Cost of Living Adjustment - Draft Rule/Budget Language¹

5123-9-06

- (J) Payment for waiver services
- (1) Providers will be paid the lesser of their usual and customary rate or the payment rate for each waiver service that is delivered. The department will maintain a mechanism through which providers will communicate their usual and customary rates to the department. A single provider may charge different usual and customary rates for the same service when the service is provided in different geographic areas of the state. In this instance, the usual and customary rates charged will be declared for each cost-of-doing-business category contained in appendix B to this rule that identifies the counties in which the provider intends to provide specific services. Upon notification of a provider's usual and customary rate or change in usual and customary rate, the department will provide notice to the appropriate county board.
- (2) The billing units, service codes, and payment rates for waiver services are contained in service-specific rules in Chapter 5123-9 of the Administrative Code including, but not limited to:
 - (a) 5123-9-12 (assistive technology under the individual options and level one waivers);
 - (b) 5123-9-13 (career planning under the individual options and level one waivers);
 - (c) 5123-9-14 (vocational habilitation under the individual options and level one waivers);
 - (d) 5123-9-15 (individual employment support under the individual options and level one waivers);
 - (e) 5123-9-16 (group employment support under the individual options and level one waivers);
 - (f) 5123-9-17 (adult day support under the individual options and level one waivers);
 - (g) 5123-9-18 (non-medical transportation under the individual options and level one waivers);
 - (h) 5123-9-20 (money management under the individual options and level one waivers);

¹ Note – similar concepts/model for ICFs found in 5124.19

- (i) 5123-9-21 (informal respite under the level one waiver);
- (j) 5123-9-22 (community respite under the individual options and level one waivers);
- (k) 5123-9-23 (environmental accessibility adaptations under the individual options and level one waivers);
- (l) 5123-9-24 (transportation under the individual options and level one waivers);
- (m) 5123-9-25 (specialized medical equipment and supplies under the individual options and level one waivers);
- (n) 5123-9-26 (self-directed transportation under the individual options and level one waivers);
- (o) 5123-9-28 (nutrition services under the individual options waiver);
- (p) 5123-9-29 (home-delivered meals under the individual options and level one waivers);
- (q) 5123-9-30 (homemaker/personal care under the individual options and level one waivers);
- (r) 5123-9-31 (homemaker/personal care daily billing unit under the individual options waiver);
- (s) 5123-9-32 (participant-directed homemaker/personal care under the individual options and level one waivers);
- (t) 5123-9-33 (shared living under the individual options waiver);
- (u) 5123-9-34 (residential respite under the individual options and level one waivers);
- (v) 5123-9-35 (remote support under the individual options and level one waivers);
- (w) 5123-9-36 (interpreter services under the individual options waiver);
- (x) 5123-9-37 (waiver nursing delegation under the individual options and level one waivers);
- (y) 5123-9-38 (social work under the individual options waiver);
- (z) 5123-9-39 (waiver nursing services under the individual options waiver);
- (aa) 5123-9-41 (clinical/therapeutic intervention under the level one waiver);
- (bb) 5123-9-43 (functional behavioral assessment under the level one waiver);

- (cc) 5123-9-45 (participant-directed goods and services under the level one waiver);
- (dd) 5123-9-46 (participant/family stability assistance under the level one waiver); and
- (ee) 5123-9-48 (community transition under the individual options waiver).
- (3) Beginning July 1, 2025 and no later than July 1 of each fiscal year, the department of developmental disabilities shall adjust the payment rates for services listed in (J)(2)(a) through (ee) of this rule by the greater of:
 - (a) Three percent;
 - (b) The rate of inflation for the previous 12 months using the unadjusted percent change for all items found in the consumer price index for all urban consumers published by the United States bureau of labor statistics or its replacement;
- (4) Funding ranges and budget limitations in this rule, 5123-9-19, and 5123-9-40 shall be increased to accommodate any increase in payment rates resulting from the provisions in (J)(3) of this rule.
- (5) The department will periodically collect payment information for a comprehensive, statistically valid sample of individuals from providers of home and community-based services at the time the information is collected. Based upon the department's review of the information, the department will recommend to the Ohio department of medicaid any changes necessary to assure that the payment rates are sufficient to enlist enough waiver providers so that waiver services are readily available to individuals, to the extent that these types of services are available to the general population, and that provider payment is consistent with efficiency, economy, and quality of care.
- (6) Payment for home and community-based services constitutes payment in full. Payment will be made for home and community-based services when:
 - (a) The service is identified in an approved individual service plan;
 - (b) The service is recommended for payment through the cost projection and payment authorization process; and
 - (c) The service is provided by a provider selected by an individual enrolled in the waiver.5123-9-06 14
- (7) Payment for waiver services will not exceed amounts authorized through the cost projection and payment authorization for the individual's corresponding waiver eligibility span.