

**NOTICE OF PUBLIC HEARING**

**DATE:** May 17, 2024

**TIME:** 10:00 a.m.

**PLACE:** Lobby Hearing Room  
Rhodes State Office Tower  
30 East Broad Street  
Columbus, Ohio 43215

**SUBJECT:** Rules governing Home and Community-Based Services waivers

Pursuant to Chapter 119. of the Revised Code, the Ohio Department of Developmental Disabilities hereby gives notice of its intent to amend and adopt rules of the Administrative Code on a permanent basis on or about July 1, 2024, and to conduct a public hearing thereon. At this public hearing, the Department will accept verbal and/or written testimony regarding the proposed rule actions. Persons unable to attend the public hearing may submit written comments. Any written comments received on or before the public hearing date will be treated as testimony and made available for public review. Submittal of written comments may be made to Becky Phillips, Administrative Rules Coordinator, by email to [becky.phillips@dodd.ohio.gov](mailto:becky.phillips@dodd.ohio.gov) or by U.S. mail to 1810 Sullivant Avenue, Columbus, Ohio 43223-1239. Comments

regarding rules are public records; persons submitting comments should refrain from including confidential or personal information about themselves or any other person.

The Ohio Department of Developmental Disabilities is proposing to amend four rules governing Home and Community-Based Services (HCBS) waivers.

Rule 5123-9-13 (HCBS waivers - career planning under the individual options, level one, and self-empowered life funding waivers) defines Career Planning and sets forth provider qualifications, requirements for service delivery and documentation of services, and payment standards for the service. The rule is being amended to add outcome-based payments available to providers of the Job Development component of Career Planning. There are two types of outcome-based payments. A provider may obtain either or both payments for each individual served:

- One payment when the individual achieves competitive integrated employment.
- Another payment if the individual achieves competitive integrated employment that pays at least \$12 per hour and/or employs the individual for an average of at least 30 hours per week.

The amount of the payments varies based on an individual's acuity assessment group assignment. Additional amendments are being made to define "acuity assessment group" and "pay stub," rescind the currently effective appendices (Appendix A and Appendix B), and enact a single new appendix.

Rule 5123-9-15 (HCBS waivers - individual employment support under the individual options, level one, and self-empowered life funding waivers) defines Individual Employment Support and sets forth provider qualifications, requirements for service delivery and documentation of services, and payment standards for the service. The rule is being amended to add outcome-based payments available to providers of Individual Employment Support. There are two types of outcome-based payments. A provider may obtain either or both payments for each individual served:

- One payment when the individual retains competitive integrated employment for 90 days.
- Another payment when the individual retains competitive integrated employment for 180 days.

The amount of the payments varies based on an individual's acuity assessment group assignment. Additional amendments are being made to define "acuity assessment group" and "pay stub," add "customized employment" to paragraph (B)(13)(a), rescind the currently effective appendices (Appendix A and Appendix B), and enact a single new appendix.

Rule 5123-9-25 (HCBS waivers - specialized medical equipment and supplies under the individual options and level one waivers) defines Specialized Medical Equipment and Supplies and sets forth provider qualifications, requirements for service delivery and documentation of services, and payment standards for the service. Based on the required five-year review, the rule is being amended to:

- Revise the definition of "Specialized Medical Equipment and Supplies."
- Add a definition of "useful life."
- Set forth explicitly, that an agency provider will ensure personnel possess appropriate knowledge, skills, and abilities relative to the type of equipment or supplies they are providing.
- Eliminate a provision that requires a veterinarian attending to service animals be licensed.
- Set forth explicitly, that Specialized Medical Equipment and Supplies will be authorized only when the item is unavailable through the Medicaid State Plan.
- Eliminate a provision that requires a provider of Specialized Medical Equipment and Supplies to assume full liability for equipment improperly installed or maintained.
- Align wording with newer rules.
- Eliminate regulatory restrictions.

Rule 5123-9-34 (HCBS waivers - residential respite under the individual options, level one, and self-empowered life funding waivers) defines Residential Respite and sets forth provider qualifications, requirements for service delivery and documentation of services, and payment standards for the service. The rule is being amended to adjust the payment rates for the Residential Respite 15-minute billing unit. Specifically, the rule is being amended to:

- Add a definition of "group size."
- Add new paragraph (F)(3) which sets forth the manner in which group size impacts the payment rates for Residential Respite 15-minute billing units.
- Rescind the currently effective appendices (Appendix A and Appendix B).
- Enact a single new appendix.
- Adjust payment rates for the 15-minute billing unit.

In addition, the Department is proposing to adopt a new rule for a new HCBS waiver service:

Rule 5123-9-27 (HCBS waivers - health care assessment under the individual options, level one, and self-empowered life funding waivers) defines Health Care Assessment and sets forth provider qualifications, requirements for service delivery and documentation of services, and payment standards for the service. Health Care Assessment uses technology to facilitate real-time consultation and support provided by a physician, a physician assistant, or an advanced practice nurse to assist an individual and/or the individual's caregivers to understand the individual's presenting health symptoms and identify appropriate next steps. The intent of the service is to provide right-on-time health assessment to determine the best clinical course of action, often avoiding unnecessary emergency room visits and decreasing the need for inpatient admissions.

The rules are available for review at the [Register of Ohio](#) and at the [Department's website](#). The rules are also available for review at each county board of developmental disabilities.

The Department is committed to providing access and inclusion and reasonable accommodation in its services, activities, programs, and employment opportunities in accordance with the Americans with Disabilities Act and other applicable laws. To request a reasonable accommodation due to a disability, please contact Becky Phillips, Administrative Rules Coordinator, no later than May 3, 2024, by email to [becky.phillips@dodd.ohio.gov](mailto:becky.phillips@dodd.ohio.gov) or by telephone (614-644-7393 / TTY 711).

Please note that visitors to the Rhodes State Office Tower must enter the building through the Broad Street lobby. Visitors will be required to register at the security desk by showing government-issued photo identification and pass through a magnetometer. Visitors' belongings, such as purses and backpacks, are subject to inspection.