

173-43-02**Process.**

This rule sets forth the process and general guidelines for providing long-term care consultations.

(A) When an individual contacts the program administrator to seek information about options available to meet long-term care needs, the program administrator shall offer a long-term care consultation to the individual.

(B) When an individual applies for admission to a nursing facility or is seeking medicaid payment for a continued stay in a nursing facility, the program administrator shall provide a long-term care consultation to the individual.

(C) If the nursing facility determines that an individual is exempt from a long-term care consultation under rule 173-43-03 of the Administrative Code, the nursing facility shall document the reason for the exemption in the individual's record.

(D) If the program administrator determines that it is not required to provide a long-term care consultation to an individual under rule 173-43-03 of the Administrative Code, the program administrator shall provide documentation to the individual (or the individual's representative, if any) and to the nursing facility (if known) that identifies the exemption being met.

(E) For an individual for whom the program administrator is required to provide a long-term care consultation, the program administrator, in consultation with the individual, shall determine whether to perform the long-term care consultation before or after admission to a nursing facility.

(F) Information about an individual who is applying to a nursing facility or seeking medicaid payment for a continued stay in a nursing facility may come from the individual, the nursing facility to which admission is being sought, or through the pre-admission screening and resident review process. The program administrator may access the nursing facility resident assessment data the nursing facility collects through the resident assessment instrument to identify individuals who are likely to benefit from a long-term care consultation. As used in this paragraph, "resident assessment instrument" has the same meaning as in rule 5101:3-3-43.1 of the Administrative Code.

(G) Each long-term care consultation shall focus on the individual's needs, circumstances, and values and provide the individual with information about options available to meet the his or her needs. At a minimum, every long-term care consultation shall provide each of the following components:

(1) The availability of any long-term care options open to the individual;

(2) Sources and methods of both private and public payment for long-term care services;

- (3) Factors to consider when choosing among the available program, services, and benefits;
- (4) Opportunities and methods for maximizing independence and self-reliance, including support services provided by the individual's family, friends, and community; and,
- (5) Support for the individual as he or she explores the range of options available, makes decision about the appropriate services to meet their needs, and creates a plan of care.
- (H) At the conclusion of the long-term care consultation, the program administrator shall provide the individual (or the individual's representative) with a written summary of options and resources discussed.
- (I) The information the program administrator provides to an individual during a long-term care consultation is not binding. The individual may choose the long-term services and supports that best meet his or her needs.
- (J) The long-term care consultation may include an assessment of the individual's functional capabilities. The long-term care consultation may incorporate portions of the determinations required under section 5111.202 of the Revised Code and may be provided concurrently with the assessment required under section 5111.204 of the Revised Code.

  - (1) An individual who is subject to a pre-admission screening and resident review and/or a level-of-care review shall comply with the requirements of a pre-admission screening and resident review and/or a level-of-care review.
  - (2) If a long-term care consultation includes any portion of a pre-admission screening and resident review and/or a level-of-care review, any determinations made in relation to these reviews shall comply with rules 173-43-05, 5101:3-3-15, 5101:3-3-15.1, and 5101:3-3-15.2 of the Administrative Code.
- (K) A nursing facility that has a provider agreement with ODJFS may only admit or retain an individual as a resident upon receipt of evidence that the individual is exempt from or has met the requirements of this rule.
- (L) The nursing facility shall not deny or limit access to the facility or a resident of the facility to person attempting to provide a long-term care consultation.

Replaces: 173-43-02, 5101:3-3-14

Effective:

R.C. 119.032 review dates:

---

Certification

---

Date

Promulgated Under: 119.03  
Statutory Authority: 173.01, 173.02, 173.42  
Rule Amplifies: 173.42  
Prior Effective Dates: 06/30/2007