

Ohio Medicaid Waiver Comparison Chart – Enrollment figures for September 2020, SFY 2021

Waiver Program Control#	MyCare Ohio OH1035.	OhioHome Care Waiver 0337	PASSPORT Waiver 0198	AssistedLivingWaiver 0446	Individual Options Waiver 0231	Level One Waiver 0380	S.E.L.F. 0877
Unduplicated Capacity (SFY 21)	33,409	9,800	35,919	5,391	27,200	19,200	2,200
Unduplicated enrollment for SFY21	32,419	7,074	20,271	3,305	23,839	14,986	1,999
Avg. Individual Waiver Costs 372 Report (SFY 18)	ManagedCareWaiver	\$18,294	\$10,475	\$11,254	\$64,467	\$11,116	\$13,082
1. What are the eligibility requirements?	1. Eligiblefor MedicareParts and fullbenefits underMedicaid; age 18+; must be enrolled in the MyCare demonstration; Intermediate or Skilled LOC; Require NF or hospital in the absence of MyCare waiver; require at least one waiver service monthly; not reside in NF or ICF-IID.	1. Specific Financial Criteria,Nursing Facility Level of Care, Age 59 or younger	1. Specific Financial Criteria, NursingFacility Level of Care, Ages 60+	1. Specific Financial Criteria, Nursing Facility Level of Care, age 21 or older	1. Specific Financial Criteria;ICF/IID Level of Care; AllAges	1. Specific Financial Criteria;ICF/IID Level of Care; All Ages	1. Specific Financial Criteria; ICF/IID Level of Care, All Ages *Participant–directed model *Cost limitations for the SELF waiver are \$30,000/year for children (defined as under age 22) and \$45,000/year for adults
2. What services are available?	<ul style="list-style-type: none"> • Adult day health • Alternative meals • Assisted living service • Choices home careattendant • Community Integration • Community Transition • Enhanced community living • Home care attendant • Home delivered meals • Home maintenance and chore • Homemaker • Home Modification • Home medicalequipment supplemental adaptive and assistive devices • Nutritional consultation • Out-of-home respite • Personal care aide • Personal emergency response system • Social work counseling • Waiver nursing • Waiver transportation 	<ul style="list-style-type: none"> • Adult day health • Community Integration • Community Transition • Emergency response • Home care attendant • Home delivered meals • Home maintenance and chore • Home modification • Out-of-home respite • Personal care aide • Supplementaladaptive and assistive devices • Supplemental transportation • Waiver nursing 	<ul style="list-style-type: none"> • Adult day health • Alternative meal service • Choices home care attendant • Community Integration • Community transition • Enhanced community living • Home care attendant • Home delivered meals • Home maintenance and chore • Home modification • Homemaker • Home medical equipment and supplies • Non-medical transportation • Nutritional consultation • Out of Home Respite • Personal Care • Personal Emergency Response System • Social work and counseling • Non-emergency medical Transportation • Waiver Nursing 	<ul style="list-style-type: none"> • Assisted living services • Community transition 	<ul style="list-style-type: none"> • Adult day support • Assistive Technology • Career planning • Community Transition • Environmental accessibility adaptations • Group employment support • Homemaker/personal care • Home-delivered meals • Individual employment support • Interpreter • Money management • Non-medical transportation • Nutrition • Participant-Directed homemaker/personal care • Remote Supports • Respite (residential and community) • Shared living • Specialized medical equipment and supplies • Social work • Transportation • Vocational habilitation • Wavier nursing delegation • Waiver nursing 	<ul style="list-style-type: none"> • Adult day supports • Assistive Technology • Career planning • Environmental accessibility adaptations • Group employment support • Homemaker/personal care • Home-Delivered Meals • Individual employment support • Informal respite • Money management • Non-medical transportation • Participant-Directed homemaker/personal care • Remote Supports • Respite (residential and community) • Specialized medical equipment and supplies • Transportation • Vocational habilitation • Wavier nursing delegation 	<ul style="list-style-type: none"> • Adult day supports • Assistive Technology • Career planning • Clinical/therapeutic intervention • Functional behavioralassessment • Group employment support • Individual employment support • Non-medical transportation • Participant-Directed homemaker/personal care • Participant-directedgoodsand services • Participant/family stability assistance • Remote Supports • Respite (residential and community) • Support brokerage • Transportation • Vocational habilitation • Waiver nursing delegation
3. How and where do I request a waiver?	3. Eligible individuals currently on one of the 3 ODA or ODM NF-based waivers will be transitioned to the MyCare waiver automatically.MyCare memberswhotransition to MyCare who are not transitioning from an ODA or ODM waiver should ask their MyCare Plan CareManager or Service Coordinator. An ODM form must be submitted.	3. The ODM 02399 form is used to request the waiver and can be obtained and submitted at the local County Department of Job and Family Services (CDJFS). Requests can also be made by calling Ohio Benefits Long Term Services and Supports (OBLTSS) at (844) 644-6582.	3. The ODM 02399 form is used to request the waiver and can be obtained and submitted at the local CountyDepartment of Job and Family Services (CDJFS) or at the regional PAA Office. Requests can also be made by calling Ohio Benefits Long Term Services and Supports (OBLTSS) at (844) 644-6582.	3. The ODM 02399 form is used to request the waiver and can be obtained and submitted at the local County Department of Job and Family Services (CDJFS) or at the regional PAA office. Requests can also be made by calling Ohio Benefits Long Term Services and Supports (OBLTSS) at (844) 644-6582.	3. The ODM 02399 form is used to request the waiver and can be obtained and submitted at the local County Department of Job and Family Services (CDJFS) or at the local county board of DD.	3. The ODM 02399 form is used to request the waiver and can be obtained and submitted at the local CDJFS or at the local county board of DD.	3. The ODM 02399 form is used to request the waiver and can be obtained and submitted at the local CDJFS or at the local county board of DD.
4. Who administers the waiver?	4. The Ohio Department of Medicaid(ODM) administers this waiver. ODM contracts with MyCare Managed Care Plans.	4. TheOhioDepartmentofMedicaid (ODM)administers this waiver program. ODM contracts with Case Management Agencies to provide administrative casemanagement services.	4. ODA operates this waiver program as outlined in the interagency agreement with ODM, which has overall responsibility for the program. PASSPORT Administrative Agencies (PAAs) provide Administrative case management services.	4. ODA operates this waiver program as outlined in the interagency agreement with ODM, which has overall responsibility for the program. PASSPORT Administrative Agencies (PAAs) provide Administrativecase management services.	4. DODD operates this waiver program as outlined in the interagency agreement with ODM, whichhas overall responsibility forthe program. County boards of developmental disabilities provide administrative case managementservices.	4. DODD operates this waiver program as outlined in the interagency agreement with ODM, whichhas overall responsibilityforthe program. County boards of developmental disabilities provide administrative case management services.	4. DODD operates this waiver program as outlined in the interagency agreement with ODM, which has overall responsibility for the program. County boards of developmental disabilities provide administrative case management services.