



# **PRAF 2.0 NurtureOhio Interface: Community Based Organizations User Guide**



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## Welcome New Users!

This guide will help you navigate the NurtureOhio website. Some of the key items provided are:

- Definitions of Perinatal Risk Assessment Form (PRAF) and Report of Pregnancy (ROP) related topics
- Step by step guidance on getting access to and logging into the NurtureOhio system
- Step by step guidance on member referrals process
- Features of NurtureOhio
- Help with troubleshooting
- Additional tips and resources

## What is NurtureOhio?

NurtureOhio was developed in 2016, in partnership with the Ohio Perinatal Quality Collaborative, the Ohio Department of Health, 23 Medicaid Maternal and Fetal Medicine providers, and the five Medicaid Managed Care Organizations (MCOs) to standardize pregnancy notification and decrease the risk of preterm birth. Through continued spread, the project has since grown beyond the progesterone quality improvement project, and the NurtureOhio web-based system has become the Ohio Department of Medicaid's preferred method for notification of pregnancy and the postpartum period for all Medicaid-insured individuals across the state.

NurtureOhio is a web-based system that stores and shares information about perinatal risks and health-related social needs (HRSNs). This information is collected using the electronic Perinatal Risk Assessment Form (PRAF 2.0) and the Report of Pregnancy (ROP). Once a user submits either the PRAF 2.0 or ROP in NurtureOhio, the data is seamlessly transmitted to Ohio Medicaid's eligibility system to ensure maintenance of Medicaid coverage, the Ohio Department of Health for connection to the Women and Infant Nutrition Program (WIC), the Ohio Department of Children and Youth (DCY) for evidence-based Home Visiting, and the individual's Managed Care Organization (MCO) for resources and identified needs.

NurtureOhio is used to notify the Ohio Department of Medicaid and key stakeholders of pregnancy and the start of the postpartum period for all Medicaid-insured individuals for eligibility maintenance and care coordination. Through the PRAF and ROP, NurtureOhio transmits the minimum information needed about Medicaid individuals' pregnancy and postpartum information to the appropriate stakeholders to ensure their needs are met.

## NurtureOhio Features

- Shareable Data Entry
- One Time Data Entry of Practice and Provider Information
- Same-Day Pregnancy Notification
- Ability to Retrieve and Save Previously Entered Forms
- Ability to Export CSV files of submitted PRAFs

More information on these features can be found in [Appendix A](#).

## Who Should Use NurtureOhio?

- Clinical obstetrical providers should submit a Perinatal Risk Assessment Form (PRAF) on behalf of their patients at the first prenatal appointment.
- Clinical non-obstetrical providers, such as primary care providers, emergency department providers, local health department clinics, etc. should submit a Report of Pregnancy (ROP) at the first report of pregnancy.
- Community Based Organizations (CBO) and Managed Care Organizations (MCO) should also submit an ROP at the first report of pregnancy.

## What is a PRAF?

The Perinatal Risk Assessment Form (PRAF) is an assessment that is intended for completion and submission by all obstetrical providers at the Medicaid patient's first prenatal visit, the start of the postpartum period, and whenever there are changes in the patient's perinatal medical, social risk factors or needs. The PRAF collects perinatal risk and health-related social needs. PRAF replaces the ODM 03535 form. The web-based version of the Perinatal Risk Assessment (PRAF 2.0) is ODM's preferred method for submission.

## What is an ROP?

The purpose of the Report of Pregnancy (ROP) form is to capture a Medicaid individual's pregnancy as soon as possible to assist with eligibility and care coordination. ROPs are intended for submission at the first identification of a positive pregnancy. This may occur in primary care practice, at the emergency department, or within a local health clinic. For example, if a patient is seen at the emergency department or a local health department and is determined to be pregnant, an ROP should be submitted on behalf of the patient. The goal is to connect the individual to obstetrical care and other services and ensure coverage throughout pregnancy and the postpartum period to optimize health care access and health outcomes for the mother and infant. Again, the ROP is only intended for submission by non-obstetrical Medicaid providers, Medicaid MCOs, and CBOs.

## Benefits of Using NurtureOhio to Submit Pregnancy Notifications:

- Updating pregnancy details in Ohio's Medicaid Eligibility System to prevent loss of Medicaid coverage during pregnancy and postpartum period.
- MCOs notification of potential members for care coordination and incentive programs to provide support and resources during pregnancy and the postpartum period.
- Enables County Department of Job and Family Services (CDJFS) users to verify that pregnancies are added to the Ohio Benefits system and coordinate care via referrals.
- Timely referrals to the Ohio Department of Health's (ODH) Special Supplemental Nutrition Program for Women, Infants, and Children (WIC).
- Referrals to The Ohio Department of Children and Youth's (DCY) Home Visiting Central Intake platform.

## User Types

Users are classified into six different user types which impact what views they have access to and how they enter information in the NurtureOhio system. For the purposes of NurtureOhio, ODM defines the following user types:

- Practice users as those users associated with a practice that provides obstetric services.
- MCOs as those users affiliated with ODM's contracted Managed Care Organizations.
- Non-OBGYN are users associated with a clinical practice that does not provide obstetric services but can confirm an individual's pregnancy via a positive pregnancy screening such as primary care, emergency department, urgent care, community health centers, community clinics, etc., and as those users identified by ODM as doulas.
- Secondary MCOs as those users affiliated with ODMs contracted Managed Care Organizations as secondary MCOs.
- OEI Community Based Organizations (CBO) and CBO Lead Entities as those users from organizations identified by the Ohio Department of Medicaid as Ohio Equity Institute Lead Infant Mortality Entities and their corresponding Community Based Organizations.
- County Department of Job and Family Services Healthchek/PRS workers as those users specializing in pregnancy related services for CDJFS office.

