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Payment during the Ohio department of job and family services (ODJFS) administrative appeals process for denial or termination of a provider agreement.

- (A) When ODJFS is required to provide an adjudicatory hearing pursuant to Chapter 119. of the Revised Code, payment shall continue for medicaid-covered services provided to eligible residents during the appeal of, and the proposed termination or non-renewal of, a nursing facility (NF) or an intermediate care facility for the mentally retarded (ICF-MR) provider agreement. Payment shall not be made under this provision for services rendered on or after the effective date of ODJFS issuance of a final order of adjudication pursuant to Chapter 119. of the Revised Code, except as provided in paragraph (B) of this rule.
- (B) Payment may be provided up to thirty days following the effective date of termination or non-renewal of a NF or ICF-MR provider agreement; or after an administrative hearing decision that upholds the ODJFS termination or non-renewal action. Payment will be available if both of the following conditions are met:
  - (1) Residents were admitted to the NF or ICF-MR before the effective date of termination or expiration; and
  - (2) The NF or ICF-MR cooperates with the state, local, and federal entities in the effort to transfer residents to other NFs, ICFs-MR, institutions, or community programs that can meet the residents' needs.
- (C) When ODJFS acts under instructions from the United States department of health and human services, payment ends on the termination date specified by that agency.

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## CERTIFIED ELECTRONICALLY

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