

Medicaid Provides Home and Community-Based Services Waivers

Q: What is a Medicaid waiver?

A: Medicaid waivers are programs that fund the services necessary for an individual to remain at home instead of living in an institutionalized residential setting, such as a nursing home or facility for people with developmental disabilities. States apply to the Center for Medicare and Medicaid Services for a specified number of waiver slots based on projected demand and available resources.

Q: Why are they called waivers?

A: These programs "waive" certain federal Medicaid regulations so Ohioans can try less costly, community-based programs with limited enrollment, locations and eligibility requirements.

Q: Are there different types of Medicaid waivers?

A: Yes. Ohio offers eight different waivers: Ohio Home Care, Transitions Carve-Out, Assisted Living, Choices, PASSPORT, Transitions Developmental Disability (DD), Level One, Individual Options (IO), and Self Empowered Life Funding (SELF). Not all waivers are always available; the state may close a particular waiver to new enrollment or impose a waiting list.

Q: How do these waivers differ?

A: Waivers vary according to the population being served and the agency administering the program. The Ohio Home Care and Transitions Carve-Out waivers are administered by the Ohio Department of Job and Family Services, whereas the Assisted Living, Choices and PASSPORT waivers are administered by the Ohio Department of Aging. The Ohio Department of Disabilities administers the Transitions DD, Level One, IO and SELF waivers. Waiver programs also have differing eligibility requirements. For example, to qualify for the Ohio Home Care Waiver, you must be 59 years old or younger, while individuals of all ages are eligible for the IO waiver.

Q: Who is eligible for a Medicaid waiver?

A: To be eligible, a person must qualify both medically and financially. To be medically eligible, the individual must require a certain "level of care" (LOC) and must demonstrate that the person's health, safety and welfare can be maintained in a community setting. The LOC needed depends on the type of waiver being requested. For example, Ohio Home Care waiver is available to individuals who require an intermediate or skilled LOC.

To be financially eligible, a person must meet certain income requirements and Medicaid's resource limit. In 2013, a person's countable income must be less than \$2,130 and his or her countable resources cannot exceed \$1,500 (not including exempt resources such as the personal residence, vehicle and prepaid funeral arrangements). Unlike traditional Medicaid, a parent's income and resources are not included when assessing a minor child's financial eligibility for waiver. There may

be additional eligibility requirements depending on the type of waiver needed.

Q: How do I apply for a Medicaid waiver?

A: The "Request for Medicaid Home and Community-Based Services," form number 02399, can be obtained from your local county department of job and family services, county board of developmental disabilities, or area agency on aging. It is also located on the Ohio Home Care Program's website (www.ohiohcp.org/02399form.pdf). A caseworker will assess your financial eligibility and a case management agency or DD board will determine if you meet the level-of-care requirements. You may also wish to contact the agency that administers the specific waiver to request additional information.

Q: My adult daughter has a Medicaid waiver. If she receives money from an inheritance, personal injury settlement, etc., will she lose her Medicaid waiver?

A: She could lose her eligibility for waiver if she receives money, depending on the amount and where it came from. You should notify the caseworker that her income has increased. If she keeps the inheritance past the last day of the month in which she received it, it is considered a "resource." She may wish to spend the money within that month or set up a "special needs trust" to retain her waiver eligibility. You may need to contact an attorney to discuss her available options.

Q: What services does a Medicaid Waiver provide?

A: Each waiver provides different services, which may include nursing care, homemaker/personal care, home-delivered meals, respite care, adult day care, supported employment services, environmental accessibility and adaptations, emergency response systems, and/or supplemental transportation.

Q: I am not sure if I am eligible for a Medicaid waiver. What should I do?

A: Contact your local county department of job and family services, DD board, and/or local area agency on aging to discuss your specific needs and to request information and an application.

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This "Law You Can Use" column was provided by the Ohio State Bar Association (OSBA). It was prepared by attorney Janet L. Lowder, a partner in the Cleveland firm of Hickman & Lowder Co., L.P.A., and updated by Amanda M. Buzo, an associate at the firm.



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