<u>**Next Generation of Ohio Medicaid's Managed Care Program**</u>

Ohio Department of Medicaid (ODM) is launching new initiatives as a part of the Next Generation program to emphasize a more personalized care experience for members and to increase program transparency and accountability.

On October 1, ODM launched **Centralized Credentialing in the Provider Network Management (PNM)** module and the **Single Pharmacy Benefit Manager (SPBM)**. These efforts are designed to reduce provider administrative burden and provide enhanced pharmacy services across all managed care plans and members. The SPBM does not apply to MyCare Ohio plans, which will continue to provide benefits to Ohioans who receive both Medicaid and Medicare benefits, with enhanced coordination of medical, behavioral, and long-term care services.

Effective October 1

Initiative	Key changes and benefits
Centralized Credentialing/PNM module	• Providers access the PNM module using an OH|ID login instead of through Medicaid Information Technology System (MITS). • New enrollment applications, record updates, revalidation/reenrollment, and online demographic updates in the PNM module. • Redirects to MITS for fee-for-service (FFS) claims, prior authorization (PA) submissions, financial reporting, etc., until December 1. • Redirects all users to MITS for member eligibility verification. • Single entry-point for enrollment, revalidations, and credentialing. • Provider demographic updates can be submitted through a complete self-service feature rather than sending emails or mailing forms. • More options are available for providers to identify all practice locations and add additional details to the provider directory. • Providers submit a single enrollment and credentialing application to be eligible to contract with any of Ohio Medicaid's managed care organizations (MCO). • Manual paper-based processes can be bypassed using the PNM's online features. • A comprehensive provider directory is available at the state level. • Reduced administrative burden, allowing more time to focus on patient care.
SPBM	• Providers access the Gainwell SPBM secure portal using an OH|ID login. • Providers must be contracted with the SPBM vendor, Gainwell Technologies, to provide pharmacy services to managed care members. This does not apply to MyCare Ohio plans. • All managed care members have new Medicaid ID cards. If a member presents an old Medicaid ID card, use the Gainwell

	RxBIN (024251), Gainwell RxPCN (OHRXPROD), and 12-digit Ohio Medicaid member ID (formerly MMIS ID).
	• Consolidated processing of retail pharmacy benefits and maintain a pharmacy claims system.
	• Providers only work with one pharmacy benefit manager (PBM) versus multiple PBMs.
	• Access to easily check the Unified Preferred Drug list (UPDL), Preferred Diabetic Supply list, Specialty Drug list, and Quantity Limits list through the secure web portal.
	• Ability to check eligibility of Ohio Medicaid members, submit and view prior authorizations and claims, and get help through the secure web portal.

The February 1, 2023, launch of the Next Generation of Ohio Medicaid program includes the implementation of the Next Generation managed care plans, Electronic Data Interchange (EDI), and the Fiscal Intermediary (FI). The Next Generation managed care plan changes and EDI trading partner transactions do not apply to MyCare Ohio plans.

Effective February 1, 2023

Initiative	Key changes and benefits
Next Generation managed care plans	• Seven Next Generation MCOs begin providing services to Ohio Medicaid members. • Updated Provider agreements with the MCOs to ensure consistency and minimize differences between how providers interact with the Next Generation managed care plans. • Members will experience benefits that help address their individual healthcare needs such as increased access to care coordination and care management supports. • All managed care prior authorizations are submitted directly to the managed care plan. • Continued use of managed care plan portals, including the new plans' portals, for direct data entry of claims submission and prior authorizations. All managed care PAs are submitted directly to MCOs.
New EDI for trading partners	• Trading partners claim inquiry and status searches. • Member eligibility searches and verification will be available via the EDI. • All trading partners must be authorized to work with Deloitte, the new EDI vendor. • EDI claim transactions for FFS and managed care are submitted by the trading partner to the new EDI vendor. • EDI will not accept prior authorizations of any kind.
Fiscal Intermediary	• Processing of FFS claims submitted via the EDI. • Replaces the following OAKS functionality:

	○ Payment of FFS providers. ○ Electronic funds transfer (EFT) bank account information changes must be made in the PNM module. ○ All other payments as directed by the state (Comprehensive Primary Care, Hospital Care Assurance Program). - Routing of managed care claims and PA requests. - Receipt and validation of encounters received from MCOs resulting from their claims processing. - Data exchange with MCOs. - Payment to providers for FFS claims submitted to via EDI. - Payment of per member per month capitation rates to MCOs (includes rate management). - Other payments as directed by the state. - Management of financial data for Medicaid and related programs operated by the Ohio Medicaid Enterprise System (OMES). - Cost reporting link redirects to the new Myers and Stauffer cost reporting tool.

In the following months

ODM will fully launch the OMES **PNM** and **EDI** modules to provide streamlined processes for claims, PAs, and other administrative tasks for providers. PNM claims and prior authorizations and EDI trading partner transactions do not include MyCare Ohio plans.

Initiative	Key changes and benefits
PNM module streamlined claims, PAs, and administrative processes.	- Claim inquiry and status searches available in the PNM module. - Member eligibility searches and verification available in the PNM module. FFS, managed care, and OhioRISE claims and PA requests are submitted through the PNM module for providers not submitting via trading partner. - Providers are required to select the payer to whom the claim or PA request will be submitted. - FFS PA requests must be submitted through the PNM module, as the EDI option through a trading partner cannot be used. - Email/text notifications of notices including financial notices, claim denials, and revalidation requests.
EDI for trading partners	Managed care PAs accepted via the EDI.

Learn more and get help with the Next Generation of Ohio Medicaid program

There are a variety of resources available to help answer provider questions, understand the Next Generation program, and address member inquiries. Please review the resources below to learn more.

Resources for Ohio Medicaid providers

- Visit the Resources for Providers webpage of the Next Generation website to learn about how the Next Generation program impacts Ohio Medicaid providers.
- Read what launched for Ohio Medicaid providers, pharmacists, and prescribers on October 1 by viewing the October 1 launch overview document Ohio Medicaid providers, pharmacists, and prescribers.
- Learn about the OhioRISE program and find resources on the OhioRISE webpage of the Next Generation website.
- Help desks are available to answer questions that Ohio Medicaid providers have. Questions related to the PNM module, OH|ID, or portal password support should be directed to the ODM Integrated Help Desk (IHD) at 800-686-1516 or IHD@medicaid.ohio.gov. Provider representatives are available during special hours through December 23, 7 a.m.-7 p.m. Monday-Friday and Saturdays 8 a.m.-5 p.m. After this, regular hours will resume, which are 8 a.m.-4:30 p.m. Monday-Friday.

Resources for Ohio Medicaid members

- The Resources for Individuals webpage of the Next Generation website is the primary page in which Ohio Medicaid members can learn about how the Next Generation program impacts them. Members can also view the following pages to learn more about specific initiatives:
- Read what launched for Ohio Medicaid members on October 1 by viewing the October 1 launch overview document for Ohio Medicaid members.
- Learn about the OhioRISE program and find resources for members on the Resources for Members and Families of the Next Generation website.
- Help desks are available to answer questions Ohio Medicaid members have. Questions related to their Next Generation managed care plan, including those related to Medicaid managed care eligibility, coverage, or plan selection should be directed to the Ohio Medicaid Consumer Hotline at 800-324-8680. Representatives are available Monday-Friday, 7 a.m.-8 p.m. (8 a.m.-5 p.m. on February 20), and Saturdays 8 a.m.-5 p.m. On Sundays, February 5, 12, and 19, representatives are available 8 a.m.-5 p.m.