

5160-51-01

Definitions for the helping Ohioans move, expanding choice (HOME choice) program.

(A) The definitions in this rule are applicable to the money follows the person (MFP) transition program known as the helping Ohioans move, expanding choice (HOME choice) program (hereafter referred to as HOME choice).

(B) Definitions.

- (1) "Agency provider" means an entity that is eligible to provide services in the HOME choice program.
- (2) "Case management agency" means the entity designated by the Ohio department of medicaid (ODM) to provide case management services to individuals enrolled on an ODM-administered waiver.
- (3) "Case manager" means a registered nurse (RN), licensed social worker (LSW) or licensed independent social worker (LISW) employed by the case management agency who provides case management services to individuals enrolled on an ODM-administered waiver, an RN or LSW employed by the Ohio Department of Aging's (ODA) designee, a medicaid managed care plan, or mycare Ohio plan, who is responsible for the planning, coordinating, monitoring, evaluation, and authorization of medicaid waiver-funded community-based long-term care services and the non-medicaid waiver-funded PASSPORT program.
- (4) "Demonstration period" means the three hundred sixty-five day period that begins the day a HOME choice participant is discharged from an institutional setting into a qualified residence in the community and during which the participant is eligible for HOME choice services.
- (5) "Financial management services" are federally-mandated fiscal intermediary and administrative services that an ODM-designated entity provides for HOME choice participants.
- (6) "Guardian" means, in accordance with section 2111.01 of the Revised Code, any person, association, or corporation appointed by the probate court to have the care and management of the person, the estate, or both of an individual who is incompetent or minor. When applicable, "guardian" includes, but is not limited to, a limited guardian, an interim guardian, a standby guardian, and an emergency guardian appointed pursuant to division (B) of section 2111.02 of the Revised Code. "Guardian" also includes an agency under contract with the Ohio department of developmental disabilities (DODD) for the provision of protective service under sections 5123.55 to 5123.59 of the Revised Code when appointed by the probate court to have the care and management of the person of an incompetent.
- (7) "HOME choice application" means an official request for participation in the

HOME choice program using the ODM 02361, "HOME Choice - Application" (rev. 7/2014).

- (8) "HOME choice case management" means the provision of case management services to individuals participating in HOME choice who are not enrolled on a home and community based services (HCBS) waiver. These services are available immediately prior to a participant's enrollment in the program and continue through the participant's demonstration period.
- (9) "HOME choice participant" or "participant" means a person who is receiving HOME choice services.
- (10) "HOME choice service plan" means the plan that is approved by ODM that identifies and authorizes the HOME choice services, supports and activities to be provided to a HOME choice participant.
- (11) "HOME choice services" means all services available to a HOME choice participant through the HOME choice program.
- (12) "Institutional level of care" means any of the levels of care as described in rules 5160-3-07 and 5160-3-08 of the Administrative Code.
- (13) "Institution" or "institutional setting" means a hospital, nursing facility, residential treatment facility, or an intermediate care facility for individuals with intellectual disabilities.
- (14) "Legally responsible family member" means an individual's spouse, or in the case of a minor, the individual's birth or adoptive parent.
- (15) "Money follows the person (MFP)" means the rebalancing demonstration program enacted by the Deficit Reduction Act of 2005. MFP is part of a comprehensive strategy to assist states in reforming long-term care support systems by reducing reliance on institutional care and developing community-based long-term care opportunities. The MFP rebalancing demonstration program in Ohio is titled HOME choice.
- (16) "Non-agency provider" means a provider who is not employed by an agency, and who is eligible to provide services in the HOME choice program.
- (17) "Plan of care" means the medical treatment plan that is established, approved, and signed by a treating physician prior to a provider requesting reimbursement for a service. The plan of care is not the same as an all services plan, service plan, individual service plan or HOME choice service plan.
- (18) "Qualified residence" is a home which meets specific criteria to transition a participant safely into the community.

(a) A qualified residence must include:

- (i) Lockable access and egress to the HOME choice participant's unit;
- (ii) Sleeping, bathing, living and cooking areas over which a HOME choice participant or a HOME choice participant's family has domain and control;
- (iii) A lease, rental agreement or other written verification of residency;
and
- (iv) No more than four unrelated individuals residing together.

(b) Examples of a qualified residence may include but are not limited to:

- (i) A home owned or leased by a HOME choice participant or a HOME choice participant's family member or friend.
- (ii) An adult foster home certified by an area agency on aging that the Ohio department of mental health and addiction services (OhioMHAS) contracts with in accordance with Chapter 5122-35 of the Administrative Code;
- (iii) An adult family home licensed by OhioMHAS in accordance with section 5119.70 of the Revised Code and Chapter 5122-33 of the Administrative Code;
- (iv) Type 1 residential facilities licensed by OhioMHAS in accordance with Chapter 5122-30 of the Administrative Code;
- (v) Type 2 residential facilities licensed by OhioMHAS in accordance with Chapter 5122-30 of the Administrative Code;
- (vi) Adult foster care where providers are certified by DODD in accordance with rule 5123:2-9-33 of the Administrative Code;
- (vii) Non-intermediate care facilities for individuals with intellectual disabilities (ICF-IID) residential facilities licensed by DODD in accordance with section 5123.19 of the Revised Code and Chapter 5123:2-3 of the Administrative Code;
- (viii) A supported living arrangement with a provider certified by DODD in accordance with Chapter 5123 of the Administrative Code for an individual with a developmental disability who is enrolled on an HCBS waiver that is administered by DODD;

- (ix) Foster homes for children that are certified by the Ohio department of job and family services (ODJFS) in accordance with section 5103.03 of the Revised Code and Chapter 5101:2-7 of the Administrative code;
 - (x) Group homes for children that are licensed by ODJFS in accordance with Chapter 5101:2-5 of the Administrative Code, or certified by ODJFS in accordance with section 5103.03 of the Revised Code;
or
 - (xi) Medically fragile foster homes for children that are certified by ODJFS in accordance with rule 5101:2-7-17 of the Administrative Code.
 - (xii) Any other community-based setting as approved by ODM.
- (19) "Qualified services" means HCBS waiver services and medicaid state plan services that have been determined by ODM to be non-acute, long-term support services. Qualified services do not include HOME choice services. Qualified services are services that a participant would still receive at the end of the demonstration period when a recipient remains eligible for medicaid.
- (20) "Residential treatment facility" means, in accordance with section 5166.01 of the Revised Code, a residential facility licensed by OhioMHAS under section 5119.34 of the Revised Code, or an institution certified by ODJFS under section 5103.03 of the Revised Code, that serves children and either has more than sixteen beds or is part of a campus of multiple facilities or institutions that, combined, have a total of more than sixteen beds.
- (21) "Service and support administrator" means a provider employed by or under contract with a county board of developmental disabilities who provides a variety of coordination activities for an individual enrolled on an HCBS waiver that is administered by DODD in accordance with section 5126.15 of the Revised Code.
- (22) "Transition coordination" is a service that helps a HOME choice participant plan for the move from an institutional setting into a qualified residence. The transition coordinator helps the participant locate benefits, secure housing, link with community services and make detailed plans for the services needed to move and remain in the community-based setting.

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