



Ohio Administrative Code

Rule 5122-24-01 Certification definitions.

Effective: August 1, 2026

(A) Purpose

The purpose of this rule is to provide definitions for key words and phrases used in the department's certification standards for community behavioral health services and recovery supports.

(B) Applicability

The following definitions apply to Chapters 5122-24 to 5122-29 of the Administrative Code, unless otherwise specified in one of those chapters:

- (1) "Abuse" means any act or absence of action inconsistent with human rights which results or could result in physical injury to an individual served, unless the act is done in self defense or occurs by accident; any act which constitutes sexual activity, as defined under Chapter 2907. of the Revised Code, where such activity would constitute an offense against an individual served under that chapter; insulting or coarse language or gestures directed toward an individual served which subjects the individual served to humiliation or degradation; or depriving an individual served of real or personal property by fraudulent or illegal means. For children, "abuse" is as described in section 2919.22 of the Revised Code; "abused child" has the same meaning as in section 2151.031 of the Revised Code.
- (2) "Acceptability" means the way in which the provider ensures that its services and activities are sensitive to the individual needs of people, and that the provider addresses issues of freedom of choice, and of ethnic, racial, gender and cultural characteristics. "Acceptability" includes seeking out the advice of individuals being served, or of populations who may not be receiving sufficient services as reflected by a comparison of community demographics and the demographics of individuals served by the provider, in order to understand how acceptability varies within the general population.
- (3) "Accessibility" means the ability for individuals served to enter, approach, communicate with, or make use of the services of a provider, including but not limited to the need for bilingual staff, minority-specific programming, staffing patterns that reflect community demographics and adequacy of hours of operation.
- (4) "Activity" means an action performed by a provider that does not constitute a certifiable service or support as defined in paragraph (B)(11) of this rule, and therefore does not have a cost per unit, but that is reimbursable by the department, either as an activity, e.g., research, or as a portion of the unit cost of services, e.g., administrative.



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- (5) "Administer" means the direct application of a single drug to the body of a client either by injection, inhalation, ingestion or any other means. The complete act of administration entails the following:
- (a) Removal of an individual dose from a previously dispensed, properly labeled container;
 - (b) Verification of drug dose with the practitioner's order;
 - (c) Properly identifying the client before giving the individual dose; and
 - (d) Properly recording the time, date, and dose given in the client's integrated clinical record.
- (6) "Administrative supervision" means to monitor the administrative aspects of a service or group of services within a provider.
- (7) "Admission" means a provider's decision to offer direct services to an individual, and includes opening an individual client record for the individual at the time of the first admission to the provider.
- (8) "Alcohol and drug addiction services" has the same meaning as in section 5119.01 of the Revised Code.
- (9) "Appropriateness" means actions, treatment, or service that promote empowerment, dignity, and self-worth as defined by the individual served in consultation with the individuals providing the service or support.
- (10) "Board of alcohol, drug addiction, and mental health services" or "board" has the same meaning as in section 5119.90 of the Revised Code.
- (11) "Certifiable services or supports" and "certifiable services and supports," depending on the context, means the alcohol and drug addiction services, mental health services, and recovery supports that the department certifies that are specified in Chapter 5122-29 of the Administrative Code.
- (12) "Certificate" means the official document containing the department's written authorization to the provider to operate specific services or supports or activities.
- (13) "Certification" means the written authorization from the department for a provider to operate specific certifiable services or supports and provide activities according to Chapters 5122-24 to 5122-29 of the Administrative Code.



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- (14) "Certification standards" means the prerequisites as stated in Chapters 5122-24 to 5122-29 of the Administrative Code with which a provider must comply in order to receive certification by the department to provide certifiable services and supports, as well as activities listed in section 340.09 of the Revised Code. These services, supports, and activities are those included in the provider's contract with the Ohio department of medicaid, the provider's contract or sub-contract with the board of alcohol, drug addiction, and mental health services, or for which a non-contract provider has voluntarily applied to operate.
- (15) "Client" means an individual admitted by a provider for certifiable services or supports or who receives certifiable services or supports from a provider. "Individuals," "individuals receiving services or supports," "individuals being served," "individuals served," or "consumer" have the same meaning as "client." The terms include all categories of individuals of all ages, unless specified.
- (16) "Community behavioral health services" means alcohol and drug addiction services or mental health services, or both, as defined in section 5119.01 of the Revised Code.
- (17) "Community behavioral health services provider" means a community addiction services or community mental health services provider, or both, as defined in section 5119.01 of the Revised Code.
- (18) "Community support system" means an array of services, supports, and activities that provides prevention, treatment, and support services and is referred to in division (A)(2) of section 340.011 of the Revised Code. This array includes all of the following:
 - (a) Location of individuals in need of certifiable services or supports to inform them of available services, supports, and benefit mechanisms;
 - (b) Assistance for clients to obtain services necessary to meet basic human needs for food, clothing, shelter, medical care, personal safety, and income;
 - (c) Mental health or addiction care, including, but not limited to outpatient, day treatment, and, where appropriate, inpatient care;
 - (d) Emergency services and crisis intervention;
 - (e) Assistance for clients to obtain vocational services and opportunities for jobs;



