

5101:3-3-77
Page 9 of 13

- date, and ODHS receives the "IAF Correction Document" postmarked on or before the due date.
- (5) The facility continues to exceed the tolerance level even after the "IAF Correction Document", received by ODHS postmarked by the due date, is processed.
 - (6) The facility continues to have facility level errors that prevent classification of records into RACS Classes even after the "IAF Correction Document", and/or, as necessary, an original or amended ODHS 2222 and submission of any additional IAF forms, received by ODHS postmarked by the due date, is/are processed.
- (I) ODHS may continue to use an assigned quarterly facility average case mix score, as defined by paragraph (D)(1) of this rule, in lieu of the facility's quarterly average case mix score calculated based on the facility's submitted information, as described in paragraph (L) of this rule, for the second month of the payment quarter if any of the following occurs:
- (1) ODHS does not receive the initial quarterly submission of the IAF data and the ODHS 2222 from the ICF-MR.
 - (2) ODHS receives the initial quarterly submission of the facility's IAF data and the ODHS 2222 postmarked on or before the filing date, the ICF-MR exceeds the tolerance level for defaulted records prior to corrections, and ODHS receives the "IAF Correction Document" postmarked thirty-one or more days after the due date.
 - (3) ODHS receives the initial quarterly submission of the facility's IAF data and the ODHS 2222 postmarked from one to thirty days after the filing date, and ODHS receives the "IAF Correction Document" postmarked after the due date.
 - (4) ODHS receives the initial quarterly submission of the facility's IAF data and the ODHS 2222 postmarked thirty-one or more days after the filing date.
 - (5) The facility continues to exceed the tolerance level even after the "IAF Correction Document(s)", received by ODHS postmarked from one to thirty days after the "IAF Correction Document" due date, is/are processed.

DEC 15 1995
195-15 APPROVAL DATE _____
SUPERSEDES
TN # 95-01 EFFECTIVE DATE 6/20/95

5101:3-3-77
Page 10 of 13

- (6) The facility continues to have facility level errors that prevent classification of records into RACS classes, even after the "IAF Correction Document(s)", and/or, as necessary, an original or amended ODHS 2222 form(s) and submission of any additional IAF form(s), received by ODHS postmarked from one to thirty days after the "IAF Correction Document" due date, is/are processed.

- (J) ODHS may continue to use an assigned quarterly facility average case mix score, as defined by paragraph (D)(1) of this rule, in lieu of the facility's quarterly average case mix score calculated based on the facility's submitted information, as described in paragraph (L) of this rule, for the third month of the payment quarter if any of the following occurs:
 - (1) ODHS does not receive the initial quarterly submission of the IAF data and the ODHS 2222 from the ICF-MR; or ODHS receives the initial quarterly submission of the facility's IAF data and the ODHS 2222 postmarked over sixty days after the filing date.
 - (2) ODHS receives the initial quarterly submission of the facility's IAF data and the ODHS 2222 postmarked on or before the filing date, the ICF-MR exceeds the tolerance level for defaulted records prior to corrections, and ODHS receives the "IAF Correction Document" postmarked sixty or more days after the due date.
 - (3) ODHS receives the initial quarterly submission of the facility's IAF data and the ODHS 2222 postmarked from one to thirty days after the filing date, and ODHS receives the "IAF Correction Document" postmarked over thirty days after the due date.
 - (4) ODHS receives the initial quarterly submission of the facility's IAF data and the ODHS 2222 postmarked from thirty one to sixty days after the filing date, and ODHS receives the "IAF Correction Document" postmarked after the due date.
 - (5) The facility continues to exceed the tolerance level even after the "IAF Correction Document(s)", received by ODHS, postmarked over thirty days after the due date, is/are processed.
 - (6) The facility continues to have facility level errors that prevent classification of records into RACS classes, even after the "IAF Correction Document(s)", and/or an original or amended ODHS 2222 form(s) and submission of any additional IAF form(s), received by ODHS, postmarked over thirty days after the due date, is/are processed.

