\_\_\_\_\_\_\_\_\_\_\_\_ Intermediate care for individuals with developmental disabilities.

1. This rule describes the criteria for an individual to meet the level of intermediate care for individuals with developmental disabilities. The criteria set forth in this rule must be used when determining level of care for individuals seeking medicaid coverage of either home and community-based services(HCBS) waivers or facility-based long term care services.
2. For individuals birth through age nine (9), inclusive, the criteria for intermediate care for individuals with developmental disabilities is met when:
	1. The individual has a substantial developmental delay or specific congenital or acquired condition; and
	2. In the absence of individually planned supports, the individual has a high probability of having substantial functional limitations in at least three major life areas described in paragraphs (C)(2)(a) through (C)(2)(g) later in life
3. For individuals ages ten (10) and above, the criteria for intermediate care for individuals with developmental disabilities is met when the individual meets all the criteria identified in paragraphs (C)(1) through (C)(3) below:
	1. The individual has been diagnosed with a severe, chronic disability that:
		1. Is attributable to a mental or physical impairment or combination of physical and mental impairments, other than an impairment caused solely by mental illness;
		2. Is manifested before the individual is age twenty-two (22); and
		3. Is likely to continue indefinitely.
	2. The condition described in paragraph (C)(1) results in substantial functional limitations in three or more of the following areas of major life activities, as determined through use of the standardized level of care assessment instrument approved by the Ohio department of job and family services, the single state Medicaid agency:
		1. Self-care;
		2. Receptive and expressive communication;
		3. Learning;
		4. Mobility;
		5. Self-direction;
		6. Capacity for independent living; and
		7. Economic self-sufficiency
	3. The condition described in paragraph (C)(1) reflects the individual’s need for a combination and sequence of special, interdisciplinary, or generic services, individualized supports, or other forms of assistance that is of lifelong or extended duration that are individually planned and coordinated.