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- (f) Provision of services designed to develop social, community, and personal living skills;
 - (g) Access to a wide range of housing and the provision of residential treatment and support;
 - (h) Support, assistance, consultation, and education for clients receiving certifiable services and supports, those clients' families and friends, and others;
 - (i) Recognition and encouragement of families, friends, and neighborhood networks, especially networks that include racial and ethnic minorities, churches, community organizations, and meaningful employment as natural supports for clients receiving certifiable services or supports;
 - (j) Grievance procedures and protection of the rights of clients receiving certifiable services or supports; and
 - (k) Case management, which includes continual individualized assistance and advocacy to ensure that needed services are offered and procured.
- (19) "Consent" means agreement to participate in a research or treatment procedure on the basis of the subject's understanding of its nature and possible risks and benefits.
- (20) "Crisis" means a situation with a high stress level, for either an individual or a system, and where usual coping methods do not succeed in resolving the issues presented by the precipitating event. A crisis is usually short in duration, lasting less than eight to twelve weeks.
- (21) "Culturological assessment" means the systematic appraisal or examination of individuals, groups and communities as to their cultural beliefs, values and practices to determine explicit needs and intervention practices within the cultural context of the people being evaluated. "Culturological assessment" includes the following domains:
- (a) Patterns of life style;
 - (b) Specific cultural values/norms;
 - (c) Cultural taboos/myths;
 - (d) Worldview and ethnocentric tendencies;



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- (e) General features that client perceives similar to other cultures;
 - (f) Health and life care rituals and rites of passage to maintain health;
 - (g) Folk and professional health/illness systems utilized;
 - (h) Degree of cultural change and acculturation noted;
 - (i) Caring behaviors;
 - (j) Cultural restrictions;
 - (k) Spiritual needs; and
 - (l) Family.
- (22) "Department" means the Ohio department of behavioral health.
- (23) "Destruction" means the act of making a drug unusable.
- (24) "Director" means the chief executive and administrative officer of the Ohio department of behavioral health.
- (25) "Dispense" has the same meaning as in rule 4729:1-1-01 of the Administrative Code. Only those individuals authorized by the state board of pharmacy may dispense medications.
- (26) "Distribute" means the general system of moving drugs from a supplier to final destination, whether administered to an individual served, stored, returned to supplier or destroyed.
- (27) "Emergency" means a situation that is a matter of life or death or of extreme drastic loss of an individual's ability to manage a potentially dangerous situation where the goal is avoidance of loss and minimization of risks.
- (28) "Executive director" means the individual responsible for the day-to-day operation of a provider. The executive director, as defined by this paragraph, may be referred to by other titles, such as "chief executive officer."
- (29) "Federally-qualified health center" and "federally-qualified health center look-alike" have the same meanings as in section 3701.047 of the Revised Code.
- (30) "Grievance" means a formal request for further review of any unresolved written complaint or a complaint containing allegations of the denial, exercise or violation of the rights of individuals served. A grievance may be initiated



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either verbally or in writing by an individual served, client, ex-client, or any other individual or provider acting on behalf of an individual served.

(31) "Group practice" means two or more individuals to which all of the following apply:

(a) The individuals have formed a corporation under Chapter 1701. of the Revised Code, a limited liability company under Chapter 1706. of the Revised Code, a non-profit corporation under Chapter 1702. of the Revised Code, a professional association under Chapter 1785. of the Revised Code, or a partnership or limited partnership under Chapter 1776. or 1782. of the Revised Code;

(b) The primary purpose of the entity they have formed under paragraph (B)(31) (a) of this rule is for providing the professional services of any one or more of the following practitioners, and such practitioners may also employ or contract with others to support the provision of the professional services:

(i) Physicians who are licensed or otherwise legally authorized to practice medicine and surgery or osteopathic medicine and surgery under Chapter 4731. of the Revised Code;

