

New Individual Options Waiver Service Rules and Single Homemaker/Personal Care Rule Clearance Comments

5123:2-9-32 Adult Family Living

Issue/Paragraph	Comment	By Whom?	DODD Response
(D)(2)	Strike or revise as it is the SSA's responsibility to coordinate services.	Dustin McKee, OACB	The paragraph has been eliminated.
(D)(2)	This language should be stricken as the SSA is responsible to coordinate services.	Missy Craddock, OPRA	The paragraph has been eliminated.
(G)(3)	States that the rule does not apply to individuals whose cost of adult family living is less than 20% of the individual "funding level." We are confused about this language. Is the department referring to "funding range?" We believe this section may be difficult to understand and suggest it be reworded to more clearly indicate DODD's intent for this provision.	Dustin McKee, OACB	The paragraph has been reworded to: "This rule does not apply to an individual whose cost of adult family living is <u>for whom personal care and support services provided by a caregiver who is related to and lives with the individual constitute</u> less than twenty per cent of his or her individual funding level."
Rates	Extremely low reimbursement rate for individuals in ODDP Range 1 will cause individuals to live elsewhere at much higher cost and receive a lower level of care. Compared to Range 1 rate for Adult Foster Care, Range 1 rate for Adult Family Living is inequitably low.	Greg Eppich	The rates for Adult Family Living were based on the current costs of individuals on an Individual Options waiver who live with and receive Homemaker/Personal Care services from a family provider. Today, there are approximately 90 individuals in ODDP Range 1 who live with and receive services from a family provider. Their average annual costs are just over \$14,000, so it is reasonable to expect that the needs of individuals in Range 1 can be met with the annual reimbursement cap.

Issue/Paragraph	Comment	By Whom?	DODD Response
Rates	Rates are too low and discriminate against families. There is a lack of qualified providers.	Kim Kelly	<p>The rates for Adult Family Living (AFL) were based on the current costs of individuals on an Individual Options waiver who live with and receive Homemaker/Personal Care (HPC) services from a family provider. Today, there are approximately 90 individuals in ODDP Range 1 who live with and receive services from a family provider. Their average annual costs are just over \$14,000, so it is reasonable to expect that the needs of individuals in Range 1 can be met with the annual reimbursement cap.</p> <p>After many meetings and discussions with families, DODD made the decision to "grandfather" family members who are currently providing HPC services for their children in the family home. DODD has heard from many parents who are elated with the new option. For many, the new AFL service will be an increase; more importantly, it will simplify documentation and billing under a daily rate.</p>

5123:2-9-34 Residential Respite and Community Respite

Issue/Paragraph	Comment	By Whom?	DODD Response
General	The rule is not clear as to when a service can be called HPC and when it must be called respite. It appears reimbursement is lower for Community Respite. Is there an advantage to billing for Community Respite that I fail to understand?	Tess Flannery, Associate Director, CYO and Community Services, Akron	<p>If a service being delivered meets the definition of Community Respite or Residential Respite, it is that service.</p> <p>The advantage of Community Respite is that it establishes a daily rate for camp.</p>
(B)(3)	Does this restriction prevent a provider from using an adult day habilitation location during its off-hours? We have some providers who find this a sensible way to use space.	Missy Craddock, OPRA	<p>No; as long as the provision of adult day services does not occur simultaneously at the same location where respite services are being provided.</p> <p>The last sentence of paragraph (B)(3) has been moved to paragraph (E)(2) and reworked into two phrases.</p>
(B)(3)	Our agency provides programming based in therapeutic recreation principles. Our program serves individuals with developmental disabilities in community settings; we are hoping this fits your definition of "an organized community program."	Deb Shumard, Director, Beyond Our Boundaries	The definition does not include an exhaustive list all of the possible types of locations where the service can be provided.

