



Ohio Revised Code

Section 5166.02 Rules governing medicaid waiver components.

Effective: September 29, 2013

Legislation: House Bill 59 - 130th General Assembly

(A) The medicaid director shall adopt rules in accordance with Chapter 119. of the Revised Code governing medicaid waiver components. The rules may establish all of the following:

- (1) Eligibility requirements for the medicaid waiver components;
- (2) The type, amount, duration, and scope of medicaid services the medicaid waiver components cover;
- (3) The conditions under which the medicaid waiver components cover medicaid services;
- (4) The amounts the medicaid waiver components pay for medicaid services or the methods by which the amounts are determined;
- (5) The manners in which the medicaid waiver components pay for medicaid services;
- (6) Safeguards for the health and welfare of medicaid recipients receiving medicaid services under a medicaid waiver component;
- (7) Procedures for prioritizing and approving for enrollment individuals who are eligible for a home and community-based services medicaid waiver component and choose to be enrolled in the component;
- (8) Procedures for enforcing the rules, including establishing corrective action plans for, and imposing financial and administrative sanctions on, persons and government entities that violate the rules. Sanctions shall include terminating provider agreements. The procedures shall include due process protections.
- (9) Other policies necessary for the efficient administration of the medicaid waiver components.



(B) The director may adopt different rules for the different medicaid waiver components. The rules shall be consistent with the terms of the waiver authorizing the medicaid waiver component.

(C) The following apply to procedures established under division (A)(7) of this section:

(1) Any such procedures established for the medicaid-funded component of the PASSPORT program shall be consistent with section 173.521 of the Revised Code.

(2) Any such procedures established for the medicaid-funded component of the assisted living program shall be consistent with section 173.542 of the Revised Code.

(3) Any such procedures established for the Ohio home care waiver program shall be consistent with section 5166.121 of the Revised Code.

(4) Any such procedures established for the unified long-term services and support medicaid waiver program shall be consistent with section 5166.141 of the Revised Code.