173-38-03 **Enrollment process.**

(A) Initial contact: A person may contact either the CDJFS or the PAA to begin the enrollment process:

(1) The person who makes initial contact with the CDJFS shall complete forms JFS07200 and JFS02399. The CDJFS shall determine if the applicant meets the program's financial eligibility criteria under Chapters 5101:1-37 to 5101:1-39 of the Administrative Code and shall notify the PAA of the person's application. In response, the PAA shall initiate contact with the applicant to perform an in-person assessment to determine if he/she meets the non-financial eligibility criteria under rule 5101:3-33-03 of the Administrative Code.

(2) For the person who makes initial contact with the PAA, the PAA shall perform an in-person assessment to determine if the applicant meets the non-financial eligibility criteria under rule 5101:3-33-03 of the Administrative Code. The PAA may help him/her complete forms JFS07200 and JFS02399 and may submit the forms to the CDJFS so the CDJFS may determine if he/she meets the program's financial eligibility criteria under Chapters 5101:1-37 to 5101:1-39 of the Administrative Code.

(B) If ineligible: If the CDJFS determines that the applicant does not meet the program's financial eligibility criteria, it shall send a notice of denial and hearing rights to him/her and also notify the PAA. If the PAA determines that the applicant does not meet the non-financial eligibility criteria, it shall notify him/her and also notify the CDJFS.

(C) If eligible:

(1) Date of determination of eligibility to enroll: If the CDJFS determines that the applicant meets the program's financial eligibility criteria and the PAA determines that the applicant meets the non-financial eligibility criteria, the PAA shall establish the date the applicant is eligible to enroll in the program. The CDJFS shall not establish this date. Only the PAA shall establish this date, and it shall do so accordingly:

(a) If the applicant currently receives medicaid services, either as a consumer of the PASSPORT program, the choices program, the Ohio home care program, or the transitions program, or as a nursing facility resident, the PAA shall establish the date the applicant is eligible to enroll as the latter of:

(i) The date the applicant met all non-financial eligibility criteria; or,

(ii) The date the applicant becomes a resident of an assisted living facility.

(b) If the applicant does not currently receive medicaid services, the PAA shall establish the date the applicant is eligible to enroll as the latter of:

(i) The date the applicant met all non-financial eligibility criteria; or,

(ii) The date the CDJFS issued a determination of medicaid financial eligibility for the program, regardless of the date the CDJFS establishes as the effective date of medicaid financial eligibility for the program.

(2) No waiting list: If the PAA establishes a date of eligibility to enroll, and if a slot in the program is available, the PAA may enroll the applicant into the program.

(3) Waiting list:

(a) If the PAA establishes a date of eligibility to enroll, but a slot in the program is not available, the PAA shall place the applicant on a waiting list according to the date that he/she signed form JFS02399.

(b) If a slot in the program becomes available, the PAA shall remove the applicant from the waiting list so the PAA may enroll the applicant into the program. In doing so, the PAA shall select an applicant from the waiting list in the following order:

(i) First: an applicant who resides in a nursing facility.

(ii) Second: any other applicant.

(c) If more than one applicant is waiting in a category described in paragraphs (C)(3)(b)(i) to (C)(3)(b)(ii) of this rule, the PAA shall remove the applicant with the earliest date the PAA determined that he/she was eligible to enroll in the program.

(D) An authorized representative may represent a person/applicant in the enrollment process.

(E) Definitions:

(1) "Authorized representative" has the same meaning as in rule 5101:3-33-02 of the Administrative Code.

(2) "Form JFS02399" means "form JFS02399 'Request for Medicaid Home and Community-Based Services (HCBS).'"

(3) "Form JFS07200" means "form JFS07200 'Request for Cash, Food Stamp, and

Medical Assistance.'"

Replaces: 173-38-01

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