

Frequently Asked Questions

Why are the programs called “waivers”?

The term “waiver” refers to an exception to federal law that is granted to a state by the federal Centers for Medicare and Medicaid Services. The programs are called waivers because they “waive” certain federal regulations for Medicaid and enable Ohio Medicaid to try programs with limited enrollment and locations, and with certain eligibility requirements.

Who administers the waiver programs?

Three state agencies administer Ohio’s eight waiver programs:

1. The Ohio Department of Job and Family Services (ODJFS) manages three waiver programs: the **Ohio Home Care Waiver**, **Transitions MR/DD Waiver**, and **Transitions Carve-Out Waiver**, as well as a transition program called Ohio Access Success.
2. The Ohio Department of Aging (ODA) manages three waiver programs: **Assisted Living**, **Choices**, and **PASSPORT**.
3. The Ohio Department of Mental Retardation and Developmental Disabilities (OMR/DD) manages two waiver programs: **Individual Options** and **Level One**.

Together, in State Fiscal Year 2007, the eight Ohio Medicaid waiver programs served as an alternative to institutionalization for more than 61,000 individuals.

What is “level of care”?

Level of care (LOC) is a classification system used to determine the appropriate type of long-term care setting most appropriate to meet an individual’s needs. Persons wishing to utilize a home and community-based waiver in lieu of an institution must meet the same LOC requirements as those utilizing institutions.

The three LOCs are:

Intermediate LOC (ILOC) evaluates an individual’s ability to perform activities of daily living, such as bathing, dressing, eating, toileting, and mobility, and/or the need for skilled services, and the inability to self-administer medication.

Intermediate Care Facility for the Mentally Retarded LOC (ICF-MR LOC) evaluates the presence of a developmental disability and the level of assistance required for economic independence, communication, capacity for independent living and personal care. A waiver requiring an ICF-MR LOC provides an alternative to institutional care for an individual with mental retardation or developmental disabilities.

Skilled LOC, in general, is for individuals whose condition requires medical care beyond what is provided for individuals with intermediate or ICF-MR LOCs. The individual requires daily skilled services for an unstable medical condition having either complications or complex treatments. Skilled services must be performed by a nurse or therapist. Waivers providing services as an alternative to nursing facilities, hospitals or rehabilitation facilities use the skilled LOC.

How do I apply for Medicaid waiver services?

Apply at your [local county department of job and family services](#) office by completing the [JFS-02399 form](#). You may print out and complete the form and take it into the county office or you may complete the form at the county office. In either case, you must apply in person at the county.

To be enrolled on a waiver, individuals must meet financial, level of care, and other program eligibility requirements.

A caseworker at the county department of job and family services will determine if you meet the financial eligibility requirements based upon your income and resources.

The state's case management agency will determine if you meet level of care and program eligibility requirements for the waiver program. If you meet all eligibility requirements, you will be enrolled on a waiver program as soon as an opening is available.

If I am found eligible, when can I begin receiving waiver services?

Each waiver program serves a limited number of people. Applicants may have to wait until an opening (or slot) is available or they may be enrolled in as few as 30 to 45 days. The number of people on the waiting list at the time of application determines the length of the wait.

What type of waiver meets my needs?

Medicaid offers a variety of waivers for specific populations.

For people with severe disabilities and medically unstable conditions who require care in a hospital or nursing facility, contact:

- Your [local county department of job and family services](#) or
- The Medicaid Consumer Hotline at 1-800324-8680 (TDD 1-800-292-3572)

For people who are age 60 or older who require care in a nursing facility, contact:

- Your [local area agency on aging](#) or
- Your [local county department of job and family services](#) or

- The Ohio Department of Aging and ask to speak to someone about waiver programs: 614-466-5500 or 1-800-266-4346.

For people who require care in a facility for mental retardation and/or developmental disabilities, contact:

- Your [local county board of mental retardation and developmental disabilities](#) or
- The Ohio Department of Mental Retardation: 614-466-8706, or
- Visit <http://odmrdd.state.oh.us/medicaid/overview.htm> for more information about waivers.

Each Medicaid waiver offers different services. Some of the services available are:

- Nursing care
- Homemaker/personal care
- Home-delivered meals
- Respite care
- Out-of-home respite
- Adult day care
- Supported employment services
- Environmental accessibility and adaptations
- Emergency response systems
- Supplemental transportation.

Consumers enrolled in the Ohio Home Care Waiver and the two Transitions waiver benefit packages are provided a variety of services through ODJFS's contracted case management agency, CareStar. These services include management of a consumer's individual case and coordinating overall care.

Consumers and families are viewed as members of a team responsible for the consumer's care and are involved at every point in the service planning development and delivery. Several consumer options allow consumers to have flexibility in directing their care and selecting providers.

ODJFS monitors compliance with the requirements for the Ohio Home Care Program through a comprehensive quality assurance program. Its monitoring activities include outcome-based consumer interviews, customer satisfaction surveys, contractor and provider site visits, and review of consumer, contractor, and provider records.

More information about CareStar's services can be found at <http://www.ohiohcp.org>.