you have a Medicare ID as issued by CMS. Leaving this box unchecked will prompt the system to ask you to provide your Medicare ID as issued by CMS’ Provider Enrollment Chain and Ownership System (PECOS). ODM will use this information to verify your Medicare enrollment and participation.

Can OT/PT/SLP or Audiologists enroll with Ohio Medicaid as Ordering, Referring and Prescribing (ORP) Providers?

- No. These practitioners do not qualify as an ORP provider because ordering, referring, and prescribing is not within the therapist’s licensed scope of practice. This designation is solely for practitioners who have the full scope of ORP including Physicians (MD/DO), Physician Assistants (PAs), and Advanced Practice Registered Nurses (APRN’s), who have authority to “O”, “R”, and “P.” This guidance is not intended to negate requirements that exist when providers operate and deliver services outside of the Medicaid School Program. Questions specific to licensure requirements should be directed to the appropriate Licensure Board
- Through HB89, therapists are now authorized to refer services solely for the purpose of MSP meaning they cannot refer therapy services outside of the school setting. MSP services

referred by a therapist should be identified on the school's claim for payment in the "referring provider" field.

Could one prescription contain several therapy providers, such as OT and SLP ordered together?

- Specific to the MSP program, OT's, PT's, SLP's, and Audiologist can only Refer (R) within their scope of practice, and cannot Order (O) nor Prescribe (P) MSP services. Whether or not a practitioner, who may indeed have the full professional authority to Order and Refer, also has the licensing ability to write a (P)rescription that contains several therapies is a question that would best be redirected to the appropriate Board (OT, PT, SLP, Medical, Nursing, etc.).

Can a school district obtain a prescription from a doctor for therapy services and use the prescription for Medicaid claims?

- Services furnished pursuant to an Individualized Education Plan (IEP) as formulated by a child's IEP Team, and without an express prescription or referral from an appropriate practitioner under 42 CFR 440.110, are not reimbursable by Medicaid. The referral for therapy services must be separate from the IEP. Guidance is available on ODE's website at the following link: <http://education.ohio.gov/getattachment/Topics/Finance-and-Funding/Programs/The-Ohio-Medicaid-Schools-Program/Ohio-Medicaid-School-Program-Webcast.pdf.aspx>

Would a prescription for therapy services have to be re-written every year?

- The order or referral for therapy services should be written as appropriate and should be based on each child's individual needs. Just as an IEP is reviewed periodically, the need for therapy services should also be reviewed as needed.

Are there other options for a school district to submit a claim to Medicaid, if an OT, PT or SLP is not enrolled in Medicaid? For example: Can the school district obtain an Rx from a doctor, have the Rx on file for use with claims?

- It is important to understand that an order or referral for therapy services must be separate from the IEP. As of July 1, 2017, all MSP claims for therapy services must include the NPI of an ordering or referring practitioner. Services furnished pursuant to an IEP document formulated by a team, without an express prescription or referral from an appropriate practitioner under 42 CFR 440.110, are not reimbursable by Medicaid. A prescribing physician or licensed practitioner must be enrolled in Medicaid, and the physician or practitioner's NPI must appear on the claim. These federal regulations apply regardless of the service delivery model. There is no exception in any of these regulations for services furnished under an IEP. As such, claims lacking an appropriate prescription, order, or referral will not be reimbursed by Medicaid.

At what point in the IEP planning process should an OT/PT/SLP/Audiology referral occur?

- Guidance from the Ohio Department of Education (ODE), and in accordance with the Individuals with Disabilities Education Act (IDEA), the primary purpose of the Evaluation Team Report (ETR) is to determine if the student qualifies as a "student with a disability." If

the student does qualify as a student with a disability, it is the Individualized Education Plan (IEP) team that determines placement and services for the student, not the team who writes the ETR. The referral could not be completed until after the IEP team agrees to the plan as a whole. The IEP can be developed with information collected and indicated in the ETR as well as other data specific to the students' placement. If that plan includes therapy services, then the therapist who was part of the IEP planning team should make a referral for any medical services. If the referral is not made at this point, it could be made by the respective therapists who serve the location associated with the student's placement.

Is it ethical for OT/PT/SLP/ and Audiologist to make referrals to themselves?

- ODM expects that a referring therapist would provide the same recommendation for services whether or not they will or will not be providing those services; however, ODM is not the authority for ethical or legal recommendations related to this practice. Ethical and legal questions should be directed to the appropriate OT, PT, SLP, and Audiology Boards.

What should be done with a completed referral?

- Each school district may have their own plan for appropriately filing completed forms. Therapist should keep a copy of this referral in their own documentation records.

Will ODM allow a provider agreement to be retroactive (up to 12 months) to encompass dates on which the provider furnished services to Medicaid consumers?

- Yes. You may request the effective date of your Medicaid provider enrollment to be retroactive up to twelve months prior to the application date or to the date of your NPI enumeration (whichever comes first). This can only be selected at the time of application and cannot be changed once the application has been submitted.
- Example #1: You submitted your Ohio Medicaid provider enrollment application on June 1, 2017 but obtained your licensure and NPI more than a year prior, on March 15, 2016. By checking the provision box, your provider enrollment will be backdated with an effective date of June 1, 2016.
- Example #2: You submitted your Ohio Medicaid provider enrollment application on June 1, 2017 and obtained your licensure and NPI on March 15, 2017. By checking the provision box, your provider enrollment will be backdated with an effective date of March 15, 2017.

As an OT, PT, SLP, or audiologist, where can I find information and resources about this requirement?

- MSP Definitions: [5160-35-01 Definitions.](#)
- Qualifications to be a MSP Practitioner: [5160-35-02 Qualifications to be a medicaid school program \(MSP\) provider.](#)
- MSP Reimbursement: [5160-35-04 Reimbursement for services provided by medicaid school program \(MSP\) providers.](#)

- MSP Authorized Services: [5160-35-05 Services authorized for medicaid coverage that can be provided by medicaid school program \(MSP\) providers.](#)
- Other Covered Services: [5160-35-06 Other services, medical supplies and equipment authorized for medicaid coverage that can be provided by medicaid school program \(MSP\) providers.](#)
- <http://medicaid.ohio.gov/PROVIDERS.aspx>
- [Step-by-step instructions for Therapist enrollment.](#)
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