## How to Obtain Access to NurtureOhio as a first-time CBO User

- CBOs must designate a lead individual to submit requests for new users using the NurtureOhio Microsoft Access Request Form. The link to the form can be obtained by sending a request to [MomsAndBabies@medicaid.ohio.gov](mailto:MomsAndBabies@medicaid.ohio.gov).
- The lead will complete the Microsoft form and submit it.
- Once the new user is the lead and the new user will be notified via email.
- When the new user logs into NurtureOhio for the first time, they will need to choose "Internal" from the dropdown box, enter their email as the username and then click "Forgot Password" to set up their password for the first time.
- The system will send a password reset to the user's email; the user should check the spam folder for the email if it is not in their main folder.

NurtureOhio Care • Encourage Ohio Department of Medicaid

PRAF 2.0 Ohio Department of Medicaid's Online Notification of Pregnancy System

Ohio Medicaid Providers/Practices: Select "OHID" from dropdown to log in with your OHID Username and Password to submit pregnancy notifications and referrals for patients currently insured by Ohio Medicaid.

All Other Users, including MCEs, CDJFS and CBOs: Select "Internal" from dropdown to login with your NurtureOhio Username and Password provided to you via email.

System: Internal

Username:

Password:



☐ Remember me

Help [Forgot Password?](#)

## How to Log into NurtureOhio

To access the NurtureOhio website visit: <https://nurtureohio.com/login>

- Select "Internal" from the dropdown list, then enter your Username and Password. Click "LOG IN."
- Logging in allows all CBO users to submit Reports of Pregnancy for patients currently insured by Ohio Medicaid.

 NurtureOhio  Department of Medicaid

**PRAF 2.0 Ohio Department of Medicaid's Online Notification of Pregnancy System**

Ohio Medicaid Providers/Practices: Select "OHID" from dropdown to log in with your OHID Username and Password to submit pregnancy notifications and referrals for patients currently insured by Ohio Medicaid.

All Other Users, including MCEs, CDJFS and CBOs: Select "Internal" from dropdown to login with your NurtureOhio Username and Password provided to you via email.

System: Internal ▼

Username:  ←

Password:  ←

☐ Remember me


**LOG IN**

[Help ?](#) [Forgot Password?](#)

## Forgotten Username or Password


If you need help logging in, contact [nurtureohiosupport@deliverhealth.com](mailto:nurtureohiosupport@deliverhealth.com).

If you have forgotten your username or password, select 'Forgot Password?' and enter the email associated with your user account.



Nurture

Care ♥ Encourage



Department of  
Medicaid

PRAF 2.0 Ohio Department of Medicaid's Online Notification  
of Pregnancy System

Ohio Medicaid Providers/Practices: Select "OHID" from dropdown  
to log in with your OHID Username and Password to submit  
pregnancy notifications and referrals for patients currently insured  
by Ohio Medicaid.

All Other Users, including MCEs, CDJFS and CBOs: Select  
"Internal" from dropdown to login with your NurtureOhio  
Username and Password provided to you via email.

System: 

Internal ▼

Username:

Password:

☐ Remember me

LOG IN

Help ⓘ 

➔

Forgot Password?

Lost your password?

Enter the e-mail address associated with your  
account.

Email


➔

SUBMIT


## NurtureOhio Initial Profile Setup

After logging into NurtureOhio for the first time, users will be taken to “New User Profile Setup” page. Here users can update their password to something more memorable.

Once the user has updated their password, click “SAVE & BEGIN.” The user will be redirected to their welcome screen.

 Nurture

[ROPS](#) [Video Library](#) [Help](#)

 CBO One [Logout](#)

Users

Edit User Profile

### New User Profile Setup

**Welcome to Nurture Ohio!**

This portal provides you the ability to electronically receive the Perinatal Risk Assessment Form (PRAF) 2.0, as well as have record of all previously completed forms. Please take a moment to confirm the information within your personal user profile.

**USER INFORMATION**

First Name

CBO

Last Name

One

User Type

OEI CBO

Email / Username

Momsandbabies+12@medicaid.ohio.gov

New Password

Please verify that the information in this section appears correct. Your email address will be used to send notifications from the system when new forms have been submitted.

CBO

OhioHealth

SAVE & BEGIN



## Welcome Screen

After logging in, CBO users will be taken to the Welcome Screen. The Welcome screen allows users to perform or access multiple tasks, including:

- Updating user information by clicking on the User ID
- Viewing submitted ROPs
- Viewing submitted PRAFs\*
- Viewing referrals \*
- Viewing reassigned forms\*
- Searching for existing forms using any of the following:
  - Patient Name
  - Patient DOB
  - Patient Medicaid transmission status
  - Date of Creation (Specific date or date range)
  - Date of Service (Specific date or date range)
- Viewing organization notifications
- Access to information needed to complete reports
- Downloading completed forms in PDF format or patient information in CSV format
- Exporting multiple forms at once to a CSV file

Patient Name	Submission Date	By	Medicaid Transmission Status	Action
ROP ref test Test	09/22/2025	CBO One	Pending	PDF CSV
Sue Miller	03/20/2023	CBO One	Successfully Processed	PDF CSV
Pam Patton	03/20/2023	CBO One	Successfully Processed	PDF CSV


## Updating User Information (the Edit User Profile Screen)

After clicking on the User ID on the Welcome Screen, users can edit information about their user account. On this screen, users can:


- Edit first name and last name
- Change their password
- View user type
- Verify that their managed care plan name is correct
- Click the “Save” button to save any changes and return to the Welcome Screen. If no changes have been made, click the “Users” button at the top left of the screen

**Note:** Some information associated with your User ID will be inserted automatically. You will not be able to edit this information. Contact your lead to submit edits if needed for prepopulated information.