(ii) Physician assistants as defined in section 1.64 of the Revised Code;

(iii) Clinical nurse specialists or certified nurse practitioners, as defined in section 1.64 of the Revised Code, including psychiatric-mental health advanced practice registered nurses;

(iv) Psychologists who are licensed or otherwise legally authorized to practice psychology under Chapter 4732. of the Revised Code;

(v) Licensed professional clinical counselors, independent social workers, independent marriage and family therapists, or marriage and family therapists who are licensed or otherwise legally authorized for their respective practices under Chapter 4757. of the Revised Code;

(vi) Licensed independent chemical dependency counselor-clinical supervisors or licensed independent chemical dependency counselors regulated under Chapter 4758. of the Revised Code.

(c) Each practitioner who is a member of the group practice provides substantially the full range of services the same type of practitioner would routinely provide if practicing as a sole practitioner, except that the



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practitioners do so through the joint use of shared office space, facilities, equipment, and personnel;

(d) The overhead expenses of the group are the responsibility of each individual member of the group in accordance with methods previously determined by members of the group.

(32) "Hazardous materials" means any substance considered to be potentially harmful to humans, including, but not limited to, toxic chemicals or flammable substances.

(33) "ICR" means individual client record as described in Chapter 5122-27 of the Administrative Code.

(34) "Individual with serious emotional disturbance" means an individual who is under twenty-two years of age who meets criteria that is a combination of duration of impairment, intensity of impairment, and diagnosis.

(a) Criteria:

(i) Under twenty-two years of age;

(ii) Marked to severe emotional/behavioral impairment;

(iii) Impairment that seriously disrupts family or interpersonal relationships; and

(iv) May involve the services of other youth-serving systems (e.g., education, human services, juvenile court, health, intellectual disabilities, youth services, and others).

(b) Marked-to-severe behavioral impairment is defined as impairment that is at or greater than the level implied by any of the following criteria in most social areas of functioning:

(i) Inability or unwillingness to cooperate or participate in self-care activities;

(ii) Suicidal preoccupation or rumination with or without lethal intent;

(iii) School refusal and other anxieties or more severe withdrawal and isolation;



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- (iv) Obsessive rituals, frequent anxiety attacks, or major conversion symptoms;
 - (v) Frequent episodes of aggressive or other antisocial behavior, either mild with some preservation in social relationships or more severe requiring considerable constant supervision; or
 - (vi) Impairment so severe as to preclude observation of social functioning or assessment of symptoms related to anxiety (e.g., severe depression or psychosis).
- (c) An impairment that seriously disrupts family or interpersonal relationships is defined as one:
 - (i) Requiring assistance or intervention by police, courts, educational system, mental health system, social service, human services, and/or children's services;
 - (ii) Preventing participation in age-appropriate activities;
 - (iii) In which community (home, school, peers) is unable to tolerate behavior; or
 - (iv) In which behavior is life-threatening (e.g., suicidal, homicidal, or otherwise potentially able to cause serious injury to self or others).
- (35) "Individual with severe mental disability" or "individual with serious mental illness" means an individual, eighteen years of age or older, who currently, or at any time during the past year, has had a diagnosable mental, behavioral, or emotional disorder of sufficient duration to meet diagnostic criteria that has resulted in functional impairment substantially interfering with or limiting one or more major life activities. Major life activities include activities of daily living such as eating, bathing, or dressing; instrumental activities of daily living, such as maintaining a household, managing money, getting around the community, or taking prescribed medications; or functioning in social, family, or vocational/educational contexts.
- (36) "Intervention" means a procedure that is intended to produce a change in behavior, cognition, and/or physiological or biochemical process.
- (37) "ITP" means individualized treatment plan as described in rule 5122-27-03 of the Administrative Code.



