Information for individuals enrolled on the OHIO ASSISTED LIVING WAIVER

MyCare Ohio is a new managed care program designed for Ohioans who receive BOTH Medicaid and Medicare benefits.

The State of Ohio has worked closely with the federal government to improve the way health care services are provided by these programs. Through the health plan YOU choose, you will receive all of the medical, behavioral, and long-term services and supports you need.

THESE QUESTIONS WILL HELP YOU LEARN MORE ABOUT MyCare Ohio:

1. **Q: I am enrolled on the Assisted Living Medicaid Waiver and receive Medicaid and Medicare, do I have to enroll in a MyCare Ohio plan?**
   
   **A:** Yes, you must enroll in a MyCare Ohio plan. You may choose to continue to receive your Medicare services in the way you do today.

2. **Q: What happens after I enroll?**
   
   **A:** Since you are already enrolled in the Assisted Living Medicaid Waiver, there will be no change in where you receive your Assisted Living service.
   
   - The MyCare Ohio plan you choose will receive information about your current care needs and services and will work with you on a plan of care designed to meet your needs.

3. **Will I still get help from my local Area Agency on Aging (AAA)?**
   
   **A:** Yes, you can continue getting help from your local AAA. The plan you choose will work with the local AAA to be sure your services continue.
   
   - The AAA will continue to coordinate your services unless you choose otherwise.
Q: What about costs?

A: As an Assisted Living Waiver enrollee, you are already paying a room and board fee at a rate set by the state. Additionally, if your income exceeds a certain amount, you are also paying a “patient liability,” or a portion of your service costs. Both of these payments that you make to your Assisted Living Waiver provider will continue.

- You will not have prescription co-payments as an Assisted Living Waiver beneficiary.
- Medicaid supplies or durable medical equipment will still be available to you through your selected health plan’s providers.
- You will continue to receive your monthly Personal Needs Allowance.

Q: How does MyCare Ohio work? When do I need to enroll?

A: Enrollment into MyCare Ohio will be in phases, by region, over several months beginning in spring and summer of 2014.

- You will receive a letter informing you of the date when you must enroll. This letter will also give you instructions on how to pick a plan and how to enroll. You will be able to enroll by phone, online, or by mail.
- There will be assistance in the community to help you understand your options.

Q: What will happen if I do not select a MyCare Ohio plan?

A: If you do not make a choice, a MyCare Ohio plan will be selected for you. After you enroll, you will have at least 90 days to change your MyCare Ohio plan, if you choose.

PLEASE NOTE: You do not have to receive your Medicare benefits from your MyCare Ohio plan. You may choose to continue to receive your Medicare benefits in the way you do today. However, your Medicaid benefits will only be available through your chosen MyCare Ohio Plan.

THERE IS NO ADDITIONAL COST TO PARTICIPATE IN THIS PROGRAM.

For more information, call the Ohio Medicaid Consumer Hotline: (800) 324-8680, Monday - Friday 7 a.m. to 8 p.m. and Saturdays 8 a.m. to 5 p.m. or visit online at www.ohiomh.com.