

Updating Provider Network Management (PNM) Module Data as the ODM System of Record

September 28, 2023



Meeting Agenda

Purpose: The purpose of this presentation is to update providers, trading partners, and provider associations about guidance released to the Next Generation Medicaid managed care organizations (MCOs), OhioRISE plan, and MyCare Ohio plans (MCOPs) on the integration and use of the Ohio Department of Medicaid's (ODM) Provider Network Management (PNM) module data, including the provider master file (PMF) and all supplemental files.

- 1 ODM's System of Record
- 2 PNM Module Data Integration Expectations
- 3 Expectations for Providers to Avoid Claims Denials
- 4 Provider and Trading Partner Actions
- 5 Q&A



ODM's System of Record: Prover Network Management (PNM) Module

Effective date February 15, 2023

The PNM Module became the ODM's system of record for Medicaid provider data.

- The Managed Care Entities (MCEs) began to transition to utilize Provider Master File (PMF), a complete extract of provider data, for daily reconciliation of provider data to:
 - » Ingest information (daily), including provider affiliation, to ensure timely and accurate claims payment.
 - » Validate (daily) provider eligibility and ineligibility.
 - » Ensure accurate and aligned provider data in provider directories.
 - » Evaluate network adequacy.
 - » Outreach to providers to confirm updates & direct to the PNM Module for updates.

PNM Module Data Integration Expectations



ODM's expectation and goal is that for each Medicaid provider the PNM Module and the MCE systems data is current, aligned, and consistent for the purpose of adjudicating/paying claims and updating provider directories.



Providers are directed to update their ODM record in the PNM Module.



Providers will <u>not</u> send changes directly to MCEs when the information is already included in the PNM Module. Provider data or information that is not collected in the PNM Module and therefore can be sent directly to MCEs when requested (e.g., provider capacity, telehealth availability, specialist information) may be collected from providers by the MCEs and maintained in their systems to meet provider directory requirements.



MCEs must not accept changes from providers into their own systems that are inconsistent with PNM system data shared through the PMF.



MCEs will conduct daily reconciliation, 7 days per week, of Medicaid provider data from the PNM Module.



Expectations for Providers to Avoid Claims Denials

PNM as the System of Record

Effective October 20, Next Generation
Medicaid managed care organizations (MCO),
the OhioRISE plan, and MyCare Ohio plans
must use provider data from Ohio Medicaid's
Provider Network Management (PNM) module
as it is the official system of record. To ensure
the provider data sent from the PNM to the
managed care entities (MCE) is accurate, it is
imperative that your records are updated
within the PNM Module. Effective October 20,
if your data in the PNM module does not
match your data on the submitted claim, your
claims will be denied for payment.

Expectations and Communications Timeline

What is new and expected of providers and trading partners?

- MCEs will only use data and information ODM has on file from each provider as entered in the PNM Module to adjudicate claims.
- MCEs will not be using historical or other information outside of the PNM Module data.
- If the provider data in the PNM Module does not match data the submitted claim, the MCE will be denying claims for payment.

Calendar of Communication

- IHD Help Desk messaging, ODM Press article, and website announcements will be distributed September 28.
- Notifications will be sent directly by email and a text campaign to providers will begin the week of October 6.
- ODM will be monitoring the MCE claims denials and will work with providers to mitigate any issues after the October 20 transition.



Expectations for Providers to Avoid Claims Denials

The MCEs will integrate and use the Provider Network Management (PNM) Module data, to ensure the prompt and timely adjudication and payment of claims for services rendered to Medicaid managed care members. Data elements included on this slide will be matched to data submitted on claims.

All provider data within the PNM Module should be updated as soon as changes occur.

MCEs conduct daily reconciliation of Medicaid provider data.	
Provider Name	Rendering Provider NPI
Group and Group Member Affiliations	ORP Provider NPI
Group/Provider Enrollment Status with ODM (Active/Not Active)	Rendering Provider Taxonomy
Provider Enrollment Date	Rendering Specialties and Specialty Effective and End Date
Provider Type	Specialty Types (primary and secondary) for Behavioral Health
Provider Specialty(ies)	Change of Provider Type
Provider ZIP Code	Certifications (i.e. CLIA Information, vent)
Billing Provider NPI	Educational Markers
Provider Medicaid ID	



Provider Actions

1. Check that all data submitted on a claim and within the <u>PNM Module</u> (e.g., addresses, affiliations, specialties, locations) is accurate and up to date.

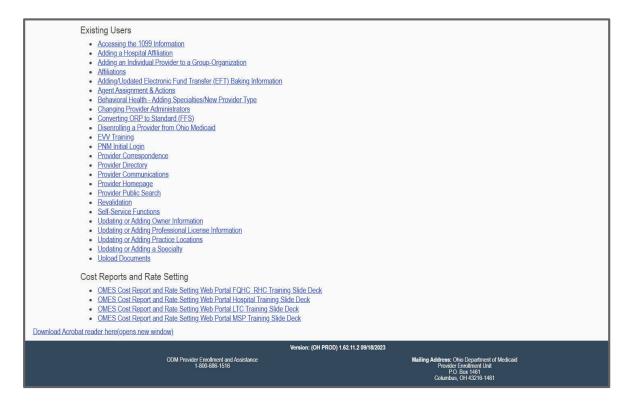




Provider Actions

2. Access Provider Education & Training Resources within the PNM 'Learning' tab for step-by-step instructions.





For technical support or assistance, contact Medicaid's Integrated Helpdesk (IHD) at 800-686-1516 and follow the prompts for Provider Enrollment (option 2, option 2) or email https://example.com/linear-representatives are available 8 a.m.-4:30 p.m. Eastern time Monday-Friday.

Provider Help Desk FAQ



Provider Actions

3. Continue to update data in the PNM Module as soon as changes occur and carefully review to match data submitted on claims. MCEs will use this information as the system of record moving forward.

For technical support or assistance, contact Medicaid's Integrated Helpdesk (IHD) at 800-686-1516 and follow the prompts for Provider Enrollment (option 2, option 2) or email https://example.com/linear-state-part of the prompts for Provider Enrollment (option 2, option 2) or email https://example.com/linear-state-part of the prompts for Provider Enrollment (option 2, option 2) or email https://example.com/linear-state-part of the prompts for Provider Enrollment (option 2, option 2) or email https://example.com/linear-state-part of the prompts for Provider Enrollment (option 2, option 2) or email <a href="https://example.com/linear-state-part of the prompts for Provider Enrollment (option 2, option 2) or email <a href="https://example.com/linear-state-part of the prompts for Provider Enrollment (option 2, option 2) or email <a href="https://example.com/linear-state-part of the prompts for Provider Enrollment (option 2, option 2) or email <a href="https://example.com/linear-state-part of the prompts for Provider Enrollment (option 2, option 2, option 2) or email <a href="https://example.com/linear-state-part of the prompts for Provider Enrollment (option 2, option 2, option 2) or email <a href="https://example.com/linear-state-part of the prompts for Provider Enrollment (option 2, option 2,

Q & A

Thank you!