**Be sure to click the “Save” button at the bottom on this screen to save any changes you make on this screen, or they will be lost.**

 Nurture

[ROPs](#) [Video Library](#) [Help](#)

 CBO One [Logout](#)

Users

Edit User Profile

### Edit User Profile

Welcome to Nurture Ohio!

This portal provides you the ability to electronically receive the Perinatal Risk Assessment Form (PRAF) 2.0, as well as have record of all previously completed forms. Please take a moment to confirm the information within your personal user profile.

USER INFORMATION

First Name

CBO

Last Name

One

User Type

OEI CBO

Email / Username

Momsandbabies+12@medicaid.ohio.gov

New Password

Please verify that the information in this section appears correct. Your email address will be used to send notifications from the system when new forms have been submitted.

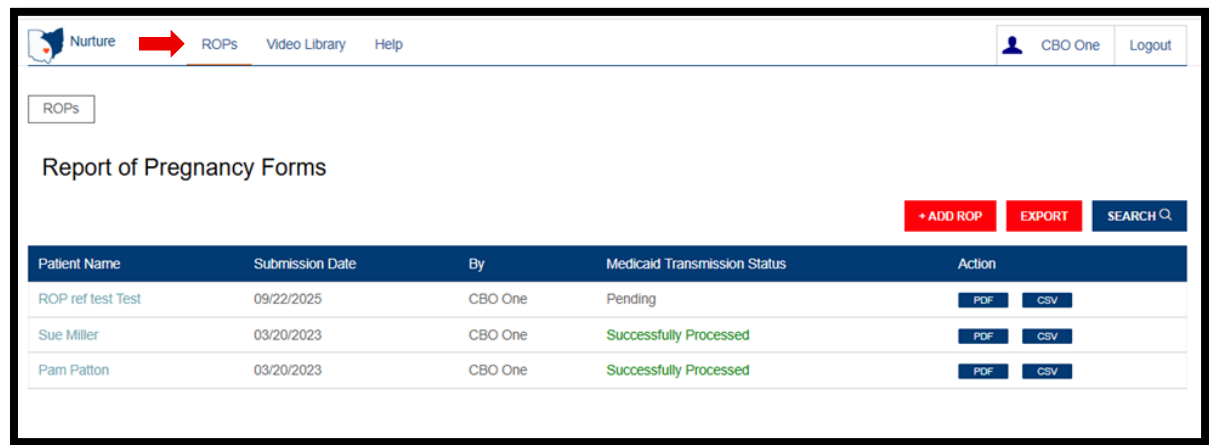
CBO

OhioHealth

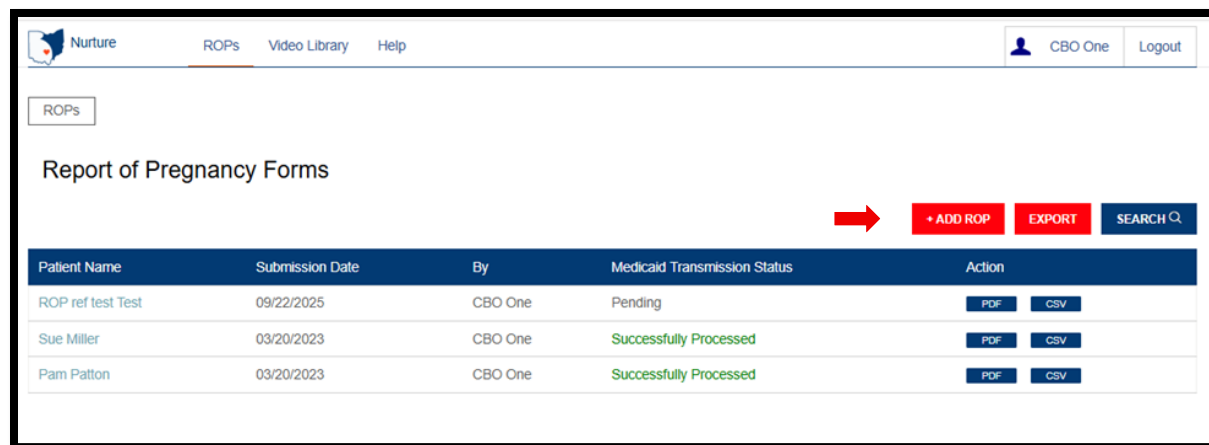
SAVE

## How to Submit a Report of Pregnancy (ROP)

From the welcome page, the user will choose the “ROPs” tab



After clicking the “+ ADD ROP” button on the main ROP screen, users can begin entering information.




