



# Ohio Department of Mental Health

30 East Broad Street  
Columbus, Ohio 43215-3430

**Date:** June 5, 2008

**To:** Community Medicaid Participating ODMH Certified Community  
Mental Health Agencies

**From:** Angie Bergefurd, Assistant Deputy Director, Administrative Services  
Ohio Department of Mental Health

**Re: **Reminder: Managed Care Prior Authorization Exemption for 2<sup>nd</sup> Generation  
Anti-Psychotic Prescriptions Spreadsheets****

This is a follow-up to my memo of March 25, 2008, regarding the Medicaid Managed Care Prior Authorization Exemption for 2<sup>nd</sup> Generation Anti-Psychotic Prescriptions for the ABD population. This process will exempt the medications listed in the memo from prior authorization requirement when prescribed by psychiatrists that are on staff or on contract with a community mental health agency for the ABD population. The memo and the "Psychiatrist Data Specifications" spreadsheet are located on the Ohio Department of Mental Health's website: <http://www.mh.state.oh.us/medicaid/general/medicaid.index.html>. If your agency is in receipt of this memo, ODMH has not received a completed spreadsheet from your agency. If your agency does not submit a spreadsheet, the psychiatrist(s) must obtain prior authorization for the listed medications when required by a managed care plan.

**In order to qualify for the PA exemption, your agency will need to perform the following actions on the enclosed "Psychiatrist Data Specifications" spreadsheet:**

1. Identify all of the **psychiatrists** who are either directly employed by or contracting with your agency.
2. Complete the spreadsheet with individually identifying information about each psychiatrist. See the instructions on Page 2.
3. Return the completed spreadsheet **by June 27, 2008** to Margie Herrel via email [herrelm@mh.state.oh.us](mailto:herrelm@mh.state.oh.us) or U.S. Mail to the following address:

Margie Herrel, Manager of Program Administration  
Ohio Department of Mental Health  
Office of Medicaid  
30 East Broad Street, 7<sup>th</sup> Floor  
Columbus, OH 43215-3430

## Completion of the Spreadsheet

- When completing the spreadsheet, please complete the information in the “Status” column after removing the written requirements.
- Use a separate spreadsheet for each psychiatrist.
- Please note that if the psychiatrist has already obtained an individual National Provider Identifier (NPI Type-1), you can gather or confirm some of the identifying information through the NPI registry available at <https://nppes.cms.hhs.gov/NPPES/NPIRegistryHome.do>. Simply select “Individual Provider” and enter the psychiatrist’s name and state. If the provider has not obtained an individual NPI you should still complete the spreadsheet leaving the NPI information blank.
- In addition, an Ohio Medicaid Provider Billing ID (i.e., the 7 digit Medicaid Provider Number) is required for a prescribing psychiatrist. **If the psychiatrist currently does not have an Ohio Medicaid Provider Number, the individual can apply for a Medicaid Provider Number through ODJFS Provider Network Management by calling 1-800-686-1516 and following the prompts.**
- All fields **must** be completed if it is indicated in the “Status” field as “required”.
- Include your agency’s name and MACSIS Unique Provider Identifier (UPI) in the “Affiliated Community Mental Health Center/Facility 1” field.

If you have any questions concerning these steps, please contact Margie Herrel via email [herrelm@mh.state.oh.us](mailto:herrelm@mh.state.oh.us) or phone (614-466-9655).

cc: Hugh Wirtz, Ohio Council of Behavioral Healthcare Providers  
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