Claim Denials for No Medicaid Enrollment – Groups and Individuals

Information for Medicaid and MyCare Ohio providers

Important Notice: The Ohio Department of Medicaid (ODM) has sent the “Medicaid Enrollment of Group Practices” memo to the Managed Care Plans (MCPs). ODM requires provider groups and individuals to be enrolled with Ohio Medicaid, and to have an active Medicaid Identification (ID) Number for each billing National Provider Identifier (NPI).

The “Medicaid Enrollment of Group Practices” ODM memo enables MCPs to deny provider claims for groups and individuals who remain unenrolled despite multiple outreach attempts.

Beginning for dates of service on or after Aug. 15, 2021, Molina will deny claims for unenrolled providers. Providers will receive the following remit message, “N767 - The Medicaid state requires provider to be enrolled in the member’s Medicaid state program prior to any claim benefits being processed,” and must take the action noted below to enroll or reactivate enrollment with ODM to continue receiving payment for rendering services to Molina members.

Please note, if you are currently enrolled and active with Ohio Medicaid, you must maintain your active status or risk future claim denials as referenced above. As Molina has reviewed the enrollment status of our network, this issue appears to be particularly impactful to Community Behavioral Health Providers (provider types 84/95).

Please follow the instructions below to enroll as a group and/or individual with Ohio Medicaid or reinstate your enrollment if it has lapsed.

Enrollment is available:
- Through the Medicaid Information Technology System (MITS) portal, or
- Providers can start the process at https://medicaid.ohio.gov

In addition, ODM requires every billing NPI to have a unique Medicaid ID number.

To view the “Medicaid Enrollment of Group Practices” memo, visit https://medicaid.ohio.gov and under “Resources for Providers” select “Managed Care” then “Policy” and “Managed Care Policy Guidance.” Please note that Medicaid enrollment is also required by the Code of Federal Regulations (CFR) rule 42 CFR 438.602.

If you have questions regarding the status of your Medicaid ID, or the status of your enrollment application, please contact ODM.