To Whom It May Concern,

ODM has received information regarding some of the signatures provided for physician’s certification on a Level of Care (LOC) request. There have been reports of LOC requests that have been submitted with a physician’s signature that appear to be photocopied onto blank forms that were later completed by another staff member. Please let this memorandum serve as notice that ODM does not consider the photocopying of a physician’s signature an acceptable practice and that any physician’s signatures that have been obtained in this way are not valid for a LOC request. The current rule language regarding a physician’s signature on LOC requests and the allowable exception has been cited below:

**OAC 5160-3-14 (B) (3)**

(3) Physician certification on the JFS 03697 or alternative form.
   (a) A physician certification means a signature from a physician, as defined in rule 5101:3-3-05 of the Administrative Code, and date on the JFS 03697 or alternative form.
   (b) A physician certification must be obtained within thirty calendar days of submission of the JFS 03697 or alternative form.
   (c) Exceptions to the physician certification:
      (i) When an individual resides in the community and ODJFS determines that the individual's health and welfare is at risk and that it is not possible for the submitter of the JFS 03697 or alternative form to obtain a physician signature and date at the time of the submission of the JFS 03697 or alternative form, a verbal physician certification is acceptable.
      (ii) ODJFS must obtain a physician certification within thirty days of the verbal physician certification.

As noted in the rule language above, the physician must sign and date the LOC request. The physician’s signature serves as their attestation that they have reviewed the medical information provided on the form and it is true and current to their knowledge, therefore, signing a blank document to be filled in at a later date or photocopying a signature onto an existing form would not be a valid form of physician’s certification.

Any LOC request submitted without a valid physician’s certification would be considered incomplete and PAAs are expected to handle these requests in the same manner as any incomplete LOC request. If a PAA receives a LOC request that appears to have a photocopied or invalid physician’s signature, please inform the submitter why the request is incomplete, include a copy of this memo and provide the applicable timeframes to submit a completed LOC request per **OAC 5160-3-14 (D)**.

If you have any questions or concerns regarding this memo or any other inquiries regarding Level of Care, please contact the PASRR@medicaid.ohio.gov mailbox at any time.