How to Enroll for StationMD's I/DD-Specialized, 24/7 Telehealth through the OhioISP

For OISP signature, contact Client Services: ClientServices@StationMD.com

For all other StationMD needs, contact Emily Martinez, Acct Executive/DOO:
Emily.Martinez@StationMD.com or 330-531-4879

1. Adding the Service

An assessed need must be identified in the ISP (i.e. need to decrease unnecessary ER visits, give additional healthcare options, etc.)
SSAs will add StationMD to the OhioISP as a Health Care Assessment service and support. The service is one unit per month for each month of their span at $34.50 per unit. Access to StationMD lasts the full term of their span.
* SSAs / providers to ensure individual has equipment and internet to use service.

2. Complete the Cost-Projection Tool

The county board, SSA, or other county board staff must complete the cost-projection tool for the Health Care Assessment service using the following codes:
- Individual Options Waiver (Code: AAS)
- SELF Waiver (Code: SAS)
- Level One Waiver (Code: FAS)

3. Complete Enrollment Packet

Once an individual (and/or their guardian) has StationMD authorized in their waiver, the enrollment packet linked here.
Please ensure the individual's support team is together to fill this out as birthdate, insurance information, medications, and medical history are part of this packet.
The individual's Service and Support Administrator (SSA) must complete the free choice of provider process for the service.
*Enrollment packet not required for those previously enrolled at any time during Ohio pilot.

4. Once an individual is enrolled with StationMD, the service is effective IMMEDIATELY.

Call StationMD at 1-877-STATMDS (1-877-782-8637) any time of the day, any day of the week

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A StationMD receptionist will collect patient information

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A StationMD technical assistant will help you complete patient check-in from your smart device

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A StationMD clinician will join you momentarily

StationMD

www.StationMD.com   Contact us at: 908-663-2929   OHTelehealth@StationMD.com