Department of Medicaid

Ohio Home Care Waiver Handbook

A Resource Guide for Ohioans Enrolled on the Ohio Home Care Waiver



Fill out the information below and keep it on hand for easy access.

Case Managers: Please help with filling in the blanks or attach your card to this page.

My Case Management Agency

My Case Manager's Name and Phone Number

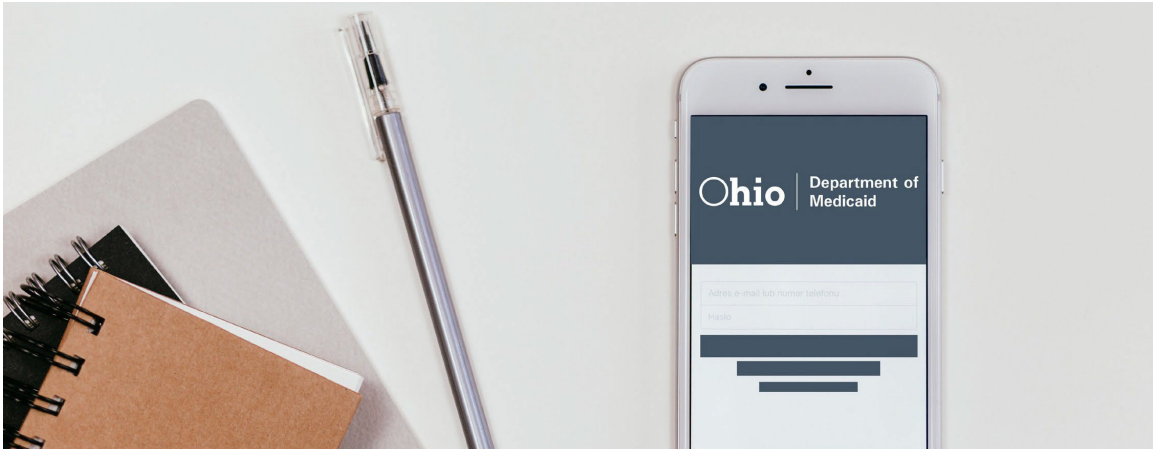
24-Hour Toll Free Phone Number

Managed Care Plan (MCP) (if applicable)

MCP Care Manager and Phone Number (if applicable)

1-800-324-8680

Medicaid Hotline



Last Updated: 6/24/2025

How to Use This Guide

This handbook provides important information about the Ohio Home Care Waiver (OHCW). The information in the handbook should help answer basic questions you have. If you cannot find answers to your questions in this handbook, contact your case manager who is available to assist you. You will receive a new copy of this document each year during your annual assessment.

This handbook is prepared by:

The Ohio Department of Medicaid (ODM)
Bureau of Long-Term Services and Supports
Care Coordination Team

For more information, contact the
Medicaid Consumer Hotline:
1 (800) 324-8680

Last Updated: 6/24/2025

Introduction

The Ohio Home Care Waiver (OHCW) is a home and community-based waiver program administered by the Ohio Department of Medicaid. This waiver provides certain services that allow you to receive supports outside of a hospital or nursing facility:

- Adult Day Health Services
- Community Integration Service
- Community Transition Service
- Personal Emergency Response System
- Home Care Attendant
- Home Delivered Meals
- Home Maintenance and Chore Service
- Home Modification Service
- Out-of-Home Respite
- Personal Care Aide
- Supplemental Adaptive and Assistive Devices
- Supplemental Transportation Services
- Waiver Nursing
- Self-Directed Goods & Services
- Self-Directed Services
- Structured Family Caregiving

All waiver services are authorized based on assessed need. This includes both the type of service and the amount of service. You have a choice on how to receive services from providers:

Provider-managed: An agency or independent provider arranges, manages, and delivers waiver services.

Self-directed services: You or your chosen representative arrange and manage waiver services using the allowed waiver budget.

Self-direction gives Ohioans control over their long-term services and supports. Individuals who select self-direction choose the type of care they receive and their providers. Benefits of self-direction include choice and control, empowerment, flexibility, access to a need-based budget, personalized care, and family involvement.

Contact with your case manager if you are interested in self-directing one or more of your waiver services.

