

Trumbull County Board of Developmental Disabilities

Procedure

Section 8.34.b

MEDICAID WAIVER SERVICES APPEAL PROCEDURE

Purpose:

The Trumbull County Board of Developmental Disabilities is dedicated and committed to upholding the rights of individuals receiving or applying for services. Whenever Medicaid-funded services are approved, denied, reduced or terminated the affected Medicaid-eligible individual or their lawfully appointed authorized representative has the right, under the federal laws governing Medicaid, to appeal that decision. This procedure details the rights and responsibilities of all individuals receiving, or applying for, Medicaid waiver services.

Procedure:

Whenever there is an approval, reduction, denial or termination of services recommended for an individual receiving Medicaid waiver services, only the individual, parents of minor children, or guardian will have the right to request a state hearing to appeal the action.

5101:6-1 through 5101:6-9 of Ohio Administrative Code requires that individuals currently receiving Medicaid waiver services be given at least fifteen (15) days prior written notice of any proposed approval, denial, reduction or termination of their services.

Pursuant to 5123:2-9-01(K) of Ohio Administrative Code, when the enrollment or denial of enrollment in, or disenrollment from a Medicaid waiver is proposed, written notice shall be provided to the individual by the Ohio Department of Developmental Disabilities at least fifteen (15) days prior to the proposed action. This notice shall include informing the individual of their right to a state hearing.

Once an individual has received written notification that their HCBS waiver services have been recommended to be approved, reduced, denied or terminated, the individual will have ninety (90) days to request a state hearing to appeal that decision. If the individual files their request for a state hearing with the Ohio Department of Jobs and Family Services' (ODJFS) Bureau of State Hearings within fifteen (15) days from the date on the notice of the proposed action, the proposed action will not be taken until a decision is rendered by the ODJFS Bureau of State Hearings.

When the department proposes to disenroll an individual from a Medicaid Waiver, the Trumbull County Board shall do both of the following:

- a. Offer the individual the opportunity to apply for an alternative home and community-based services waiver for which the individual is eligible that may

more adequately address the needs of the individual, to the extent that such waiver openings exist; and

- b. Assist the individual in identifying and obtaining alternative services that are available and may more adequately address the needs of the individual.
- c. In the event that options set forth in paragraphs a or b above do not meet the individual's needs, the Board may offer the individual an opportunity for placement in an intermediate care facility.
- d. An individual who is disenrolled from the transitions developmental disabilities waiver shall have the opportunity to retain his or her transitions developmental disabilities waiver slot and re-enroll in the same waiver program year, if it is determined that the individual meets the eligibility criteria for the waiver.

Effective 6/24/14

Reference:

OAC 5101:6-1 thru 6-9

OAC 5123: 2-9-01