

Quick Reference Guide: Changing Provider Administrators

Steps: *Each Medicaid ID only has one active Provider Administrator at a time. If the assigned Administrator is changed, all administrator rights/privileges to the Medicaid ID transfer to that single user's account.*

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Reg ID	Provider	Status	Provider Type	NPI	Medicaid ID	Specialty	DD Contract Number	DD Facility Number	Location	Effective Date	Submit Date	Revalidation Due Date
517965	Test Training	Complete	69 - Pharmacist	1316344583	9999883	PHARMACIST				03/09/22	03/23/22	03/23/22

A user with an Administrator role can assign their Administrator rights/privileges for a particular practitioner (Medicaid ID), to another user with the Provider Administrator role in PNM. To complete this process, the current Provider Administrator must have the OH|ID number for the 'new' Administrator being assigned. This would be common for Administrator transfers within the same organization.

Click **Account Administration**.

To request an Administrator change be completed by someone other than the current Provider Administrator, please proceed to Step 4.

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Medicaid ID: 9999877 Change admin to: 35522277

Name: Michael Trainer

Select Agent:

Search

Change Admin

From the drop-down menu, select the *Medicaid ID* of the provider who needs to be transferred to a new Provider Administrator.

Enter the OH|ID for the 'new' Provider Administrator that the administrator rights/privileges are being transferred to on the line labeled "Change admin to."

Once entered, click **Change Admin**.

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If PNM cannot locate an active Provider Administrator with the OH|ID ID entered, error messages display.

Review the OH|ID entered to ensure it is the correct user's information.

User ID entered should be a OH|ID account.

User ID entered does not exist.

My Providers Account Administration New Provider ?

Reg ID	Provider	Status	Provider Type	NPI	Medicaid ID	Specialty	DD Contract Number	DD Facility Number	Location	Effective Date	Submit Date	Revalidation Due Date
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No providers found

If the reassignment is successful, the Medicaid ID reassigned will no longer appear on homepage/dashboard of the 'previous' Provider Administrator and will now display for the 'new' Provider Administrator.

Disclaimer: It is the Provider's responsibility to keep information up to date in PNM. This includes specialties, license information, addresses, etc.

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Steps:

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Ohio Department of Medicaid PROVIDER NETWORK MANAGEMENT (PNM) SYSTEM ADMINISTRATOR CHANGE REQUEST

Each Medicaid ID, including individual practitioners, must have an assigned PNM Administrator to manage their provider data and assign agent roles as appropriate. **Each Medicaid ID can only have one active Administrator at a time.** If there is some business reason that the Administrator role must be changed or if a practitioner moves to another billing organization, the Ohio Department of Medicaid requires approval of the organization or individual practitioner, as appropriate, to make the Administrator change.

This form provides **two options** for changing the PNM Administrator role assignment.

Option 1	Change PNM Administrator from one individual to another in your organization, when the Self-Service PNM option is not available.
Option 2	Request to have PNM Administrator Role assigned to someone other than the individual practitioner when someone else is going to maintain the individual's PNM provider data.

If requesting to become the Provider Administrator for a specific Medicaid ID, please access the [PNM System Administrator Change Request Form](#) on the Ohio Department of Medicaid website.

**This form is to be completed by the individual practitioner (Medicaid ID) for whom the Provider Administrator is requesting administrator rights/privileges or the current Provider Administrator for a Medicaid ID (if changing Admins).*

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The form needs to be completed with the following details relating to the Provider Administrator assignment:

- Provider/Individual Practitioner Name
- Provider/Individual Practitioner Medicaid ID
- Provider/Individual Practitioner NPI
- New Administrator Name
- New Administrator OHID

After the details are entered and the document is signed by the practitioner, email the request form to ihd@medicaid.ohio.gov with "Administrator Change Request" listed in the subject line.

Option 1: Change PNM Administrator when the PNM Self-Service change option is not accessible

Provider Name	Provider Medicaid ID	Provider NPI
New Administrator Name		New Administrator OHID

My signature authorizes the New Administrator identified above to manage my organization's Ohio Medicaid provider data in the Provider Network Management system.

Authorizing Signature

Date

Option 2: Individual Practitioner PNM Administrator Role Assignment and Authorization

Please provide the following information

Individual Practitioner Name	Individual Practitioner Medicaid ID	Individual Practitioner NPI
New Administrator Name		New Administrator OHID

My signature authorizes the New Administrator identified above to manage my Ohio Medicaid provider data in the Provider Network Management system on my behalf.

Practitioner Signature Authorizing PNM Administrator

Date

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Ohio Department of Medicaid													
Provider Network Management Medicaid Home Learning Contact Fee Schedule Log out													
My Providers Account Administration New Provider ?													
Reg ID	Provider	Status	Provider Type	NPI	Medicaid ID	Specialty	DD Contract Number	DD Facility Number	Location	Effective Date	Submit Date	Revalidation Due Date	
517965	Test Training	Complete	69 - Pharmacist	1316344583	9999883	PHARMACIST				03/09/22	03/23/22	03/23/22	

After receiving the request via email, a technology support specialist will reassign the practitioner to the requested Provider Administrator user account.

Once the assignment is completed, the practitioner will display on the Provider Administrator's homepage/dashboard, allowing access the Medicaid record and assignment of other users (Agents) to the record, if necessary.

Version and Revision History:

Revision:	Description of Changes and Pages Affected:	Effective Date:	Author:
1.0	Initial Release to client	7/18/2023	Jon Wulf
1.1	Version 1.1 submitted to address client feedback	7/24/2023	Jon Wulf
2.0	Version 2.0 submitted for final approval	7/26/2023	Jon Wulf

Approval:

Accepted By	Signature	Date:
ODM Contract Manager	Tara Stokes	7/27/23
ODM Project Sponsor	Roger W. Fouts	7/26/2023
Approval Comments		