



Ohio Revised Code

Section 5119.362 Duties of community addiction services provider.

Effective: September 30, 2025

Legislation: House Bill 96

(A) In accordance with rules adopted under section 5119.363 of the Revised Code, each community addiction services provider shall do all of the following:

(1) Maintain a waiting list for the provider's included opioid and co-occurring drug addiction services and recovery supports;

(2) Notify an individual included on the provider's waiting list when the provider has a slot available for the individual and, if the individual does not contact the provider about the slot within a period of time specified in the rules, contact the individual to determine why the individual did not contact the provider and to assess whether the individual still needs the included opioid and co-occurring drug addiction services and recovery supports;

(3) Remove an individual from the waiting list if either of the following applies:

(a) The individual withdraws the individual's request for included opioid and co-occurring drug addiction services and recovery supports;

(b) When the provider notifies the individual about an available slot, the individual does not contact the provider about the slot within the period of time specified in the rules or otherwise vacates the slot before beginning to receive the services and supports.

(4) As part of the process of maintaining the waiting list, determine both of the following:

(a) For each individual who seeks from the provider included opioid and co-occurring drug addiction services and recovery supports, the number of days that starts with the day the individual first contacts the provider about accessing the services and supports and ends on the following day:

(i) If the individual is required to be assessed for the individual's clinical need for the services and



supports, the day of the assessment;

(ii) If the individual is not required to be assessed for the individual's clinical need for the services and supports, the first day of the individual's access to the services and supports.

(b) For each such individual who is required to be assessed for the individual's clinical need for the services and supports, the number of days that starts with the day of the assessment and ends with the first day of the individual's access to the services and supports.

(5) Using information the provider acquires by maintaining the waiting list, determine whether included opioid and co-occurring drug addiction services and recovery supports are insufficient to meet the needs of individuals on the waiting list;

(6) Subject to division (B) of this section, report all of the following information not later than the last day of each month to the department of behavioral health:

(a) An unduplicated count of all individuals who were included on the provider's waiting list during the immediately preceding month and each type of included opioid and co-occurring drug addiction services and recovery supports for which they were waiting;

(b) The total number of days each such individual had been on the provider's waiting list during the immediately preceding month;

(c) The last known type of residential setting in which each such individual resided during the immediately preceding month;

(d) The total number of individuals who did not contact the provider after receiving, during the immediately preceding month, the notices under division (A)(2) of this section about the provider having slots available for the individuals and, if known, the reasons the contacts were not made;

(e) The total number of such individuals who withdrew, in the immediately preceding month, their requests for included opioid and co-occurring drug addiction services and recovery supports, each type of service and support that those individuals had requested or been assessed as having a clinical



need for, and, if known, the reasons those individuals withdrew their requests;

(f) An unduplicated count of all individuals who were referred to another community addiction services provider because the referring provider does not provide the type of included opioid and co-occurring drug addiction services and recovery supports that those individuals had requested or been assessed as having a clinical need for and each type of service and support for which those individuals were referred;

(g) All other information specified in the rules.

(B) Each report that a community addiction services provider provides to the department under this section shall do both of the following:

(1) For the purposes of divisions (A)(6)(a) and (f) of this section, specify the counties of residence of the individuals in the unduplicated counts and include identifying information required by the rules adopted under section 5119.363 of the Revised Code so that the department is able to identify any individuals who are inadvertently duplicated in the counts;

(2) For the purpose of the information reported under division (A)(6)(c) of this section, identify the types of residential settings at least as either institutional or noninstitutional.