

## Stark County Board of Developmental Disabilities

Policy 2.16 Administrative Resolution of Complaints	Effective: 5/28/2026
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### ADMINISTRATIVE RESOLUTION OF COMPLAINTS

#### POLICY

The Board is committed to protecting the rights of individuals it serves and ensuring access to a fair, timely, and transparent complaint resolution process. This commitment is grounded in Ohio Administrative Code (OAC) 5123-4-04 and all applicable requirements noted therein.

This policy establishes an administrative process that allows any constituent—other than Board employees—to file a complaint concerning a reduction, suspension, or termination of a non-Medicaid service, including:

- Board programs, services, policies, or administrative practices, or
- Entities providing services under contract with the Board.
- The outcome of eligibility terminations.

The Board maintains an accessible and responsive process for receiving, reviewing, and resolving complaints. This process ensures:

- Individuals are informed of their rights,
- Complaints are addressed promptly and objectively,
- Documentation is maintained in accordance with state requirements, and
- Systemic issues are identified and addressed through ongoing quality improvement.

The administrative resolution of complaints process does not replace or supersede the formal appeal rights associated with Medicaid Home and Community-Based Services (HCBS) Waiver applications, enrollments, or services. Complaints involving HCBS waiver decisions must be submitted to the Ohio Department of Job and Family Services (ODJFS) as a request for a state hearing (appeal), following the rules in the State Hearings section of the Ohio Administrative Code. While a state hearing is pending, the individual and the Board may attempt to resolve waiver-related concerns informally through a grievance process convened by the Superintendent's designee.

For children and youth placed in a Board-operated education program by a local education agency, complaint procedures will conform to the rules established by the Ohio Department of Education and Workforce for the education of children with disabilities.

The Board will conduct an annual review of all formal complaints, grievances, and appeals to:

- Identify trends,
- Assess system performance, and
- Implement improvements that strengthen service quality and responsiveness.

The Superintendent is authorized to develop, revise, and maintain procedures necessary to implement this policy. All procedures must comply with applicable state and federal laws, administrative rules, and Board policies.

Historical Resolution Information		Reviewer(s): Superintendent
Date	Resolution Number	
5/26/20	05-25-20	
6/27/23	06-24-23	
4/28/26	04-20-26	

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### **PROCEDURE**

The process steps within this procedure mirror the requirements identified in OAC 5123-4-04, and this rule and its contents are the black letter direction the Board follows for any complaints pertaining to an adverse action involving the reduction, suspension, or termination of a non-Medicaid service. For the purpose of the Board's procedure, the procedure covers the informal and formal complaints process, appeals of adverse action sections, and the timelines.

- 1) The county board shall give the "Complaint or Appeal of Adverse Action Explanation Form" contained in the appendix to this procedure to an individual:
  - a) At the time of the individual's initial request for services,
  - b) At least annually to each individual receiving or on a waiting list for non-Medicaid services, and
  - c) At the time a complaint within the scope of this rule is received or the county board proposes an adverse action.
  - d) Upon request, a county board or contracting entity shall provide a copy of OAC 5123-4-04.
  - e) The board shall publicly post the "Complaint or Appeal of Adverse Action Explanation Form" contained in the appendix of this procedure.

### **Informal Process for Resolution of Complaints and Appeals of Adverse Action**

- 1) The Board works to address all complaints to bring about consensus, and the Board will not use the informal process in a manner that discourages individuals or persons from exercising their legal rights under the formal process, nor unnecessarily delay the resolution of a matter beyond the timeline of the formal process.
- 2) With those stakeholders using an informal process, the resolution of complaints will take no longer than thirty (30) days.
- 3) An individual or person and the Board may mutually agree to waive the informal process and initiate the formal process.

### **Step 1: Filing a Formal Complaint or Appeal**

- 1) Must be in writing and submitted to the program supervisor/manager.
  - a) Must be filed within 90 calendar days of:
    - i) Becoming aware of the issue (complaints), or
    - ii) Receiving notice of the adverse action or the end of the informal process (appeals).
- 2) Service protection:
  - a) If an appeal is filed during the prior-notice period, services continue unchanged until the appeal is resolved—unless the individual voluntarily agrees in writing to the change.
- 3) Notify Superintendent
  - a) Supervisor/manager must notify the Superintendent or designee within 2 working days of receiving the complaint or appeal.
- 4) Supervisor/Manager Investigation
  - a) Meet with the individual or representative.
  - b) Gather and review all relevant information.
- 5) Special situations:
  - a) Diagnosis disputes:
    - i) Board consults a qualified medical professional (Board-selected and Board-paid).

