

173-39-02.12 **Social work counseling service.**

(A) "Social work counseling service" means a service to the consumer or to the family caregiver to promote the consumer's physical, social, or emotional well-being. The service promotes the development and maintenance of a stable and supportive environment for the consumer. The service includes crisis interventions, grief counseling, and other social-service interventions that support the consumer's health and welfare.

(B) Minimum requirements for the social work counseling service in addition to the conditions of participation under rule 173-39-02 of the Administrative Code:

(1) In-home: The provider shall deliver the service in the consumer's residence, unless the consumer and case manager authorize another arrangement.

(2) Assessment:

(a) The provider shall assess each consumer, including the consumer's psycho-social, financial, and environmental statuses.

(b) The provider shall furnish the case manager with a copy of the assessment report no later than seven business days after the provider completes the assessment.

(3) Treatment plan:

(a) The provider shall develop and revise, as necessary, with the assistance of the consumer, any caregiver, and the case manager, a treatment plan that includes the recommended method of treatment and the recommended number of counseling sessions.

(b) The provider shall furnish the case manager with a copy of the treatment plan no later than seven business days after the provider completes the assessment.

(c) The provider shall furnish the consumer with a copy of the treatment plan no later than seven business days after the provider completes the assessment, unless there are clinical indications against furnishing the consumer with a copy of his or her treatment plan.

(d) The provider shall implement the treatment plan.

(4) Clinical record:

(a) The provider shall develop and retain a clinical record for each consumer that includes the consumer's:

(i) Identifying information, including name, address, date of birth, sex,

race, marital status, significant phone numbers, and health insurance identification numbers;

(ii) Medical history, if supplied by the consumer, the consumer's case manager, or the consumer's physician;

(iii) Treating physician's name;

(iv) Service plan (initial and revised versions);

(v) Individualized assessment (initial and revised versions);

(vi) Treatment plan (initial and revised versions);

(vii) Advanced directives, including a "do not resuscitate order" or medical power of attorney, if those directives exist;

(viii) Food and drug interactions (e.g., "Don't take pills with milk."), allergies, and dietary restrictions, if supplied by the consumer, the consumer's case manager, or the consumer's physician; and,

(ix) Discharge summary, which the professional who provided the service shall sign and date at the point he or she is no longer going to provide the service to the consumer or the consumer no longer needs the service. In the summary, the professional shall include records on the service outcomes and the progress made toward the goals specified in the consumer's service plan, and shall record any follow-ups or referrals that the professional recommends. The provider shall furnish a copy of the summary to the consumer and the consumer's case manager.

(b) The provider may use a technology-based system to develop and retain the clinical record.

(5) Provider qualifications: No individual shall provide the service unless the individual is employed by a provider that ODA certifies as an agency provider, or unless ODA certifies the individual as a non-agency provider.

(a) Agency provider:

(i) An agency provider shall assure that the agency's direct-care staff includes a licensed professional clinical counselor (LPCC), a licensed professional counselor (LPC), a licensed psychologist (MA or PhD), an independent marriage and family therapist (IMFT), a licensed independent social worker (LISW), a licensed social worker (LSW), or a marriage and family therapists (MFT).

(ii) No individual shall provide the service under the employment of the agency provider unless the individual is a licensed professional clinical counselor (LPCC), a licensed professional counselor (LPC), a licensed psychologist (MA or PhD), an independent marriage and family therapist (IMFT), a licensed independent social worker (LISW), a licensed social worker (LSW), or a marriage and family therapist (MFT).

(iii) The provider shall retain records to show that each counseling staff member holds a license in good standing with his or her respective Ohio professional licensure board, and has at least one year of counseling experience.

(iv) The provider shall supervise any licensed social worker (LSW), licensed professional counselor (LPC), or marriage and family therapist (MFT) whom the provider employs according to the requirements of Chapter 4757. of the Revised Code. The supervisor of a LSW, LPC, or MFT shall co-sign all initial assessments and all treatment plans prepared by the LSW, LPC, or MFT.

(b) Non-agency provider:

(i) No individual shall provide the service as a non-agency provider unless the individual is an independent marriage and family therapist (IMFT), a licensed professional clinical counselor (LPCC), licensed psychologist (MA or PhD), a licensed independent social worker (LISW), or a registered nurse (RN) who holds a certificate of authority from the Ohio board of nursing in psych-mental health nursing specialty.

(ii) The provider shall retain records to show that he or she holds a license in good standing with his or her Ohio professional licensure board, and has at least one year of counseling experience.

(6) Limitations:

(a) The provider shall not provide any service to a consumer in excess of what the case manager authorizes in the consumer's service plan.

(b) The provider shall only bill the PAA for the service provided under the PASSPORT program if the case manager identifies the provider in the service order for the consumer.

(c) The provider shall not provide the service to a consumer if the consumer

is receiving a similar service under Chapter 173-39 of the Administrative Code.

(d) The provider shall not provide the service in place of a case management service.

(e) The provider shall not provide a service to a consumer's authorized representative or caregiver if the service is unrelated to the consumer's well-being.

(7) Service verification:

(a) The provider shall retain a record of the case manager's service order.

(b) For each service provided, the provider shall retain a record of the:

(i) Consumer's name;

(ii) Date of service;

(iii) Time of day each service begins and ends;

(iv) Name of staff member counseling the consumer; and,

(v) Consumer's signature. The case manager shall record the consumer's signature of choice in the consumer's service plan. The signature of choice may include a handwritten signature; initials; stamp or mark; or electronic signature.

(c) The provider may use a technology-based system to collect or retain the records required under this rule.

(d) The agency provider shall retain records required under this rule and provide access to those records for monitoring according to paragraph (B)(5) of rule 173-39-02 of the Administrative Code and the non-agency provider shall retain records required under this rule and provide access to those records for monitoring according to paragraph (C)(5) of rule 173-39-02 of the Administrative Code.

(C) Unit and rate:

(1) A unit of a social work counseling service is equal to fifteen minutes.

(2) The maximum rate allowable for a unit of the service is listed in rule 5101:3-1-06.1 of the Administrative Code.

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