



Ohio Administrative Code

Rule 5160:1-1-05 Medicaid: asset verification system (AVS).

Effective: August 10, 2017

(A) This rule describes the asset verification program outlined in section 1940 of the Social Security Act (as in effect on October 1, 2016), requiring state agencies that administer medical assistance to implement a system by which the agency will obtain financial records from financial institutions with respect to an individual, his or her spouse, or any other such person, as applicable, whose assets are required to be evaluated whenever the administrative agency determines the record is needed in connection with a determination of eligibility for, or the amount or extent of, medical assistance on the basis of age, blindness, or disability, including a determination regarding medical assistance for long-term care services. This rule applies to a determination of eligibility for medical assistance for any covered group subject to:

(1) A resource limit; and/or

(2) Provisions related to the transfer of assets.

(B) Definitions.

(1) "Financial institution" means any office of an institution engaged in the business of dealing with monetary transactions including, but not limited to, a bank, savings bank, trust company, savings association, cooperative bank, credit union, or consumer finance institution, as defined in 42 U.S.C. 3401 (as in effect on October 1, 2016).

(2) "Financial record" means any record held by a financial institution pertaining to a customer's relationship with the financial institution, as defined in 42 U.S.C. 3401 (as in effect on October 1, 2016).

(C) Administrative agency responsibilities. The administrative agency shall:

(1) Use the authorization provided under paragraph (D) of this rule to electronically verify the assets



of an individual, his or her spouse, or any other such person, as applicable, in order to determine or redetermine the individual's eligibility for medical assistance.

(2) Inform all individuals in writing at the time of application and renewal that the agency will obtain and use information available through AVS to determine eligibility for medical assistance.

(3) Determine an individual ineligible for medical assistance if he or she refuses to provide, or revokes, authorization under paragraph (D) of this rule.

(D) Individual responsibility. An individual must provide authorization for the administrative agency to obtain from any financial institution any financial record held by the institution with respect to the individual, his or her spouse, or any other such person, as applicable, whenever the administrative agency determines the record is needed in connection with a determination of eligibility for, or the amount or extent of, medical assistance on the basis of age, blindness, or disability, including a determination regarding medical assistance for long-term care services. This authorization will remain in effect until the earliest of the following:

(1) The individual's application for medical assistance is denied; or

(2) The individual's eligibility for medical assistance is terminated; or

(3) The individual expressly revokes his or her authorization in a written notification to the administrative agency.