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(12/1/10)

- (b) Consumer medical history.
 - (c) Name of consumer's treating physician.
 - (d) A copy of the initial and all subsequent all services plans.
 - (e) Documentation of all food and drug interactions, allergies and dietary restrictions.
 - (f) A copy of any advance directives including, but not limited to, DNR order or medical power of attorney, if they exist.
 - (g) Documentation of tasks performed or not performed, arrival and departure times, and the dated signatures of the provider and consumer or authorized representative, verifying the service delivery upon completion of service delivery. Nothing shall prohibit the collection and maintenance of documentation through technology-based systems. The consumer's or authorized representative's signature of choice shall be documented on the all services plan, and shall include, but not be limited to, any of the following: a handwritten signature, initials, a stamp or mark, or an electronic signature.
 - (h) Progress notes signed and dated by the ~~personal-care-aide~~ waiver aide support service provider, documenting all communications with the CM, treating physician, other members of the multidisciplinary team, and documenting any unusual events occurring during the visit, and the general condition of the consumer.
 - (i) A discharge summary, signed and dated by the departing ~~non-agency--personal-care aide or RN supervisor of an agency personal-care aide,~~ waiver aide support service provider, or when the service is furnished through an agency, the RN supervisor of the provider, at the point the ~~personal-care-aide~~ provider is no longer going to ~~provide~~ furnish services to the consumer, or when the consumer no longer needs ~~personal-care-aide - waiver aide support~~ services. The summary should include documentation regarding progress made toward achievement of goals as specified on the consumer's all services plan and indicate any recommended follow-ups or referrals.
- (C) Adult day ~~health-center~~ habilitation services.
- (1) "Adult day ~~health-center services (ADHCS)~~ habilitation services " are regularly scheduled services delivered at an adult day ~~health-center~~ habilitation site to consumers age eighteen or older. A qualifying adult day ~~health-center - habilitation site~~ must be a freestanding building or a space within another

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building that shall not be used for other purposes during the provision of -
~~ADHCS~~ adult day habilitation services.

(a) The services the adult day ~~health-center~~ habilitation provider must ~~provide~~
~~are the following~~ furnish include:

(i) Waiver nursing services as set forth in paragraph (A) of this rule, or -
~~personal-care aide~~ waiver aide support services as set forth in paragraph
(B)(1) of this rule, in accordance with the need for such services as
specified on the consumer's all services plan;

(ii) Recreational and ~~educational~~ leisure activities; and

(iii) At least one, but no more than two meals per day that meet the
consumer's dietary requirements.

(b) The services the adult day ~~health-center~~ habilitation provider may also make
available include the following:

(i) Prevocational activities that prepare a consumer for paid or unpaid
employment (e.g., teaching concepts including, but not limited to,
compliance, attendance, task completion, motor skills, problem-solving
and safety);

(ii) Transportation of the consumer to and from the adult day habilitation
site; and

~~(i)(iii)~~ Skilled therapy services as set forth in rule 5101:3-12-01 of the
Administrative Code;

~~(ii) Transportation of the consumer to and from ADHCS.~~

(c) ~~ADHCS~~ Adult day habilitation services are reimbursable at a full-day rate
when five or more hours are provided to a consumer in a day. ~~ADHCS -~~
Adult day habilitation services are reimbursable at a half-day rate when less
than five hours are provided to a consumer on a day.

(d) All of the services set forth in paragraphs (C)(1)(a) and (C)(1)(b) of this rule
and delivered by an adult day ~~health-center~~ habilitation site shall not be
reimbursed as separate services.

(2) ~~ADHCS do not include services performed in excess of what is approved pursuant to,~~
~~and specified on, the consumer's all services plan.~~ Adult day habilitation service do not
include:

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- (a) Education and educationally-related services under the Individuals with Disabilities Education Act (IDEA) set forth in 20 U.S.C. Sections 1400-1485 (effective date) and 34 C.F.R. part 300.
 - (b) Vocational services that are otherwise available to the consumer through a program funded under section 110 of the Rehabilitation Act of 1973 (29 U.S.C. 730) (effective date).
 - (c) Reimbursement for state plan or waiver nursing services furnished by an outside provider who accompanies the consumer to the adult day habilitation site.
 - (d) Reimbursement for waiver aide support services furnished by an outside provider who accompanies the consumer to the adult day habilitation site.
 - (e) Services delegated in accordance with Chapter 4723. of the Revised Code and rules to be adopted thereunder, and to be performed by individuals who are not licensed nurses in accordance with Chapter 4723. of the Revised Code;
 - (f) Services performed in excess of what is approved pursuant to, and specified on, the consumer's all services plan.
- (3) In order to be a provider and submit a claim for reimbursement, providers of - **ADHCS** adult day habilitation services must:
- (a) Comply with all applicable rules set forth in Chapters 5101:3-45 and 5101:3-47 of the Administrative Code.
 - (b) Request reimbursement for the provision of services in accordance with rule 5101:3-47-06 of the Administrative Code.
 - (c) Be identified as the provider on the consumer's all services plan that is prior-approved by ODJFS or its designee, the number of hours for which the provider is authorized to furnish ADHCS to the consumer.
 - (d) Be an agency provider.
 - ~~(d)~~(e) Operate the adult day **health-center** habilitation site in compliance with all applicable federal, state and local laws, rules and regulations.
 - (f) Furnish adult day habilitation services in accordance with paragraph (C)(4) of this rule.
- (4) All providers of **ADHCS** adult day habilitation services must:

