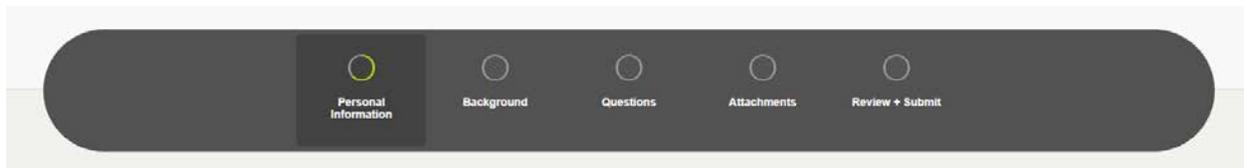


## MEDTAPP Question Instructions (Rev. 2-12-2019)

In cooperation with the Medicaid Technical Assistance and Policy Program (MEDTAPP) the CSWMFT Board has added some questions to license applications and license renewal applications. Answers to the questions will help researchers and other stakeholders explore the size and capacity of Ohio's healthcare workforce, as well as to help identify gaps and forecast future needs. The information you provide will be helpful in setting healthcare policy in the State of Ohio, developing programs, and applying for funding to train Ohio's future healthcare workers.

Many of the questions are self-explanatory. The information below pertains to questions added to gather information for the MEDTAPP.

When the license application or renewal application is saved and ready for submission, eLicense may show on the review and submit page that certain questions were not answered. Clicking on the corresponding section of the application that appears in the oblong band at the top of the application (shown below) will enable you to return to that section to complete the questions. Note: **If you are not actively working (e.g. retired, on a leave of absence) or volunteering in a position that requires this license (e.g. student or recent graduate) employment location information is optional. These questions may be flagged as incomplete when submitting the application. However, the application can still be submitted.**



### Personal Information Section

The first section of the licensure or renewal applications gathers information regarding the licensee or applicant such as name and contact information. All fields with (\*) are required and must be completed to continue the application process.

- Select U.S. residency status as shown in the pick list below.

- None--
- United States Citizen
- Alien lawfully admitted for permanent residency in the United States
- Other non-immigrant status
- I am a foreign national not living in the United States

- Indicate if you consider yourself of Hispanic, Latino/a or Spanish origin. Applicants may select more than one choice by double clicking on a choice. If you select a choice incorrectly or want to make a change, click on the arrow to move it from “Chosen” back to the “Available” list.

Do you consider yourself Hispanic, Latino/a or of Spanish origin?

Available	Chosen
No	
Yes, Mexican, Mexican American, Chicano/a	
Yes, Puerto Rican	

- Select a race. Applicants may select more than one choice by double clicking on a choice and adding it to the “Chosen” list. If you select a choice incorrectly or want to make a change, click on the arrow to move it from “Chosen” back to the “Available” list.

What do you consider your race?

Available	Chosen
American Indian or Alaska Native	
Asian Indian	
Black or African American	
Chinese	

- Select all languages you speak when working with clients or patients in the *workplace*. You may select more than one language.

List languages you personally use to communicate with patients excluding an interpreter or software

Available	Chosen
English	
Afrikaans	
Arabic	
American	

### *Employment Status*

- Select the choice that best represents your *current* employment status. Select only one.

What is your primary employment status?

Actively working in a position(s) that requires this license ▼

--None--

Actively working in a position(s) that requires this license

Actively working in a position(s) that does not require this license

Actively volunteering (without pay) in a position that requires this license

Not currently working - student pursuing this license

Not currently working - seeking position that requires this license

Not currently working - seeking position that does not require this license

Not currently working - retired

Not currently working - Short-term leave of absence (less than 12 months)

Not currently working - Long-term leave of absence (12 or more months)

- Select the choice that best represents your *anticipated* plans over the next **five years**. Select only one.

Which of the following best describes your five-year employment plan?

Maintain practice hours as is ▼

- None--
- Maintain practice hours as is
- Reduce practice hours
- Increase practice hours
- Move to another practice location in Ohio
- Move to a practice location out of Ohio
- Leave the field associated with this license
- Return to school or training program
- Military service
- Retire
- Other

Background Section

*Education History*

To add an educational institution to your profile, click the ADD EDUCATION button. Begin typing the name of the school into the Education Institution field. As you type, the name of your school should auto-populate. Once it does, click on it to select it. You will then enter your school's name and address in the fields that appear. Repeat this process for all education entries. All fields marked with (\*) are required. Once finished, continue with the next Background sections or click the SAVE AND CONTINUE button.

If you did not receive a degree, please select "Not Applicable" as the degree type and do not enter a graduation date.

If upon typing your institution into the text box it does not auto-populate, begin typing "OTHER". When Other appears, select it. Immediate below text boxes will appear for you to enter the name and location of the appropriate institution.

Education Institution

Oth

Other

Education Institution

Educational Program

Degree Type

Degree Received

Enrollment Date

Graduation Date

\*

## Employment Locations

Please provide the following information for **all** practice sites where you use this license, beginning with the locations in which you spend most of your time working. **If you are not actively working (e.g. retired, on a leave of absence) or volunteering in a position that requires this license (e.g. student or recent graduate) employment location information is optional.** Employment location information helps improve the accuracy and efficiency of Health Professional Shortage Area Designations and enables Ohio to identify healthcare workforce distribution.

Name of Practice Site		
Practice Settings		
--None--		
Street Address		
City	* State	* Zip/Postal Code
	OH	
County		
Adams		
Major area of focus or speciality at this practice site		
--None--		
Total hours worked at this practice site, per week		

- Indicate the percentage of work hours spent on various tasks. The percentages must total 100. For definitions, click on the question mark by the task. Place a zero in the box for any work not completed at the practice site.

**Percent of time spent per week in each of the following at this practice site:**

Direct Patient Care <a href="#">?</a>	<input type="text"/>
Teaching/Academic <a href="#">?</a>	<input type="text"/>
Research <a href="#">?</a>	<input type="text"/>
Professional Services	<input type="text"/>
Administrative Activities <a href="#">?</a>	<input type="text"/>
Other	<input type="text"/>
Total Percentage	<input type="text"/>

Do you have hospital admitting privileges for patients from this practice site?

--None--

Which of the following best describes your current employment arrangement?

--None--

Is this an intern/resident position?

--None--

Are you employed as a federal employee at this practice site?

--None--

Are you accepting new patients at this practice site?

--None--

### *More About MEDTAPP*

MEDTAPP, the Medicaid Technical Assistance and Policy Program, is Ohio's Medicaid-state university technical assistance and policy research program. MEDTAPP work broadly includes quality improvement efforts, large scale surveys, and data analysis. Under the direction of the State Medicaid Director, MEDTAPP addresses questions of policy and research relevant to the effective and efficient administration of the Medicaid program. Questions may relate to:

- Health services program evaluation and research
- Health care quality improvement and patient safety
- Health care and human services workforce development
- Policy and data analysis to support administration of the Medicaid Program
- Ohio Medicaid Quality Strategy

More information about MEDTAPP can be found at: <http://grc.osu.edu/>.