1. Eligible for Medicare Parts A and B and Medicaid. Must be enrolled in the MyCare demonstration; intermediate or skilled LTC; requires a hospital in the absence of MyCare waiver; reside at least 60 days per month in NH or CF IID.

2. MyCare OH 01015.R00

3. Specific Financial Criteria, Nursing Facility Level of Care, Age 60+ or younger

4. ODM contracts with Case Management Agencies to provide administrative case management services.

5. Ohio Department of Medicaid

6. ODA operates this waiver program as outlined in the interagency agreement with ODM, which has overall responsibility for the program. County boards of developmental disabilities provide administrative case management services.

7. ODM administers this waiver program as outlined in the interagency agreement with ODM, which has overall responsibility for the program. County boards of developmental disabilities provide administrative case management services.