

173-37-01

**Enrollment process for the choices home and community-based services medicaid waiver program.**

(A) The purpose of this rule is to establish the standards and procedures for enrollment in the choices home and community-based services medicaid waiver program.

(B) As used in this rule:

(1) "Authorized representative" means a person eighteen years of age or older who acts on behalf of an individual who is applying for or receiving medical assistance. An authorized representative may be a family member, attorney, hospital social worker, or any person chosen to act on the individual's behalf. In accordance with rule 5101:1-38-01.2 of the Administrative Code, the individual must provide a written statement naming the authorized representative and the duties that the named authorized representative may perform on the individual's behalf.

(2) "CDJFS" means the county department of job and family services.

(3) "Choices medicaid waiver program" means the choices home and community-based services medicaid waiver program as described in Chapter 5101:3-32 of the Administrative Code.

(4) "Individual" means an individual who is enrolled in the PASSPORT medicaid waiver program who is applying to receive services from the choices medicaid waiver program.

(5) "PAA" means the local PASSPORT administrative agency.

(C) An individual must be enrolled in the PASSPORT medicaid waiver program as described in rule 173-42-01 of the Administrative Code at the time the individual begins the enrollment process for the choices medicaid waiver program. The individual, the authorized representative of the individual, if any, and a family member or the individual's case manager may initiate the contact with the choices program staff to request enrollment.

(D) An individual who requests enrollment into the choices medicaid waiver program must meet the program eligibility requirements described in rule 5101:3-32-03 of the Administrative Code in order to enroll in the program.

(E) Any applicant for choices medicaid waiver program services is entitled to notice and hearing rights as set forth in section 5101.35 of the Revised Code, and division-level designation 5101:6 of the Administrative Code.

(1) The PAA must notify the individual and the individual's authorized representative, if any, of the approval for enrollment for an individual determined to meet all choices medicaid waiver program eligibility criteria.

- (2) If the PAA determines that the individual does not meet the criteria for enrollment into the choices medicaid waiver program, the PAA must notify the CDJFS of the results of the PAA's determination, and the CDJFS must send notice of denial of the waiver application to the individual and the individual's authorized representative, if any.
- (3) If the CDJFS determines that the individual does not meet the financial eligibility criteria for enrollment in the choices medicaid waiver program, the CDJFS must send notice of denial of the waiver application to the individual and the individual's authorized representative, if any, and notify the PAA.
- (F) If an individual meets all of the eligibility criteria, but a slot is not available for enrollment in the choices medicaid waiver program, the PAA must place the individual on a waiting list according to the individual's completion date of the certification process described in rule 5101:3-32-03 of the Administrative Code.
- (G) The PAA must remove each individual to be enrolled in the choices medicaid waiver from the waiting list according to the chronological order of the date the individual was placed on the waiting list.

Effective:

R.C. 119.032 review dates:

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Certification

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Date

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