



Ohio Administrative Code

Rule 5180-8-02 Home visiting program eligibility.

Effective: July 12, 2024

(A) The centralized intake and referral contractor will contact every caregiver or parent referred to home visiting to determine if they are eligible or not eligible within thirty days of the program referral, in accordance with the following:

(1) Expectant families or caregivers of a child under the age of three whose family income is not in excess of two hundred per cent of the federal poverty level, unless approved by the department; and is in accordance with the fidelity standards for the home visiting model implemented, and meets any standards of the funding source used to provide services.

(2) Any family or caregiver referenced in paragraph (A) of this rule who is enrolled in home visiting services, may be served in accordance with the age specifications in section 3701.61 of the Revised Code, or exit the program in accordance with the fidelity standards for the home visiting model being implemented.

(3) A parent or caregiver who is actively working with child welfare to regain or obtain custody of their child, foster care families and kinship care families may receive services in accordance with the fidelity standards for the home visiting model being implemented.

(B) If, after thirty days, the centralized intake and referral contractor is not able to determine eligibility, they will notify the home visiting provider to whom the family is referred. The home visiting provider will either confirm eligibility or exit the family from services.

(C) Families will remain eligible for home visiting services as long as the child defined in paragraph (A) of this rule has not reached the age of exit as specified in section 3701.61 of the Revised Code and enrollment in services does not end. Eligibility remains with the child if transferred to another provider. If a family exits the program, eligibility will be re-determined when a new referral is made in accordance with rule 3701-8-10 of the Administrative Code.



(D) When a family or caregiver is determined not eligible for home visiting services, the central intake and referral agency will submit a letter in person, by e-mail, or by post mail stating the reasons they did not qualify for home visiting, present other potential service options available, and the process for reconsideration. This communication will be sent to the family or caregiver within ten days of the decision.

(E) When a family or caregiver disagrees with the eligibility determination, the caregiver may request reconsideration of the decision by filing a written request with the director within thirty days of the date on the written notice. The request for reconsideration will contain a statement of the reasons the caregiver believes the decision is incorrect or inappropriate and may include any written documentation, argument, or other materials they wish to submit. The request is filed with the director when it is received by the department. The decision of the director will be final, and not subject to further administrative or judicial review.