173-38-03 Enrollment process.

- (A) Initial contact: To determine if an applicant for the assisted living program meets eligibility criteria for the program under rule 5101:3-33-03 of the Administrative Code, the CDJFS shall determine if the applicant meets the medicaid financial eligibility criteria required by that rule and the PAA ODA's designee shall determine if the applicant meets the non-financial eligibility required by that rule. An applicant may initially contact either the CDJFS or the PAA ODA's designee to begin the enrollment process:
 - (1) CDJFS: The applicant who makes initial contact with the CDJFS shall complete forms JFS07200 and JFS02399. The CDJFS shall determine if the applicant meets the program's financial eligibility criteria and shall notify the PAA ODA's designee of the applicant's application. In response, the PAA ODA's designee shall initiate contact with the applicant to perform an in-person assessment to determine if the applicant meets the non-financial eligibility criteria.
 - (2) PAAODA's designee: The applicant who makes initial contact with the PAA ODA's designee shall complete forms JFS07200 and JFS02399 and submit the forms to the CDJFS. The PAA ODA's designee may help the applicant complete the forms and may forward the completed forms to the CDJFS on behalf of the applicant. The PAA ODA's designee shall perform an in-person assessment to determine if the applicant meets the non-financial eligibility criteria.
- (B) If determined ineligible: If the CDJFS or the PAA ODA's designee determine determines that the applicant does not meet the eligibility criteria for the program under rule 5101:3-33-03 of the Administrative Code, the applicant is ineligible to enroll in the program.
 - (1) If the CDJFS determines that the applicant does not meet the financial eligibility criteria, it shall send a notice of denial and hearing rights to the applicant and also notify the PAA ODA's designee.
 - (2) If the PAA ODA's designee determines that the applicant does not meet the non-financial eligibility criteria, it shall notify the applicant and also notify the CDJFS. In turn, the CDJFS shall send a notice of denial and hearing rights to the applicant.

(C) If determined eligible:

(1) Waiver program enrollment date: Pursuant to paragraph <u>rule</u> 5101:1-38-01.6 of the Administrative Code, the PAA ODA's designee shall establish the waiver

program enrollment date in the following manner:

(a) If the applicant currently receives medicaid services, either as a consumer of the PASSPORT program, the choices program, the Ohio home care program, or the transitions program, or as a nursing facility resident, the PAA ODA's designee shall establish the waiver program enrollment date as the latter of:

- (i) The date the PAA ODA's designee determined that the applicant met all non-financial eligibility criteria under rule 5101:3-33-03 of the Administrative Code; or,
- (ii) The date the applicant becomes a resident of a residential care facility that is licensed by the department of health and certified by ODA as an assisted living provider.
- (b) If the applicant does not currently receive medicaid services, the PAA ODA's designee shall establish the waiver program enrollment date the applicant is eligible to enroll as the latter of:
 - (i) The date the PAA ODA's designee determined that the applicant met all non-financial eligibility criteria under rule 5101:3-33-03 of the Administrative Code; or,
 - (ii) The date the CDJFS notified the PAA ODA's designee that the applicant met all medicaid financial eligibility criteria required by rule 5101:3-33-03 of the Administrative Code.
- (c) Pursuant to paragraph (E)(6)(d) of rule 173-39-02 of the Administrative Code, the assisted living program shall not pay for any service provided to an applicant before the PAA ODA's designee enrolls the applicant into the program and before the case manager authorizes the service in the consumer's service plan.
- (d) The applicant's waiver program enrollment date for the assisted living waiver program may differ from the date the CDJFS determines that the applicant is eligible for medicaid coverage, which is established according to Chapters 5101:1-37 and 5101:1-39 of the Administrative Code.
- (2) No waiting list: If a slot in the program is available, and the PAA <u>ODA's</u> designee has established the applicant's waiver program enrollment date, the

- PAA ODA's designee may enroll the applicant into the program.
- (3) Waiting list: If a slot in the program is not available for an eligible applicant, ODA's designee shall place the applicant on the unified waiting list according to the terms of rule 173-44-04 of the Administrative Code.
 - (a) If a slot in the program is not available for an eligible applicant, the PAA shall place the applicant on a waiting list according to the date the applicant signed form JFS02399.
 - (b) Once a slot in the program becomes available:
 - (i) The PAA shall offer enrollment to the applicant from the waiting list so the PAA may enroll the applicant into the program. In doing so, the PAA shall select an applicant from the waiting list in the following order:
 - (a) First: an applicant who resides in a nursing facility.
 - (b) Second: any other applicant.
 - (ii) If more than one applicant is waiting in a category described in paragraphs (C)(3)(b)(i)(a) to (C)(3)(b)(i)(b) of this rule, the PAA shall offer enrollment to applicants according to the date each applicant signed form JFS02399.
 - (iii) If the PAA offers enrollment to an applicant from the waiting list, but the applicant declines enrollment, as permitted under section 5111.894 of the Revised Code, the applicant may remain on the waiting list and the PAA shall offer enrollment to the next applicant on the list according to the order established by paragraphs (C)(3)(b)(i)(a) to (C)(3)(b)(i)(b) of this rule.
- (D) An authorized representative may represent an applicant in the enrollment process.
- (E) Definitions for this rule:
 - (1) "Authorized representative" has the same meaning as in rule 5101:3-33-02 of the Administrative Code.
 - (2) "Form JFS02399" means "form JFS02399 'Request for Medicaid Home and Community-Based Services (HCBS).""
 - (3) "Form JFS07200" means "form JFS07200 'Request for Cash, Food Stamp, and

Medical Assistance."

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