

TO BE RESCINDED

3304-2-52 Least cost, use of comparable benefits, participant contribution, and fees for services.

OOD shall provide services to participants at the least cost consistent with the participant's rehabilitation needs and with participant choice.

- (A) Maximum fees for medical, psychological and dental services paid wholly or in part by OOD shall be based on the fee schedule established by the Ohio department of medicaid as set forth in rule 5160-1-60 of the Administrative Code and the appendix to the rule.
- (B) Pursuant to section 3304.15 of the Revised Code, the executive director shall establish a fee schedule for vocational rehabilitation services. The executive director hereby adopts the vocational rehabilitation service provider fee schedule indicated in appendix A to this rule, developed with stakeholder input. Any community rehabilitation program, entity or person providing a service listed on the vocational rehabilitation providers fee schedule shall bill in accordance with the fee schedule.
- (C) Maximum fees for training services paid wholly or in part by OOD shall be those established by the school.
- (D) OOD shall pay only the fee agreed upon up to the maximum listed in the fee schedule, less the participant contribution and less any applicable comparable benefit.
- (E) OOD shall not pay for missed appointments or other goods and services which have not been provided, except when required for purchase order items and except for the guaranteed minimum fee for interpreter service.
- (F) If a participant chooses to receive services from a qualified service provider other than the least cost provider identified in accordance with this rule, OOD shall only pay for the services in the amount it would cost for the participant to go to the least cost service provider. Any costs incurred by the participant above that amount shall be the participant's sole responsibility to pay.
- (G) Notwithstanding paragraph (F) of this rule, the participant may not choose an alternative provider when goods or services are procured through the department of administrative services competitive bidding process.
- (H) "Comparable benefits" means services and benefits that are available to a participant from federal, state, or local public agencies, by health insurance, or by employee benefits.

- (1) OOD shall use comparable benefits to pay for services, unless such a determination would interrupt or delay:
 - (a) Services to a participant who is at extreme medical risk. "Extreme medical risk" means a probability of substantially increasing functional impairment or a risk of death if medical services, including mental health services, are not provided expeditiously; determination of such risk shall be based on medical evidence provided by an appropriate, licensed medical professional;
 - (b) An immediate job placement;
 - (c) The progress of the participant toward achieving the employment outcome in the individualized plan for employment.
 - (2) OOD shall not require the use of comparable benefits for diagnostic services, but when possible, available information shall be obtained rather than new services purchased.
 - (3) Awards and scholarships based on merit are not considered comparable benefits.
 - (4) OOD shall not require the use of comparable benefits for counseling and guidance, referral, job-related services, including job search and placement assistance, job retention services, follow-up services, and follow-along services, rehabilitation technology, and any of these services when provided as post-employment services.
- (I) A participant may be expected to pay for services to the extent possible.
- (J) Exceptions to this rule may be made only upon the express, written approval of the executive director of OOD or the executive director's designee.
- (K) This rule is designed to implement "the Workforce Innovation and Opportunity Act," which contains amendments to "The Rehabilitation Act of 1973," and resulting regulations.

Replaces: 3304-2-52

Effective:

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Certification

Date

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