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- (a) Comply with federal nondiscrimination regulations as set forth in ~~42~~ 45-C.F.R. part 80 ~~(as in effect on the effective date of this rule)~~.
- (b) Provide for replacement coverage of a consumer's loss due to theft, property damage, and/or personal injury; and maintain a written procedure identifying the steps a consumer takes to file a liability claim. Upon request, provide documentation to ODJFS or its designee verifying the coverage.
- (c) Maintain evidence of non-licensed direct care staff's completion of twelve hours of in-service training within a twelve-month period, excluding agency and program-specific orientation, and must be completed annually thereafter.
- (d) Assure that any waiver nursing services provided are within the nurse's scope of practice as set forth in paragraph (A)(1) of this rule.
- (e) Provide task-based instruction to direct care staff providing ~~personal care aide~~ waiver aide support services as set forth in paragraph (B)(1) of this rule.
- (f) Maintain, at all times, a paid direct care staff to consumer ratio ~~of 1:6 that is consistent with applicable licensure and/or certification standards, and that assures the health and welfare of the consumer.~~
- (g) Conduct an individual assessment to evaluate the consumer's preferences, likes and dislikes, supervision and environmental needs.
- (h) Develop and revise, as necessary, with the assistance of the consumer and/or the consumer's authorized representative, service provider(s) and the case manager, an adult day habilitation plan based upon an individual assessment completed in accordance with paragraph (C)(4)(g) of this rule, that includes the recommended activities and related services, and the recommended frequency and duration.
- (i) Assure the implementation of the adult day habilitation plan set forth in paragraph (C)(4)(h) of this rule.
- (j) Furnish ODJFS or its designated case manager, as appropriate, the consumer and/or the consumer's authorized representative with the individual assessment report and the adult day habilitation plan developed in accordance with paragraph (C)(4)(h) of this rule no later than thirty days after completion of the individual assessment.

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- (5) Providers of ~~ADHCS~~ adult day habilitation services must maintain a clinical record for each consumer served in a manner that protects the confidentiality of these records. At a minimum, the clinical record must contain the information listed in paragraphs (C)(5)(a) to (C)(5)(~~h~~)(k) of this rule.
- (a) Consumer identifying information, including but not limited to: name, address, age, date of birth, sex, race, marital status, significant phone numbers, and health insurance identification numbers.
 - (b) Consumer medical history.
 - (c) Name of consumer's treating physician.
 - (d) A copy of the initial and all subsequent individual assessments.
 - (~~h~~)(e) A copy of the initial and all subsequent all services plans.
 - (f) A copy of all initial and subsequent adult day habilitation plans.
 - (~~e~~)(g) A copy of any advance directive including, but not limited to, DNR order or medical power of attorney, if they exist.
 - (~~h~~)(h) Documentation of all drug and food interactions, allergies and dietary restrictions.
 - (~~g~~)(i) Documentation that clearly shows the date of ~~ADHCS~~ adult day habilitation service delivery, including tasks performed or not performed, and the consumer's arrival and departure times. Nothing shall prohibit the use of technology-based systems in collecting and maintaining the documentation required by the paragraph.
 - (~~h~~)(j) A discharge summary, signed and dated by the departing ~~ADHCS~~ adult day habilitation service provider, at the point the ~~ADHCS~~ provider is no longer going to ~~provide~~ furnish services to the consumer, or when the consumer no longer needs ~~ADHCS~~ adult day habilitation services. The summary should include documentation regarding progress made toward goal achievement and indicate any recommended follow-ups or referrals.
 - (~~h~~)(k) Documentation of the information set forth in paragraphs (A)(6)(e), (A)(6)(f), (A)(6)(i), (A)(6)(j) and (A)(6)(k) of this rule when the consumer is provided waiver nursing and/or skilled therapy services.
- (D) Home delivered meal services.