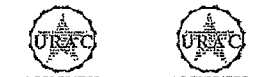
PERMEDION
an HMS company



August 28, 2009

Dear Medicaid Provider:

The Ohio Department of Job and Family Services (ODJFS) is required to implement and administer utilization and quality review of the Ohio Medical Assistance (Medicaid) Program, according to the 456.3 Code of Federal Regulations (CFR). ODJFS has contracted with Permedion for the development, implementation, and management of the statewide comprehensive quality and utilization review program.

As part of the ODJFS Quality and Utilization Management Program, Permedion has been asked to conduct a quality improvement study to assess the physical, clinical and functional characteristics of consumers residing in ICF/MR facilities. Information requested will be provided to Permedion from patient information documented in:

3697 Level of Care Form – last current form completed as of June 2008

The Individual Service Plan (ISP) – at the time of admission into the program (if available) and the last one completed as of June 2008

Ohio Eligibility Determination Instrument for over 16 years old
If the consumer is under 16 years old – The Children's Ohio Eligibility Determination Instrument

Medical records of the consumer's admission assessment and admission physician orders

Medical records of the last current assessment and physician orders as of June 2008

Your facility has been selected to participate in this study. This letter serves as the request for the above information to be produced for an **off site** review for the specific patients for the specific admission date listed in the attached request.

Information requested for this review must be postmarked within **30 days** of this notification or can be faxed to a secure confidential fax number provided below. Please send/fax the copies of the requested patient forms along with the enclosed identification sheet to:

ICF/MR FACILITY AND WAIVER FUNCTIONAL ASSESSMENT STUDY
ATTN: CYNTHIA HUGG
PERMEDION
350 WORTHINGTON ROAD, SUITE H

350 Worthington Road, Suite H • Westerville, OH 43082
614/895-9900 • fax: 614/895-6784 • www.permedion.com

Ohio | Department of Job and Family Services

Ted Strickland, Governor
Douglas E. Lumpkin, Director

August 10, 2009

Medicaid ICFMR Facility Provider:

The Ohio Department of Job and Family Services (ODJFS), Office of Ohio Health Plans (OHP), has asked Permedion, an independent health care quality review and improvement organization, to conduct a "ICFMR Facility and Waiver Functional Assessment" study funded through dollars allocated under the State Fiscal Year 2007 Contract.

The study is a component of Ohio's "Front Door" work, a multi-phase project aimed at improving access points for individuals who are elderly and/or have disabilities.

Proposed Front Door Work Plan Phases and Timeline (as of June 2009)

Phase 1	Short Term PASRR Impact	May 2008 – May 2009
Phase 2	Short Term Level of Care Impact NF, ICF/MR, beginning steps toward a Single Screening Tool (uniform assessment), Level of Care for children	June 2009 – Jan. 2011
Phase 3	Long Term PASRR Impact	Feb 2011 – Jan. 2012
Phase 4	Long Term Level of Care Impact Tiered System, Front Door IT changes	Feb. 2012 – June 2014

*Note: Phases 3 and 4 will likely occur together during the Feb. 2011 through June 2014 timeframe).

Good data is one of the key elements of policy change expected to occur throughout all of the phases of the "Front Door" Project. The Permedion studies are aimed at providing the key data to drive potential changes to both the Nursing Facility and ICF/MR criteria and process. Permedion's work to gather data for the Nursing Facility component (August 2007 through July 2009) is almost complete. Permedion will soon begin the data collection process for the ICF/MR study.

The ICF/MR study will assess the physical, clinical and functional characteristics of individuals residing in Intermediate Care Facilities for persons with MR/DD or enrolled in the Level 1, Individual Options or Transitions MR/DD waivers. The study objectives are to determine variations and frequencies in such characteristics across the settings and to identify factors or characteristics that may be associated with, or precipitate, admissions to facilities or enrollment into one of the waiver programs.

30 East Broad Street
Columbus, Ohio 43215
jfs.ohio.gov

An Equal Opportunity Employer and Service Provider

Ohio Medicaid Utilization Program ICF/MR Study Medical Record Request List

Last Name	First Name	Date of Birth	Sex	Medicaid #	Provider Name	Address 1
[illegible]	[illegible]	04/07/1985	M	[illegible]	[redacted]	[redacted]SID FAC
[illegible]	[illegible]	07/30/1971	F	[illegible]	[redacted]	[redacted]RESID FAC
					TOTAL: 2	

Please include this
cover sheet with your
copies of medical records
and mail/ship to:

Cynthia Hugg
Permedion
350 Worthington Road, Suite H
Westerville, OH 43082

or

fax to
866-480-3579