Issue/Paragraph	Comment	By Whom?	DODD Response
(B)(3), (B)(4), (B)(5), (B)(6), & (E)(4)(g)	Our agency coordinates group vacations involving overnight stays at various destinations. Our trips are one, two, or three nights in duration. We are making the assumption that the rule, as proposed, would allow for full-day billing each day that ends in an overnight stay, then partial day billing (or 15-minute) for the day the individual is returning home, as long as the billing is not mixed in the same calendar day. Is this accurate?	Deb Shumard, Director, Beyond Our Boundaries	Yes; if the service meets all other requirements of the rule.
Distinction between service settings	Rule should explicitly recognize the distinction between community and institutional settings for respite services.	Kevin Truitt, Attorney, OLRS	We believe it does, as set forth in paragraphs (B)(3) and (B)(16).
(C)(2)(a)	Paragraph should state that respite services shall be provided in the least restrictive environment and pursuant to the individual's choice.	Kevin Truitt, Attorney, OLRS	We do not believe it necessary to state this in the rule. The concepts of least restrictive environment and freedom of choice of provider are well established and applicable to all waiver services.
(C)(2)(c)	Strike or revise as it is the SSA's responsibility to coordinate services.	Dustin McKee, OACB	The paragraph has been eliminated.
(C)(2)(c)	We believe this language should be stricken or revised as the SSA is responsible to coordinate services, not the provider of services.	Missy Craddock, OPRA	The paragraph has been eliminated.
(E)(4)(e)	We recommend further clarification in the payment standards section of the new rule. For example, in section (E)(4)(e) discussing partial day billing for Community Respite, it is not clear if a provider can also bill for Homemaker/Personal Care services on a day it billed for respite.	Missy Craddock, OPRA	It is permissible for a provider to bill Homemaker/Personal Care and Community Respite on the same day as long as it is not for the same time of day. Please see paragraph (E)(2)(b).
Waiver of licensed capacity	There is also no provision in this proposed rule providing for a waiver of licensed capacity in order to provide Residential Respite care, such as that present in rule 5101:3-3-02.3.	Missy Craddock, OPRA	DODD's authority to waive licensed capacity is addressed in rule 5123:2-3-15 (<i>Procedures to Waive Licensure Rule Requirements</i>); we do not believe it is necessary to repeat in this rule.

Issue/Paragraph	Comment	By Whom?	DODD Response
Adult Foster Care rates	The rule does not specifically state that if, for example, a foster provider with two individuals takes in a respite person for the weekend, that the foster rate does not drop with the addition of another person in the foster setting. Is it understood that because there are two different waivers and rates, the foster provider's foster rates will not be penalized with the respite individual?	Missy Craddock, OPRA	If we understand correctly that you are referring to Adult Foster Care in your example, the staff ratio would not be adjusted when an individual is receiving Residential Respite (which is by definition, a short-term service). The provider would be paid the \$130 daily rate for the individual receiving Residential Respite. In no case, however, shall the total number of individuals with a developmental disability being served in the home (including those receiving Residential Respite) exceed four; and, unless the home is licensed under section 5123.19 of the Revised Code, the provider shall not provide Adult Foster Care to more than three of the individuals living in the home.

5123:2-9-35 Remote Monitoring and Remote Monitoring Equipment

Issue/Paragraph	Comment	By Whom?	DODD Response
Privacy	Rule raises several privacy concerns for any individual receiving services.	Kevin Truitt, Attorney, OLRS	DODD has purposefully included protections in paragraphs (D)(2)(d)(i), (D)(2)(d)(ii), (D)(2)(g), and (D)(2)(q) to address such concerns.
(B)(1)	Actual price does not accurately reflect actual cost of item acquisition. There are indirect costs associated with purchasing, human resources, accounting, and other indirect expenses that would not be reflected in the price. It is impractical to determine the actual price of some items that come in a bundle or where a discount is applied for a specific total purchase dollar amount. We suggest a "fair market price" approach rather than this administratively burdensome approach.	Missy Craddock, OPRA	<p>Paragraph (E)(4)(a) has been revised to:</p> <p>"If the provider <u>of remote monitoring equipment</u> purchases the equipment, the monthly rate billed to the department for the item shall be the lesser of the provider's usual and customary charge or the actual price <u>plus acquisition costs</u> of the item <u>both of which shall be</u> pro rated over the useful life of the equipment, plus a reasonable percentage adequate to cover the cost of the provider's responsibilities as set forth in paragraph (E)(2)(c) of this rule."</p> <p>A definition of "acquisition costs" was added to paragraph (B): <u>"Acquisition costs" means the cost of any attachments, accessories, or auxiliary apparatus necessary to make the equipment usable; taxes; duty; protective in-transit insurance; and freight charges.</u>" This definition was derived from the definition of acquisition costs in federal OMB Circular A 87 Attachment B subsection 15.</p>