## Add Patient Information

### Patient Validation


To improve data quality and ensure HIPAA protections, a patient validation feature has been added to check that the information entered is linked to an individual’s Medicaid case. To complete this validation, NurtureOhio takes the information entered and searches against Ohio Medicaid’s eligibility system. The user will then receive feedback based on the data entered. If the information does not match, the user will have the opportunity to correct, re-validate, and resubmit. If the information still does not match after correcting the indicated fields, the user may continue without validation but will need to verify the data after submission, complete any necessary edits to the ROP, and then resubmit. The user has up to 30 days to edit the form and resubmit. After 30 days, the user cannot edit a form and must submit a new one.

Patient Validation Fields

- 1. Complete the required fields:
  - Patient First Name
  - Patient Last Name
  - Estimated Due Date
  - Patient DOB
  - Patient Medicaid ID (MMIS number) and/or Patient Social Security Number (9-Digit)

 Nurture

ROPsVideo LibraryHelp

 CBO OneLogout

Patients

Patient Validation for ROP

In order to improve the quality of data, all patient information will be validated against the Ohio Department of Medicaid's database. Data from this page, as well as data returned from Medicaid, will be pre-populated into the form.

Patient Medicaid ID

Patient First Name\*

Patient Last Name\*

Patient Social Security Number (9 digit - no dashes)

Patient Date Of Birth\*


Estimated Due Date\*

The following fields are required for Validation: Patient First and Last Names, Patient Date of Birth, Estimated Due Date and at least one of the following:

- Patient Medicaid ID
- Patient Social Security (9-Digit)

SUBMIT FOR VALIDATION

**Note:** The Patient's Medicaid ID may be found on the Medicaid card as shown in the graphic below. For more information and to view the Medicaid ID on archived Medicaid cards, see [Appendix A](#).



## Next Generation managed care member ID cards

The Next Generation managed care member ID cards were designed to include important information, including pharmacy benefit information, in one place and in a format that is easy to understand.

### Every Ohio Medicaid managed care member should use this card

A member's ID number can be found here

A member's primary care provider's name and phone number can be found here

When a member's ID card was issued can be found here

Member Services | Phone: 000-000-0000  
24 Hour Emergency Services | Phone: 000-000-0000  
OhioRISE Member Service | Phone: 833-711-0773

Member Name: Janasadebyungkim  
Verifoxooong@estnet

Member ID Number: 000000000000

Plan ID Number: 000000000000

Primary Care Provider: Dr. John Doe  
Phone: 000-000-0000

Issuance Date: MM/DD/YYYY

OhioRISE  
Aetna  
Newa Better Health of Ohio  
Phone: 833-711-0773


Pharmacy Benefit  
g:imwell  
Ex Num: 004620  
Ex PCN: 004000000  
Phone: 833-691-0344  
CSP Enrolled  
Use Member ID for Billing

If a member has questions or an emergency related to their benefits, they can use the phone numbers located here


If a member is enrolled in OhioRISE, they will have the OhioRISE and Aetna logo here

All member pharmacy information can be found here

2. Select **“Submit for validation”**
  - NurtureOhio will search the ROP system to ensure no other records from the last 30 days can be found in the system for that member.



[ROPs](#)
[Video Library](#)
[Help](#)


[CBO One](#)
[Logout](#)

Patients

### Patient Validation for ROP

In order to improve the quality of data, all patient information will be validated against the Ohio Department of Medicaid's database. Data from this page, as well as data returned from Medicaid, will be pre-populated into the form.

Patient Medicaid ID

Patient First Name\*

Patient Last Name\*


Patient Social Security Number (9 digit - no dashes)

Patient Date Of Birth\*

Estimated Due Date\*

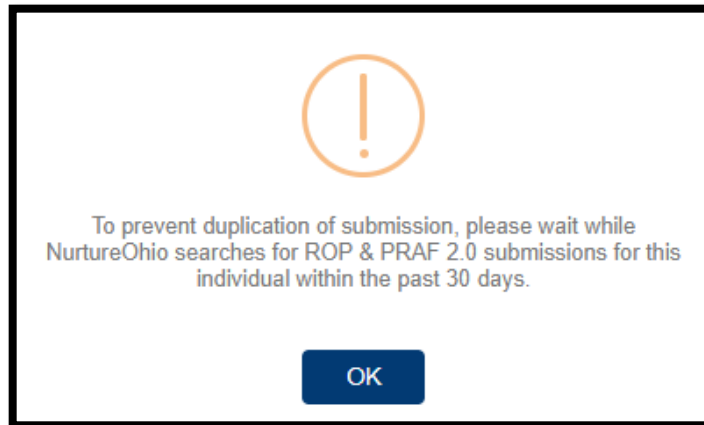
The following fields are required for Validation: Patient First and Last Names, Patient Date of Birth, Estimated Due Date and at least one of the following:

- Patient Medicaid ID
- Patient Social Security (9-Digit)