TN # 95-15 APPROVAL DATE DEC 6 8 1993
SUPERSEDES
TN # 95-01 EFFECTIVE DATE 4/20/95

5101:3-3-77
Page 11 of 13

~~(K) Although data processed by ODHS may be received too late to be used for calculating the quarterly facility average case mix score used in the rate setting process for that payment quarter, late submissions of data will be processed and used for calculating the annual facility case mix score as described in paragraph (M) of this rule if all of the following occur:~~

~~(1) The facility submits its IAF data, the ODHS 2222 form, and, as necessary, the "IAF Correction Document(s)", amended ODHS 2222 form(s) and additional IAF form(s);~~

~~(a) For any of the first three calendar quarters, no later than the end of two calendar quarters after the reporting period end date of that quarter, and~~

~~(b) For the last calendar quarter, no later than the thirty first of March of the following calendar year, and~~

~~(2) By the deadlines specified in paragraph (K)(1) of this rule, the facility's ODHS processed resident assessment data for those quarters do not exceed the tolerance level for defaulted records and all facility level errors for those quarters have been corrected.~~

(K) EFFECTIVE WITH THE DATA SUBMITTED FOR THE REPORTING QUARTER ENDING MARCH 31, 1995 AND THEREAFTER, ASSESSMENT DATA AND CORRECTIONS RECEIVED BY ODHS AFTER THE DUE DATE FOR CORRECTIONS STATED IN PARAGRAPH (G)(3) OF THIS RULE SHALL NOT BE PROCESSED UNLESS:

(1) ODHS USES AN ASSIGNED SCORE IN LIEU OF THE FACILITY'S SCORE FOR THE FIRST MONTH OF THE PAYMENT QUARTER IN ACCORDANCE WITH PARAGRAPH (H) OF THIS RULE, AND ODHS RECEIVES CORRECTIONS POSTMARKED FROM ONE TO THIRTY DAYS AFTER ITS DUE DATE THAT, WHEN PROCESSED, ENABLE ODHS TO USE THE FACILITY'S ACTUAL SCORE FOR THE SECOND AND THIRD MONTHS OF THE PAYMENT QUARTER; OR

(2) ODHS USES AN ASSIGNED SCORE IN LIEU OF THE FACILITY'S SCORE FOR THE FIRST AND SECOND MONTHS OF THE PAYMENT QUARTER IN ACCORDANCE WITH PARAGRAPH (H) AND PARAGRAPH (I) OF THIS RULE, AND ODHS RECEIVES CORRECTIONS POSTMARKED FROM ONE TO THIRTY DAYS AFTER ITS DUE DATE THAT, WHEN PROCESSED, ENABLE ODHS TO USE THE FACILITY'S ACTUAL SCORE FOR THE THIRD MONTH OF THE PAYMENT QUARTER; OR

TN # 95-15 APPROVAL DATE DEC 00 1995
SUPERSEDES
TN # 95-01 EFFECTIVE DATE 4/20/95

5101:3-3-77
Page 12 of 13

- (3) ODHS USES AN ASSIGNED SCORE IN LIEU OF THE FACILITY'S SCORE FOR THE SECOND MONTH OF THE PAYMENT QUARTER IN ACCORDANCE WITH PARAGRAPH (I)(2) OF THIS RULE, AND ODHS RECEIVES CORRECTIONS POSTMARKED FROM THIRTY-ONE TO FIFTY-NINE DAYS AFTER ITS DUE DATE THAT, WHEN PROCESSED, ENABLE ODHS TO USE THE FACILITY'S ACTUAL SCORE FOR THE THIRD MONTH OF THE PAYMENT QUARTER.
- (L) The quarterly facility average case mix score for ICFs-MR that submitted their IAF data and corrections timely, have no facility level errors and do not exceed the tolerance level for defaulted records is calculated as follows:
- (1) All residents' case mix scores for the quarter, including resident scores in the fifth RACS class remaining after the correction document due date, are added together.
 - (2) The sum of resident case mix scores is divided by the total number of residents.
- (M) The annual facility average case mix score is used to compute the cost per case mix unit for the ICF-MR and the direct care peer group maximum cost per case mix unit.

Effective for calendar year 1993 and thereafter, resident assessment data for all four quarters of the calendar year shall be used to calculate the annual facility average case mix score:

- (1) ODHS-assigned facility average case mix scores as a result of late submissions of data, late submissions of corrections, exceeding the tolerance level for defaulted records or outstanding facility level errors, as described in paragraphs (H) to (J) of this rule, will be omitted from the facility's annual average case mix score calculation.
- (2) The annual facility average case mix score shall be calculated from no fewer than two acceptable quarterly average case mix scores. Acceptable quarterly facility average case mix scores shall be summed and divided by the total number of quarters of acceptable scores. EFFECTIVE FOR CALENDAR YEAR 1995 AND THEREAFTER, ACCEPTABLE ~~Acceptable~~ quarterly average case mix scores for the purposes of calculating the annual facility average case mix score include, in order of hierarchy:

