

5101:3-33-02

Definitions for the assisted living HCBS waiver program.

- (A) The purpose of this rule is to define the terms used in the assisted living HCBS waiver program.

As used in this chapter:

- (B) "ADL" means activities of daily living including bathing; grooming; toileting; dressing; eating; and mobility, which refers to bed mobility, transfer, and locomotion as these are defined in Chapter 5101:3-3 of the Administrative Code.
- (C) "Assessment" means a face-to-face evaluation and interview that is conducted by the preadmission screening system providing options and resources today (PASSPORT) administrative agency (PAA) to collect in-depth information about an individual's current situation and ability to function. It is comprehensive and identifies the individual's strengths, problems, and care needs in the major functional areas: physical health, medical care utilization, activities of daily living, instrumental activities of daily living, mental and social functioning, financial resources, physical environment, and utilization of services and support.
- (D) "Assisted living HCBS waiver" means the medicaid program that serves individuals residing in certified residential care facilities and enrolled on the waiver who would otherwise receive services in a nursing facility if the waiver program were not available.
- (E) "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 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.
- (F) "CDJFS" means a county department of job and family services.
- (G) "CMS" means the centers for medicare and medicaid services, a federal agency that is part of the United States department of health and human services, and that administers the medicaid program and approves home and community-based services (HCBS) waivers.
- (H) "Consumer" means the program participant and the representative who assists in directing the consumer's care.
- (I) "HCBS" or "home and community-based services" means services furnished under the

provisions set forth in 42 CFR 441 Subpart G (October 1, 2005) that permit individuals to live in a home setting rather than a nursing facility (NF) or hospital. HCBS waiver services are approved by CMS for specific populations and are not otherwise available under the medicaid state plan.

- (J) "Level of care" (LOC) means the designation describing an individual's functional levels and nursing needs pursuant to the criteria set forth in rules 5101:3-3-05, ~~5105:3-3-06~~, 5101:3-3-06, 5101:3-3-07 and 5101:3-3-08 of the Administrative Code.
- (K) "NF" means a nursing facility as defined in section 5111.20 of the Revised Code.
- (L) "ODA" means the Ohio department of aging.
- (M) "ODJFS" means the Ohio department of job and family services.
- (N) "PASSPORT" means preadmission screening system providing options and resources today.
- (O) "PAA" means PASSPORT administrative agency.
- (P) "Plan of care" means the written outline of the consumer's HCBS waiver services, other medicaid services and any other services necessary to prevent institutionalization as developed by the consumer and case manager.
- (Q) "Residential care facility" means a residential care facility as defined in section 3721.01 of the Revised Code that is issued a license pursuant to section 3721.02 of the Revised Code.
- (R) "Room and board" means a payment made by a consumer enrolled in the assisted living waiver directly to the ODA certified assisted living waiver provider. When paying "room" the consumer shall not be charged for the same furnishings and other shelter expenses the residential care facility provides at no cost to private pay non-waiver residents pursuant to the facility's resident agreement. The term "board" means three meals a day or any other full nutritional regimen.
- Room and board does not include charges for ancillary items, services, and/or social activities purchased or paid for by the consumer including hygiene and supplies not provided through medicaid and reflected on the consumer's care plan, recreation and activities, and/or other items or services purchased by the consumer; however ODA certified assisted living providers may, at their own discretion, provide ancillary items, services and/or social activities as part of the room and board payment.

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Certification

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