Your Rights

When enrolled on the Ohio Home Care Waiver, you have these rights:

- Be fully informed of all your rights, responsibilities, and what it means to be enrolled on a waiver
- Be treated with dignity and respect
- Receive assistance from your case manager (CM), who is assigned to assess your needs and coordinate your services
- Have private meetings with your case manager
- Be protected from abuse, neglect, and mistreatment
- Receive information that is timely, accurate, and easy to understand
- Choose Medicaid-approved providers who will provide safe, appropriate, and high-quality services
- Decide how your services are delivered
- Speak in confidence with your case manager and know that your information will be kept confidential
- Participate in the development of your Person-Centered Services Plan
- Request a state hearing to appeal any decisions made by your Case Management Agency (CMA) or the Ohio Department of Medicaid about your waiver eligibility or benefits

- Request files or records related to your health care
- Be informed about how to report concerns with your case manager, services, or providers to the Ohio Department of Medicaid

You and your authorized representative (if applicable) direct your waiver services

- An authorized representative is a person aged 18 years or older that you have authorized in writing to make decisions on your behalf about your Ohio Home Care Waiver services

Your Responsibilities

As an individual enrolled on the Ohio Home Care Waiver, you are responsible for:

- Communicating openly and honestly with your case manager, providers, and other members of your care team
- Providing accurate and complete information, including your medical history
- Actively participating in your service planning and implementation
- Keeping scheduled appointments
- Reporting problems, concerns, changes, or incidents to your case manager
- Informing your case manager if you want or need to change services or providers
- Respecting the rights of your providers
- Working with your care team to resolve problems or concerns

- Refusing to participate in dishonest or illegal activities involving your providers, caregivers, or members of your care team

A complete list of your rights and responsibilities is in the Ohio Administrative Code at codes.ohio.gov/oac/5160-45-03. You can request a printed copy from your case manager.

Case Management

All individuals enrolled on the Ohio Medicaid Home Care Waiver receive case management services.

Case management connects you to services and supports that help you get the care you need in an environment where you can be the most independent.

Case management activities include:

- Monitoring your health and welfare
- Periodically assessing your needs, service goals, and objectives
- Annually assessing your waiver program eligibility
- Coordinating meetings with you and your care team
- Authorizing waiver services that meet your needs
- Providing referrals and connecting you to services and providers
- Monitoring the delivery of all services identified in your person-centered service plan

- Planning for significant changes, including those changes that occur prior to enrollment on the waiver program and at significant life milestones

- Educating you on how to identify and report incidents, and working with you to develop prevention plans to reduce risks

- Assisting you to develop a meaningful backup plan in the event that your provider does not show up for work

    - A backup plan includes one or more people who are able to meet your needs and respond immediately if your regularly scheduled provider is unable to work

To request to change your case manager, you can submit your request in one of the following ways:

- Contact your Case Management Agency.
- Email: caremanagement@medicaid.ohio.gov
- Fax: 614-466-6945
- Mail:
  Ohio Department of Medicaid
  Bureau of Long-Term Services and Supports
  ATTN: CMA Change
  P.O. Box 43214
  Columbus, OH 43215

Reporting Incidents

Be sure to report any incidents:

An incident is any event that is inconsistent with your routine care and is harmful or potentially harmful to you. You or a member of your care team should notify your case manager within 24 hours of an incident.

The Ohio Department of Medicaid, Case Management Agencies, and its provider

oversight agency perform activities to make sure that you are protected from harm.

Incident investigation and follow up includes:

- Making sure you are healthy and safe
- Ensuring that medical attention is sought when needed
- Taking steps to prevent incidents from happening again
- Confirming you have the necessary services to remain healthy and safe
- Making sure providers know how to keep you safe and cause no harm
- Educating you on how to report incidents when they occur

Person-Centered Service Plan

Your person-centered service plan (PCSP) is a written outline of your waiver services, other Medicaid services, and all other services (paid and unpaid) needed to keep you safely in your home.

The plan identifies goals and outcomes related to your health and the services you receive. The person-centered service plan will be updated as often as necessary to continue to reflect your needs.

How is your plan developed?
Your case manager works with you and your care team to develop a person-centered service plan.

Care team members include your natural supports, an authorized representative (if applicable), providers, your physician, and any others who you would like to include who are involved in your care.

