



Ohio Administrative Code

Rule 5160-3-02.1 Nursing facilities (NFs): length and type of provider agreements.

Effective: June 24, 2016

(A) Definitions.

(1) "Reasonable assurance period" means a certain period of time, determined by the centers for medicare and medicaid services (CMS), for which a nursing facility operator whose provider agreement has been involuntarily terminated is required to operate without recurrence of the deficiencies that were the basis for termination. Participation in the medicare and medicaid programs may resume only following that period. If corrections were made before submission of a new request for participation, the period of compliance before the new request is counted as part of the period.

(2) "State survey agency" means the agency that is under contract with the state medicaid agency and that inspects nursing facilities for the purposes of survey and certification. The state survey agency in Ohio is the Ohio department of health (ODH). The state medicaid agency in Ohio is the Ohio department of medicaid (ODM).

(B) Effective dates.

(1) Initial certification of NFs and skilled nursing facilities/nursing facilities (SNF/NFs).

(a) Effective dates of NF and SNF/NF provider agreements generally are assigned by the state survey agency on the basis of findings of compliance or substantial compliance with standards of certification.

(b) The effective date shall not be earlier than the date on which compliance is documented via the state survey agency's onsite visits to the facility.

(c) The effective date of a provider agreement of a nursing facility that participates in the medicaid program as a SNF/NF shall be the same as that of the facility's medicare provider agreement.



(2) NFs subsequently approved to operate as SNF/NFs.

(a) Upon approval from CMS of a NF to participate in the medicare program as a SNF/NF, ODM shall issue a SNF/NF provider agreement.

(b) The effective date of this provider agreement shall be the same as that of the facility's medicare provider agreement.

(3) Re-entry into the program following involuntary termination.

(a) Following involuntary termination of the medicare provider agreement for a nursing facility, the provider agreement effective date of a facility re-entering the medicare program shall be the same effective date as the date CMS issues for the facility's medicare provider agreement.

(b) Re-entry may occur only after the successful completion of a reasonable assurance period as determined by CMS.

(C) Term limits.

(1) A NF or SNF/NF provider agreement shall expire no later than five years from the effective date of the agreement in accordance with section 5164.32 of the Revised Code. The process for revalidation of a NF or SNF/NF provider agreement is specified in rule 5160-1-17.4 of the Administrative Code

(2) The term of a NF or SNF/NF provider agreement shall be determined by the period of certification established by the state survey agency, which is based upon compliance with certification standards. The term of a NF or SNF/NF provider agreement may be less than, but shall not exceed, five years.