3701-8-02 **Home visiting program eligibility.**

- (A) Home visiting providers The centralized intake and referral contractor shall ensure that every caregiver, parent or child referred to home visiting is determined eligible or not eligible within thirty days of the program referral, in accordance with the following:
 - (1) Expectant families or caregivers of a child under the age of two whose family income is not in excess of two hundred per cent of the federal poverty level, unless approved by the department; and is in accordance with the fidelity standards for the home visiting model implemented, and meets any requirements of the funding source used to provide services. possess at least one of the following risk factors:
 - (a) Pregnant women under age twenty-one;
 - (b) Previous preterm birth;
 - (e) Families with a history of child abuse, neglect or have had interactions with child welfare services;
 - (d) Families with a history of substance abuse, or demonstrate a need for substance abuse treatment;
 - (e) Families with a child who has a diagnosed developmental delay;
 - (f) Families that have users of tobacco products in the home;
 - (g) Active military families;
 - (h) Families with a history of unstable housing or homelessness; or
 - (i) Families with a caregiver who has a history of depression or other diagnosed mental health concerns.
 - (2) At least eighty-five per cent of the provider's capacity shall be used to serve families or caregivers that meet the criteria in paragraph (A)(1) of this rule who are enrolled prenatally, or families of a child not exceeding six months of age at the time of system referral.
 - (3) Up to fifteen per cent of the provider's capacity may be used to serve families that meet the criteria in paragraph (A)(1) of this rule that include a child not exceeding twenty-four months of age at the time of system referral.
 - (4)(2) Any family or caregiver referenced in paragraph (A) of this rule who is enrolled in home visiting services, may be served in accordance with the <u>age</u>

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requirements as specified in section 3701.61 of the Revised Code, or exit the program in accordance with the fidelity standards for the home visiting model being implemented. of the Administrative Code until the child reaches three years of age.

- (5)(3) When an eligible child is in foster care placement, home visiting services shall be permitted in accordance with this chapter when family reunification, improving parenting skills and capacity are identified as goals. Accordingly, a parent or caregiver who is actively working with child welfare to regain or obtain custody shall receive services, and must be present for the service to be reimbursable as required by rule 3701-8-09 of the Administrative Code.
- (B) Families will remain eligible for home visiting services as long as the child defined in paragraph (A) of this rule has not reached the age of exit as specified in section 3701.61 of the Revised Code three years of age and enrollment in services does not end. Eligibility remains with the child if transferred to another provider., however does not stay with the family if they exit the program. If a family exits the program, A family's eligibility will be re-determined when a new system referral is made in accordance with rule 3701-8-10 of the Administrative Code.
- (C) When a family or caregiver is determined not eligible for home visiting services, the <u>central intake and referral agency provider</u> shall submit a letter in person, by e-mail, or by post mail stating the reasons they did not qualify for the home visiting, present other potential service options available, and the process for reconsideration. This communication must be sent to the family or caregiver within ten days of the decision.
- (D) When a family or caregiver disagrees with the eligibility determination, the caregiver may request reconsideration of the decision by filing a written request with the director within thirty days of the date on the written notice. The request for reconsideration shall contain a statement of the reasons the caregiver believes the decision is incorrect or inappropriate and may include any written documentation, argument, or other materials they wish to submit. The request is filed with the director when it is received by the department. The decision of the director shall be final, and not subject to further administrative or judicial review.

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