

Ohio Administrative Code

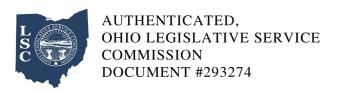
Rule 5160-43-01 Specialized recovery services program definitions.

Effective: October 15, 2021

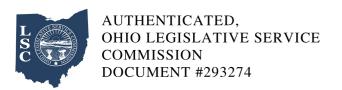
(A) This rule contains the definitions used in Chapter 5160-43 of the Administrative Code applicable to the specialized recovery services program.

(B) Definitions.

- (1) "Adult Needs and Strengths Assessment (ANSA)" (8/2021) is an integration information assessment tool for use in the development of individualized person-centered care plans, to monitor outcomes, and to help design and plan systems of care for adults with behavioral health challenges.
- (2) "Authorized representative" means a person the individual appoints to act on his or her behalf in accordance with rule 5160-1-33 of the Administrative Code.
- (3) "Clinical record" is a record containing written documentation that must be maintained by a service provider.
- (4) "Health and safety action plan" means the document created between the Ohio department of medicaid (ODM) or its designee and an individual enrolled in the program that identifies the interventions recommended by the recovery manager to remedy risks to the health and welfare of the individual.
- (5) "Home and community-based services (HCBS) setting" has the same meaning as set forth in rule 5160-44-01 of the Administrative Code.
- (6) "Incident" means an alleged, suspected or actual event that is not consistent with the routine care of and/or service delivery to an individual as set forth in rule 5160-44-05 of the Administrative Code. Incidents include, but are not limited to abuse, neglect, exploitation, misappropriation, and inappropriate service delivery.



- (7) "Individual" means a person who is pending enrollment or who is enrolled in the specialized recovery services program and therefore is directed to adhere to the rules in Chapter 5160-43 of the Administrative Code.
- (8) "Individualized placement and support supported employment (IPS-SE)" means the implementation of evidence-based practices allowing individuals to obtain and maintain meaningful employment by providing training, ongoing individualized support, and skill development to promote recovery. IPS-SE is an evidence based practice which is integrated and coordinated with mental health treatment and rehabilitation designed to provide individualized placement and support to assist individuals with a severe and persistent mental illness to obtain, maintain, and advance within competitive community integrated employment positions.
- (9) "Legally responsible family member" means an individual's spouse, or in the case of a minor, the individual's birth or adoptive parent.
- (10) "Peer recovery support" means a service that provides community-based supports to an individual with a mental illness with individualized activities that promote recovery, self-determination, self-advocacy, well-being and independence through a relationship that supports the person's ability to promote his or her own recovery. Peer recovery supporters use their own experiences with mental illness to help individuals reach their recovery goals.
- (11) "Person-centered service plan" means a document that identifies goals, objectives, and interventions selected by the individual. The plan identifies and addresses the assessed needs, services, and supports of the individual and is developed in accordance with 42 CFR 441.725(a) (as in effect on October 1, 2020).
- (12) "Provider" means a person or entity who has a provider agreement with ODM and who delivers a specialized recovery services program service, any other service provider that is directed to adhere to this rule, and all of their respective staff who have direct contact with individuals.
- (13) "Provider occurrence" means any alleged, suspected or actual performance or operational issue by a provider furnishing program services that does not meet the definition of an incident as set forth in this rule. Provider occurrences include, but are not limited to, alleged violations of provider



eligibility and/or service specification requirements, and billing issues including overpayments and medicaid fraud.

- (14) "Recovery management" means the coordination of all specialized recovery services program services received by an individual and assisting him or her in gaining access to needed medicaid services, as well as medical, social, educational, and other resources, regardless of funding source.
- (15) "Recovery manager" means the person responsible for performing the needs-based assessment and monitoring the provision of services included in the person-centered service plan to ensure the individual's needs, preferences, health and welfare are supported as described in rule 5160-43-04 of the Administrative Code.
- (16) "Significant change" means a variation in the health, care or needs of an individual that warrants further evaluation to determine if changes to the type, amount or scope of services are needed.
- (17) "Specialized recovery services" means recovery management, peer recovery support and IPS-SE.
- (18) "Specialized recovery services program" means the home and community-based services (HCBS) program jointly administered by ODM and the Ohio department of mental health and addiction services (OhioMHAS) or only administered by ODM to provide services to individuals with qualifying diagnoses of severe and persistent mental illness or diagnosed chronic conditions.
- (19) "Trans-disciplinary care team" or "care team" means the group of persons freely chosen by the individual to assist and support him or her in the collaboration of creating and implementing a person-centered service plan. The team is led by the individual where possible and must include a recovery manager. It may also include, but is not limited to, the individual's friends, family and natural supports, the physician(s) and other professionals and providers.