DEC 00 1993

TN # 95-15 APPROVAL DATE _____
SUPERSEDES
TN # 95-01 EFFECTIVE DATE 4/20/95

5101:3-3-77
Page 13 of 13

- (a) Adjusted quarterly facility average case mix scores as a result of exception review findings; OR
 - ~~(b) Calculated quarterly facility average case mix scores from data submitted in accordance with paragraph (K) of this rule; and~~
 - ~~(c)~~(b) Actual quarterly QUARTERLY facility average case mix scores CALCULATED BASED ON THE FACILITY'S SUBMITTED INFORMATION AS DESCRIBED IN ~~used to establish the ICF MR's direct care rate in accordance with paragraph (L) of this rule~~ AND USED FOR ESTABLISHING THE FACILITY'S DIRECT CARE RATE FOR AT LEAST ONE MONTH OF THE PAYMENT QUARTER.
- (3) If at least two acceptable quarterly facility average case mix scores are not available by March thirty-first of the following calendar year, ODHS shall assign the cost per case mix unit , as defined in paragraph (D)(2) of this rule.

Effective date: _____

Certification: _____

DATE

Promulgated under: Chapter 119.

Statutory authority: RC Sections 5111.02, 5111.231.

Rule amplifies: RC Sections 5111.01, 5111.02, AND 5111.231.

Prior effective dates: 4/15/93 (Emer.), 7/1/93, 7/1/94 (Emer.), 9/30/94.

DEC 10 1993

TN # 95-15 APPROVAL DATE _____

SHS/SP/DEES

TN # 95-01 EFFECTIVE DATE 4/20/93

5101:3-3-78 INTERMEDIATE CARE FACILITIES FOR THE MENTALLY RETARDED (ICFS-MR):
METHOD FOR ESTABLISHING THE TOTAL PROSPECTIVE RATE.

- (A) THE METHOD FOR ESTABLISHING THE TOTAL PROSPECTIVE RATE FOR ICFS-MR IS THE COMBINATION OF ALLOWABLE PER DIEMS ESTABLISHED FOR DIRECT CARE, OTHER PROTECTED CARE, INDIRECT CARE AND CAPITAL COSTS AS SET FORTH IN RULES 5101:3-3-79, 5101:3-3-82, 5101:3-3-83 AND 5101:3-3-842 OF THE ADMINISTRATIVE CODE. THE OHIO DEPARTMENT OF HUMAN SERVICES (ODHS) SHALL NOT REDUCE THE RATES CALCULATED PURSUANT TO THESE RULES ON THE BASIS THAT THE FACILITY CHARGES A LOWER RATE TO ANY RESIDENT WHO IS NOT ELIGIBLE FOR MEDICAID.
- (B) AFTER ODHS RECEIVES THE COST REPORTS FOR A COST REPORTING PERIOD, ODHS SHALL PERFORM A DESK REVIEW OF EACH COST REPORT. BASED ON THE DESK REVIEW, ODHS SHALL MAKE A PRELIMINARY DETERMINATION WHETHER THE COSTS ARE ALLOWABLE. NO LATER THAN JULY FIRST OF EACH YEAR, ODHS SHALL NOTIFY EACH ICF-MR IF ANY OF ITS COSTS ARE PRELIMINARILY DETERMINED NOT TO BE ALLOWABLE AND OF ITS RATE CALCULATION AND SHALL EXPLAIN THE REASONS FOR THE RESULTS. ODHS SHALL ALLOW THE ICF-MR TO VERIFY THE CALCULATION AND, IF NECESSARY, SUBMIT ADDITIONAL INFORMATION.
- (C) ODHS SHALL CALCULATE AND ESTABLISH NEW RATES BEGINNING JULY FIRST OF EACH FISCAL YEAR AS SET FORTH IN RULES 5101:3-3-79, 5101:3-3-82, 5101:3-3-83 AND 5101:3-3-842 OF THE ADMINISTRATIVE CODE. EFFECTIVE ON THE FIRST DAY OF EACH CALENDAR QUARTER, THE DIRECT CARE PER DIEM OF THE RATE WILL BE ADJUSTED TO REFLECT NEW ASSESSMENT INFORMATION SUBMITTED PURSUANT TO RULE 5101:3-3-75 OF THE ADMINISTRATIVE CODE.

