

PROVIDER APPROVAL CHECKLIST and Marketing guidance

Date Completed	Provider responsibilities in <i>Italics</i>
	<p><i>Provider applicant Completes the Certification online Application for the intended services via the DODD’s “Provider Certification Wizard” (P.C.W.), supplies supporting documentation, signed application forms, and the application fee. (<a href="http://www.dodd.ohio.gov">www.dodd.ohio.gov</a>) ?s: 800-617-6733, option 3</i></p> <p>Link to Certification page of DODD site:  <a href="https://doddportal.dodd.ohio.gov/PRV/certification/Pages/default.aspx">https://doddportal.dodd.ohio.gov/PRV/certification/Pages/default.aspx</a></p>
	<p><b>If applicable*</b>, Applicant, or a designated staff member (if agency), completes the FCBDD 8-hour Waiver training program, offered to familiarize new providers with DODD rules and procedures and/or meet certification standard.</p> <p><b>*Optional at FCBDD, as training is offered elsewhere.</b></p>
	<p>*Upon request, FCBDD can provide sites for obtaining a current criminal background check, BCII and FBI (if applicable).  <a href="mailto:provider.relations@fcbdd.org">provider.relations@fcbdd.org</a> or 614-342-5944</p> <p>If the report is received at FCDD, Provider Relations forwards a copy to the applicant, and attaches instructions for follow-up with DODD.</p>
	<ul style="list-style-type: none"> <li>- <b>DODD staff and the P.C.W.</b> process applications and supporting documentation and the P.C.W. notifies the applicant via email of any necessary corrections, or approves the application as submitted.</li> <li>- <b>DODD</b> issues an electronic <b>“Initial Approval Letter”</b> (confirming the provider’s effective date and billing number), <b>and later a Final Approval Letter</b> (confirming the provider’s eligibility to bill), via email.</li> </ul>
<p><i>Important -&gt;</i></p>	<p><b><i>Provider submits a copy of the “Initial or Final Approval Letter” issued by DODD</i></b> {containing the MBS/DODD Contract Number, effective date and approved service(s)} <b><i>along with a completed “PROVIDER CONTACT DATA COLLECTION SHEET” (used to collect full current provider contact data).</i></b></p> <p>➔ Following receipt of above documentation, FCDD supplies Marketing instructions to the provider.</p> <p>Refer to the link below, on the DODD site, which supplies information on permissible marketing opportunities.  <a href="https://doddportal.dodd.ohio.gov/PRV/MP/Pages/default.aspx">https://doddportal.dodd.ohio.gov/PRV/MP/Pages/default.aspx</a></p>
	<ul style="list-style-type: none"> <li>-Parents/guardians/Individuals/advocates personally contact providers with whom they are interested in scheduling an interview meeting. If chosen, the interviewer/parent/guardian/Individual, notifies the Service Coordinator of their selection.</li> <li>-The Service Coordinator adds the new Provider to the Individual’s Service Plan.</li> </ul>
	<p><b><i>Contact Office of Provider Relations to request DODD Billing guideline resources and FCDD Documentation Training information( if needed), and/or to request a list of Medication Administration/Delegated Nursing Training sites, if indicated as a requirement per an assigned ISP.</i></b></p>