

**CHAPTER 7: COMMUNITY CHOICES WAIVER**

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**ORGANIZED HEALTH CARE DELIVERY SYSTEM**

An organized health care delivery system (OHCDS) is an entity with an identifiable component within its mission to provide services to individuals receiving Community Choices Waiver services. The entity must be a qualified and enrolled Medicaid provider and must directly render at least one service offered in the community Choices Waiver. As long as the entity furnishes at least one waiver service itself, it may contract with other qualified providers to furnish the other required waiver service.

Entities that function as an OHCDS must ensure that subcontracted entities meet all of the applicable provider qualification standards for the services they are rendering.

The OHCDS must attest that all provider qualifications are met in accordance with all of the applicable waiver provider qualifications as set forth in this manual chapter.

Prior to enrollment, an OHCDS must show the ability to provide all of the services available in the Community Choices Waiver on December 1, 2012 (see section 7.6 – Provider Requirements for a list of those particular services), with the exceptions of the following:

1. Support coordination;
2. Transition intensive support coordination (TISC);
3. Transition services; and
4. Adult day health care (ADHC) if there is no licensed ADHC provider in the service area.