



Ohio Administrative Code

Rule 5123-7-27 Intermediate care facilities for individuals with intellectual disabilities - request for rate reconsideration.

Effective: July 1, 2024

(A) Purpose

This rule establishes a process for an intermediate care facility for individuals with intellectual disabilities (ICFIID) or a group or association of ICFIID providers to request reconsideration of an ICFIID's per diem payment rate pursuant to section 5124.38 of the Revised Code.

(B) Submission of request

(1) An ICFIID will submit a request for reconsideration of the ICFIID's per diem payment rate in writing via email to cr-icf@dodd.ohio.gov. The request will indicate the basis for rate reconsideration.

(2) In addition to the circumstances described in section 5124.38 of the Revised Code, an ICFIID may request reconsideration of the ICFIID's per diem payment rate on the basis of:

(a) A possible error in the calculation of the rate, in which case the request will:

(i) Be submitted to the department within thirty calendar days after the later of the initial payment of the rate or the receipt of the rate-setting calculation.

(ii) Include a detailed explanation of the possible error and the proposed corrected calculation and references to the relevant sections of the Revised Code and/or rules of the Administrative Code, as applicable.

(b) Actual allowable costs that are significantly higher than those recognized by the ICFIID's current per diem payment rate and the ability of the ICFIID to deliver necessary care and active treatment is severely jeopardized, in which case the request will include:



(i) A detailed explanation of the current hardship and the impact on delivery of necessary care and active treatment.

(ii) A cost report for at least three full months of operation.

(C) Consideration of request

(1) The department will respond in writing within sixty calendar days of receiving a written request for rate reconsideration. If the department requests additional information to determine whether a rate adjustment is warranted, the ICFIID will respond in writing and provide additional supporting documentation within thirty calendar days of receipt of the request for additional information. The department will respond in writing within sixty calendar days of receiving the additional information.

(2) If the department grants a rate adjustment due to an error in the calculation of the rate, the adjustment will be implemented retroactively to the initial service date for which the rate is effective.

(3) If the department grants a rate adjustment due to actual allowable costs that are significantly higher than those recognized by the ICFIID's current per diem payment rate and the ability of the ICFIID to deliver necessary care and active treatment is severely jeopardized, the adjustment will be implemented the first day of the first month after the request is approved.

(4) If the department grants a rate adjustment to an ICFIID that subsequently undergoes a change of operator, the adjusted rate will remain in place as though a change of operator had not occurred.

(5) The department's decision at the conclusion of the rate reconsideration process is not subject to any administrative proceedings under Chapter 119. or any other provision of the Revised Code.