Issue/Paragraph	Comment	By Whom?	DODD Response
(B)(12)	Manufacturer's' suggested retail prices may be higher than competitor for a "comparable item" because of a real difference in quality, materials, or function. What standards will be used to determine if two items are "comparable?"	Missy Craddock, OPRA	There is an expectation that the provider/manufacture should be able to document/demonstrate how price was established. We believe the phrase, "same or a comparable item" is sufficient.
(B)(15)	<p>Remote monitoring should include monitoring and providing assistance with an activity of daily living (ADL) outside of the individual's residence. Why would we want to restrict this to an individual's residence, if we can save HPC time and expense outside of the residence? For example, ultra mobile personal computers allow an individual to move around in their community by themselves, when without such technology they would need staff with them. Only exceptions to this are listed in (D)(2). The rule is written specifically for remote monitoring and remote monitoring equipment. Remote monitoring technologies represent a subset of the technologies that can reduce staff costs while supporting objectives of the Individual Service Plan. It is recommended that the rule be written to also include coverage of technologies that can assist individuals with developmental disabilities with an activity of daily living (ADL), and thus reduce staff costs while supporting the goal to ensure an individual's health and welfare. To accomplish this, the following revisions are recommended:</p> <ul style="list-style-type: none"> • Add a new definition as (B)(2). <u>ADL technologies</u> means equipment used by individuals with developmental disabilities to independently perform activities of daily living, including, but not limited to, cognitively accessible electronic task prompting systems, electronic schedule prompting systems and other technologies to facilitate independent performance of an ADL at home or in the community. • Throughout the rule, replace the phrase "remote monitoring and remote monitoring technologies to read "ADL technologies, remote monitoring, and remote monitoring technologies." 	Missy Craddock, OPRA & Dustin McKee, OACB	The rule reflects the stakeholder workgroup's determination that the Remote Monitoring service was designed to be utilized within the individual's residence. Our goal is to have the Centers for Medicaid and Medicare Services (CMS) approve the service; as such, we believe that at this point in time, it is inadvisable to alter the locations where the service may be delivered. DODD will consider making revisions to the service after the amendment has been approved and the service is in place for a year.

