

MyCare Ohio Waiver Amendment Posted for Public Comment

Pursuant to the provision of title 42 Sections 441.301 and 441.304 of the Code of Federal Regulations, public notices are required for any of the following: new 1915(c) waiver, new 1915(i) state plan amendment, renewal of a 1915(c) waiver, and any amendment to a 1915(c) waiver that includes one or more substantive changes. Continuation of a waiver requires that the state submit a five-year waiver renewal application submitted at least 90 calendar days in advance of the approved waiver's expiration date. A 30-day public comment period is required prior to submission.

Changes to the MyCare Ohio Waiver amendment

Below is a summary of the key changes to the waiver. A link to the full waiver amendment is included below the summary.

ODM is filing the amendment to the Integrated Care Delivery System (MyCare Ohio) Waiver with the goal of making program updates and maintaining alignment with the other Nursing Facility Level of Care 1915(c) waivers with an effective date of January 1, 2025. Changes proposed through this waiver amendment application:

Appendix B

-Updated Medicaid eligibility categories to identify all "working individuals with disabilities who buy into Medicaid" categories, including the new Ohio WorkAbility Medicaid eligibility category for working disabled individuals aged 65 and older.

Public comments welcome

As part of the waiver renewal process, the public can comment on the proposed renewal. The public comment period is September 17th-October 16th, 2024. Comments must be received by midnight on October 16th, 2024, and can be submitted by:

- **E-mail:** MyCarefeedback@medicaid.ohio.gov
- **Written comments sent to:**
MyCare Ohio Waiver
Ohio Department of Medicaid 4th Floor
P.O. Box 182709
Columbus, OH 43218
- **FAX:** [\(614\) 752-7701](tel:6147527701) (Please include Attn. **MyCare Waiver Amendment** in the subject line)
- **Call toll-free** to leave a voicemail message: [1 \(888\) 433-6755](tel:18884336755)
- **Courier or in-person submission to:**
Ohio Department of Medicaid

MyCare Ohio Amendment, Lazarus Building
50 West Town Street
Columbus OH 43218