

The Oklahoma State Medicaid Program and Frequently Used Terms

Term	Definition
Individual	An individual practitioner of the healing arts who is licensed, certified, or otherwise authorized to perform specific medical services or provide medical care, equipment, and/or supplies in the normal course of business. This individual may be a solo practitioner or a part of a group. Examples of individuals are physicians and dentists. An individual provider must complete an enrollment application for each physical location in which he or she practices. Individuals applying to join an existing group must complete a group corporation contract in addition to the individual contract for payments to be made to federal tax identification number.
Group/Payee	<p>An entity composed of one or more individuals, generally created to provide coverage of patient's needs in terms of office hours, professional backup and support, or range of services, resulting in specific billing or payment arrangements. It is possible that the group itself is not licensed or certified, but the individual(s) who compose the group are licensed, certified, or otherwise authorized to provide health care services. An individual can be a member of multiple groups. Examples of groups are:</p> <ul style="list-style-type: none"> • Two physicians practicing as a group where they bill and receive payment for their services as a group. • An incorporated individual billing and receiving payment as a corporation. <p>The group must fill out an application. In addition, each individual participating in the group must complete an individual application.</p>
Facility/Organization	An entity, other than an individual, that is licensed, certified, or otherwise authorized to provide medical services, care, equipment, or supplies in the normal course of business. The licensure, certification, or other recognition is granted to the organization entity. Individual owners, managers, or employees of the organization may also be certified, licensed, or otherwise recognized as individual providers in their own right. Examples of organizations are hospitals, laboratories, ambulance companies and pharmacies.
Change of Ownership	<p>Under procedures set forth by the Health Care Financing Administration (HCFA) and the Oklahoma Health Care Authority, a change in ownership of a facility does not terminate Medicare eligibility, therefore, Medicaid participation may be continued provided that the new owners comply with the following requirements:</p> <ul style="list-style-type: none"> • Obtain re-certification as a title XVIII (Medicare) facility under the new ownership, if applicable • Complete new Medicaid provider enrollment packets for each provider number affected by the Change of Ownership • Provide Medicaid with a copy of the Contract for Sale (specifically, a signed agreement that includes the identification of previous and current owners)
Electronic Funds Transfer (EFT)	A form that is required to enrollment in the Medicaid program allowing approved payments to be directly deposited into a provider's checking or savings account.