Issue/Paragraph	Comment	By Whom?	DODD Response
(B)(17)	Suggest this be revised to: "... "Sensor" means equipment used to notify the remote monitoring staff of an adverse situation <u>and to provide assistance with ADLs.</u> "	Missy Craddock, OPRA & Dustin McKee, OPRA	The definition of "sensor" was revised from "equipment used to notify the remote monitoring staff of an adverse situation " to "equipment used to notify the remote monitoring staff of a situation that requires attention. "
(C)(1)(b)	Says failure to comply with certification rule 5123:2-2-01 may result in revocation of licensure too. The sentence is too lengthy and confuses licensure regulations with certification.	Missy Craddock, OPRA	The paragraph was revised to: "Failure to comply with the requirements of this rule and either rule 5123:2-2-01 of the Administrative Code or standards and assurances established under Chapter 5123:2-3 of the Administrative Code, as applicable, may result in denial, suspension, or revocation of the provider's certification or licensure."
(C)(2)(a)	Recommend including language referencing the assessment tool and ISP protocol developed by the workgroup	Dustin McKee, OACB	We do not want to add a requirement in the rule to use a specific planning tool. We will, however, disseminate a memo to the field recommending the tool developed by the workgroup.
(C)(2)(a)	Suggest this division be revised: "The individual's service and support administrator shall <u>use the assessment approved by the department to assess</u> whether Remote Monitoring is sufficient to ensure the individual's health and welfare.	Missy Craddock, OPRA	We do not want to add a requirement in the rule to use a specific planning tool. We will, however, disseminate a memo to the field recommending the tool developed by the workgroup.
(C)(2)(a)	Seems inconsistent with the individual service planning (ISP) process currently in rule and statute. The ISP team is not mentioned, nor the individual's role in planning their own waiver services.	Missy Craddock, OPRA	<p>The paragraph was revised to: "The individual's service and support administrator, <u>in consultation with the individual and the individual's team</u>, shall assess whether remote monitoring is sufficient to ensure the individual's health and welfare."</p> <p>A definition of "team" was added to paragraph (B): "<u>Team</u>" has the same meaning as in rule 5123:2-1-11 of the Administrative Code."</p> <p>Paragraph (C)(2)(b) sets forth that remote monitoring and remote monitoring equipment shall be provided pursuant to an individual service plan that conforms to the requirements of Ohio Department of Job and Family Services rule 5101:3-40-01.</p>
(C)(2)(a) ???	There needs to be a process for solving disagreements between individuals, SSAs and providers on who is eligible for remote monitoring and the specific remote monitoring service(s) to be utilized.	Missy Craddock, OPRA	<p>The revision made to paragraph (C)(2)(a)—noted above—addresses this concern.</p> <p>We appreciate the collaborative effort by the Ohio Association of County Boards and the Ohio Provider Resource Association to develop instructions for using the assessment with a goal of reducing disagreements.</p>

Issue/Paragraph	Comment	By Whom?	DODD Response
(C)(2)(c)	Requirement for provider to coordinate with others should be replaced with requirement for provider staff to participate in team meetings and remote monitoring services should be made part of the ISP.	Kevin Truitt, Attorney, OLRS	Paragraph (C)(2)(c) has been eliminated. All services must be delivered in accordance with an approved ISP. Please see paragraph (C)(2)(b).
(C)(2)(c)	Strike or revise as it is the SSA's responsibility to coordinate services.	Dustin McKee, OACB	The paragraph has been eliminated.
(C)(2)(c)	We believe this language should be stricken or revised as the SSA is responsible to coordinate services, not the provider of services.	Missy Craddock, OPRA	The paragraph has been eliminated.
(D)(2) ???	We suggest adding clarifying language, "Remote monitoring services are not required to be delivered to every individual living together in one residence. Individuals can receive remote monitoring while their roommates are receiving Homemaker/Personal Care."	Missy Craddock, OPRA	We do not believe this is necessary; it is implied by paragraphs (C)(2)(a), (C)(2)(b), (D)(2)(d)(i), and (D)(4)(a).
(D)(2)(c)	Please define what specific services are included in "non-residential habilitation settings."	Missy Craddock, OPRA	The paragraph was revised to: "Remote monitoring shall not be provided in adult foster care, adult family living, supported employment , or non-residential habilitation settings."
(D)(2)(d)	Suggest this division be revised to read: "permits others to view activities and/or listen to conversations in the common areas of the residence." For example, the use of listening devices (monitors) in an individual's bedroom should not be broadcast to everyone in the residence and visitors if it does not affect them (i.e., their conversations cannot be heard outside of the room of the individual being monitored).	Missy Craddock, OPRA	Conversations will not be broadcast to people in the residence. To clarify, the paragraph was revised from: "When remote monitoring involves the use of audio and/or video equipment that permits others to view activities and/or listen to conversations in the residence..." to: "When remote monitoring involves the use of audio and/or video equipment that permits remote monitoring staff to view activities and/or listen to conversations in the residence..."
(D)(2)(d)(i)	There is a risk that information could be disclosed to unauthorized persons or entities or that the individual's privacy could be otherwise compromised. Should require that consent be granted in writing only after detailed information about remote monitoring is provided in a form of communication understood by individual. Also, individual should be notified if monitoring will occur in sensitive areas (bathrooms, bedrooms).	Kevin Truitt, Attorney, OLRS	This is true with all services. Protections have been included in paragraphs (D)(2)(d)(i), (D)(2)(d)(ii), (D)(2)(g), and (D)(2)(q).
(D)(2)(e)	To ensure adequate training is provided to all remote monitoring staff, paragraph should include the phrase "at a minimum of six months."	Kevin Truitt, Attorney, OLRS	As there are a variety of remote monitoring systems and individuals' levels of need and understanding will be vastly different, we do not believe specifying the frequency for training is the best approach.

