

5160-31-03

Eligibility for enrollment in the PASSPORT HCBS waiver program.

(A) To be eligible for the medicaid-funded component of the pre-admission screening system providing options and resources today (PASSPORT) program, an individual must meet all of the following requirements:

- (1) The individual must have been determined eligible for medicaid in accordance with Chapters 5160:1-1 to 5160:1-56 of the Administrative Code.
- (2) The ~~waiver service cost of waiver services in of the twelve-month person-centered services~~ services plan does not exceed the individual cost ~~limit. limit at the time of initial enrollment.~~ The individual cost limit is equal to fourteen thousand and seven hundred dollars per month for waiver services.
 - (a) ~~If the Ohio department of aging's (ODA)~~ If ODA's designee determines that the applicant's waiver service needs cannot be met within the individual cost limit, the individual shall not be enrolled.
 - (b) Once enrolled in PASSPORT, additional waiver services may ~~not~~ be authorized in excess of the ~~fourteen thousand and seven hundred dollars per month~~ individual cost limit with prior approval from ODA. ~~When a change in condition occurs that necessitates the provision of additional waiver services, referrals to other community services, including institutional services, will be explored.~~
 - (c) ~~If the individual's waiver service needs~~ When additional waiver services that exceed the individual cost limit are not approved ~~of fourteen thousand seven hundred dollars per month,~~ the individual shall be disenrolled from the waiver.
- (3) The needed services are not readily available through another source at the level required to allow the individual to live in the community.
- (4) The individual agrees to participate in PASSPORT and while enrolled in PASSPORT, shall not be simultaneously enrolled in the state-funded component of the PASSPORT program, the state-funded component of the assisted living program, another medicaid home and community-based program, the residential state supplement (RSS) program, or the program of all inclusive care for the elderly (PACE). ~~while enrolled in PASSPORT.~~
- (5) The individual's health related needs can be safely met in a home and community-based setting as determined by ~~the~~ ODA's designee.

- (6) The individual will participate in the development of a person-centered services plan in accordance with the process and requirements set forth in rule 5160-44-02 of the Administrative Code.
- (7) The individual must require the provision of at least one waiver service on a monthly basis as documented in the individual's approved person-centered services plan.
- ~~(7)~~(8) ; The individual's attending physician must approve that the services in the person-centered services plan are appropriate to meet the individual's needs. The physician's approval may be either verbal or written. If the approval is verbal, written approval must be obtained within thirty days of the enrollment date. ODA's designee shall be responsible for obtaining the physician's approval.
- ~~(8)~~(9) While ~~receiving~~enrolled in PASSPORT, the individual must reside in a setting that possesses the home and community-based setting characteristics set forth in rule 5160-44-01 of the Administrative Code and not reside in a hospital, nursing facility (NF), intermediate care facility for individuals with an intellectual disability (ICF-IID) or another licensed/certified facility, any facility covered by section 1616(e) of the Social Security Act (42 U.S.C. 1382e(e) (July 1, 2018) residential care facility, adult foster home or another group living arrangement subject to state licensure or certification. ~~be a resident of either a Keys amendment facility, a hospital or a nursing facility (NF) as defined in rule 5160-31-02 of the Administrative Code. For purposes of this rule, a resident of a Keys amendment facility is an individual who receives services from the facility and is not a family member of the owner or operator of the facility.~~
- ~~(9)~~(10) The individual is age sixty or older at the time of enrollment.
- ~~(10)~~(11) The individual must be determined to meet the criteria for an intermediate or skilled level of care in accordance with rule 5160-3-08 of the Administrative Code and, in the absence of PASSPORT, would require NF services as defined in 42 C.F.R. 440.40 (as in effect on October 1, ~~2014~~2018).
- ~~(11)~~(12) PASSPORT has not reached ~~the centers for medicare and medicaid services (CMS)~~ the CMS-authorized limit on the number of individuals who may enroll on the waiver during the current year.
- ~~(12)~~ ~~The individual must require the provision of at least one waiver service on a monthly basis as documented in the individual's approved person-centered service plan.~~

- (B) If, at any time, the individual ~~fails or ceases to meet~~does not meet any of the eligibility requirements identified in this rule, the individual shall be denied or disenrolled from PASSPORT. In such instances, the individual shall be notified of his or her hearing rights in accordance with division 5101:6 of the Administrative Code.

Effective:

Five Year Review (FYR) Dates: 10/16/2018

Certification

Date

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