

TO BE RESCINDED

5101:3-40-01 **Home and community-based services waiver VI program.**

- (A) The home and community-based services (HCBS) waiver VI program is designed to serve persons of all ages who are determined to require the level of care provided in an intermediate care facility for the mentally retarded (ICF-MR).
- (B) Program eligibility criteria for the HCBS waiver VI program are set forth in sections of the federally approved waiver VI document in appendix A of this rule.
- (C) Evaluation, enrollment and assessment procedures for the HCBS waiver VI program are set forth in sections of the federally approved waiver VI document in appendix B of this rule.
- (D) The following forms must be used for application, approval, denial, and disenrollment purposes:
- (1) The "Application for Home and Community Based Services," ODHS 2399 (contained in appendix B of this rule);
 - (2) The "Explanation of State Hearing Procedures," ODHS 4059 as set forth in rule 5101:1-35-021 of the Administrative Code;
 - (3) The "Notice of Approval of Your Application for Assistance," ODHS 4074 as set forth in rule 5101:1-35-022 of the Administrative Code;
 - (4) The "Notice of Denial of Your Application for Assistance," ODHS 7334 as set forth in rule 5101:1-35-023 of the Administrative Code;
 - (5) The "Prior Notice of Right to a State Hearing," ODHS 4065, as set forth in rule 5101:1-35-024 of the Administrative Code; and
 - (6) The "Notice of Right to a State Hearing," ODHS 4085 as set forth in rule 5101:1-35-025 of the Administrative Code.
- (E) The types of waiver services provided and service provider qualifications required for the HCBS waiver VI program are set forth in sections of the federally approved waiver document in appendix C of this rule.
- (F) Ohio department of human services (ODHS) will not reimburse Ohio department of mental retardation and developmental disabilities (ODMR/DD) for HCBS waiver

VI services which are furnished without a written individual service plan (ISP).

- (G) ODHS has delegated to ODMR/DD the day-to-day operational responsibilities of the HCBS waiver VI program. Providers of HCBS waiver VI services shall submit claims to ODMR/DD.
- (H) Providers other than county boards of mental retardation and developmental disabilities (MR/DD) must bill their usual and customary charge (the amount charged to the general public). ODMR/DD will reimburse HCBS waiver VI providers at the lesser of their billed charge or the medicaid maximum. If the amount billed to the department exceeds the department's maximum, the amount paid will automatically be reduced to the maximum permitted.
- (I) All public providers will be reimbursed the actual costs and are subject to cost settlement each year.

Effective:

R.C. 119.032 review dates: 04/15/2005

Certification

Date

Promulgated Under: 119.03
Statutory Authority: 5111.85
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