

Hearing Date: 12/21/2020 Today's Date: 1/22/2021

Agency: Ohio Department of Medicaid

Rule Number(s): 5160-3-80

If no comments at the hearing, please check the box.

List organizations or individuals giving or submitting testimony before, during or after the public hearing and indicate the rule number(s) in question.

1. Beverley L. Laubert, State Long Term Care Ombudsman (5160-3-80)
2. Kelly Shank, Ohio Association of Advanced Practice Registered Nurses (5160-3-80)
3. Click here to enter text.
4. Click here to enter text.
5. Click here to enter text.
6. Click here to enter text.
7. Click here to enter text.
8. Click here to enter text.
9. Click here to enter text.
10. Click here to enter text.
11. Click here to enter text.
12. Click here to enter text.
13. Click here to enter text.
14. Click here to enter text.
15. Click here to enter text.
16. Click here to enter text.

Hearing Report and Summary

Consolidated Summary of Comments Received

Please review all comments received and complete a consolidated summary paragraph of the comments and indicate the rule number(s).

One comment asked that the Department ensure access to Health Care Isolation Centers (HCICs) for individuals with dementia. Another comment stressed the importance of quality of care and asked that the Department add additional quality requirements. A third comment asked that the Department add language stressing the right of the State Long Term Care Ombudsman and her representatives to have access to HCICs in the same manner that they have access to other nursing facilities. A final comment asked that the requirements for HCICs be modified so that Advance Practice Registered Nurses have the same ability to sign orders for admission and discharge to HCICs.

Hearing Report and Summary

Incorporated Comments into Rule(s)

Indicate how comments received during the hearing process were incorporated into the rule(s).
If no comments were incorporated, explain why not.

No Changes were made to the rules following the Public Hearing.

Individuals with dementia can receive care in an HCIC with a physician order and a COVID diagnosis or exposure under the current language.

Applications are reviewed by the Ohio Department of Health which considers the quality of care in the facility prior to making a recommendation for approval to the Ohio Department of Medicaid. This process effectively provides the quality oversight requested by the commenter.

HCICs are required to be certified for Medicaid participation as nursing facilities. Existing regulatory provisions require ombudsman access to these facilities.

No change was made to the requirements for a physician's order for admission to and discharge from an HCIC. The physician's order replaces the level of care determination and is required under federal approval for the HCIC program.