Assisted living program (medicaid-funded component): introduction and definitions.

(A) Introduction: Chapter 173-38 of the Administrative Code regulates the medicaid-funded component of the assisted living program created under section 173.54 of the Revised Code. (See Chapter 173-51 of the Administrative Code for rules on the state-funded component of the assisted living program.)

(B) Definitions for this chapter:

"Assisted living program" (program) means the home and community-based medicaid waiver program created under section 173.54 of the Revised Code that provides individuals enrolled in the program with the assisted living service under rule 173-39-02.16 of the Administrative Code and, in some cases, the community transition service under rule 173-39-02.17 of the Administrative Code, if the individuals reside in a residential care facility and would otherwise receive services in a nursing facility if the waiver program was not available.

"Authorized representative" has the same meaning as in rule 5160-1-33 of the Administrative Code.

"ODA" means "the Ohio department of aging.

"ODA’s designee" has the same meaning as in rule 173-39-01 of the Administrative Code.

"ODM" means "the Ohio department of medicaid."

"ODM's administrative agency" has the same meaning as "administrative agency" in rule 5160:1-1-01 of the Administrative Code.

"Person-centered services plan" means the written outline of the services that a case manager authorizes a provider to provide to an individual, regardless of the funding source for those services. It includes the person-centered planning in rule 5160-44-02 of the Administrative Code.

"Residential care facility" (RCF) has the same meaning as in section 3721.01 of the Revised Code.
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