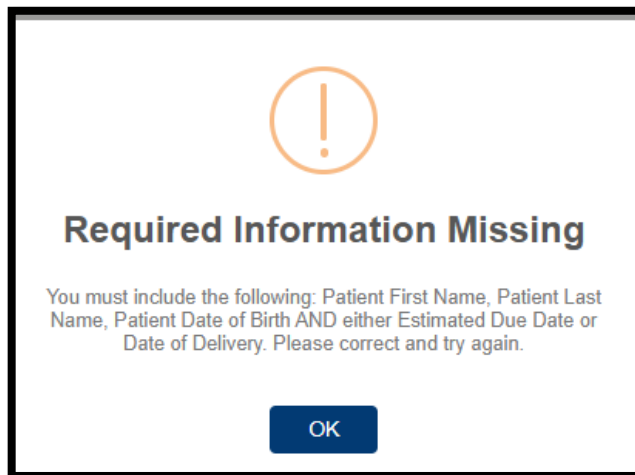


SUBMIT FOR VALIDATION

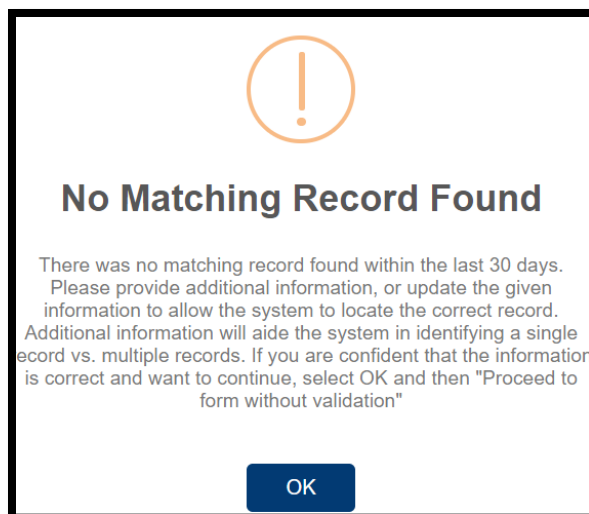
The following notification appears when you submit, select OK to proceed



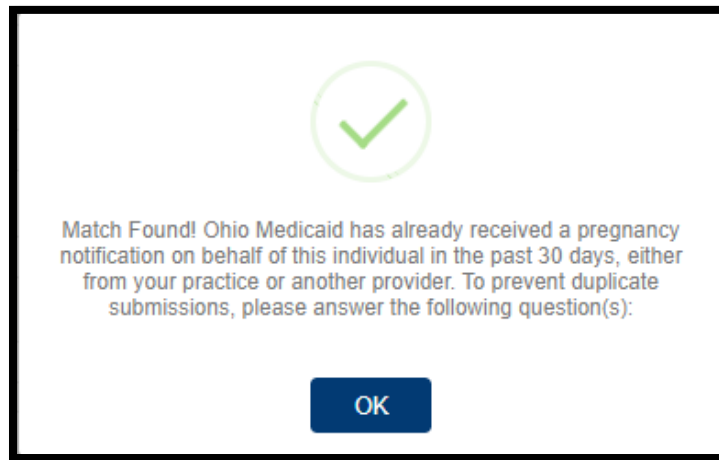
The following notification will appear if you are missing the required information



The following notification will appear when no matching ROP record is found:



The following notification will appear when a matching record is found:



If a matching record is found, users must then answer the following questions:

In the past 30 days have there been changes to:

- The individual's health?
- Social risk factors from the prior submission?
  - **If yes:** the user may continue to complete a new form.
  - If no:** the user must open the previously completed form to edit with new information, or the user can stop the submission.

In the screenshot below, the red circled X indicates that the information provided does not have a matching record in the Medicaid system and needs to be addressed.

A screenshot of the "Patient Validation for ROP" form in the NurtureOhio system. The form has a header with the Nurture logo and navigation links (ROPs, Video Library, Help). On the right, there are links for "CBO One" and "Logout". Below the header is a "Patients" button. The main title is "Patient Validation for ROP". A red asterisk note says "Must Provide Valid Patient Medicaid ID and/or Social Security Number." A blue banner states: "In order to improve the quality of data, all patient information will be validated against the Ohio Department of Medicaid's database. Data from this page, as well as data returned from Medicaid, will be pre-populated into the form." The form contains several input fields: "Patient Medicaid ID" (with a red circled X), "Patient First Name\*" (with "Test" entered), "Patient Last Name\*" (with "Test" entered), "Patient Social Security Number (9 digit - no dashes)" (with a red circled X), "Patient Date Of Birth\*" (with "01/01/1998" entered), and "Estimated Due Date\*" (with "10/25/2025" entered). To the right of the first three fields, a message says: "The following fields are required for Validation: Patient First and Last Names, Patient Date of Birth, Estimated Due Date and at least one of the following: Patient Medicaid ID, Patient Social Security (9-Digit)". At the bottom right are two buttons: "PROCEED TO FORM WITHOUT VALIDATION" and "SUBMIT FOR VALIDATION".

There can be multiple errors returned at once and NurtureOhio does its best to identify the fields that need to be addressed. The common errors that can be returned are as follows:

- Invalid/Missing Date(s) of Service
- Patient Date of Birth Does Not Match the Patient on File
- Invalid/Missing Patient Medicaid ID
- Invalid/Missing Patient Name
- Patient Not Found
- Duplicate Patient ID Number
- Must Provide Valid Patient Medicaid ID and/or Social Security Number
- Patient does not have active Medicaid coverage
- System is unable to respond, please contact NurtureOhio Helpdesk (This error also sends an alert to NurtureOhio)

To proceed the user must:

- Verify the patient's information.
- Correct errors
- Resubmit for validation

In the screenshot below, the green circled check mark indicates that the information provided has a matching Medicaid record and the user may proceed to the form.