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- b) OEDI/COEDI disputes:  
Supervisor/manager convenes a 3-person trained review committee to confirm the eligibility determination followed required procedures.
- 6) Written Decision
- Must be issued within 30 calendar days of receiving the complaint or appeal.
  - Must be reviewed and signed by the Superintendent or designee before being sent.
  - Must include:
    - The decision and rationale
    - Next steps if the individual disagrees
    - Clear justification when a complaint or appeal is denied
- 7) Documentation:
- The Board keeps a copy of the written decision and proof it was issued to the individual.

<b>At-a-Glance Timeline for Step 1</b>
• Day 0–90: Complaint or appeal filed
• Within 2 working days: Supervisor notifies Superintendent
• Within 30 days: Investigation completed and written decision issued

### **Step 2: Filing With the Board President**

- If the individual is not satisfied with the Step 1 decision, they may file a written complaint or appeal with the President of the Stark DD Board.
- The written request must be submitted within 10 calendar days of receiving the Step 1 written decision.
- Scheduling the Hearing
  - The Board President must schedule a hearing within 20 calendar days of receiving the Step 2 appeal.
  - The hearing must be held at a time and place convenient for all parties.
- Who may conduct the hearing:
  - The full Stark DD Board, or
  - A committee of two or more Board members, or
  - A neutral hearing officer appointed by the Board President (not a Stark DD employee or contractor)
- If a committee or hearing officer conducts the hearing, they must issue a report and recommendation to the full Board within 10 days after the hearing concludes.
- Rights and Access for the Individual
  - The individual must receive all records and materials related to the case at least 10 days before the hearing.
  - The hearing is private, unless the individual requests a public hearing.
  - Both the individual and the Board may present evidence.
  - Both parties may be represented by an attorney.
  - The individual has the right to question any Stark DD staff or officials who have information related to the case. The Board President must notify them of this right in writing.

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- f) The hearing must be recorded (audio, stenographic, or electronic).
  - g) The Board must provide one free written transcript upon request.
- 7) Board Review and Decision
- a) The Board may request additional information, written statements, or presentations from either party.
  - b) If a committee or hearing officer was used, the full Board must **accept, reject, or modify** the recommendation.
  - c) The Board President (or designee) must issue the final written decision within 30 calendar days of:
    - i) The end of the hearing (if heard by the full Board), or
    - ii) The Board's receipt of the committee/hearing officer recommendation.
  - d) The written decision must include:
    - i) The rationale for the decision
    - ii) The next step available to the individual

At-a-Glance Timeline
• Within 10 days: Individual files Step 2 appeal
• Within 20 days: Hearing is held
• Within 10 days after hearing: Committee/hearing officer issues recommendation (if used)
• Within 30 days: Board issues final written decision

### **Step 3: State-Level Review**

- 1) When a State-Level Review Is Allowed:
- a) An individual may request review by the Director of the Ohio Department of Developmental Disabilities if the county board fails to:
    - i) Issue a required notice or issues a notice that does not clearly explain the individual's legal rights.
    - ii) Issue a required written decision after Step 1 or Step 2.
  - b) This step is only for situations where the county board did not issue what the rule requires.
- 2) Filing the Request
- a) The request must be in writing and sent to the Director of DODD.
  - b) It must be filed within 25 calendar days after the county board failed to issue the required notice or decision.
- 3) Director's Review
- a) Once the Director receives the request:
    - i) The Director will review all relevant information to determine whether the county board failed to issue the required notice or decision.
  - b) If the Director determines the county board did not meet its obligation, the Director may order the county board to:
    - i) Issue or reissue the required notice with all required information and give the individual a new 90-day window to appeal, or
    - ii) Allow the individual to reapply for county board services.

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- 4) After All Administrative Steps Are Completed
- a) If the complaint or appeal is still not resolved to the individual's satisfaction after completing all required administrative steps, the individual may choose to pursue a civil action.  
This rule does not create any new legal rights beyond those that already exist in law.

<b>At-a-Glance Timeline</b>	
<b>Within 25 days:</b>	Individual files request for review with the Director
<b>Director reviews:</b>	Determines whether the county board failed to issue required notice/decision
<b>If failure is confirmed:</b>	<ul style="list-style-type: none"> <li>○ County board must issue/reissue notice <b>and</b> allow a new 90-day appeal window, <b>or</b></li> <li>○ County board must allow the individual to reapply for services</li> </ul>
<b>After all steps:</b>	Individual may pursue civil action if still dissatisfied