



Network Notification

Notice Date: November 16, 2017
To: Ohio Medicaid Health Partners
From: CareSource®
Subject: Upcoming Deadline for Submitting Ohio Medicaid Provider Number Applications
Effective Date: December 16, 2017

If you recently received a letter from the Ohio Department of Medicaid (included on the [next page](#)) requiring that you submit an Ohio Medicaid Provider Number application, CareSource reminds you to act quickly.

You must have a new Medicaid ID number if you wish to continue providing services for Medicaid recipients. A copy of the letter from the Ohio Department of Medicaid is enclosed and contains directions on how to apply for your Ohio Medicaid Provider Number.

Your current Medicaid ID will expire on Dec. 16, 2017. If your current number expires and you have not obtained a new Medicaid ID, you will not be reimbursed for your services provided for CareSource members.

We appreciate your participation with CareSource and look forward to our continued partnership. **For any questions related to your Medicaid ID, please reach out directly to the Ohio Department of Medicaid's Provider Hotline at 1-800-686-1516.**



In order to comply with new federal rules (42 CFR 438.602), you are required to submit a new application to the Ohio Department of Medicaid, if you wish to continue providing services through one of the Ohio Medicaid managed care plans.

The new enrollment process is all electronic and only takes a few minutes to complete. You can start the process by selecting “Enrollment and Support” from the “Provider” heading or you can enter in the link listed below. This requirement to submit a new application to Ohio Medicaid will not cause you to also submit a new application to your current managed care companies. Ohio Medicaid will work directly with the managed care plans during this transition.

If your current number expires and you have not obtained a new Medicaid ID, you will not be able to be reimbursed for any of your services. Your current Medicaid ID will expire on December 16, 2017.

How to Submit a Provider Application

1. Go to the MITS Portal at:
<http://medicaid.ohio.gov/providers/EnrollmentandSupport/ProviderEnrollment.aspx>
2. Select the “I need to enroll as a provider to bill Ohio Medicaid” option.
3. Follow the system prompts and provide the requested information.
4. When you have completed all steps, please submit your application.

You will be able to view the status of your application online using your Application Tracking Number (ATN). Thank you for participating in the Ohio Medicaid program, and we look forward to your timely response. If you need any assistance, please contact our Provider Hotline (800) 686-1516.

Sincerely,
The Ohio Department of Medicaid