TO BE RESCINDED

173-39-01 **ODA** provider certification: introduction and definitions.

(A) Introduction:

- (1) This chapter establishes the certification requirements for providers who provide goods or services to individuals through an ODA-administered medicaid waiver program or the state-funded components of the assisted living or PASSPORT programs; the requirements for providing goods or services through those programs; disciplinary action against providers who do not comply with the requirements; and appeal hearings for providers receiving disciplinary action.
- (2) Rule 5160-58-04 of the Administrative Code requires providers to comply with many of the requirements for providing goods or services in this chapter when the provider provides those goods or services to individuals in the mycare Ohio program.

(B) Definitions for this chapter:

"Abandonment of application" means a provider applicant who does not complete all requirements of the provider-certification process as set forth in rule 173-39-03 of the Administrative Code.

"Activity of daily living" ("ADL") has the same meaning as in rule 5160-3-05 of the Administrative Code.

"Activity plan" means a description of interventions and the dates and times that the provider shall provide the interventions.

"Assistance with self-administration of medication" has the same meaning as in as in paragraph (C) of rule 4723-13-02 of the Administrative Code when an unlicensed person provides the assistance.

"Caregiver" means a relative, friend, or significant other who voluntarily provides assistance to the individual and is responsible for the individual's care on a continuing basis.

"Case manager" means the registered nurse, licensed social worker, or licensed independent social worker that ODA's designee employs to plan, coordinate, monitor, evaluate, and authorize services for ODA-administered programs that require provider certification under this chapter.

"CDJFS" means "county department of job and family services."

"Certification" means ODA's approval of a provider to provide one or more of the services that this chapter regulates.

"Certification agreement" means an agreement between ODA's designee and the provider.

"Consumer" has the same meaning as "individual."

"Incident" means any event that is not consistent with providing routine care of a good or service to an individual. Examples of an incident are abuse, neglect, abandonment, accidents, or unusual events or situations that may result in injury to a person or damage to property or equipment. An incident may involve an individual, a caregiver (to the extent the event impacts the individual), a provider, a facility, or a staff member of a provider, facility, ODA, ODA's designee, or other administrative authority.

"Individual" means an individual as defined in rule 5160-31-02 of the Administrative Code.

"Individual's signature" means the individual's signature or that of the individual's caregiver, which may include a handwritten signature; initials; stamp or mark; or electronic signature that represents the individual's acknowledgment, including acknowledgment that he or she received a good or service. ODA's designee documents the individual's signature of choice (i.e., handwritten, initials, stamp or mark, or electronic) in the individual's record and communicates it to the provider.

"Instrumental activity of daily living" ("IADL") has the same meaning as in rule 5160-3-05 of the Administrative Code.

"Licensed practical nurse" ("LPN") has the same meaning as in section 4723.01 of the Revised Code.

"Medicaid-provider agreement" means an agreement between ODM and the provider.

"Nursing facility" has the same meaning as in section 5165.01 of the Revised Code.

"ODA" means "the Ohio department of aging."

"ODA-certified provider" means a provider certified by ODA according to this chapter.

"ODA's designee" means an entity to which ODA delegates one or more of its administrative duties. ODA's current designees include the area agencies on aging that ODA lists in rule 173-2-04 of the Administrative Code and "Catholic Social

Services of the Miami Valley." When "its designee" occurs after "ODA," it means "ODA's designee."

"ODM" means "the Ohio department of medicaid."

"Ownership or control interest" means having ownership or interest, whether directly, indirectly, or in any combination.

"Plan of treatment" means the orders of a licensed healthcare professional whose scope of practice includes making plans of treatment.

"Provider" means a person or entity that provides a good or service under this chapter. The five categories of providers are agency providers, assisted living providers, non-agency providers, participant-directed individual providers, and participant-directed personal care providers. "Agency provider" means a legallyorganized entity that employs staff. "Assisted living provider" means a licensed residential care facility. "Non-agency provider" (i.e., "self-employed provider") means a legally-organized entity that is owned and controlled by one self-employed person who does not employ, either directly or through a contract, anyone else to provide goods or services, and who is unsupervised. "Participant-directed provider" means either a "participant directed individual provider" or "participantdirected personal care provider" depending upon the context. "Participant-directed individual provider" ("consumer-directed individual provider") means a person that an individual (participant) directly employs and supervises to provide a choices home care attendant service (CHCAS)."Participant-directed personal care provider" ("consumer-directed personal care provider") means a person that an individual (participant) directly employs and supervises to provide personal care.

"Registered nurse" ("RN") has the same meaning as in section 4723.01 of the Revised Code.

"Service plan" means the written outline of the goods or services that a case manager authorizes a provider to provide to an individual, regardless of the funding source for those goods or services. "Service plan" includes the person-centered planning in rule 5160-44-02 of the Administrative Code.

"Services" has the same meaning as "community-based long-term care services" in section 173.14 of the Revised Code.

"Significant change" means a variation in the health, care, or needs of an individual that warrants further evaluation to determine if changes to the type, amount, or scope of goods or services are needed. Significant changes include differences in health status, caregiver status, residence, service location, service delivery, hospitalization,

and emergency department visits that result in the individual not receiving services for thirty days.

"Vocational program" means a planned series, or a sequence of courses or modules, that incorporate challenging, academic education and rigorous, performance-based training to prepare participants for success in a particular health care career or occupation.

Effective:

Five Year Review (FYR) Dates: 3/18/2019

Certification

Date

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