

ODM Draft PRTF Rules Comments
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Thank you for the opportunity to provide comments and feedback on the draft rules to support development and implementation of PRTFs in Ohio. We look forward to continuing our collaborative efforts to expand access to new, intensive services that are intended to fill gaps in the current continuum of care that will be beneficial to youth with significant behavioral health challenges and needs.

5160-59-03.6 Psychiatric Residential Treatment Facilities: Services

1. In (B)(2), supervision costs should be included in direct care costs.
2. (B)(4) defines therapeutic leave to not include a hospital related to payment for bed hold days described in (B)(1). This will require PRTFs to discharge patients from the PRTF when admitted to a hospital, even for short-term or overnight stays, as it is likely not feasible to hold beds indefinitely due to fiscal and capacity issues.
3. (C)(2)(b) requires PRTFs to inform ODM of any cited deficiencies or plans of correction within the preceding three years. More details are needed on the process or mechanism for providers to inform ODM.
4. Paragraph (C)(2)(e) requires reporting of true allegations that could impact the health, safety, or welfare of individuals in the facility. This section is vague and would benefit from more detail. Is this completed through the standard incident reporting process? Is this a new and separate process?
5. Paragraph (D)(3)(c)(i) indicates the per diem includes staffing costs to support increased acuity. However, there does not appear to be a separate mechanism to receive increased funding to treat more acute patients. Some youth will require 2:1 coverage or potentially higher. How will varied staffing needs supporting individualized patient care be covered if this is assumed in the per diem?
6. Paragraph (D)(6) is new and has not been previously discussed. More information is needed about this setting and the reimbursement rate to share meaningful recommendations.

5160-59-07 PRTF: Cost Reports

7. While this rule outlines the requirement to complete a cost report, more discussion is needed on the cost reporting methodology, data elements, and expectation for rates. Generally, we feel rates should be flexible to accommodate the actual allowable costs for service delivery that will vary by provider and geographical location. We encourage a targeted discussion on cost reporting.

Thank you for the opportunity share these detailed comments. We appreciate that the PRTF rates are still under development. However, it is difficult to submit fully informed comments on the aspects of these rules related to the per diem and covered costs and services without information on those rates. We understand there will be future opportunities to comment on these rules and assuming the rates are finalized we anticipate changes to our current input. We look forward to further discussion and collaboration to support successful development and implementation of PRTFs.