

173-45-01

Introduction and definitions.

(A) Introduction: This chapter governs the Ohio long-term care consumer guide that ODA electronically publishes to provide the public with detailed information on long-term care facilities, including nursing homes, residential care facilities, skilled nursing facility units of hospitals, and county homes certified to receive medicare and medicaid reimbursement. The information includes a facility's size, location, services offered, customer satisfaction data, regulatory compliance performance data, and, in the case of nursing facilities, quality measures. The guide's information allows the public to compare two or more facilities. The guide may also include detailed information about other types of long-term care providers.

(B) Definitions for this chapter:

- (1) "CMS" means "centers for medicare and medicaid services."
- (2) "Facility" means a nursing facility or a residential care facility.
- (3) "Guide" means the "Ohio long-term care consumer guide," which was created by ODA in accordance with section 173.46 of the Revised Code.
- (4) "Medicaid" has the same meaning as in section ~~5111.01~~ 5162.03 of the Revised Code.
- (5) "Medicare" ~~means the program operated pursuant to Title XVIII of the "Social Security Act," 49 Stat. 620 (1936), 42 U.S.C.A. 301, as amended~~ has the same meaning as in 42 C.F.R. 400.200 (October 1, 2013 edition).
- (6) "Nursing facility" means either:
 - (a) A facility, or a distinct part of a facility, that is certified a nursing facility or a skilled nursing facility for purposes of the medicare or medicaid program; or,
 - (b) A nursing home licensed under section 3721.02 of the Revised Code that is not certified as a nursing facility or skilled nursing facility.
- (7) "ODA" means "the Ohio department of aging."
- (8) "ODH" means "the Ohio department of health."
- (9) "Quality measure" means an aspect of the physical or mental conditions of the

residents of a nursing facility that is derived from the resident assessment instruments submitted by nursing facilities to CMS for the purposes of the medicare and medicaid programs.

- (10) "Residential care facility" has the same meaning as in section 3721.01 of the Revised Code.

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