Issue/Paragraph	Comment	By Whom?	DODD Response
(D)(2)(b) & (D)(2)(j)	Rule should contain specific limitation on the number of individuals a staff person may simultaneously monitor.	Kevin Truitt, Attorney, OLRS	The workgroup that developed the service and rule wanted the service to be individual-specific and purposely chose not to include this limitation in the rule. The decision to use this service (based in part on the provider's staff ratios) will be made by the individual and his/her team.
(D)(2)(e) – (D)(2)(j)	Paragraphs use the term “provider” without delineation for which provider this means. We suggest clarifying each of these divisions by adding “remote monitoring provider” or “remote monitoring equipment provider” as applicable.	Missy Craddock, OPRA	"Provider" was replaced with "provider of remote monitoring."
(D)(2)(j)	We believe that the provider should update their ratios on an ongoing basis so that current information is always provided to individuals and families during the provider selection process. We suggest that this section be revised accordingly.	Dustin McKee, OACB	We believe "ongoing basis" is too cumbersome, but the team should request updated information whenever the ISP is modified.
(D)(2)(j)	Suggest revision to “[t]he provider shall disclose <u>to the individual</u> during the provider selection process its current ratio of monitoring staff” The current draft language does not specify to whom such disclosure should be made.	Missy Craddock, OPRA	The paragraph was revised to: "The provider <u>of remote monitoring</u> shall disclose <u>to the individual and the individual's team</u> during the provider selection process..."
(D)(2)(k)	As the remote monitoring center will likely be at a different location from the site being monitored, calling 911 may not be appropriate. Instead, we recommend that the language be changed to require staff contact the local emergency number for the site being monitored.	Dustin McKee, OACB	"911" was replaced with "emergency personnel," a term which is delineated in paragraph (D)(2)(h).
(D)(2)(l)	Recommend be revised to read: “The backup support person shall verbally acknowledge receipt of a request for <u>in-person</u> assistance from the remote monitoring staff and shall arrive at the individual's residence within a reasonable amount of time (to be specified in the individual service plan) from the time the request is made.”	Missy Craddock, OACB	Paragraph (D)(2)(l) was reworked into two phases which were moved under paragraph (D)(2)(k).
(D)(2)(n)	Paragraph should require that remote monitoring staff be thoroughly familiar with the unique needs of each individual as set forth in his/her plan.	Kevin Truitt, Attorney, OLRS	We do not believe this is necessary as the remote monitoring staff have protocols for responding to each individual's needs.

