



Ohio Administrative Code

Rule 173-45-01 Long-term care consumer guide: introduction and definitions.

Effective: November 13, 2025

(A) Introduction: This chapter governs the Ohio long-term care consumer guide that AGE electronically publishes to provide the public with detailed information on Ohio's long-term care facilities, including nursing homes, residential care facilities, skilled nursing facility units of hospitals, and county homes certified to receive medicare and medicaid reimbursement. The information includes a facility's size, location, services offered, customer satisfaction data, regulatory compliance performance data, and, in the case of nursing facilities, quality measures. The guide's information allows the public to search for facilities. The guide may also include detailed information about other types of long-term care providers. The long-term care quality navigator publishes information obtained from the guide and satisfies the requirements of the guide.

(B) Definitions for this chapter:

"AGE" means the Ohio department of aging.

"CMS" means "centers for medicare and medicaid services."

"Facility" means a nursing facility or residential care facility.

"Guide" means the "Ohio long-term care consumer guide," which was created by AGE in accordance with section 173.46 of the Revised Code, published as the long-term care quality navigator.

"Medicaid" has the same meaning as in section 5162.01 of the Revised Code.

"Medicare" has the same meaning as in section 5162.01 of the Revised Code.

"Nursing facility" means either of the following:

(1) A facility, or a distinct part of a facility, that is certified as a nursing facility or a skilled nursing



facility for purposes of the medicare or medicaid program.

(2) A nursing home licensed under section 3721.02 of the Revised Code that is not certified as a nursing facility or skilled nursing facility.

"ODH" means the Ohio department of health.

"Quality measure" means an aspect of the physical or mental conditions of the residents of a nursing facility that is derived from the resident assessment instruments submitted by nursing facilities to CMS for the purposes of the medicare and medicaid programs.

"Residential care facility" (RCF) has the same meaning as in section 3721.01 of the Revised Code.