Quick Reference Guide: Updating or Adding Owner Information

Steps:

1

If your organization is enrolled as a Medicare provider, the ownership that is disclosed to Ohio Medicaid must match what was disclosed with Medicare for all individuals and/or organizations that own 5% or more of the organization.

Reg ID	Provider	Status	Provider Type	NPI	Medicaid ID	Specialty	DD Contract Number	DD Facility Number	Location	Effective Date	Submit Date	Revalidation Due Date
517946	Training Medical Group	Complete	21 - Professional Medical Group	1245585009	9999876	Professional Medical Group				02/09/22	02/09/23	02/09/27

Editing or adding owner information for a provider enrolled in Medicaid is completed by initiating and finalizing an update to the group/organization/agency's Medicaid record. Locate the record on your dashboard in PNM and click on the Reg ID.

This process can be completed by the Administrator for the group/organization/agency's Medicaid ID or a user with the Agent role, if that Agent has been assigned the 'Enrollment Agent' action by the Administrator.

2

Under the Manage Application section, click the '+' icon to expand the Enrollment Action Selections.

Click on the hyperlink which says "Begin ODM Enrollment Profile Update."

If you have previously initiated an update, but have not submitted the update, this link will appear as "Continue ODM Enrollment Profile Update."

Manage Application

Enrollment Actions	+ Enrollment Action Selections:
Programs	+ Program Selections:
Self Service	+ Self Service Selections:

Enrollment Actions — Enrollment Action Selections:
Begin ODM Enrollment Profile Update
Edit Key Provider Identifiers
Request Disenrollment

3

From the list of updates, locate 'Owner Information' under the Owner Information section.

Click **Update** next to Owner Information.

Owner Information
Update — Owner Information

If you initiate an update in error, select "Cancel Update Registration" under Enrollment Actions to end the update process.

— Enrollment Action Selections:
Continue ODM Enrollment Profile Update
Cancel Update Registration
Edit Key Provider Identifiers

Steps:

4

If adding a owner information, proceed to Step 6.

Expand the Owner, Managing Employee and Controlling Interest Information section by clicking the '+' icon.

+ Owner, Managing Employee and Controlling Interest Information

To update an existing owner's information, click on the 'pencil and paper' icon for the owner you wish to edit.

- Owner, Managing Employee and Controlling Interest Information

Type	Name	Title	Percentage	Start Date	End Date		
Organization	Training Group LLC		100.00	02/09/2022	12/31/2299	✏️	

Add New

5

Edit the owner's information, percentage of ownership, or enter an end date for the owner, if they no longer have ownership.

Once information is updated, click **Save** on the Owner Information pop-up window.

To save the Owner Information page, with the new information, click **Save** at the top of the page.

Save   Cancel

Owner Information

Owner Type*	Organization
Owner Title	
Affiliation Type*	ORGANIZATION - DIRECT OWNER
Organization Name*	Training Group LLC
Address 1*	2400 Corporate Exchange Drive
Address 2	
City*	Columbus
State*	Ohio
County	
Zip*	43231
Tax ID*	574769694
Percentage of Ownership*	100
Owner Effective Date *	2/9/2022
Owner End Date	12/31/2299

Save   Cancel

6

If you completed Steps 4 & 5, and are not adding an owner, proceed to Step 8.

Expand the Owner, Managing Employee and Controlling Interest Information section by clicking the '+' icon.

+ Owner, Managing Employee and Controlling Interest Information

To add a new owner, click **Add New**.

- Owner, Managing Employee and Controlling Interest Information

Type	Name	Title	Percentage	Start Date	End Date		
Organization	Training Group LLC		100.00	02/09/2022	12/31/2299	✏️	

Add New

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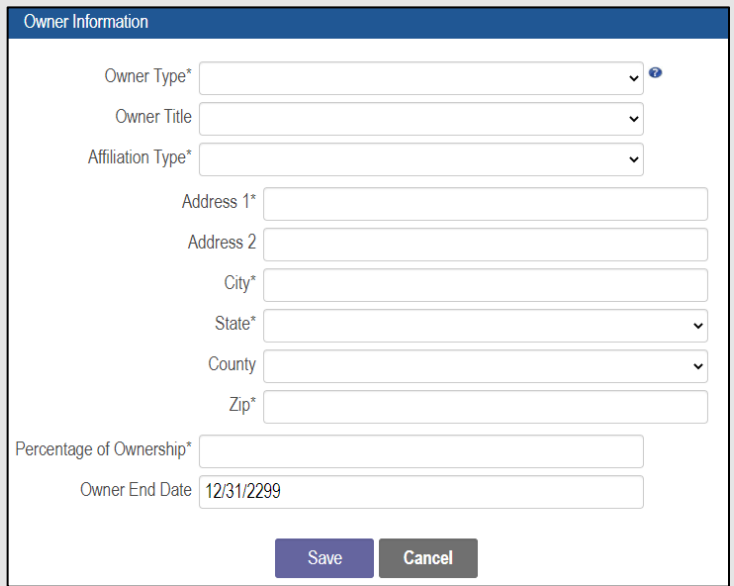
Steps:

7

Enter the owner's information, including the Owner Type, Affiliation Type, Address, and Percentage of Ownership.

Once information is entered, click **Save**.

To save the Owner Information page, with the new information, click **Save** at the top of the page.

| Save | Cancel |

Owner Information

Owner Type*	
Owner Title	
Affiliation Type*	
Address 1*	
Address 2	
City*	
State*	
County	
Zip*	
Percentage of Ownership*	
Owner End Date	12/31/2299

Save   Cancel

8

A red dot indicates that changed information has been saved on the page.

A red X only appears for owners added during this update. Any previously added owners cannot be deleted.

Owner Information*

- Owner, Managing Employee and Controlling Interest Information

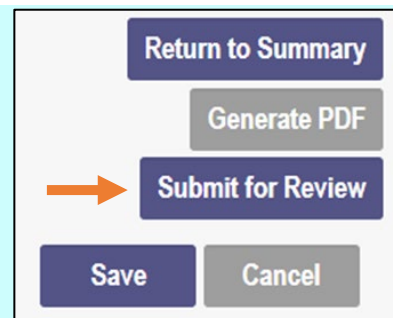| Type	Name	Title	Percentage	Start Date	End Date		
Organization	Training Group LLC		50.00	02/09/2022	12/31/2299	✎	
Organization	Training Ownership Enterprises		50.00	04/14/2023	12/31/2299	✎	✖

Add New

Ensure the edits or additions to the owner information appear correctly on the table.

Click X to remove an added owner.

9

To complete the update process (and the changes to the owner information), click **Submit for Review.**

| Return to Summary |
| Generate PDF |
| Submit for Review |
| Save | Cancel |

Submission Confirmation

You have successfully submitted your application to the Medicaid Program. Please allow at least 10 days for processing before attempting to submit any changes.

Return to Home Page

A submission confirmation message displays indicating that the update has been submitted.

Click **Return to Home Page**, to go to your dashboard.

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