

## TO BE RESCINDED

5101:3-1-17.4      **Length and type of provider agreements [except long-term care nursing facilities (NFs), intermediate care facilities for the mentally retarded (ICFs-MR) and medicaid contracting managed care plans (MCPs)].**

(A) The effective date of a provider agreement will be retroactive one year prior to the date of application except for the following circumstances:

(1) Where required licensure, certification, accreditation, or registration is obtained within twelve months prior to application, the effective date will be that date on which the license, certification, accreditation, or registration was obtained.

(2) In certain circumstances the effective date of the provider agreement is dependent upon program approval and authorization to provide services as determined by the Ohio department of job and family services (ODJFS).

(3) It is determined by ODJFS that services rendered prior to the effective date of a provider agreement are not reimbursable.

(B) Provider agreements are generally of two types: open-end and closed-end (time limited).

(1) Open-end agreements have no specific termination date and continue to be in force as long as agreeable to both parties.

(2) Closed-end agreements are for a specific period of time not to exceed twelve months. Closed-end agreements automatically expire on the designated date unless renewed by the provider and approved by ODJFS. Providers must notify ODJFS of their intent to renew their provider agreement prior to the termination of their current closed-end provider agreement. Providers failing to notify ODJFS of their intent to renew their provider agreement will be notified of the termination of their provider agreement and their right to appeal the termination under Chapter 119. of the Revised Code.

(C) ODJFS may transfer a provider's open-end agreement to a closed-end agreement whenever such a transfer is in the best interest of the consumers or the state of Ohio. The transfer from an open-end to a closed-end provider agreement does not affect the amount or scope of medicaid reimbursement. The provider will maintain provider status subject to the limitations as indicated in paragraph (B)(2) of this rule.

(D) Out-of-state providers, as defined in rule 5101:3-1-11 of the Administrative Code,

who practice in non-contiguous states, with the exception of pharmacy, durable medical supply, long-term care nursing facility, laboratory, and transportation providers, will be enrolled using a closed-end provider agreement for a period not to exceed twelve months unless renewed annually prior to the agreement's termination date by both parties as described in paragraph (B)(2) of this rule.

- (E) The following practitioners must have individual provider agreements regardless of whether they are a member of a group with a provider agreement or an employee of an entity with a provider agreement: physicians, dentists, optometrists, opticians, podiatrists, chiropractors, osteopaths, physical therapists, psychologists, private duty nurses, certified registered nurse anesthetists, anesthesiology assistants, nurse midwives, nurse practitioners, clinical nurse specialists, and Ohio home care providers.
- (F) To ensure program integrity ODJFS reserves the right to conduct pre-enrollment on-site reviews.

Effective:

R.C. 119.032 review dates: 10/16/2007

---

Certification

---

Date

Promulgated Under: 119.03  
Statutory Authority: 5111.02  
Rule Amplifies: 5111.01, 5111.02  
Prior Effective Dates: 4/7/77, 12/30/77, 1/1/79, 3/23/79, 8/31/79, 11/1/79,  
7/1/80, 7/7/80, 10/1/87, 1/1/95, 5/30/02, 8/11/05