Your case manager will:

- Document communication
- Authorize and help schedule services with your providers
- Ensure your plan includes the amount, frequency, scope, and duration of your services
- Assist with securing and contacting all providers and agencies that are involved in your care
- Schedule meetings, send out important information, update your plan, and communicate with your care team

Your person-centered service plan will include:

- Your care, including your medical and personal care needs
- Your strengths
- Your chosen personal goals and desired outcomes
- The setting where you choose to receive your care
- Upkeep of your home environment, including adaptations as applicable
- How you access your community, including transportation
- Physical, mental, and behavioral health needs, including any applicable interventions
- School, work, or other day activities
- Medication management

- Medical and personal care supplies, including equipment
- Backup and emergency plans
- Case management services

Your Providers

You have the right to choose your Medicaid state plan and waiver service providers. Your assigned Case Management Agency is responsible to help you with choosing your providers.

Who can be my provider?

- You may choose agency-based providers and/or non-agency providers (NAP)

Can I choose a family member or relative to be my direct care worker?

- Parents of minor children and spouses can be direct care workers in some circumstances, which are listed in Ohio Administrative Code 5160-44-32
- Your case manager will administer a screening tool called the Extraordinary Care Instrument (ECI) to determine if you or your child are eligible
- Speak with your case manager if:
    - You are the parent of a minor child and are interested in becoming your child's direct care worker
    - You are interested in your spouse becoming your direct care worker
- Relatives can also be direct care workers in some cases. There may be limitations if the relative serves in a legal decision-making role like Power

of Attorney, Durable Power of Attorney, Authorized Representative, etc.

- Your case manager is required to search for alternative able and willing providers per Ohio Administrative Code 5160-44-32 and federal regulations.

- If a willing and able provider is available, then they must be authorized to provide the waiver services needed before a parent or spouse can be authorized as a direct care worker.

- If a parent of a minor or spouse is authorized as the direct care worker, then case managers are required to contact you every 2-3 months to search for alternate able and willing providers.

Find a Provider:

Website: https://myohiohcp.org/
Medicaid Consumer Hotline: 1-800-324-8680

Translation Service Notice:

To help you understand this notice, language assistance, interpretation services, and auxiliary aids and services are available upon request at no cost to you. Services available include, but are not limited to: oral translation, written translation, and auxiliary aids. You can request these services and/or auxiliary aids by calling the Customer Service Call Center at the toll-free phone number 1-844-640-6446; individuals with a hearing impairment may call TDD 7-1-1.

Spanish
Para ayudarle a comprender este folleto, se encuentran disponibles a pedido asistencia lingüística, servicios de interpretación, asistencia adicional y otros servicios sin costo alguno. Los servicios disponibles incluyen, entre otros: traducción oral, traducción escrita y ayudas auxiliares. Puede solicitar estos servicios o ayudas auxiliares llamando al Centro de llamadas de Servicio al Cliente al teléfono gratuito 1-844-640-6446; las personas con discapacidad auditiva pueden llamar al TDD 7-1-1.

Nepali
यो सूचना बुझ्न मद्दतको लागि, अनुरोधमा भाषा सहायता, दोभाषे सेवाहरू, र सहायक सहायता र सेवाहरू निःशुल्क उपलब्ध छन्। उपलब्ध सेवाहरूमा समावेश छन्, तर सीमित छैनन्: मौखिक अनुवाद, लिखित अनुवाद, र सहायक सहायता हो। तपाईंले ग्राहक सेवा कल सेन्टरको टोल-फ्री फोन नम्बर 1-844-640-6446 मा फोन गरेर यी सेवाहरू र/वा सहायक सहायताहरू अनुरोध गर्न सक्नुहुन्छ; श्रवणशक्ति कमजोर भएका व्यक्तिहरूले TDD 7-1-1 मा कल गर्न सक्छन्।

Arabic
لمساعدتك في فهم هذا الإخطار، تتوفر خدمات المساعدة اللغوية وخدمات الترجمة الفورية والمساعدات الإضافية عند الطلب دون أي تكلفة. تشمل الخدمات

Last Updated: 6/24/2025

المتاحة، على سبيل المثال لا الحصر: الترجمة الشفوية والترجمة التحريرية والمساعدات الإضافية. يمكنك طلب هذه الخدمات أو المساعدات الإضافية أو كلتيهما عبر الاتصال بمركز اتصال خدمة العملاء على الرقم المجاني 1-844-640-6446، وللأفراد الذين يعانون من ضعف السمع، يمكنهم استخدام خدمة الهاتف النصي على الرقم التالي 7-1-1.

