1. What are the eligibility requirements?

1. Eligible for Medicare Parts A & B, and all benefits under Medicaid; age 60+. Reside in a demonstration county; must be enrolled in the MyCare demonstration; Interim or Skilled SOC. Require NF or hospital in the absence of MyCare waiver; require at least one waiver service monthly, not made in NF or CF-ID.

2. What services are available?

- Adult day health
- Alternative meals
- Assisted living
- Chores
- Community Transition
- Emergency response
- Enhanced community living
- Home attendant
- Home delivered meals
- Home medical equipment and supplemental adaptive and assistive devices
- Home modification, maintenance and repair
- Homemaker
- Independent living assistance
- Nutritional consultation
- Out-of-home respite
- Personal care aide
- Personal care aide
- Pest control
- Social work counseling
- Waiver nursing
- Waiver transportation

3. How do and where to I request a waiver?

1. The ODM 02399 form is used to request the waiver and can be obtained and submitted at the local County Department of Job and Family Services (CDJFS).

4. Who administers the waiver?

4. ODM Administers this waiver. ODM contracts with MyCare Managed Care Plans. ODM contracts with a Case Management Agency to provide administrative case management services.

5. Enrolled April 2016

<table>
<thead>
<tr>
<th>Managed Care Waiver</th>
<th>OH1035.R00</th>
<th>3/1/16-2/28/17</th>
<th>41,970</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enrolled April 2016</td>
<td>25,468</td>
<td>5,628</td>
<td>19,537</td>
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6. Average Individual Waiver Costs

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7. Cost Limitations

*Cost Limitations for the SELF waiver are $25,000/year for children (defined as under age 21) and $45,000/year for adults; sufficient to assume individual’s health and welfare.