The screenshot shows the 'Patient Validation for ROP' form in the NurtureOhio system. The form includes a header with the Nurture logo and navigation links (ROPs, Video Library, Help). A 'Patients' button is visible. The form title is 'Patient Validation for ROP'. A blue banner states: 'In order to improve the quality of data, all patient information will be validated against the Ohio Department of Medicaid's database. Data from this page, as well as data returned from Medicaid, will be pre-populated into the form.' The form fields and their validation status are as follows:

Field	Value	Status
Patient Medicaid ID	[Redacted]	Valid (Green Checkmark)
Patient First Name*	Test	Valid (Green Checkmark)
Patient Last Name*	Test	Valid (Green Checkmark)
Patient Social Security Number (9 digit - no dashes)	[Redacted]	Valid (Green Checkmark)
Patient Date Of Birth*	01/01/1998	Valid (Green Checkmark)
Estimated Due Date*	10/25/2025	Valid (Green Checkmark)

On the right side of the form, the following text is displayed:

**Member Successfully Identified!**

Based on the information provided, we were able to locate this individual within the Ohio Department of Medicaid's records.

Please proceed to complete the form by clicking on the button below.

**PROCEED TO FORM**




**Note:** The ROP can be submitted without verifying eligibility by selecting “Proceed to Form Without Verification” but please note the risks below:

- Potential HIPAA violation
- System not notified of Medicaid eligibility


ROP Form

After clicking the “Proceed to Form” button, users are directed to the ROP Form (shown over the next few pages).

 Nurture

FormsReassigned FormsData UploadsAnalyticsVideo LibraryHelp

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Logout

ROPs

Report of Pregnancy Form

\*Source of Data

Choose One

\*Date of Service

MM/DD/YYYY

\*Claims Data

Choose One

\*Name of Managed Care Plan

Choose One

(If patient was validated on previous page, this value will be pre-filled with the correct MCO from the Ohio Department of Medicaid)

\*Patient Medicaid ID

900000000009

\*Patient Social Security Number

123-45-3456

\*Patient Date of Birth

01/01/1990

\*Patient First Name

test

\*Patient Last Name

test

\*Estimated Due Date

07/02/2025

\*Gestational Weeks

Choose One

\*Gestational Days

Choose One

\*Date Gestational Age Recorded

MM/DD/YYYY

\*Patient Address

\*Patient City

\*Patient State

Choose One

\*Patient Zip

\*Patient County

Choose One

\*Patient Phone

Patient Alternate Phone (Optional)

\*Primary Language is English?

Choose One

Patient Email

Patient's Preferred Method of Contact:

Choose One

\*How does the patient describe their ethnicity?

Choose One

\*How does the patient describe their race?

Choose One

The name of the person at my site who should be contacted with updates/questions about this form is:

Referrals

This section is where referrals are submitted to the patient’s Managed Care Organization and their County Department of Job and Family Services for follow-up.

For Medicaid Application Assistance call 1-844-640-OHIO.  
For questions about Medicaid Programs, covered services or managed care call 1-800-324-8680.

For purposes of healthcare operations and care coordination, your patient/client might be contacted by someone from their managed care plan or a representative from the county department of job and family services about their pregnancy. Contact can be made by either phone, email or mailed communication. Patient would benefit from Managed Care and/or County Job and Family Services assistance with: Check all that apply.

☐ Transportation  
☐ Food  
☐ Housing  
☐ Utilities  
☐ Assistance finding an OBGYN provider

**\*Patient would benefit from Managed Care and/or County Job and Family Services assistance with: Check all that apply.**

Assistance scheduling appointments?  

Choose One ▾

Patient has a prenatal visit appointment scheduled.  

Choose One ▾


☐ My patient would benefit from a referral to WIC.  
☐ My patient would benefit from a referral for Home Visiting.

SUBMIT

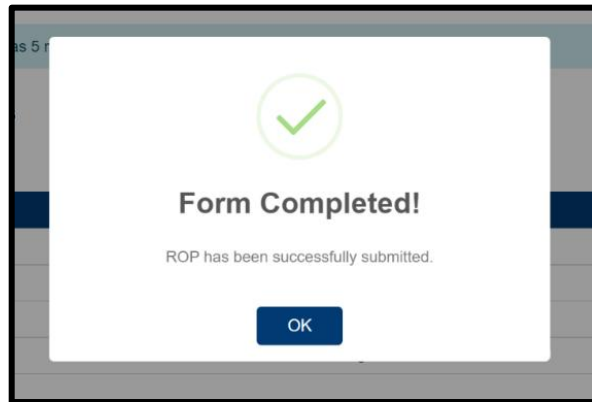
Checking “My patient would benefit from a referral for Home Visiting” will prompt you for permission to text the patient. You must ensure you have a cell phone listed for either the patient’s primary or alternate phone number listed on the form.

Once all required sections have been completed, click the “Submit” button.

☒ My patient would benefit from a referral to WIC.  
☒ My patient would benefit from a referral for Home Visiting.  
☐ Permission is given for text messages about Home Visitation

 SUBMIT

Make sure you see the “Form Completed!” message



**Note:** If required areas are missing from the document, the user will be directed to those areas for correction or addition of information. **Missing information is outlined in red.**

A screenshot of the "Report of Pregnancy Form" in the NurtureOhio system. The form is titled "Report of Pregnancy Form" and includes several fields: "Source of Data" (a dropdown menu with "Choose One" selected), "Date of Service" (a text field with "MM/DD/YYYY" placeholder), "Claims Data" (a dropdown menu with "Choose One" selected), "Name of Managed Care Plan" (a dropdown menu with "Choose One" selected), and "Patient Medicaid ID" (a text field with "900090678347" entered). The form is outlined in red, indicating required areas. The top navigation bar includes links for Forms, Reassigned Forms, Data Uploads, Analytics, Video Library, and Help. The user's name "MCP Caresource, Cares..." and a "Logout" button are visible in the top right corner.

