



Transitions Waiver

The Transitions Waiver is a limited-enrollment, cost-capped program of home and community services for people who are eligible for Medicaid coverage in an intermediate care facility for people with mental retardation or developmental disabilities (ICF-MR). Only people who were originally enrolled on the Ohio Home Care Waiver and have an ICF-MR level of care are eligible for the Transitions Waiver, and the Transitions Waiver has the same services, providers, and method of operation as the Ohio Home Care Waiver.

Home and community-based services waiver programs are operated under a special agreement with the federal Centers for Medicare and Medicaid Services (CMS), which oversees and provides a large part of the funding for state Medicaid programs. Waiver programs are an alternative to care in an institution.

SERVICES

These *Core Services* are available to consumers participating in all Ohio Home Care benefit packages, including the Transitions Waiver.

- TNursing** services provided by a registered nurse (RN) or licensed practical nurse (LPN) under the supervision of an RN, examples: G-tube feeding, medication administration, and wound care
- TDaily Living** help with activities of daily living provided by a home health aide or personal attendant, examples: bathing, dressing, grooming, and help with transferring
- TSkilled Therapies** services delivered by a licensed therapist: occupational therapy, physical therapy, and speech & hearing therapy

The following services are only available to people enrolled on the waiver:

- THome-delivered Meals** planned by a dietician in consultation with the consumer
- TEmergency Response Systems** electronic devices that send a signal when someone needs help
- THome Modifications** construction or remodeling to make a home accessible to a person with disabilities
- TSupplemental Adaptive/ Assistive Devices** not otherwise covered appliances, equipment, and supplies that increase consumers' functional ability



Transitions Waiver Services, continued

- T Adult Day Health Services** services delivered to adults in a group day-care setting as an alternative to being cared for at home during the day
- T Out-of-home Respite** temporary placement of a waiver consumer in an institution to provide relief for the care giver(s)
- T Supplemental Transportation** transportation not otherwise covered which enable consumers to meet goals identified in the All Services Plan
- T Social Work and Nutrition Counseling** if identified as needed by your home services facilitator

OTHER TRANSITIONS WAIVER FEATURES

- A *cost range* is assigned to you based on the dollar amount of services your home services facilitator determines will meet your needs. The cost of services cannot exceed the upper end of the cost range without approval.
- Your facilitator works with you and everyone involved in your care to keep an *All Services Plan*. This plan authorizes home health agencies, independent daily living aides, independent nurses, and others who have a Medicaid provider contract to provide you with needed care. Your home services facilitator helps you locate service providers.
- You receive a Medicaid card every month that entitles you to the full range of Medicaid benefits, including hospitalization, physician care, prescription drugs, and many other types of services.
- Depending on your income, you may be required to make a payment called a *patient liability* each month toward the cost of your services.
- Your home services facilitator will call or visit you regularly, and conduct a reassessment of your eligibility and needs at least once a year.
- Ohio Department of Job and Family Services (ODJFS) staff may visit you to make sure you are receiving quality care.

For more information, visit the Ohio Home Care website at <http://jfs.ohio.gov/ohp/ohc>.