

**Public Notice Summary: Ohio Home Care Waiver
Ohio Home Care Waiver Renewal and
Conversion from a 209(b) State to a Section 1634 State**

Introduction

The Ohio Home Care Waiver is due for renewal by the Centers for Medicare and Medicaid Services (CMS) effective July 1, 2016. A renewal application governing five new waiver years (July 1, 2016 - June 30, 2021) must be submitted to the CMS no later than April 1, 2016. It must include new enrollment and cost neutrality projections.

Additionally, as a result of the new single disability determination process for Medicaid and SSI, Ohio is seeking a Medicaid state plan amendment to adopt criteria authorized in section 1634 of the Social Security Act. The income standard will be raised from 64 percent of the federal poverty level (FPL) to 75 percent FPL, the resource limits will be raised from \$1,500 to \$2,000, people on SSI will automatically become eligible for Medicaid and the spend down process will be eliminated.

The Ohio Home Care Waiver renewal application must be updated to reflect the State's conversion to section 1634, and it must identify the Medicaid eligibility groups included under a section 1634, and include a plan for continued access to services for individuals who have income over the eligibility threshold but otherwise meet the requirements for Medicaid.

The proposed effective date of the waiver renewal application is July 1, 2016.

Renewal Application Summary

Changes contained in the renewal application include the following:

- Updated Public Input description in Main 6-I
- New unduplicated enrollment projections in Appendix B-3-a.
- New reserve waiver capacity projections for HOME Choice Program participants in Appendix B-3-c.
- Corrected level of care language in Appendices B-6-b, -e, -f and -j now pending in amendment before CMS.
- Updated verification of provider qualifications section in each service found in Appendix C-1/C-3.
- Removed and revised language in Appendix C-2-e requiring designation of an authorized representative when the legal guardian is also the non-agency provider.
- New Cost Neutrality Estimates in Appendix J-2-a, -b, -c and -d.

The waiver renewal application also reflects the changes required to align with the Medicaid State Plan's conversion from a Section 209(b) state to a Section 1634 state. As a result,

- Appendix B-4 specifies the Medicaid eligibility groups served in the waiver, under a section 1634 authority.
- Appendix B-5 describes the post-eligibility calculation process, including the spousal impoverishment rules, to determine the amount that the waiver participant is liable to pay for the cost of waiver services.
- Main 8, Attachment #1 describes the plan to ensure every individual enrolled on the waiver who is potentially impacted by the conversion receives adequate notice of the conversion and potential impact on his/her Medicaid eligibility, is educated on his/her options, and has access to assistance with establishing a Qualified Income Trust (QIT) also called a Miller Trust.

Finally, the renewal application also contains the proposed changes found in the Ohio Home Care Waiver amendment submitted to CMS on December 2, 2015 and currently pending approval by CMS for a proposed effective date of April 1, 2016.