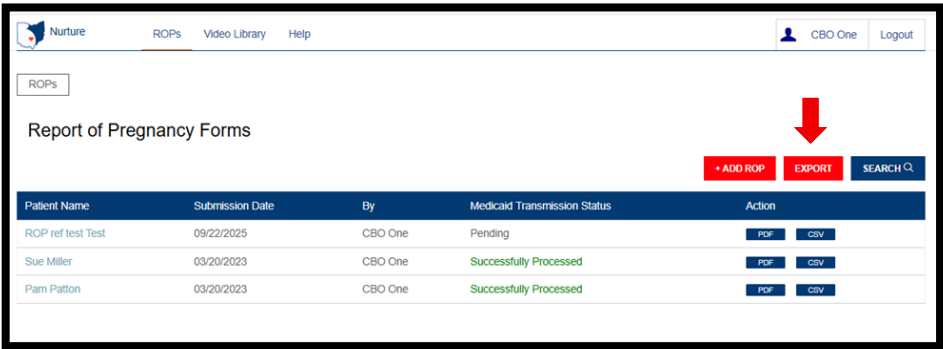
**Note:** If you have any general questions regarding the ROP form content or process, please email [MomsandBabies@medicaid.ohio.gov](mailto:MomsandBabies@medicaid.ohio.gov) with the Subject “ROP Form”.|

# Exporting

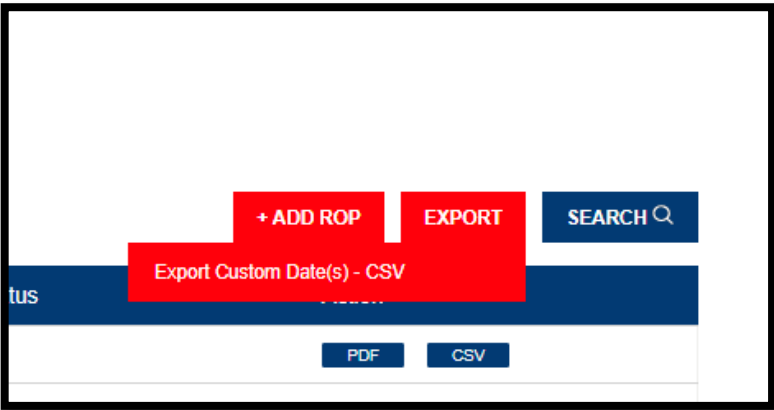
## Exporting ROPs

The Export option allows you to export all forms associated with the logged-in CBO user to a CSV file.

Click the *Export* button next to the search button.



The dropdown menu will provide you with the export option for ROPs The file will be exported and saved to the default download folder on your local machine.



## Log Out

It is important to log out of the NurtureOhio system when finished.

- Select “Logout” in the top right-hand corner of the screen.



## Help Desk and User Support

If you have any concerns or issues with the website or are unable to view fields, please use the “Help” button shown in the screenshot below.



### Help Form

You will then want to describe the issue that you are experiencing in the text box. Include a contact email and then click 'Submit'.

A screenshot of the 'Nurture Ohio Help' form. The form includes a title 'Nurture Ohio Help', a thank-you message, and instructions for users. It features a large text area for describing the issue, a 'Contact Email' field, and a 'SUBMIT' button. Red arrows point to the issue description text box, the contact email field, and the submit button.

## Maintenance and System Outages

If the NurtureOhio system is shut down for maintenance, you will receive an e-mail from the Nurture Helpdesk (no-reply@duethealth.com). The Ohio Department of Medicaid paper-based notification process can be used during these system outages. The paper-based form, ODM 102577, and its accompanying instructions, ODM 102577, can be found at the URL below.

<http://medicaid.ohio.gov/RESOURCES/PUBLICATIONS/MEDICAIDFORMS.ASPX>

## Appendix A

### About NurtureOhio Features

#### Shareable Data Entry

Users can edit a ROP form submitted by another CBO user up to 30 days after the original submission date.

#### Same-Day Pregnancy Notification

Pregnancy notification helps patients maintain Medicaid eligibility. It also helps MCOs and CDJFS to address the needs of pregnant Medicaid members more quickly.

The NurtureOhio website can notify the managed care plan and the Ohio Benefits Worker Portal of the patient's pregnancy the same day it is entered into NurtureOhio. Practice users assist in this process by accurately entering the following patient information:

- First name
- Last name
- Date of birth
- Social security number (full nine digits)
- Medicaid ID/MCID

Ohio Benefits, Medicaid's eligibility system, accepts pregnancy information directly from the information users enter in NurtureOhio. Accuracy of the five details above is important to match the individual's case in Ohio Benefits. The member ID as displayed on the patient's Medicaid card and/or the patient's social security number is important as they are used to identify the member for whom pregnancy needs to be updated. The estimated pregnancy due date paired with the latter five identifiers are used to update the Ohio Benefits system. This helps prevent loss of coverage during pregnancy. Please note the member ID number is consistent across Medicaid MCOs; however, the member ID number will not always be the same as the MCO ID #, which varies by insurance plan. Thus, please be sure to capture the member ID number and not mistakenly input the MCO ID #.

