



## Ohio Administrative Code

### Rule 5160:1-6-02.3 Medicaid: continuing care communities, life care communities, and philanthropic long-term care facilities.

Effective: September 1, 2017

---

(A) The purpose of this rule is to describe the eligibility requirements for individuals residing in a continuing care retirement community (CCRC), life care community, or a philanthropic long-term care facility (LTCF).

(B) Definitions.

(1) "Continuing care retirement communities" and "life care communities" mean housing communities that provide different types of care based on each resident's need over time. CCRCs and life care communities may range from independent living in an apartment to assisted living to full-time care in a nursing facility. Residents may move from one setting to another, based on their needs, but continue to live as part of the community. Generally, CCRCs require a written contract and an entrance fee, in addition to monthly fees. CCRCs and life care communities may also be philanthropic facilities.

(2) "Entrance fee" means a payment generally required for admission to a CCRC or life care community and may vary in amount based on the type of housing accommodations and/or type of care.

(3) "Philanthropic long-term care facility" means a not-for-profit long-term care facility.

(C) Eligibility for medical assistance for individuals residing in a philanthropic long-term care facility.

(1) An aged, blind or disabled person, living in a philanthropic long-term care facility, who has entered into a life care contract with the LTCF, is eligible for medical assistance, if all other eligibility requirements for medical assistance are fulfilled, when the following conditions are met:

(a) The philanthropic LTCF must provide evidence that it is financially unable to operate. The LTCF



must show that the total financial situation of the LTCF indicates the LTCF is financially unable to fulfill its responsibilities under the life care contract (rather than showing the individual has exhausted the amount of money turned over to the long-term care facility); and

(b) The entrance fee would be depleted had the individual paid the facility at the medicaid long-term care rate for a comparable facility.

(2) An individual residing in a philanthropic long-term care facility who has not entered into a life care contract must have eligibility for medical assistance determined in accordance with Chapter 5160:1-6 of the Administrative Code.

(D) For purposes of determining or redetermining eligibility for medical assistance on or after February 8, 2006, an individual's entrance fee for admission to a CCRC or life care community shall be considered an available resource to the individual, in accordance with 42 U.S.C. 1396p (as in effect October 1, 2016), when all of the following conditions are met:

(1) The entrance fee can be used to pay for care, under the terms of the entrance contract, when other resources or income of the individual are insufficient; and

(2) The individual is eligible for a refund of any remaining entrance fee when the individual dies or terminates the contract and leaves the CCRC or life care community; and

(3) The entrance fee does not confer an ownership interest in the CCRC or life care community.