

5122-36-03

**Application process.**

(A) RSS application process may be through submission of an ODM 07120 form, electronic equivalent, or the use of an electronic system designated by OhioMHAS, and shall include an application for medicaid if the individual is not currently in receipt of medicaid.

(B) OhioMHAS shall record the following information about the individual:

(1) The individual's name, address, telephone number, date of birth, and social security number;

(2) If the individual has an authorized representative, the authorized representative's name, address, and telephone number. "Authorized representative" has the same meaning as in rule 5160:1-1-58 of the Administrative Code;

(3) If the individual has a legal representative, the legal representative's name, address, and telephone number. "Legal representative" means a person that the individual or probate court designates to decide for the individual. Examples of types of legal representatives are guardians, conservators, and attorneys# in#fact who are designated through a power of attorney, including a durable power of attorney for health care decisions; and,

(4) Whether the individual receives Social Security, SSI, or SSDI benefits.

(C) The day the RSS application is completed and submitted to OhioMHAS will be considered the date of application.

(D) Once a completed application has been submitted to OhioMHAS, it shall be made available to the department of medicaid and the CDJFS for the determination of eligibility in accordance with rule 5160:1-1-58 of the Administrative Code.

(E) OhioMHAS shall allow any individual to withdraw from the application process at any time.

(F) OhioMHAS shall offer enrollment to any individual when:

(1) The individual is determined eligible in accordance with rule 5160:1-1-58 of the Administrative Code; and,

(2) RSS program funds are sufficient to provide cash assistance to all enrollees.

(G) Failure to cooperate: OhioMHAS may deny an individual's enrollment into the RSS program if the applicant fails to cooperate in the enrollment process because:

(1) The individual did not apply for medicaid before the tenth working day after the date of the determination of eligibility in rule 5160:1-1-58 of the Administrative Code; or,

(2) The individual did not select a living arrangement for a determination of the living arrangement's appropriateness, before the thirtieth day after the date of the determination of eligibility in rule 5160:1-1-58 of the Administrative Code.

An application denied for the reasons listed in this paragraph shall be held as pending by OhioMHAS until such time as the applicant requests it be withdrawn or updates the application to be in compliance with this paragraph.

Replaces: 5122-36-03

Effective:

Five Year Review (FYR) Dates:

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Certification

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Date

Promulgated Under: 119.03  
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Rule Amplifies: 5119.41  
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