TO BE RESCINDED

173-42-03PASSPORT program (medicaid-funded component):
enrollment process for individuals.

- (A) Initial contact: To determine if an individual who applies for the medicaid-funded component of the PASSPORT program meets the eligibility criteria for the program under rule 5160-31-03 of the Administrative Code, the CDJFS shall determine if the individual meets the medicaid financial eligibility criteria required by that rule and ODA's designee shall determine if the individual meets the non-financial eligibility criteria required by that rule. An individual may contact either the CDJFS or ODA's designee to start the enrollment process. The two agencies shall coordinate processing the request for enrollment into the medicaid-funded component of the PASSPORT program.
 - (1) CDJFS: The individual who makes initial contact with the CDJFS shall complete the application for home and community-based services using the medicaid application forms JFS07200 and JFS02399. The CDJFS shall determine if the individual meets the program's financial eligibility criteria and shall notify ODA's designee of the individual's application. In response, ODA's designee shall initiate contact with the individual to perform an in-person assessment to determine if the individual meets the non-financial eligibility criteria.
 - (2) ODA's designee: The individual who makes initial contact with ODA's designee shall complete forms JFS07200 and JFS02399 and submit the forms to the CDJFS. ODA's designee may help the individual complete the forms and may forward the completed forms to the CDJFS on behalf of the individual. ODA's designee shall perform an in-person assessment to determine if the individual meets the non-financial eligibility criteria.
- (B) If determined ineligible: If the CDJFS or ODA's designee determines that the individual does not meet the eligibility criteria for the program under rule 5160-31-03 of the Administrative Code, ODA's designee shall not enroll the individual in the program.
 - (1) CDJFS: If the CDJFS determines the individual does not meet the financial eligibility criteria, it shall notify ODA's designee and send to the individual a notice of denial and hearing rights under section 5101.35 of the Revised Code and division 5101:6 of the Administrative Code.
 - (2) ODA's designee: If ODA's designee determines that the individual does not meet the non-financial eligibility criteria, it shall send to the individual a notice of denial and hearing rights under section 5101.35 of the Revised Code and division 5101:6 of the Administrative Code.

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- (C) If determined eligible:
 - (1) Notification: ODA's designee shall notify any individiaul who meets all PASSPORT eligibility criteria that he or she meets all PASSPORT eligibility criteria.
 - (2) Available slot: If a waiver slot in the medicaid-funded component of the PASSPORT program is available, ODA's designee may enroll the individual into the program. ODA's designee shall not place the individual on the unified waiting list.
 - (3) No available slot: If a waiver slot is not available in the medicaid-funded component of the PASSPORT program, ODA's designee may enroll the eligible individual when a waiver slot does become available by one of two means: the unified waiting list or the home-first component of the medicaid-funded component of the PASSPORT program.
 - (a) Unified waiting list: If an individual meets all the non-financial eligibility criteria, but a slot is not available in the PASSPORT program, ODA's designee shall place the individual on the unified waiting list according to the terms of rule 173-44-04 of the Administrative Code, unless the individual qualifies for the home first component of the PASSPORT program under paragraph (C)(3)(b) of this rule.
 - (b) Home first:
 - (i) ODA's designee shall enroll an eligible individual who qualifies for the home first component of the medicaid-funded component of the PASSPORT program before any eligible individual on the unified waiting list.
 - (ii) An eligible individual qualifies for the home first component of the medicaid-funded component of the PASSPORT program if the eligible individual meets both of the following sets of criteria:
 - (*a*) ODA's designee has determined that the individual meets all the eligibility criteria in rule 5160-31-03 of the Administrative Code.
 - (b) The individual meets at least one of the following four sets of criteria:
 - (*i*) The individual resides in a nursing facility.

- (ii) A physician has determined and documented in writing that the individual has a medical condition that, unless ODA's designee enrolls the individual in a home and community-based program such as the medicaid-funded component of the PASSPORT program, the individual will require admission to a nursing facility in fewer than thirty days after the physician's determination.
- (*iii*) The individual has been hospitalized and a physician has determined and documented in writing that, unless the individual is enrolled in a home and communitybased program such as the PASSPORT program, the individual is to be transported directly from the hospital to a nursing facility and admitted.
- (*iv*) Both of the following apply:
 - (A) The individual is the subject of a report made under section 5101.61 of the Revised Code regarding abuse, neglect, or exploitation or such a report referred to a CDJFS under section 5126.31 of the Revised Code or has made a request for adult protective services as defined in section 5101.60 of the Revised Code; and,
 - (B) A CDJFS and ODA's designee have jointly documented in writing that, unless ODA's designee enrolls the individual into a home and community-based program such as the medicaid-funded component of the PASSPORT program, the individual should be admitted to a nursing facility.
- (D) An authorized representative may represent an individual in the enrollment process.
- (E) Definitions for this rule:
 - (1) "Form JFS02399" (rev. 05/2013) means "form JFS02399 'Request for Medicaid Home and Community-Based Services (HCBS)." The form is readily available on http://www.odjfs.state.oh.us/forms/.

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(2) "Form JFS07200" (rev. 12/2012) means "form JFS07200 'Request for Cash, Food, and Medical Assistance." The form is readily available on http:// www.odjfs.state.oh.us/forms/.

Effective:	11/1/2018
Five Year Review (FYR) Dates:	8/14/2018

CERTIFIED ELECTRONICALLY

Certification

10/22/2018

Date

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