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- (38) "Mental health services" has the same meaning as in section 5119.01 of the Revised Code.
- (39) "Misconduct" means any act that may affect, interrupt or interfere with the performance of official duties and that is illegal or a wrongful performance or omission of a legal duty.
- (40) "Neglect" means a purposeful or negligent disregard of duty by an employee or staff member. Such duty is one that is imposed on an employee or staff member by statute, rule, or professional standards and which is owed to the individual served by that employee or staff member.
- (41) "Orientation" means a process designed to improve or enhance an employee's knowledge about his or her job responsibilities and physical environment to increase awareness of the expectations, choices, resources, and constraints that affect job performance and adjustment.
- (42) "Outcomes" means the impact on the system or individual served.
- (43) "Parent" means either parent of a minor, except that if one parent has sole custody, "parent" means the parent with sole custody. "Parent" also includes a guardian or custodian as defined in section 2151.011 of the Revised Code.
- (44) "Person," as specified in section 1.59 of the Revised Code, includes an individual, corporation, business trust, estate, trust, partnership, and association.
- (45) "Personally furnish" has the same meaning as in rule 4729:8-1-01 of the Administrative Code. Only those individuals authorized by the state board of pharmacy may personally furnish drugs for use outside a prescriber's practice setting.
- (46) "Physician" (DO or MD) means an individual authorized under Chapter 4731. of the Revised Code to practice medicine and surgery or osteopathic medicine and surgery.
- (47) "Plan" means a written document related to a service or activity that describes goals and objectives, assigns responsibility for implementation, establishes outcome measures, and assigns responsibility for monitoring and reporting results.
- (48) "Policy" means a written statement developed by a provider that gives specific direction regarding how the provider intends to operate, either administratively or programmatically. Policies are developed to ensure that provider staff



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perform their duties in a consistent manner and that the public can expect that all services and activities will be conducted according to the policy statement.

- (49) "Practitioner" means an individual eligible to provide a service in accordance with Chapter 5122-29 of the Administrative Code.
- (50) "Prescribe" means the professional judgment of selecting a specific drug, dosage and schedule of administration appropriate to the therapeutic needs of an individual served.
- (51) "Principal" means an individual who has controlling authority or is in a leading position, (e.g., executive director, chief financial officer, or chief clinical officer); a principal may also be an owner, partner, or member of the governing body of the provider.
- (52) "PRN order" (pro re nata order) means a written practitioner's order for a medication, treatment, or procedure which is only carried out when an individual served manifests a specific, previously defined clinical or behavioral characteristic.
- (53) "Procedure" means a written set of instructions describing the step-by-step actions to be taken by provider staff in implementing the policies of the provider.
- (54) "Psychiatrist" (DO or MD) means a physician who has satisfactorily completed a residency training program in psychiatry approved by the residency review committee of the accreditation council for graduate medical education of the American medical association, the committee on postgraduate education of the American osteopathic association, or the American osteopathic board of neurology and psychiatry a physician who has been recognized as of July 1, 1989, as a psychiatrist by the Ohio state medical association or Ohio osteopathic association, on the basis of formal training and five or more years of medical practice limited to psychiatry or a physician working under a temporary license and completing a residency in psychiatry.
- (55) "Recovery" means the personal process of change in which Ohio residents strive to improve their health and wellness, resiliency, and reach their full potential through self-directed actions.
- (56) "Recovery supports" has the same meaning as in section 5119.01 of the Revised Code.
- (57) "Referral" means a recommendation to seek or request certifiable services or supports and/or evaluation between agencies in order to assess or meet the needs of individuals served. Referral, as used in "information and referral



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service," means the act of assisting an individual gain access to certifiable services or supports of a community behavioral health services provider.

- (58) "Resiliency" means a dynamic process which takes into account the interaction of risk and protective factors, contextual conditions, as well as the individual's traits and abilities.
- (59) "Self-administration" means an individual taking medication independently.
- (60) "Significant others" means individuals who are significant and important to the well-being of an individual served, as identified by the individual served.
- (61) "Standard" means a stated level of performance for a service or activity expressed as an accepted and adhered-to practice.
- (62) "Stock supply" means a volume of medications that are not dispensed, or not labeled with the specific name of an individual served, and has the same meaning as "limited stock supply."
- (63) "Student" means an individual enrolled in an approved, certified or accredited educational program and who may provide certifiable services or supports as part of his/her practicum, internship, or field placement, and with appropriate supervision according to the obligations of the educational institution, applicable licensing board standards, and in coordination with applicable provider policies and procedures.
- (64) "Supervise" means to monitor, instruct and be accountable for provider staff in their performance of clinical services to individuals served according to the policies of the provider. "Supervise" has the same meaning as "clinical supervision."
- (65) "Termination" means the decision to no longer provide services to an individual served by the provider.
- (66) "Transfer" means a provider's recommendation to discontinue providing one or more services to an individual and to begin providing another service(s) in the same provider.
- (67) "Variance" means written permission granted by the department to a provider to meet a modified requirement of a rule in the Administrative Code.
- (68) "Waiver" means written permission granted by the department to a provider to be exempted from a rule or specific provision of a rule in the Administrative Code.