

5160-31-07

PASSPORT HCBS waiver program rate setting.

The purpose of this rule is to describe the methods used to determine provider rates for the PASSPORT HCBS Medicaid waiver program.

(A) Rates determined under this rule shall not exceed the maximum reimbursement rate for PASSPORT services in Appendix A to rule 5160-1-06.1 of the Administrative Code. Payment for PASSPORT HCBS waiver services constitutes payment in full and may not be construed as a partial payment when the payment amount is less than the provider's usual and customary charge. The provider may not bill the individual for any difference between the medicaid payment and the provider's charge or request the individual to share in the cost through a co-payment or other similar charge.

(B) PASSPORT reimbursement rates are established for the services in rule 5160-31-05 under the following categories:

- (1) Per job bid rate;
- (2) Per item rate; and
- (3) Unit rate.

(C) Rates set within the categories in paragraph (B) of this rule may be:

(1) Participant-directed, in which the individual or their designated authorized representative, who is acting on the individual's behalf, may negotiate the reimbursement rate for services furnished by providers as specified in paragraphs (D)(3), (E)(3), (G)(4), and (H) of this rule.

(2) Statewide, in which the State establishes a rate that is used on a statewide basis to reimburse for services specified in paragraph (F) of this rule.

(3) Regional, in which the State establishes a regional reimbursement rate for services specified in paragraph (G) of this rule. The regions in which applicable rates are calculated shall be designated by ODA.

(a) The regional rate for each service shall be the weighted average rate paid in the region using cost and unit data either from the most recently completed state fiscal year or the most recent twelve calendar months for which complete data is available, whichever is later.

(b) ODA or its designee shall enter into a contract with providers in each region. The contract shall do all of the following:

- (i) Specify the time period for which the rates shall be in effect;
- (ii) Specify the timelines for contracting;

(iii) Define the region/subregions for which the rates will be established;

(iv) Base rates on the units of service as set forth in appendix A to rule 5160-1-06.1 of the Administrative Code;

(v) Reflect the rate the provider is willing to accept as set forth in paragraph (H)(5) of this rule; and

(vi) Adjust the regional rate up to the nearest number that is divisible by four, out to two decimal places.

(c) Regional contract rates shall be established as follows:

(i) No provider shall have a contract rate that exceeds the rate for that service as established in rule 5160-1-06.1 of the Administrative Code.

(ii) If the state recalculates regional rates for the services in paragraph (G) of this rule, certified providers may either accept the new regional rate or continue to be reimbursed at the rate paid for services prior to the calculation of the regional rate.

(iii) Providers who are certified after the regional rate is established shall have a contract rate less than or equal to the regional rate.

(4) Group rates, in which a provider that is furnishing certain services to more than one individual enrolled on PASSPORT is reimbursed at a rate that is seventy-five per cent of the reimbursement rate the provider would be paid for furnishing PASSPORT services as specified in paragraphs (D)(2), (F)(2), (G)(2), and (G)(3) of this rule.

(D) For the services listed in this paragraph, a per job bid rate shall be negotiated between the provider and the individual's case manager.

(1) A per job bid rate shall be used for the following services:

(a) Chore Services;

(b) Community transition services;

(c) Minor home modification services;

(d) Non-medical transportation services;

(e) Pest control services; and

(f) Transportation services.

(2) Transportation and non-medical transportation services rendered simultaneously by the same provider to more than one individual enrolled in PASSPORT residing in the same household and traveling in the same vehicle to the same destination shall be reimbursed using a group rate that is equal to seventy-five per cent of the provider's per job bid rate. This applies to any combination of transportation and/or non-medical transportation services.

(3) Minor home modification and pest control services may be participant directed services in which the individual enrolled on PASSPORT or their authorized representative, acting on the individual's behalf, may negotiate reimbursement rates.

(a) The negotiated rate shall be reviewed by the individual's case manager and reflected on the individual's service plan prior to service delivery.

(b) Should the individual choose not to negotiate a rate of reimbursement the service shall be reimbursed at a rate proposed by the provider and accepted by the consumer and the consumer's case manager. The accepted rate shall be reflected on the consumer's service plan.

(E) A per item rate shall be determined for home medical equipment and supplies service.

(1) The cost of the item shall not exceed the medicaid state plan rate.

(2) The cost of an item that does not have an established medicaid rate shall be reimbursed at a per item bid rate submitted and agreed to in writing by the PASSPORT administrative agency (PAA) prior to delivery of the item.

