5101:3-3-04 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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