



Ohio Administrative Code

Rule 5122-25-02 Certification procedure - initial application.

Effective: August 1, 2026

- (A) This rule specifies the procedure a provider is to follow when applying for initial certification of at least one certifiable service or support.

If the provider is already certified for at least one certifiable service or support and seeks to add one or more certifiable services or supports to the menu of services or supports it provides, the provider has two options:

- (1) If the provider is seeking to add services or supports during its certification term, submit an update application to the department using the procedure in rule 5122-25-03 of the Administrative Code.
- (2) If the provider is seeking to add services or supports when renewing certification for other services or supports, submit a renewal application to the department using the procedure in rule 5122-25-04 of the Administrative Code and indicate the desire for the certification of the additional services or supports in that application.

- (B) A provider is to submit an application for initial certification to the department through the department's licensure and certification tracking system. If a provider has a parent organization that operates multiple providers, each provider under that parent organization is to submit its own application.

The application for initial certification consists of all of the following:

- (1) An initial application form mandating all of the following information:
 - (a) The provider's legal name as it is filed with the Ohio secretary of state and, if applicable, any other name under which the provider does business.
 - (b) The provider's federal tax identification number (FTID). If the provider has a parent organization, the FTID listed is to be the FTID of the provider and not the FTID of the parent organization.
 - (c) If applicable, the numbers of all certificates or licenses the provider already possesses from the department.
 - (d) The addresses and telephone numbers for each physical (i.e., brick and mortar) site at which the provider intends to provide certifiable services or supports and the address the provider uses to receive legal notices and correspondence. For purposes of this subparagraph, each provider is to own or lease at least one physical site in Ohio where certifiable services and supports are to be provided. All of the following do not qualify as a physical site:



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- (i) A co-working or shared workspace used on an "as-needed basis";
- (ii) A library;
- (iii) A restaurant, cafe, or similar environment;
- (iv) A school, except where a school-based provider has an office on the premises of a school or a school operates a permanent site for the delivery of one or more certifiable services or supports; or
- (v) A site which would be considered the client's natural environment (e.g., home or county department of job and family services location).

If the physical location is leased by the provider, any room where clients are seen is not to be shared with other lessees or individuals who are not affiliated with the provider.

- (e) The provider's governing structure and the names and contact information for each member of the provider's governing body, board of directors, or similar body.
- (f) The provider's table of organization.
- (g) The name and email address of the provider's executive director, chief executive officer, or president.
- (h) The name and email address of the individual who serves as the provider's primary contact.
- (i) The provider's history of licensure or certification for certifiable services or supports or their equivalent in this state and all other jurisdictions where the applicant provides mental health services, addiction services, or recovery supports.
- (j) A list of the certifiable services or supports specified in Chapter 5122-29 of the Administrative Code that are to be provided during the term of certification, along with identification of each service or support that is accredited by, or for which an application for accreditation is pending with, one or more of the following national accrediting organizations specified in division (B)(3) of section 5119.36 of the Revised Code, the status of that accreditation (e.g., full, provisional, conditional, etc.), and the name of each national accrediting organization accrediting each service or support:



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- (i) The joint commission;
- (ii) The commission on accreditation of rehabilitation facilities;
- (iii) The council on accreditation; or
- (iv) Any other national accrediting organization the director considers appropriate.

For a provider that solely operates or seeks to operate opioid treatment programs exclusively serving clients who are enrolled as opioid treatment program participants (meaning the provider does not operate or seek to operate any site that serves clients who are not enrolled as opioid treatment program participants), the department will accept opioid treatment program national accreditation as sufficient evidence of national accreditation for purposes of compliance with division (B) of section 5119.36 of the Revised Code for the following certifiable services and supports needing to be certified under rule 5122-40-04 of the Administrative Code: general services as described in rule 5122-29-03 of the Administrative Code, substance use disorder (SUD) case management services as described in rule 5122-29-13 of the Administrative Code, and crisis intervention service as described in rule 5122-29-10 of the Administrative Code.

- (k) The number of beds for each residential and withdrawal management substance use disorder services location.
 - (l) A description of the provider's purpose, mission, and goals.
 - (m) Notification if the provider plans to use seclusion and restraint as defined in rule 5122- 26-16 of the Administrative Code.
 - (n) Any other information the department requests for the purpose of determining that the provider's services and supports meet certification standards.
- (2) If requested by the department, any of the following corporate information:
- (a) A copy of the provider's articles of incorporation and all amendments thereto;
 - (b) Identification of the statutory corporate agent for service; and



