

## Update to Prior Communication: Waiver Provider Signature Requirement

### *Information for the MyCare Ohio network*

**All** waiver service providers for MyCare Ohio waivers are required to sign the individual's person-centered service plan (PCSP) previously known as the waiver services plan (WSP).

Providers delivering "direct care" services (personal care, waiver nursing, home-care attendant, Choice home-care attendant, out-of-home respite, enhanced community living, adult day health services, social work counseling and independent living assistance) with waiver as the payer began this process on Jan. 1, 2019. Effective on Feb. 18, 2019 this process applies to all waiver service providers.

This process meets Ohio Department of Medicaid (ODM) requirements, in compliance with Center for Medicare & Medicaid Services (CMS) rule 42 CFR 441.301 requiring the service plan "be finalized and agreed to, with the informed consent of the individual, in writing, and by all people and providers responsible for its implementation."

The provider's signature is required when:

- a new service is authorized
- an existing service authorization is adjusted and anticipated to continue for the duration of the service plan
- a new service plan has been issued

Only the provider affected by the change needs to provide a signature. The provider's signature shows the provider acknowledges and agrees to provide the waiver service, as authorized in the waiver service plan. The signed service plan must be returned by the provider to the care management agency.

### Procedure

Each provider's signature will be required at the time the provider receives the waiver service authorization from Molina.

To facilitate this process, Molina will provide a signature page with the waiver service authorization listing the name of the provider who is required to sign, the corresponding authorization number and a space for the provider's signature.

Providers will continue to receive the waiver service authorization along with the signature page via the same format it is currently received by the provider. The signature form should be signed and returned to Molina via secure email to [WaiverServiceAuthorizations@MolinaHealthcare.com](mailto:WaiverServiceAuthorizations@MolinaHealthcare.com).

When a provider agrees to provide new services or accepts a permanent change in the service plan, the care manager or waiver service coordinator will provide a verbal reminder to the provider of the need to sign the waiver service plan upon receipt. The provider will then receive the signature page along with the waiver service authorization.

Should the provider not return the signed provider signature page, Molina will send a second copy of the signature page for provider to sign and return.

### Questions?

Provider Services – (855) 322-4079  
8 a.m. to 5 p.m., Monday to Friday  
(MyCare Ohio available until 6 p.m.)

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