Haitian French Creole
Pou ede w konprann avi sa a, gen asistans lengwistik, sèvis entèpretasyon, èd oksilyè ak sèvis ki disponib gratis, lè ou fè demann pou sa. Sèvis ki disponib yo gen ladan yo, men se pa sa sèlman: tradiksyon oral, tradiksyon alekri ak èd oksilyè. Ou kapab mande sèvis sa yo ak/oswa èd oksilyè lè w rele Sant Apèl Sèvis Kliyantèl la nan nimewo telefòn gratis la ki se 1-844-640-6446; moun ki gen pwoblèm tande yo ka rele TDD 7-1-1.

Somali
Si lagaaga caawiyo inaad fahanto ogaysiiskan, kaalmada luqadda, adeegyada tarjumaada, iyo kaalmooyinka iyo adeegyada ayaa la heli karaa marka la codsado lacag la'aan adiga. Adeegyada la heli karo waxaa ka mid ah, laakiin aan ku xaddidnayn: tarjumaada afka, turjumaadda qoran, iyo qalabyada caawinta. Waxaad codsan kartaa adeegyadan iyo/ama caawimada caawimada adiga oo wacaya Xarunta Wicitaanka Adeegga Macmiilka ee lambarka taleefanka lacag la'aanta ah 1-844-640-6446; Shakhsiyaadka qaba maqal la'aanta waxay wici karaan TDD 7-1-1.

Ukrainian
Щоб допомогти вам зрозуміти це повідомлення, за запитом безкоштовно надається мовна допомога, послуги перекладача, а також допоміжні засоби та послуги. Доступні послуги включають, але не обмежуються наступним: усний переклад, письмовий переклад та допоміжні засоби. Ви можете замовити ці послуги та/або допоміжні засоби, зателефонувавши до Центру обслуговування клієнтів за безкоштовним номером 1-844-640-6446; особи з вадами слуху можуть зателефонувати за номером TDD 7-1-1.

Russian
Чтобы помочь вам понять данное уведомление, по вашему запросу бесплатно предоставляется языковая помощь, услуги устного перевода, а также вспомогательные средства. Доступные услуги включают, в частности, устный перевод, письменный перевод и вспомогательные средства. Вы можете запросить эти услуги и/или вспомогательные средства, позвонив в службу поддержки клиентов (Customer Service Call Center) по бесплатному номеру телефона 1-844-640-6446; лица с нарушениями слуха могут позвонить по телефону TDD 7-1-1.

Swahili
Ili kukusaidia kuelewa notisi hii, usaidizi wa lugha, huduma za ukalimani, na visaidizi na huduma za ziada zinapatikana unapoomba bila gharama kwako. Huduma zinazopatikana ni pamoja na, lakini sio tu: tafsiri ya mdomo, tafsiri ya maandishi, na visaidizi vya ziada. Unaweza kuomba huduma hizi na/au visaidizi vya ziada kwa kupiga simu kwa Kituo cha Simu cha Huduma kwa Wateja kwenye nambari ya simu isiyolipishwa 1-844-640-6446; watu walio na ulemavu wa kusikia wanaweza kupiga simu TDD 7-1-1.

Kinyarwanda
Kugira ngo tugufashe gusobanukirwa iri tangazo, ubufasha bujyanye n'indimi, serivisi z'ubusemuzi, n'ibikoresho na servisi bifasha abafite ubumuga mu kumva biraboneka nta kiguzi utanze iyo ubisabye. Serivisi ziboneka zikubiyemo, ariko si gusa: ubusemuzi mu mvugo, ubusemuzi mu nyandiko, n'ibikoresho bifasha abafite ubumuga mu kumva. Ushobora gusaba izi serivisi na/cyangwa ibikoresho bifasha abafite ubumuga mu kumva uhagamaye Ikigo Gifasha Umukiriya kuri nomero itishyurwa 1-844-640-6446; abantu bafite imbogamizi mu kumva bashobora guhamagara TDD 7-1-1.

French
Pour vous aider à comprendre cet avis, une assistance linguistique, des services d'interprétation et des aides et services auxiliaires sont disponibles sur demande et sans frais. Les services disponibles comprennent, sans toutefois s’y limiter, la traduction orale, la traduction écrite et les aides auxiliaires. Vous pouvez demander ces services et/ou ces aides auxiliaires en appelant le centre d'appel du service clientèle au numéro gratuit 1-844-640-6446 ; les personnes malentendantes peuvent appeler le TDD 7-1-1.