REPLACES RULE: 5101:3-3-78

EFFECTIVE DATE: _____

REVIEW DATE: _____

CERTIFICATION: _____

DATE

PROMULGATED UNDER: CHAPTER 119.
 STATUTORY AUTHORITY: RC SECTION 5111.02
 RULE AMPLIFIES: RC SECTIONS 5111.01 , 5111.02 , 5111.23 TO 5111.28
 PRIOR EFFECTIVE DATES: 9/30/93

TN #~~93-19~~ APPROVAL DATE MAR 15 1999
 SUPERSEDES
 TN #94-07 EFFECTIVE DATE 12/17/98

5101:3-3-79
Page 1 of 14

5101:3-3-79 Method for establishing the direct care costs component of the prospective rate for intermediate care facilities for the mentally retarded (ICFs-MR).

- (A) The Ohio department of human services (ODHS) shall pay each eligible ICF-MR a per resident per day rate for direct care costs established prospectively for each facility. ODHS shall establish each facility's rate for direct care costs quarterly.
- (B) Each facility's rate for direct care costs shall be based on the facility's cost per case-mix unit, subject to the maximum costs per case-mix unit established under paragraphs (B)(2) or (B)(3) of this rule, from the calendar year preceding the fiscal year in which the rate is paid. To determine the rate, ODHS shall:
- (1) Determine each facility's cost per case-mix unit for the calendar year preceding the fiscal year in which the rate will be paid by dividing the facility's desk-reviewed, actual, allowable, per diem direct care costs for that year by its annual facility average case-mix score determined under rule 5101:3-3-77 of the Administrative Code for that year.
 - (2) Set the maximum cost per case-mix unit of ICFs-MR with more than eight beds as illustrated in appendix A of this rule and as follows:
 - (a) For fiscal year beginning July 1, 1993 based upon calendar year 1992, set the maximum cost per case-mix unit of ICFs-MR as follows:
 - (i) Calculate the cost per case-mix unit under paragraph (B)(1) of this rule for each ICF-MR; and
 - (ii) Determine each ICF-MR in which the cost per case-mix unit has been assigned pursuant to rule 5101:3-3-77 of the Administrative Code and any ICF-MR that serves residents who have outlier service needs and for which rates have been set pursuant to rule 5101:3-3-25 of the Administrative Code; and
 - (iii) Array the cost per case-mix units from the calculation under paragraph (B)(2)(a)(i) of this rule for all ICFs-MR excluding the ICFs-MR determined under paragraph (B)(2)(a)(ii) of this rule in ascending order for each facility and calculate the cost per case-mix unit which reflects the median medicaid day; and

TNS # 94-17 APPROVAL DATE SEP 13 1994
SUPERSEDES
TNS # 97-24 EFFECTIVE DATE 6/30/94

- (iv) Array the cost per case-mix units from the calculation under paragraph (B)(2)(a)(i) of this rule for all ICFs-MR excluding the ICFs-MR determined under paragraph (B)(2)(a)(ii) of this rule in ascending order for each facility and calculate the cost per case-mix unit which reflects the eighty and one-half percentile medicaid day; and
 - (v) Divide the eighty and one-half percentile cost per case-mix unit obtained under paragraph (B)(2)(a)(iv) of this rule by the median under paragraph (B)(2)(a)(iii) of this rule to obtain a percentage above the median for all ICFs-MR; and
 - (vi) Multiply the percentage obtained under paragraph (B)(2)(a)(v) of this rule by the median cost per case-mix unit obtained under paragraph (B)(2)(a)(iii) of this rule to obtain the maximum cost per case-mix unit.
- (b) For fiscal year beginning July 1, 1994 based upon calendar year 1993, set the maximum cost per case-mix unit of ICFs-MR as follows:
- (i) Calculate the cost per case-mix unit under paragraph (B)(1) of this rule for each ICF-MR; and
 - (ii) Determine each ICF-MR in which the cost per case-mix unit has been assigned pursuant to rule ~~5101:3-3-42~~ 5101:3-3-77 of the Administrative Code, ~~and ANY ICF-MR THAT PARTICIPATED IN THE MEDICAL ASSISTANCE PROGRAM UNDER THE SAME OPERATOR FOR LESS THAN TWELVE MONTHS DURING THE CALENDAR YEAR 1993, AND any ICF-MR that serves residents who have outlier service needs and for which rates have been set pursuant to rule 5101:3-3-25 of the Administrative Code;~~ and
 - (iii) Array the cost per case-mix units from the calculation under paragraph (B)(2)(b)(i) of this rule for all ICFs-MR excluding the ICFs-MR determined under paragraph (B)(2)(b)(ii) of this rule in ascending order for each facility and calculate the cost per case-mix unit which reflects the median medicaid day; and

