



Ohio Administrative Code Rule 5122-14-04 Classification of licenses.

Effective: April 24, 2024

(A) Licenses are classified as follows:

(1) A probationary license, which expires within one hundred twenty days of the date of issuance, to be used in either of the following circumstances:

(a) Serious deficiencies are found during the department's on-site survey of an inpatient psychiatric service provider; or

(b) An inpatient psychiatric service provider's documented corrective action is not approved by the department.

(2) An interim license, which expires within ninety days after the date of issuance, to be used for emergency licensure purposes or administrative reasons as determined by the department.

An inpatient psychiatric service provider applying for its first license, and who has preliminary, interim, or similar accreditation, is to be issued an interim license until it obtains full accreditation from either TJC, ACHC, or DNV.

(3) A full license expires one year after the date of issuance.

(B) All licenses are renewable, except that an interim license may be renewed only twice.

(C) A license will specify authorization to admit either one or both age categories of patients based upon the provision of age appropriate diagnostic and treatment services. The child/adolescent category applies to all persons less than eighteen years of age upon admission. The adult category applies to all persons eighteen years of age and older upon admission.

(1) Persons less than eighteen years of age are to be admitted only to authorized child/adolescent



designated beds;

(2) Persons eighteen years of age and older are to be admitted only to authorized adult designated beds.

(3) The following will be the only exceptions permitted for not admitting a patient to an age appropriate bed. All exceptions are based on clinical needs specific to each patient or the unavailability of age appropriate designated beds. For all exceptions there is to be documentation in the patient's medical record of the reasons for the exception and ongoing concurrent utilization review. The inpatient service provider is to maintain a log which is to contain the reason for admission, length of stay, referral arrangements, and reason for the exception. The department is to review the log annually.

(a) For child/adolescent admissions to adult beds due to the unavailability of child/adolescent beds, the concurrent utilization review is to include documentation indicating all efforts made to seek appropriate resources and linkages with child/adolescent providers for consultation including treatment planning and after hospitalization care.

(b) The inpatient psychiatric service provider is to inform the parent or legal guardian of the reasons for the decision to admit a child/adolescent to an adult designated bed and also provide information about all available child/adolescent designated beds.

(c) When the admission is an emergency and all child/adolescent designated beds are unavailable, a person less than eighteen years of age upon admission may be admitted to an adult designated bed.

(i) A sixteen or seventeen-year-old patient may remain in an adult designated bed for up to seventy-two hours, and if all child/adolescent beds remain unavailable, the admission may be extended for an additional seventy-two hours. If the admission is extended beyond the first seventy-two hours, an assessment mandated by paragraph (E)(2)(g) of rule 5122-14-13 of the Administrative Code is to be conducted, and rehabilitation therapy services and family therapy/interventions are to be available in accordance with paragraphs (K)(3) to (K)(4) of rule 5122-14-12 of the Administrative Code.

(ii) A fifteen-year-old or younger patient may remain in an adult designated bed for a maximum of



forty-eight hours if all child/adolescent beds remain unavailable.

(d) A seventeen-year-old person may be electively admitted and treated in an adult designated bed if the person is functioning as an adult in such areas as employment (with limited or no school involvement), family, or marriage, or if the diagnosis or problem is such that treatment is warranted in an adult designated bed, provided that such treatment best meets the patient's needs.

(e) A patient eighteen to twenty-one years old may be admitted to a child/adolescent designated bed based on developmental or other clinical needs specific to the patient.

(4) To receive authorization to admit persons less than eighteen years of age, the licensee is to have diagnostic and treatment services that meet the needs of these patients in accordance with rules 5122-14-12 and 5122-14-14 of the Administrative Code.