



Ohio Administrative Code

Rule 5160-59-05 OhioRISE home and community-based services waiver: covered services and providers.

Effective: [October 13, 2025](#)

(A) This rule establishes the services available under the Ohio resilience through integrated systems and excellence (OhioRISE) home and community-based services (HCBS) waiver program (waiver) established in accordance with 1915(c) of the Social Security Act 42 U.S.C. 1396n (January 1, 2025), and the providers eligible to deliver those services to youth enrolled on the waiver.

(B) Providers seeking to deliver services in the waiver program will meet the criteria in Chapter 5160-59 and rules 5160-44-02 and 5160-44-31 of the Administrative Code, as appropriate. Upon prior approval by the Ohio department of medicaid (ODM), providers that have responsibility for developing the child and family-centered care plan for a youth can provide other direct OhioRISE 1915(c) waiver services to that youth.

(C) Prior to a qualified waiver provider delivering services to waiver recipients, the services will be documented on the youth's child and family-centered care plan as described in Chapter 5160-59 of the Administrative Code and approved by the OhioRISE plan. The child and family-centered care plan will be developed in accordance with person-centered practices as set forth in rule 5160-44-02 of the Administrative Code.

(D) Waiver covered services are limited to the following and are subject to any reimbursement provisions in the Ohio Administrative Code rules cited therein:

- (1) Out-of-home respite as set forth in rule 5160-59-05.1 of the Administrative Code;
- (2) Transitional services and supports as set forth in rule 5160-59-05.2 of the Administrative Code;
and
- (3) Secondary flex funds as set forth in rule 5160-59-05.3 of the Administrative Code. Secondary flex funds service is subject to participant-direction through budget authority.



(E) When the OhioRISE plan denies, reduces, terminates or suspends an OhioRISE waiver service, this constitutes an adverse benefit determination, and can be appealed in accordance with rule 5160-26-08.4 of the Administrative Code.