TNS # 94-17 APPROVAL DATE SEP 13 1994
SUPERSEDES
TNS # 93-24 EFFECTIVE DATE 6/30/94

- (iv) Array the cost per case-mix units from the calculation under paragraph (B)(2)(b)(i) of this rule for all ICFs-MR excluding the ICFs-MR determined under paragraph (B)(2)(b)(ii) of this rule in ascending order for each facility and calculate the cost per case-mix unit which reflects the eighty and one-half percentile medicaid day; and
 - (v) Divide the eighty and one-half percentile cost per case-mix unit obtained under paragraph (B)(2)(b)(iv) of this rule by the median under paragraph (B)(2)(b)(iii) of this rule to obtain a percentage above the median for all ICFs-MR; and
 - (vi) Multiply the percentage obtained under paragraph (B)(2)(b)(v) of this rule by the median cost per case-mix unit obtained under paragraph (B)(2)(b)(iii) of this rule to obtain the maximum cost per case-mix unit.
- (c) For the first six months beginning July 1, 1995 based upon calendar year 1994, set the maximum cost per case-mix unit of ICFs-MR as follows:
- (i) Calculate the cost per case-mix unit under paragraph (B)(1) of this rule for each ICF-MR; and
 - (ii) Determine each ICF-MR in which the cost per case-mix unit has been assigned pursuant to rule ~~5101:3-3-42~~ 5101:3-3-77 of the Administrative Code, **and ANY ICF-MR THAT PARTICIPATED IN THE MEDICAL ASSISTANCE PROGRAM UNDER THE SAME OPERATOR FOR LESS THAN TWELVE MONTHS DURING THE CALENDAR YEAR 1994, AND any ICF-MR that serves residents who have outlier service needs and for which rates have been set pursuant to rule 5101:3-3-25 of the Administrative Code; and**
 - (iii) Array the cost per case-mix units from the calculation under paragraph (B)(2)(c)(i) of this rule for all ICFs-MR excluding the ICFs-MR determined under paragraph (B)(2)(c)(ii) of this rule in ascending order for each facility and calculate the cost per case-mix unit which reflects the median medicaid day; and

TNS # 94-17 APPROVAL DATE SEP 13 1994
SUPERSEDES
TNS # 93-24 EFFECTIVE DATE 6/30/94

- (iv) Array the cost per case-mix units from the calculation under paragraph (B)(2)(c)(i) of this rule for all ICFs-MR excluding the ICFs-MR determined under paragraph (B)(2)(c)(ii) of this rule in ascending order for each facility and calculate the cost per case-mix unit which reflects the eighty and one-half percentile medicaid day; and
 - (v) Divide the eighty and one-half percentile cost per case-mix unit obtained under paragraph (B)(2)(c)(iv) of this rule by the median under paragraph (B)(2)(c)(iii) of this rule to obtain a percentage above the median for all ICFs-MR; and
 - (vi) Multiply the percentage obtained under paragraph (B)(2)(c)(v) of this rule by the median cost per case-mix unit obtained under paragraph (B)(2)(c)(iii) of this rule to obtain the maximum cost per case-mix unit.
- (d) For the six-month period beginning January 1, 1996 through June 30, 1996 based upon calendar year 1994 and each fiscal year thereafter based upon the calendar year preceding the fiscal year in which the rate is paid, set the maximum cost per case-mix unit of ICFs-MR as follows:
- (i) Calculate the cost per case-mix unit under paragraph (B)(1) of this rule from the calendar year preceding the fiscal year in which the rate is paid; and
 - (ii) Determine each ICF-MR in which the cost per case-mix unit has been assigned pursuant to rule 5101:3-3-77 of the Administrative Code, **and ANY ICF-MR THAT PARTICIPATED IN THE MEDICAL ASSISTANCE PROGRAM UNDER THE SAME OPERATOR FOR LESS THAN TWELVE MONTHS DURING THE CALENDAR YEAR PRECEDING THE FISCAL YEAR IN WHICH THE RATE WILL BE PAID, AND any ICF-MR that serves residents who have outlier service needs and for which rates have been set pursuant to rule 5101:3-3-25 of the Administrative Code;** and
 - (iii) Array the cost per case-mix units from the calculation under paragraph (B)(2)(d)(i) of this rule excluding the ICFs-MR determined under paragraph (B)(2)(d)(ii) of this rule in ascending order for each facility and calculate the cost per case-mix unit which reflects the median medicaid day; and

TNS # 94-17 APPROVAL DATE SEP 13 1994
SUPERSEDES
TNS # 93-24 EFFECTIVE DATE 6/30/94