Last Updated: 6/24/2025

Pashtu

ستاسو په دې خبرتیا د ښه درک کولو (پوهیدو) لپاره، د ژبې مرستې، د شفاهي ژباړې خدمتونه، او اضافي مرستندویه وسایل او خدمتونه ستاسو د غوښتنې پر بنسټ بې لګښته شتون لري. په شته خدماتو کې شفاهي ژباړه، په لیکلي بڼه ژباړه، او مرستندویه وسایل شامل دي، خو یوازې دي پورې محدود نه دي. تاسو کولی شئ د دې خدمتونو او/یا مرستندویه وسایلو د غوښتنې لپاره د پیرودونکو د خدماتو تلیفوني مرکز سره په وړیا شمېرې 1-844-640-6446 اړیکه ونیسئ؛ د اورېدو ستونزه لرونکي کسان کولی شي 7-1-1 TDD ته زنګ ووهي.

Dari

برای کمک به شما در درک این اطلاعیه، کمک های زبانی، خدمات ترجمه شفاهی و کمک ها و خدمات اضافی بر اساس درخواست شما و بدون هیچ هزینه ای برای شما ارائه می گردد. خدمات موجود شامل موارد ذیل میباشد، اما محدود به آنها نیست: ترجمه شفاهی، ترجمه کتبی و کمک های اضافی. شما می توانید با تماس با مرکز تماس خدمات مشتریان از طریق شماره تلیفونی رایگان 1-844-640-6446 این خدمات و/یا کمک های اضافی را درخواست کنید، افراد دارای اختلال شنوایی می توانند با شماره 7-1-1 TDD به تماس شوند.

Uzbek

Bu bildirishnomani tushunishingizga yordam berish uchun so‘rovingiz asosida bepul til yordamchi xizmatlari, og‘zaki tarjima xizmatlari va qo‘shimcha yordamchi vositalar taqdim etiladi. Mavjud xizmatlar qatoriga og‘zaki tarjima, yozma tarjima hamda yordamchi vositalar kiradi. Siz ushbu xizmatlar va/yoki yordamchi vositalarni quyidagi mijozlarga bepul xizmat ko‘rsatish markaziga qo‘ng‘iroq qilib so‘rashingiz mumkin: 1-844-640-6446; eshitish qobiliyati cheklangan shaxslar ushbu raqami orqali bog‘lanishlari mumkin: TDD 7-1-1.

Vietnamese

Để giúp bạn hiểu thông báo này, hỗ trợ ngôn ngữ, dịch vụ phiên dịch, phương tiện trợ giúp và dịch vụ phụ trợ được cung cấp miễn phí theo yêu cầu. Các dịch vụ có sẵn bao gồm, nhưng không giới hạn ở: dịch bằng lời nói, dịch bằng văn bản và phương tiện phụ trợ. Bạn có thể yêu cầu các dịch vụ này và/hoặc phương tiện phụ trợ bằng cách gọi cho Customer Service Call Center theo số điện thoại miễn cước 1-844-640-6446; những người khiếm thính có thể gọi TDD 7-1-1.

Tigrinya

ነዚ ምልክታ ክትርደእዎ ንኽሕግዘኩም፣ ሓገዝ ቋንቋ፣ ኣገልግሎታት ትርጉም፣ ከምኡ'ውን ተወሰኽቲ ሓገዛትን ኣገልግሎታትን ኣብ ዝሓተትክምዎ ብዘይ ክፍሊት ይርከቡ። ዘለው ኣገልግሎታት፣ ናይ ዘረባ ትርጉም፣ ናይ ጽሑፍ ትርጉምን ተወሰኽቲ ሓገዛትን ዘጠቓልሉ ኮይኖም፣ በዚ ጥራሕ ዝድረቱ ኣይኮኑን። ናብ ማእከል ኣገልግሎት ዓማዊል (Customer Service Call Center) ካብ ክፍሊት ነጻ ብዝኾነ ቁጽሪ ስልኪ 1-844-640-6446 ብምድዋል፣ ነዞም ኣገልግሎታትን/ወይ ተወሰኽቲ ሓገዛት ክትሓቱ ትኽእሉ ኢኹም፤ ናይ ምስማዕ ጸገም ዘለዎም ውልቀ-ሰባት ናብ TDD 7-1-1 ክድውሉ ይኽእሉ እዮም።

Department of Medicaid

Last Updated: 6/24/2025