(3) Home medical equipment and supplies services may be participant directed in which the individual enrolled on PASSPORT or the authorized representative, acting on the individual's behalf, may negotiate reimbursement rates.

(a) The negotiated rate shall be reviewed by the individual's case manager and reflected on the individual's service plan prior to service delivery.

(b) Should the individual choose not to negotiate a rate of reimbursement the service shall be reimbursed at a rate proposed by the provider and accepted by the consumer and the consumer's case manager. The accepted rate shall be reflected on the consumer's service plan.

(F) The Ohio department of aging (ODA) shall establish unit rates for the services listed in this paragraph. No service shall have both a regional and statewide rate set pursuant to this rule.

(1) Statewide rates shall be established and used for the following services:

(a) Adult day services;

(b) Emergency response system services;

(c) Enhanced community living services;

(d) Personal care services provided by ODA-certified long-term care consumer-directed personal care provider; and

(2) Personal care services rendered during the same visit by the same ODA-certified long-term care consumer-directed personal care provider to more than one but less than four PASSPORT consumers in the same household, as identified in the consumers' service plans, shall be reimbursed using a group rate equal to one hundred per cent of the provider's per unit rate set in accordance with paragraph (C) of this rule for one PASSPORT consumer. The provider shall be reimbursed seventy-five per cent of the provider's per unit rate for each subsequent PASSPORT consumer in the household receiving services during the visit.

(G) ODA shall establish regional unit rates for the services listed in this paragraph pursuant to the methodology in paragraph (C)(3) of this rule. No service, except personal care services provided under paragraph (F)(1)(f) of this rule, shall have both a regional and statewide rate set pursuant to this rule.

(1) Regional unit rates shall be set for the following services:

(a) Adult day services transportation;

(b) Home delivered meals services;

(c) Homemaker services;

(d) Social work counseling services;

(e) Nutritional Consultation services

(f) Personal care services; and

(g) Independent living assistance services.

(2) Adult day service transportation services rendered simultaneously by the same provider to more than one consumer residing in the same household and traveling in the same vehicle to the same destination shall be reimbursed using a group rate equal to seventy-five per cent of the provider's regional

unit rate.

(3) Personal care services, except personal care services provided under paragraph (F) of this rule, that are rendered during the same visit by the same provider to more than one but less than four PASSPORT consumers in the same household, as identified in the consumers' service plans, shall be reimbursed using a group rate equal to one hundred per cent of the provider's regional per unit rate set in accordance with paragraph (C) of this rule for one PASSPORT consumer. The provider shall be reimbursed seventy-five per cent of their regional per unit rate for each subsequent PASSPORT consumer in the household receiving services during the visit.

(4) Homemaker services may be participant directed services in which the individual enrolled on PASSPORT or their authorized representative, acting on the individual's behalf, may negotiate reimbursement rates.

(a) The negotiated rate shall be reviewed by the individual's case manager and reflected on the individual's service plan prior to service delivery.

(b) Should the individual choose not to negotiate a rate of reimbursement the service shall be reimbursed in accordance with paragraph (G) of this rule. The accepted rate shall be reflected on the consumer's service plan.

(H) The services in this paragraph are participant directed and the individual may negotiate unit rates with providers.

(1) The participant directed services include:

(a) Alternative meals service; and

(b) Choices home care attendant services.

(2) The consumer shall have in effect, before choices home care attendant services are delivered, a signed agreement with each ODA-certified consumer-directed individual provider delivering services to the consumer. The agreement shall:

(a) Include the rate of reimbursement negotiated with the provider;

(b) Specify the time period the rates shall be in effect;

(c) Base rates on the units of service as set forth in Chapter 173-39 of the Administrative Code;

(d) Be signed by the choices HCBS waiver program participant and the HCAS provider.

- (3) The rates negotiated by the choices HCBS waiver consumer with providers of services in this paragraph shall not exceed the maximum allowed per unit of service as specified in appendix A to rule 5160-1-06.1 of the Administrative Code. The negotiated rate shall be reviewed by the consumer's case manager and reflected on the consumer's service plan prior to service delivery.
- (4) Should the consumer choose not to negotiate a rate of reimbursement for any of the services in this paragraph, the service shall be reimbursed at a rate proposed by the provider and accepted by the consumer and the consumer's case manager. The accepted rate shall be reflected on the consumer's service plan.
- (I) The Ohio department of medicaid, or its designee, shall evaluate unit rates within two years of the effective date of this rule and every two years thereafter.

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