Issue/Paragraph	Comment	By Whom?	DODD Response
(D)(2)(o)(iv)	States "The remote monitoring staff shall contact the individual's service and support administrator who shall determine whether the individual/guardian chooses to continue to receive the service." It is the individual/guardian's right to chose whether or not they continue to receive the service, so why is the SSA making that determination rather than documenting the individual/guardian's choice?	Missy Craddock, OPRA	We agree. "Determine" was replaced with "confirm."
(D)(2)(r)	The rule states that if a major unusual incident or unusual incident occurs while the individual is being monitored, the provider shall ensure retention of any video or audio recordings and any sensor or written information regarding the incident for at least seven years. The rule should also contain minimum retention requirements for all other recordings or information.	Kevin Truitt, Attorney, OLRS	While the information is "protected health information" under the Health Insurance Portability and Accountability Act (HIPAA), HIPAA does not require a retention period for protected health information. This is not "service documentation" per the definition in paragraph (B)(19) of the rule.
(D)(4)(a)	States "The payment rates for remote monitoring are intended as payment for providing remote monitoring for all individuals in the residence who receive the service." Please explain the rationale behind this division, as this always applies to waiver services. Is there some particular reason that the department included this language?	Missy Craddock, OPRA	Remote monitoring is different than other services in that it is billed per hour, per site . We included the language in paragraph (D)(4) to reinforce this concept.
(D)(4)(d) & (D)(4)(e)	Should be rewritten to be less confusing, perhaps with an example for each one.	Missy Craddock, OPRA	We would prefer to stay away from putting examples in the rule.
(E)(2)(b)	We recommend revising "Remote monitoring equipment shall be designed so that it can be turned off only by the <u>person(s) identified in the individual's ISP remote monitoring staff</u> ." We talked with providers of remote monitoring in other states. Consistently, they agreed with this. Here is a quote from one of these providers: "For most homes we support, the staff and/or resident(s) turn the system on and off at the home. We are alerted immediately when this happens. We are able to turn systems off/on remotely if needed. Many individuals take pride in having the ability to participate more fully in our supports by controlling their EM system independently. We have the capacity to do both, but believe this should be determined case-by-case."	Missy Craddock, OPRA	The paragraph was revised as suggested.

Issue/Paragraph	Comment	By Whom?	DODD Response
(E)(2)(b)	Recommend revising "Remote monitoring equipment shall be designed so that it can be turned off only by the remote monitoring staff person(s) identified in the individual's ISP."	Dustin McKee, OACB	The paragraph was revised as suggested.
(E)(2)(c)	Paragraph uses the term "provider" without delineation for which provider this means. We suggest clarifying each of these divisions by adding "remote monitoring provider" or "remote monitoring equipment provider" as applicable.	Missy Craddock, OPRA	"Provider" was replaced with "provider of remote monitoring equipment."
(E)(4)(a) & (E)(4)(b)	Paragraphs use the term "provider" without delineation for which provider this means. We suggest clarifying each of these divisions by adding "remote monitoring provider" or "remote monitoring equipment provider" as applicable.	Missy Craddock, OPRA	"Provider" was replaced with "provider of remote monitoring equipment."
(E)(4)(b)	States "If the provider leases or manufactures the equipment, the monthly rate billed to the department for an item of equipment shall be the lesser of the provider's usual and customary charge or seventy-two per cent of the manufacturer's suggested retail price pro rated over the useful life of the equipment plus a reasonable percentage adequate to cover the cost of the provider's responsibilities as set forth in paragraph (E)(2)(c) of this rule." Where did you come up with the 72%? Why would providers need to subsidize the waiver system by 28%?	Missy Craddock, OPRA	The paragraph was revised to: "If the provider <u>of remote monitoring equipment</u> leases or manufactures the equipment, the monthly rate billed to the department for an item of equipment shall be the lesser of the provider's usual and customary charge or seventy-two per cent of the manufacturer's suggested retail price pro rated over the useful life of the equipment plus a reasonable percentage adequate to cover the cost of the provider's responsibilities as set forth in paragraph (E)(2)(c) of this rule."

5123:2-9-36 Emergency Response Systems

Based on feedback from CMS, DODD is not pursuing this service under the Individual Options waiver at this time.

5123:2-9-30 Homemaker/Personal Care

Issue/Paragraph	Comment	By Whom?	DODD Response
General concept	Do not understand purpose of consolidating two rules; recommend a meeting asap.	Dustin McKee, OACB	We are trying to move forward in accordance with our stated plan for waiver service rules (i.e., one rule per service).

