



Ohio Administrative Code

Rule 4123-6-38 Payment for home health nursing services and home health aide services.

Effective: February 1, 2022

(A) Except as provided in rule 4123-6-38.1 of the Administrative Code, home health nursing services and home health aide services shall be provided by registered nurses or licensed practical nurses and home health aides employed by a home health agency meeting the qualifications specified in paragraph (C) of rule 4123-6-02.2 of the Administrative Code.

(B) Authorization for home health nursing services and home health aide services.

(1) Authorization for home health nursing services will be considered only in cases where, as the result of an allowed injury or occupational disease:

(a) The injured worker is mentally or physically incapable of independently performing activities of daily living; or

(b) Home health nursing services or home health aide services are ordered for discharge follow-up or by a treating physician as part of a written treatment plan.

(2) The request for authorization from the physician of record or treating physician must include a written treatment plan that identifies the reason for home health nursing services or home health aide services, the period of time the services will be needed, the specific services needed, and the number of hours per day that are needed.

(3) Authorization must be obtained prior to rendering home health nursing services or home health aide services, except in cases of emergency or where the injured worker's allowed conditions could be endangered by the delay of services.

(C) Except as otherwise provided in paragraph (D) of this rule, only part-time or intermittent home health nursing services or home health aide services will be authorized, in accordance with the written treatment plan. Part-time or intermittent care means that total home health nursing services



and home health aide services do not exceed eight hours per day.

(D) When more than eight hours of total home health nursing services or home health aide services are medically necessary, the bureau will consider more appropriate alternative settings. In exceptional cases, the bureau may authorize more than eight hours of total home health nursing services or home health aide services when medically necessary and appropriate.

(E) Authorized home health aide services may include:

(1) Bathing, dressing, grooming, hygiene, including shaving, skin care, foot care, ear care, hair, nail, and oral care needed to facilitate care or prevent deterioration of the injured worker's health.

(2) Feeding, assistance with elimination including administering enemas (unless the skills of a home health nurse are necessary), routine catheter care, routine colostomy care, assistance with ambulation, changing position in bed, and assistance with transfers.

(3) Performing a selected nursing activity or task delegated in accordance with Chapter 4723-13 of the Administrative Code and performed as specified in the written treatment plan.

(4) Assisting with activities such as routine maintenance exercises and passive range of motion as specified in the written treatment plan developed by either a licensed therapist or a licensed registered nurse within their scope of practice. These activities are directly supportive of skilled therapy services but do not necessitate the skills of a therapist to be safely and effectively performed.

(5) Performing routine care of prosthetic and orthotic devices.

(F) Incidental services performed by a home health aide for the injured worker, such as laundry, minor meal preparation, or light housekeeping, are not direct health care services and will not be reimbursed, except to the extent they are ancillary to providing direct health care services. Incidental services may not extend the service hours provided, and may only be performed for the injured worker, not other members of the household.



(G) The services of an adult day care facility meeting the qualifications specified in paragraph (C) of rule 4123-6-02.2 of the Administrative Code may be utilized in lieu of home health nursing services or home health aide services. The hours of such adult day care facility services will be included in the calculation of service hours referenced in paragraph (C) of this rule.

(H) A physical examination of the injured worker must be conducted by the physician of record or treating physician no less than annually to ensure that home health nursing services or home health aide services, and the number of service hours requested, are medically necessary and appropriate as a result of the allowed injury or occupational disease. In extraordinary circumstances when an in-person physical examination is not reasonably possible, BWC may accept a telemedicine visit with the physician of record or treating physician.

(I) Home health agency providers must maintain records which fully document the extent of services provided to each injured worker, in compliance with rule 4123-6-45.1 of the Administrative Code. The bureau may request detailed hourly descriptions of care delivered to an injured worker to review care needs, medical necessity and appropriateness, and billing accuracy.