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- (c) If an out-of-state corporation, a copy of the corporation's registration with the Ohio secretary of state to do business in Ohio.
- (3) For each jurisdiction where the provider already provides certifiable services or supports or their equivalent, whether any adverse action, as defined in section 5119.367 of the Revised Code, was taken against the provider, any owner or principal of the provider, or any subsidiary of the provider or owner within the three-year period immediately preceding the date of application.
- (4) The applicable non-refundable fee or fees specified in rule 5122-25-12 of the Administrative Code.
- (5) A copy of each national accrediting organization survey report and any modifications to the survey reports, if applicable.
- (6) A copy of each certificate, license, or plaque issued by a national accrediting organization.
- (7) A copy of each accreditation award notification letter issued by a national accrediting organization.
- (8) Copies of approved physical inspections, either initial or renewal, for each physical (i.e., brick and mortar) site at which the provider intends to provide certifiable services or supports, including:
 - (a) A building inspection by a local certified building inspector or a certificate of occupancy issued by the department of industrial relations, to be re-inspected whenever there are major alterations or modifications to the building or facility. An additional building inspection is mandated for any major change in the use of space that would make the building or facility subject to review under different building code standards;
 - (b) An approved fire inspection conducted within the previous twelve months, free of deficiencies, that was conducted by a certified fire authority or, where none is available, by the division of the state fire marshal of the department of commerce;
 - (c) A water supply and sewage disposal inspection, if these systems are not connected with public services, to certify compliance with rules of the department of health and any other state or local regulations, rules, codes, or ordinances;
 - (d) A current boiler certificate of operation, if applicable;



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(e) A current elevator permit, if applicable; and

(f) A food service license or permit, if required by the department of health.

(C) Upon receipt of an application for initial certification, the department will review it to determine whether it is complete and compliant. If the application is incomplete or not compliant, the department will notify the provider of the corrections or additions that are needed and may return the application to the provider. Return of the application or failure to issue a certificate is not a denial of an application for certification.

A provider that fails to respond to a request to submit corrections or additions to an application for initial certification within forty-five days of the request is to automatically be considered to have withdrawn its application. If the provider desires to seek certification again, the provider is to file a new application for initial certification.

(D) Following the department's determination that an application for initial certification is complete and compliant and that the standards specified in section 5119.36 of the Revised Code and rules adopted under that section are satisfied, the director will, in accordance with division (A) of section 5119.36 of the Revised Code, inform the board of alcohol, drug addiction, and mental health services serving the alcohol, drug addiction, and mental health service district in which the provider's certifiable services or supports will be provided of the receipt of the application. On the board's request, the director is to provide the board with a copy of the application. In addition, the director will determine, in accordance with paragraph (D)(1) of this rule, whether an on-site review is needed or permitted and take the appropriate action. If necessary pursuant to paragraph (D)(2) of this rule, the department will complete a written statement of noncompliance.

(1) On-site reviews

(a) The director may conduct an on-site review of the provider if the director needs additional information to determine whether the standards in section 5119.36 of the Revised Code and any rules adopted under that section are satisfied.

Otherwise, if the director determines that the standards specified in section 5119.36 and any rules adopted under that section are satisfied without the need for additional information, the director will issue the certification without further evaluation of the services or supports.

If the director chooses to conduct an on-site review under these circumstances, the director may conduct the on-site review in cooperation



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with a board of alcohol, drug addiction, and mental health services that seeks to contract or has a contract with a provider under section 340.036 of the Revised Code. It is up to the department's discretion as to whether the department will notify a provider in advance of such an on-site review.

- (b) If the director determines that national accreditation does not exist for at least one of the certifiable services or supports or equivalent services or supports for which the provider is seeking certification, however, an on-site review is mandatory. Under these circumstances, it is the director's obligation to conduct an on-site review of the provider for certifiable services or supports for which national accreditation does not exist.
- (c) In addition to an on-site review conducted under paragraph (D)(1)(a) or (D)(1)(b) of this rule, the department may, as authorized by division (H) of section 5119.36 of the Revised Code, conduct an on-site review or otherwise evaluate a provider at any time based on cause, including complaints made by or on behalf of individuals receiving certifiable services or supports and confirmed or alleged deficiencies brought to the director's attention. The department has the discretion to determine whether it will notify a provider in advance of such an on-site review. In conducting an on-site review under these circumstances, the department may do so in cooperation with a board of alcohol, drug addiction, and mental health services that seeks to contract or has a contract with the provider under section 340.036 of the Revised Code.
- (d) Regardless of whether the department is conducting an on-site review under paragraph (D)(1)(a), (D)(1)(b), or (D)(1)(c) of this rule, the department is to have access to all of the provider's records, regardless of format, to verify compliance with certification standards. In addition, the department may conduct interviews with members of the provider's governing body, staff, and others and, with client permission, the client.

(2) Written statement of noncompliance

If the department determines that a provider fails to comply with any certification standards applicable to the provider, the department is to send to the provider a written statement citing the items that are not in compliance. The statement is to describe the deficiencies and specify the actions needed for correction. The provider's plan of correction is to describe the actions the provider plans to take and a time frame in which the provider plans to correct all deficiencies.

A provider that fails to respond to a request to submit a corrective response (e. g., a plan of correction) within ninety days is to automatically be considered to



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have withdrawn its application. If the provider desires to seek initial certification again, the provider is to file a new application for initial certification.