The member ID # is:

- Used to verify a patient's eligibility and their MCO,
- Consistent across all MCOs and Ohio Medicaid, and
- Required for the PRAF 2.0 form to communicate with Ohio Benefits.

Below is where you will locate the member ID number on our contracted managed care entity insurance cards.



## Next Generation managed care member ID cards

The Next Generation managed care member ID cards were designed to include important information, including pharmacy benefit information, in one place and in a format that is easy to understand.

### Every Ohio Medicaid managed care member should use this card

A member's ID number can be found here

A member's primary care provider's name and phone number can be found here

When a member's ID card was issued can be found here

<MCO Logo Here>

Member Services | Phone: 000-000-0000  
24 Hour Emergency Services | Phone: 000-000-0000  
OhioRISE Member Service | Phone: 833-711-0773

Member Name: jennawestling@first  
Member ID Number: 000000000000  
Plan ID Number: 000000000000

Primary Care Provider: Dr. John Doe  
Phone: 000-000-0000

Issuance Date: MM/DD/YYYY

OhioRISE  
Aetna

Pharmacy Benefit  
Gimwell  
Rx Bin: 004251  
Rx PCN: OH00XPH00  
Phone: 833-458-0344  
CSP Enrolled  
Use Member ID for Billing

If a member has questions or an emergency related to their benefits, they can use the phone numbers located here

If a member is enrolled in OhioRISE, they will have the OhioRISE and Aetna logo here

All member pharmacy information can be found here

Below is where you will locate the member ID number on archived versions of the managed care organization cards.



US Script  
BIN#008019  
Pharmacies call: 1-800-460-8988

Name: \_\_\_\_\_  
Effective Date: \_\_\_\_\_  
DOB: \_\_\_\_\_  
PCP Name: \_\_\_\_\_  
PCP Phone #: \_\_\_\_\_

If you have an emergency, call 911 or go to the NEAREST emergency room (ER). You do not have to contact Buckeye for an okay before you get emergency services. If you are not sure whether you need to go to the ER, call your PCP or Buckeye NurseWise toll-free at 1-866-248-4358 and follow the prompt for "Nurse" or TTY at 1-800-750-0750. NurseWise is open 24 hours per day.



Health Care with Heart

Member Name: Mary Doe  
Date of Birth: 04-12-73  
CareSource Member ID #: 12345678900  
MMIS #: 987654321000  
Case #: 7654321000

Primary Care Provider/Clinic Name: Good, Iam A.  
Provider/Clinic Phone: (937) 123-4567  
Member Services: 1-800-488-0134 (TTY: 1-800-750-0750 or 711)  
24-hour Nurse Line: 1-866-206-0554 (TTY: 1-800-750-0750 or 711)



Molina Medicaid

Member: DUMMY NAME  
Identification #: XXXXXXXXXX  
Date of Birth: 01/01/01  
Effective Date: 01/01/01

Primary Care Provider: DUMMY PCP  
Primary Care Provider Phone: (000) XXX-XXXX

MMIS #: XXXXXXXXXX  
Bin#: 000000  
Issue Date: 01/01/01



PARAMOUNT ADVANTAGE  
HEALTH PLAN (80840)  
7952304120  
ID NUMBER: A9999999901  
MEMBER NAME: Jane Doe  
PRIMARY CARE PROVIDER: John Smith  
(419) 5551212  
PROVIDERS CALL FOR PRIOR AUTH: 800-891-2500/419887-2520

GROUP NUMBER: ADV0010011  
EFF. DATE: 01/01/2015  
MMIS NUMBER: 000000000000  
CVS/CAREMARK: RXGRP RX6407  
RXBIN 004336  
RXPCN ADV



UnitedHealthcare Community Plan  
Health Plan 00840: 911-87726-04  
Member ID: 999999999  
Group Number: OHPHCP  
Payer ID: 87726

Member: DR. PROVIDER BROWN  
PCP Name: DR. PROVIDER BROWN  
PCP Phone: (999)999-9999

OPTUMRx  
Rx Bin: 810494  
Rx Grp: ACUOH  
Rx PCN: 9999

0001 Administered by UnitedHealthcare Community Plan of Ohio, Inc.

Revised 12/01/2025


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Ability to Retrieve and Save Previously Entered Forms

Forms entered can be viewed and downloaded in two different formats (PDF and CSV).


- Navigate to the “ROP” tab
- Select the ROP you want to retrieve or save
- After making your selection you can choose PDF or CSV under the Action heading to view or download forms

 Nurture

ROPs

Video Library

Help

 CBO One

Logout

ROPs

Report of Pregnancy Forms

• ADD ROP

EXPORT

SEARCH

Patient Name	Submission Date	By	Medicaid Transmission Status	Action
ROP ref test Test	09/22/2025	CBO One	Pending	<div><div>PDF</div><div>CSV</div></div>
Sue Miller	03/20/2023	CBO One	Successfully Processed	<div><div>PDF</div><div>CSV</div></div>
Pam Patton	03/20/2023	CBO One	Successfully Processed	<div><div>PDF</div><div>CSV</div></div>

