

# BEHIND THE SCENES OF COMPLIANCE

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DODD's Office of Compliance

December 17, 2025

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**Department of  
Developmental  
Disabilities**

# COMPLIANCE REVIEW AUTHORITY/PROCESS

- [Compliance Review Protocol](#)
- [Ohio Admin. Code 5123-2-04 Compliance reviews of certified providers](#)
- [Ohio Admin. Code 5123-3-06 Licensed residential facilities – compliance reviews, issuance of licenses, and adverse actions](#)

# WHO CONDUCTS REVIEWS?

- DODD's Office of Compliance
  - 33 reviewers located around the state
- County Board and Council of Government(COGs) reviewers
  - Approximately 200 around the state
- All trained by DODD
- All use same process and tools
- All meet reviewer requirements established in Provider Compliance rule (Ohio Admin. Code 5123-2-04)

# TYPES OF REVIEWS

- Regular Review
  - Conducted once per certification span
  - Full review
  - 90 Days notice
- Licensure Review
  - Conducted once per license term
    - Generally, three months prior to expiration (waiver)
    - Sometime during year of license expiration in conjunction with ODH certification review (ICF)
  - Full review
  - 90 Days Notice (waiver)
- Unannounced (ICF)
- Special Review
  - Based on credible complaints, risks to health/welfare, or MUIs
  - Does not affect regular review cycle
  - Review may be focused on a particular area
  - May be announced or unannounced – no minimum notification
- Abbreviated Review
  - Providers with a national accreditation may request

# COMPLIANCE REVIEW FORMATS

- Onsite Review
  - Active agency providers, Independent Providers of certain services or in their first review, licensed residential facilities
- Desk Review - *can be conducted as desk reviews, may be conducted in person*
  - Inactive providers, Independent Providers past their first review, ancillary only services
  - Review is done with the provider via Teams or other electronic means
  - Required documentation is submitted prior to review
  - If actively providing, individual interview and visit to service location still required depending on service (i.e., Shared Living, in-home HPC)

# WHO CONDUCTS THE REVIEW?

- Only DODD conducts:
  - County Board Accreditations
  - Adult Day/Employment Services
  - Licensed facility reviews
  - Abbreviated reviews
- County Boards:
  - Typically assigned small agencies, ancillary services-only providers, independent providers
- Ohio Department of Health:
  - ICF Licensure Reviews *on behalf of DODD*
- Special Reviews:
  - Can be conducted by CBs/COGs without DODD approval
  - ICF specials (of DODD licensure requirements) conducted by DODD

# WHERE ARE WAIVER PROVIDER REVIEWS CONDUCTED

- Highest billed county in the past 12 months **when the data was pulled**
  - Day service provider locations will also be reviewed as part of the agency's review
- For providers who haven't billed in 12 months, but have billed in the past 24 months, review county is the county in which they were originally certified

# REVIEW SCHEDULES

- County Boards/COGs currently sent list of providers to review for a six-month period
  - Sent to CB/COGs three months prior to the first month of the six-month period (e.g., January – June 2026 assignments were sent by the end of September 2025)
- DODD puts out schedule for reviewers a quarter at a time, with separate assignments for each month
- ICF Licensure reviews conducted unannounced in conjunction with their certification review sometime during the calendar year the license expires

# SETTING UP REVIEW

- Review created and notice sent asking the provider to confirm demographics
  - At least 90 days prior to review date *unless requested earlier by the provider*
- Potential causes for delay at this step :
  - Provider can't access the system to confirm demographics
  - Outdated demographics so provider doesn't receive the notice
  - Provider no longer provides services in the assigned county, so determination needs made regarding what to do with review
  - Provider ignores the notice
  - Provider asks for an extension to complete the review

# SCHEDULING THE REVIEW

- Reviewer needs to gather service locations (ADS/VH), staff information, confirm individual served location
- Confirm date/time/location for review
- Samples selected
- Review confirmation with samples sent no less than 45 days prior to review date *unless requested by provider or due to difficulty getting information from provider*

# SCHEDULING THE REVIEW

- Potential causes for delay at this step :
  - Provider does not respond with requested information
  - Provider gives wrong information
  - Provider has not identified ADS/VH locations in the system as required
  - Provider requests an extension to complete the review
- Provider ignores request for information
- Information changes
  - People served
  - No longer providing in county of review
- Provider says they no longer want to be a provider, but don't complete the process to relinquish their certification

# BETWEEN CONFIRMATION OF REVIEW AND REVIEW DATE

- Reviewer coordinates dates/time/locations for:
  - Settings evaluations
  - Home visits/individual interviews
- Potential causes for delay at this step :
  - Provider doesn't provide requested information
  - Provider says they no longer want to be a provider but don't complete the process to relinquish their certification

# CONDUCTING THE REVIEW

- Review of requested information
- Site visits/settings evaluations
- Individual Interviews
- Exit conference

# CONDUCTING THE REVIEW

- Potential causes for delay at this step :
  - Provider requests an extension to complete the review
    - Illness
    - Personal emergencies
    - Unpreparedness
  - Provider cancels review last minute or does not show for review
  - Provider does not provide requested information for desk review
  - Provider did not review any of documents provided as part of the review setup process
  - Provider does not have requested information available on review
  - Provider does not have person able to answer questions/access information available on the day of review
  - Changes in employees
  - Changes in persons served
  - Provider says they no longer want to be a provider but have not completed the process to relinquish their certification

# POST REVIEW PROCESS

- Plan of Correction (POC)
  - Due within 14 days of report being issued
- Plan of Correction Verification
  - Due within 90 days of POC being approved
- Potential causes for delay at these steps :
  - Provider submits multiple POCs that don't include minimum necessary information
  - Provider doesn't provide requested information
  - Provider doesn't respond
  - Provider cannot access system
  - Provider lets certification lapse, but is renewing

# TECHNICAL ASSISTANCE

- Throughout the process, reviewers are providing information about what is going to be reviewed and what a provider needs to do to prepare for the review
  - Required Documents List
  - Compliance Review Tool
  - Resources potentially shared:
    - [Documentation Templates](#)
    - [Background Check one-pager](#)
    - [Provider Training Series](#)

# NON-RESPONSIVE PROVIDERS

- Informally referred to as the '777' process
- Each step of the review process **typically** will include
  - An initial email, three reminder emails, and a final reminder email
  - At least one phone call
    - All steps past the initial demographics confirmation will include 3-4 phone call attempts
  - May include request to CB to assist
- Requests for reconsideration

# OTHER POTENTIAL CAUSES FOR DELAY AND DIFFICULTY

- Ever changing list of providers
- Data outdated the minute it is pulled
- Changing priorities
- Unexpected reviewer absences
- Clunky systems
- Reviewers continuously and simultaneously working on setting up reviews, conducting reviews, and finishing up the review process for previously completed reviews

# THANK YOU

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