

Becoming an Agency Provider

Please note that prior to starting the DODD Agency Certification process, your business must already be established and registered with the State of Ohio, IRS, Unemployment and Bureau of Workers Compensation

Review the Steps for Becoming an Agency Provider

<https://dodd.ohio.gov/wps/portal/gov/dodd/providers/initial-renewal-certification/2become-provider-agency>

<https://clarkdd.org/how-to-become-a-provider/>

Learn about Provider Certification and the Services you will provide

<https://dodd.ohio.gov/wps/portal/gov/dodd/forms-and-rules/rules-in-effect/administrative-rules-list>

Rule 5123-2-08 – Provider Certification- Agency Providers and rules for all the services available can be found on this page

Create your Provider Account with DODD

<https://dodd.ohio.gov> Click the login icon on the top right and then click Create New Account

After signing up, you will receive a series of emails. Follow those instructions to get your account set up finalized, and once it is final, your account will be active.

Make sure you WRITE DOWN and/or REMEMBER the email address and password you used to create your account AND your DODD Account Username and Password

Gather the Required Documentation and Complete Required Training

FOR THE AGENCY DIRECTOR OF OPERATIONS- *Director of Operations shall be directly and actively involved in day-to-day operation of agency provider and oversee provision of services. A Director of Operations CANNOT be in name only.*

- ☐ Current BCII (Background Check) using reason code 5123.081
 - Must get an FBI check as well **if** have not been a resident of Ohio for the previous 5 consecutive years
- ☐ Verification of Age (must be at least 21), COPY OF VALID BIRTH CERTIFICATE
- ☐ Valid Social Security Card
- ☐ Valid government issued photo identification (ex. Copy of Valid Driver's License or State ID Card)
- ☐ Has at least 1 year of full-time or equivalent part-time paid work experience in the provision of specialized services **OR** 4 years if experience providing care to a family member (parent, child or sibling) with a developmental disability
- ☐ Has at least 1 year of full-time or part-time equivalent paid work experience in: supervision of employees; development, oversight and/or supervision of programs or services; **and** financial management of an organization
- ☐ High School Diploma / Certificate of High School Equivalence
- ☐ Either a Bachelor's Degree from an accredited university or college **OR** 4 years of full time paid work experience as a supervisor of specialized services **OR** 4 years of experience providing care to a family member (parent, child or sibling) with a developmental disability
- ☐ Is able to read, write and understand English at a level sufficient to comply with all requirements

REQUIRED TRAINING FOR DIRECTOR OF OPERATIONS

- ☐ Department-provided web-based orientation for Directors of Operations including:
 - “National Alliance for Direct Support Professionals” Code of Ethics
 - Rights of the individuals set forth in section 5123.62 of the Revised Code and the agency provider’s responsibilities set forth in sections 5123.63 and 5123.64 of the Revised Code
 - Facilitating community participation and integration for individuals served
 - Service documentation and billing for services
 - Rule 5123-17-02 of the Administrative Code (MUI Rule) including a review of health and welfare alerts issued by the Department
 - Internal compliance programs
- ☐ Department-provided training in empathy-based care
- ☐ Electronic Visit Verification (EVV) Training Certificate – for the agency **(only applicable if providing Homemaker Personal Care, Participant Directed Homemaker Personal Care and/or IO Waiver Nursing)**

FOR THE AGENCY

- ☐ Certificate of good standing from the Secretary of State verifying the Agency’s status as a for-profit corporation, nonprofit corporation, limited liability company or limited liability partnership
- ☐ Proof of an unencumbered line of credit in the agency provider’s name in an amount of at least \$10,000
- ☐ Evidence of comprehensive general liability insurance of at least \$1,000,000 that includes coverage for an individual’s losses due to theft or property damage
- ☐ Submit proof of staff (must have at least 1 employee in addition to the Director of Operations)
- ☐ IRS letter verifying Employer Identification Number
- ☐ BWC Employer Identification Number
- ☐ Must be current with payroll taxes, workman’s compensation premiums and unemployment compensation premiums
- ☐ Disclose the name, country of birth, date of birth and social security number of any person owning a 5% or more interest in the agency (including a direct, indirect, security, or mortgage financial interest)
- ☐ State of Ohio Supplier ID Number (see below for details)
- ☐ Submit written policies and procedures that address the agency’s management practices in:
 - Person-centered planning and self-determination
 - Individual’s satisfaction with services delivered
 - Internal monitoring and evaluation procedures to improve services delivered
 - Supervision of staff
 - Training plan as described in paragraph(F)(1) of Rule 5123-9-08
 - Service delivery
 - Background investigations for employment in accordance with Rule 5123-2-02 of the Administrative Code
 - Volunteers (when the agency provider engages volunteers)
 - Confidentiality of individual’s records
 - Management of individual’s funds
 - Reporting and investigation of major unusual incidents and unusual incidents
 - Documentation and billing for services
 - Annual written notice to each employee explaining the conduct for which one may be placed on the Abuser Registry and setting forth the requirement for each employee to notify the agency in writing if they are ever formally charged with, convicted of, or plead guilty to any of the offenses listed in the Revised Code within fourteen days after the date of the charge, conviction or plea

