

Ohio Department of Job and Family Services
The Behavioral Center
 Douglas L. Campbell, Director

ODJFS-Administered Waivers and Adult Day Health Center Services: An Overview

Brandi Nicholson, Clinical Policy Manager
 Wayne Morgan, Provider Compliance Manager
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Home and Community Based Services (HCBS) Waivers

Ohio administers eight HCBS Waivers.


<p>DODD</p> <ul style="list-style-type: none"> • Individual Options • Level 1 	<p>ODA</p> <ul style="list-style-type: none"> • Passport • Assisted Living • Choices
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ODJFS-Administered Waivers

ODJFS

- Ohio Home Care Waiver
- Transitions DD Waiver
- Transitions (Carve-Out) Aging Waiver



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ODJFS-Administered Waivers

ODJFS has contracted with CareStar, the case management agency, to perform certain operational activities in support of ODJFS-administered waivers. CareStar assists in the implementation of these programs throughout the state, interfacing with consumers and providers at the local level.




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ODJFS-Administered Waivers

<p>ODJFS</p> <ul style="list-style-type: none"> • Policy development • Enrollment and waiting list management • Prior Authorization • Technical Assistance • Oversight 	<p>CareStar</p> <ul style="list-style-type: none"> • Eligibility assessments and determinations • Service planning • Case management • Provider monitoring • Incident management and investigation
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Bureau of Long-Term Care Services And Supports



What else do we do?

- PDN authorizations
- Prior authorizations
- Oversight reviews
- ICFMR facility levels of care
- Policy development
- Interagency Agreements

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Eligibility

Level of Care for Waiver Eligibility

Ohio Home Care Waiver

- Intermediate Level of Care (ILOC)
- Skilled Level of Care (SLOC)

Transitions Carve-out (Aging)

- Intermediate Level of Care (ILOC)
- Skilled Level of Care (SLOC)


Transitions DD

- Intermediate Level of Care for Persons with MR/DD (ICF/MR LOC)

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AN IMPORTANT NOTE ABOUT TRANSITIONS:

The Transitions DD and Transitions Carve-out waivers are not open for enrollment.



These waivers are only available to Ohio Home Care Waiver recipients who meet the ICF/MR level of care criteria OR ILOC or SLOC criteria and reach age 60.

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Waiting Lists

- **Priorities for Waiting List**
 - Children from birth up to, but not including their 6th birthday who have been residing in an inpatient hospital setting at the time of, and at least 30 days prior to the OHC waiver application
 - Applicants who are residents of a Medicaid funded NF at the time of their application and have projected monthly cost of services in the community that will not exceed 80% of the average monthly Medicaid costs of a Medicaid recipient residing in a NF
 - HOME Choice

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Current Waiting List:

- Approximately 2,300
- 2,399 signature dates through November, 2009 by end of May




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Available Services

- Waiver Nursing
- Personal Care Aide
- Adult Day Health
- Home Delivered Meals
- Home Modifications
- Supplemental Transportation
- Supplemental Adaptive/Assistive Devices
- Out of Home Respite
- Emergency Response Systems

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All Services Plan (ASP)=ISP for our waivers



- services needed
- goals and objectives
- service providers
- cost of services
- payment source(s)
- authorizes provider billing

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Cost Caps

- Case managers cost-out the services in the plan to determine the cost cap
- monthly individual cost of services
- Consumers are placed into cost ranges based upon the amount of services needed and authorized
- Maximum: \$14,700 per month

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Cost Caps - Continued

- All waiver are included in the overall waiver cost caps.
- Cost caps are individualized, driven by consumer needs and abilities, and medical necessity for services.

Impact of Change Requests

- Service changes may impact other services in the ASP
- Prior authorization is required
 - increase of \$2,000 or more
 - costs exceed \$14,000

Some Specifics on Adult Day Health

- Must include:
 - Waiver nursing and/or personal care services
 - Recreational and educational activities
 - Meals (at least one, no more than two)




Some Specifics on Adult Day Health (cont.)

- Transportation is not required
- May include skilled therapies
- Available to consumers age 18 and older

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ADH Nuances



- nursing services must be provided by licensed RNs and LPNs who are providing services within their scope of practice
- Maintain a paid staff to consumer ratio of 1:6
- Full-day or half-day program

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ADH services must be provided

- In a freestanding building or a space within another building that is used solely for Adult Day Health Center Services
- space can be used for other purposes when the adult day care is not in session

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Collaboration

How can SSAs get involved?

- Interdisciplinary team process
- Participate in care planning meetings and assessments
- Collaborate on issues, needs, and services
- Assist with behavior plan development

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Questions?

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Contact Information:
50 W Town St, 5th floor
PO Box 182709
Columbus, OH 43218
614-466-6742

Brandi Nicholson Wayne Morgan
brandi.nicholson@jfs.ohio.gov wayne.morgan@jfs.ohio.gov
