<u>5101:3-3-02.1</u> Length and type of long term care provider agreements.

(A) Definitions.

- (1) "Reasonable assurance period" means a certain period of time, determined by the centers for medicare and medicaid services (CMS), for which a long term care facility operator whose provider agreement has been involuntarily terminated is required to operate without recurrence of the deficiencies that were the basis for termination. Participation in the medicare and medicaid programs may resume only following that period. If corrections were made before submission of a new request for participation, the period of compliance before the new request is counted as part of the period.
- (2) "State survey agency" means the agency that is under contract with the state medicaid agency and that inspects long term care facilities for the purposes of survey and certification. The state survey agency in Ohio is the Ohio department of health (ODH). The state medicaid agency in Ohio is the Ohio department of job and family services (ODJFS).
- (B) Effective dates skilled nursing facilities (SNFs), nursing facilities (NFs), and <u>SNF/NFs.</u>
 - (1) Initial certification of NFs and SNF/NFs.
 - (a) Effective dates of NF and SNF/NF provider agreements generally are assigned by the state survey agency on the basis of findings of compliance or substantial compliance with standards of certification.
 - (b) The effective date shall not be earlier than the date on which compliance is documented via the state survey agency's onsite visits to the institution.
 - (c) The effective date of a provider agreement of a nursing facility that participates in the medicaid program as a SNF/NF shall be the same as that of the facility's medicare provider agreement.
 - (2) NFs subsequently approved to operate as SNF/NFs.
 - (a) Upon approval from CMS of a NF to participate in the medicare program as a SNF/NF, ODJFS shall issue a SNF/NF provider agreement.
 - (b) The effective date of this provider agreement shall be the same as that of the facility's medicare provider agreement.
 - (3) Re-entry into the program following involuntary termination.
 - (a) Following involuntary termination of the medicaid provider agreement for a nursing facility, the provider agreement effective date of a facility

re-entering the medicaid program shall be the same effective date as the date CMS issues for the facility's medicare provider agreement.

(b) Re-entry may occur only after the successful completion of a reasonable assurance period as determined by CMS.

(C) Term limits - NFs and SNF/NFs.

- (1) The term of a provider agreement shall be based on the period of certification established by the state survey agency.
- (2) The actual term of the agreement may be less than, but shall not exceed, the certification period recommended by the state survey agency.
- (3) NFs and SNF/NFs.
 - (a) NFs and SNF/NFs are governed by open-end provider agreements.
 - (b) Open-end agreements have no specific expiration date.
 - (c) Continuation of an open-end provider agreement is contingent upon findings of continued compliance or substantial compliance with certification standards as determined by the state survey agency.

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Certification

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