Additional Policies may be required depending on services selected to provide

Background Check FYI

All Director of Operations applicants must complete a BCII Background Check. FBI Checks are required if you have lived outside of Ohio in the last 5 years.

Ensure the proper code is being used: BCII – 5123.081 , FBI – 5126.28

Results must be sent directly to DODD. Do not send the results to the County Board.

DODD

Office of Provider Certification

30 E. Broad Street, 13th Floor

Columbus, Ohio 43215

State of Ohio Supplier ID Number FYI

New State of Ohio suppliers must first register online with the Ohio Office of Budget and Management (OBM) using the Supplier Self-Registration module of the Ohio Administrative Knowledge System (OAKS). Go to www.supplier.obm.ohio.gov and click 'Register a New Account'. To complete this process, you need access to a printer as well as a scanner. The registration process will take approximately 15 minutes to complete.

You need the agency's bank account information. You will also be prompted to fill out a W-9 for the agency (link provided at the website).

Once your agency is assigned a Supplier Number, you will need to upload a copy of an email or screenshot of your account showing the agency name and assigned Supplier Number in the document upload.

For an agency, you will fill out all the information in the name of the agency and the contact person should be the Owner of the Business)

Complete the Application

Login to your account on <http://dodd.ohio.gov/Pages/default.aspx> by using the login button towards the top right of the screen.

Click Applications on the top of the page then on the right select PSM-portal from the menu to begin the application

The application is not considered complete until all required documentation is submitted and the application fees have been paid

All documents must be separately scanned and uploaded. They CANNOT all be contained in one file.

HELPFUL HINT: When you are gathering the documentation, scan and upload them to your computer as PDF files, and name the file what it is (ex. Driver's License, Social Security Card, etc.).

Application Fees

The application fee is non-refundable. It must be paid with a credit/debit card or electronic check. Agency providers pay a non-refundable application fee AND a non-refundable Medicaid Application fee.

	Initial Certification	Renewal Certification	Add Service(s) during Certification
Small Agency Serves 50 or less individuals	\$800	\$800	\$75
Large Agency Serves 51 or more individuals	\$1600	\$1600	\$150

There is also a Medicaid Application Fee of \$586.00 that is in addition to the fees listed above

The application fee is waived for exclusively one or more of the following services; Assistive Technology, Environmental Accessibility Adaptations, Functional Behavioral Assessment, Home-delivered meals, Interpreter Services, Non-Medical Transportation only when the applicant is an operator of Commercial vehicles, Nutrition Services, Participant Directed Homemaker Personal Care, Participant/Family Stability Assistance, Social Work, Specialized Medical Equipment and Supplies, Support Brokerage and/or Transportation only when the applicant is an operator of Commercial vehicles.

What happens after the Application is submitted?

Once DODD receives your completed application, application fee, and the background check, your application will be reviewed.

If your application requires additional information, DODD will contact you via email to let you know. If you fail to submit the needed information within the time line, your application will expire, and you will have to start over again.

The Department of Medicaid will complete a site visit to ensure the setting meets all of the requirements.

Once you are a certified provider, you will receive your certification letter via email.

Contact your county board and let them know you are interested in providing services.

Additional Training and Ongoing Requirements/Responsibilities

Agency Providers are required to complete training on an annual basis once certified (both the Director of Operations and agency employees) as well as maintain certain documentation and follow certain reporting criteria. Agencies are also required to comply with federal, state, and local requirements pertaining to the employment of staff. It is the responsibility of the agency provider to know of and understand what is required by DODD and any other entities. You can find the DODD information within the Provider Certification- Agency Provider Rule as well as the rule(s) specific to the services you provide.

For More Information

YOU CAN CONTACT:

Developmental Disabilities of Clark County

Sarah Hess, Provider Liaison

2527 Kenton St., Springfield, OH 45503 (P) 937-346-0740 (F) 937-328-4575 (E) shess@clarkdd.org



DODD-

<http://dodd.ohio.gov>

1.800.617.6733, press 5 for certification questions