Issue/Paragraph	Comment	By Whom?	DODD Response
General concept	We would prefer to be able to meet and discuss the intent behind the revisions of this rule and the rules that currently contain this content. It is not clear exactly which rules this will replace. Until we have more clarity, our comments would be too numerous. If the purpose was to simplify the rules, perhaps another way to do it would be to remove the lengthy provider certification information in the current Homemaker/Personal Care rules and leave the rest as it is. We look forward to further discussion on this topic to more productively move forward.	Missy Craddock, OPRA	We will develop a document that summarizes more precisely the strategy for moving forward.
General structure, overlap with other rules	The email dated December 15, 2010 states that the current rule regarding payment for waiver services, rule 5123:2-9-06, is going to stay as is. However, proposed rule 5123:2-9-30 contains pieces and parts of 5123:2-9-06, such as payment standards on pages 7-10. Yet, parts of 5123:2-9-06 were not included in this new proposed rule, such as references to sections regarding prior authorizations. We do not understand this inconsistency or repetitiveness. Payment rates are also included at the end of the rule, even though rates were not included with the old rules (5123:2-13-04 and 5123:2-8-10) that this new rule is intending to replace.	Missy Craddock, OPRA	We are trying to move forward in accordance with our stated plan for waiver service rules (i.e., one rule per service with service documentation requirements and payment rates included in each service rule). Once we have rates established in the service rules, rates will be eliminated from rule 5123:2-9-06. Rule 5123:2-9-06 will ultimately contain only general provisions that are applicable across services.
(B)	We are also concerned that several new definitions in this proposed rule could lead to inconsistency and confusion. The proposed rule includes several new definitions for terms such as "agency provider," "county board," "group size," "individual service plan," and so on. These terms, however, are already defined throughout the current existing waiver rules. For example, the new definition of an ISP does not reference the more detailed requirements of 5101:3-40-01(H) and 5101:3-42-01(H), which is present in the other waiver rules. Why such changes were made to these definitions in this and the other proposed rules, even if minor, is not clear. Such inconsistency between the rules will undoubtedly lead to confusion among boards and providers.	Missy Craddock, OPRA	These definitions align with definitions in the proposed new Individual Options waiver service rules. We are trying to eliminate inconsistency and confusion by using these definitions as we move forward.

Issue/Paragraph	Comment	By Whom?	DODD Response
(C)(2)	Allowing the Lorain County Board to provide services violates the principle of statewideness contained in 42 USC 1396a(a)(1) and 42 CFR 431.50 and the principle that one has the freedom of choice of provider contained in 42 USC 1396a(a)(23), 42 CFR 431.51, and OAC 5101:3-41-08.	Kevin Truitt, Attorney, OLRS	We are evaluating this situation.
(D)(2)	Strike or revise as it is the SSA's responsibility to coordinate services.	Dustin McKee, OACB	The paragraph has been eliminated.
(D)(2)	We believe this language should be stricken or revised as the SSA is responsible to coordinate services, not the provider of services.	Missy Craddock, OPRA	The paragraph has been eliminated.
(D)(3)(b)	States that Homemaker/Personal Care (HPC) providers will: "Recognize changes in the individual's condition and behavior as well as safety and sanitation hazards, report to the service and support administrator, and record them in the individual's written record." This is an additional requirement on non-licensed providers and goes well beyond the current scope of their relationship with individuals. We cannot afford to arbitrarily apply licensure standards to all certified HPC providers.	Missy Craddock, OPRA	This is an existing requirement under paragraph (B)(1)(c)(iii) of rule 5123:2-8-10 and paragraph (B)(4)(c)(iii) of rule 5123:2-13-04. The paragraph, however, has been eliminated.
(E)(2)(h) & (F)(3)(d)	"Group size" does not apply to all Homemaker/Personal Care providers, namely only to those still billing under the 15-minute unit system and not to those billing a daily billing unit.	Missy Craddock, OPRA	The proposed rule does not apply to the Homemaker/Personal Care Daily Billing Unit service, which is addressed in rule 5123:2-9-31.