



Ohio Revised Code

Section 5124.69 Informational pamphlet.

Effective: September 29, 2015

Legislation: House Bill 64 - 131st General Assembly

(A) The department of developmental disabilities shall develop and make available to all ICFs/IID a written pamphlet that describes all of the items and services covered by medicaid as ICF/IID services and as home and community-based services. The department shall develop the pamphlet in consultation with persons and organizations interested in matters pertaining to individuals eligible for ICF/IID services and home and community-based services.

(B) Each ICF/IID provider shall provide the pamphlet to the residents of the ICF/IID who receive ICF/IID services, and the guardians of such residents, and shall discuss the items and services described in the pamphlet with those residents and their guardians, as follows:

(1) At least annually;

(2) Any time such a resident, or resident's guardian, requests to receive the pamphlet and to discuss the items and services described in the pamphlet;

(3) Any time such a resident, or resident's guardian, expresses to the provider an interest in home and community-based services.

(C) If a resident of an ICF/IID who receives ICF/IID services, or the resident's guardian, indicates to the ICF/IID provider an interest in enrolling the resident in a medicaid waiver component providing home and community-based services, the provider shall refer the resident or guardian to the county board of developmental disabilities serving the county in which the resident would reside while enrolled in a medicaid waiver component.

(D) Not later than thirty days after a county board is contacted by an ICF/IID resident or resident's guardian who was referred to the county board pursuant to division (C) of this section, the county board, notwithstanding a waiting list for the component established pursuant to section 5126.042 of the Revised Code, shall enroll the resident in the component if all of the following apply:



- (1) The resident is eligible and chooses to enroll in the component.

- (2) The component has an available slot.

- (3) The director of developmental disabilities determines that the department has the funds necessary to pay the nonfederal share of the medicaid expenditures for the home and community-based services provided to the resident under the component.