## 173-40-01 Introduction and definitions.

- (A) Introduction: This chapter Chapter 173-40 of the Administrative Code establishes the eligibility criteria and disenrollment procedures for individuals presently enrolled in regulates the nonwaiver-funded PASSPORT program (aka, the "state-funded component of the PASSPORT program" or the "PASSPORT grandparented eligibility home care program"), to establish criteria for assistance to individuals who have reached loss of medicaid eligibility status, and to establish establishes the criteria for receivership of a PAA ODA's designee. (See Chapter 173-42 of the Administrative Code for rules on the medicaid-funded component of the PASSPORT program.)
- (B) Definitions for this chapter Chapter 173-40 of the Administrative Code:
  - (1) "Authorized representative" means a person, eighteen years of age or older, acting 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 other person the individual chooses to act on his or her 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.
  - (1)(2) "CDJFS" means "county department of job and family services."
  - (2) "Grandparented consumer" means an individual who is enrolled in the nonwaiver-funded PASSPORT program currently known as the "PASSPORT grandparented home care program" and formerly known as the "PASSPORT state home care program" who was transferred to PASSPORT grandparented home care, pursuant to rule 173-40-03 of the Administrative Code, as a result of a denial of his/her eligibility for either the PASSPORT HCBS program or the Ohio home care waiver program.
  - (3) "Loss of medicaid eligibility status" means the status given to an applicant who is denied enrollment into the PASSPORT HCBS program or an individual who is disenrolled from the PASSPORT HCBS program because he/she no longer meets the medicaid financial eligibility requirements for the PASSPORT HCBS program.
  - (3) "Nursing facility" has the same meaning as in section 5111.20 of the Revised Code.
  - (4) "ODA" means "the Ohio department of aging."
  - (5) "ODA's designee" has the same meaning as "PASSPORT administrative agency" in section 173.42 of the Revised Code. The current PASSPORT

administrative agencies are the area agencies on aging listed in rule 173-2-04 of the Administrative Code plus "Catholic Social Services of the Miami Valley."

(5)(6) "ODJFS" means "the Ohio department of job and family services."

- (6) "Ohio home care waiver" means the particular medicaid home and community-based services medicaid waiver program which is separate from the PASSPORT home care program, and which provides home and community based services to individuals under the age of sixty who have disabilities and who would require the level of care provided by a nursing facility if the waiver program were not available. Eligibility criteria, enrollment procedures, services to be provided, and service provider qualifications are described in Chapter 5101:3-12 of the Administrative Code.
- (7) "PASSPORT administrative agency" ("PAA") means a public or non-profit entity that has entered into a contract with ODA to provide administrative services on behalf of ODA within a particular PSA for medicaid waiver programs under the authority of ODA, the nonwaiver-funded PASSPORT program, and the RSS program.
- (8) "PASSPORT home and community based services program" ("PASSPORT HCBS") means the particular medicaid HCBS waiver program which provides home and community-based services as part of the PASSPORT home care program to individuals aged sixty and over who, due to having disabilities and being elderly, would require the level of care provided in a nursing facility if the waiver program were not available. Eligibility criteria and services available for the PASSPORT HCBS program are described in Chapter 5101:3-31 of the Administrative Code. Enrollment procedures for the PASSPORT HCBS program are described in rule 173-42-01 of the Administrative Code. Provider certification and service specification rules for the PASSPORT HCBS program are found in Chapter 173-39 of the Administrative Code.
- (9)(7) "Plan of care" "Service plan" means written documentation of the specific tasks and activities to be carried out by a service provider, including, but not limited to, consumer-specific goals and objectives, detailed description of the interventions, frequency, and time frames for ongoing services.
- (10) "Representative" means an adult eighteen years of age or older who is familiar enough with a consumer's circumstances to act on behalf of the enrollee, including signing the plan of care or assisting with a medicaid application. The representative may be, but shall not be limited to, a parent of a minor child, a spouse, a relative, a personal friend, or a representative from a public or private agency who has been authorized by the consumer or his/her legal

guardian to act as his/her representative.

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