5101:3-30-01 Eligible provider for alcohol and drug addiction services.

- (A) An eligible provider for purposes of this chapter is an entity that meets the following criteria: is operating a program certified in accordance with the requirements set forth in Chapters 3793:2-1 and 3793:2-2 of the Administrative Code, or certified in accordance with the requirements set forth in Chapters 3793:2-1 and 3793:2-2 of the Administrative Code and licensed according to Chapter 3793:2-3 of the Administrative Code to provide a methadone program. An eligible provider must contract with an alcohol and drug addiction services board or an alcohol, drug addiction and mental health services board to receive medicaid reimbursement for the medicaid covered services defined in rule 5101:3-30-02 of the Administrative Code. Alcohol and drug addiction treatment services must be provided in accordance with Chapter 5101:3-30 of the Administrative Code.
 - (1) The entity has a valid medicaid provider agreement with the Ohio department of job and family services (ODJFS) in accordance with rule 5101:3-1-17 of the Administrative Code to provide alcohol and drug addiction treatment services in accordance with Chapter 5101:3-30 of the Administrative Code; and
 - (2) The entity is operating a program certified in accordance with the requirements set forth in Chapter 3793:2-1 of the Administrative Code, or certified in accordance with the requirements set forth in Chapter 3793:2-1 of the Administrative Code and licensed according to Chapter 3793:2-3 of the Administrative Code to provide a methadone program.
- (B) For any provider that is a government entity which receives nonfederal public funds, including but not limited to county departments of human services, county children services boards and local education agencies, eligibility is further contingent upon demonstration by the agency, as requested by the department of alcohol and drug addiction services, that sufficient state and/or local public funds not otherwise encumbered to match other federal funds will be committed to match Title XIX funds for reimbursement of the contracted service(s) and certified as representing expenditures eligible for federal financial participation.
- (B) An eligible provider may subcontract for services. For such services to be billable, the services must be certified in accordance with section 5119.61 of the Revised Code and provided in accordance with the provisions set forth in Chapter 5101:3-30 of the Administrative Code.
- (C) As a condition of participation in the Medicaid program, all eligible providers must submit to the Ohio department of alcohol and drug addiction services (ODADAS) cost reports at least annually for the period beginning July first and ending June thirtieth of each state fiscal year. The cost report must be prepared in accordance with generally accepted accounting principles. Any eligible provider failing to file a cost report within one hundred eighty days after the close of a fiscal year shall have its medicaid provider status terminated. When an incomplete or inadequate cost report is submitted within the prescribed time period, the provider will be notified

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that information is lacking. Lacking information is due within forty-five days after notification of inadequacy or the eligible provider shall have its medicaid provider status terminated. The eligible provider will not be reinstated until all delinquent or lacking information has been submitted to and accepted by ODADAS.

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