What are Medicaid Waiver Programs?

If a health issue limits your daily life, you may want to apply for a Medicaid waiver. Some waivers have a set amount of money available each year. Most times, people must also show their need cannot be met another way (like a managed care plan). These programs give extra help such as the following:

- Home health care
- Home modifications
- Case management
- Durable medical equipment
- Transportation
- Adult day services
- Do you ever struggle or fail to do this?
- Does this take you more effort or time than it does others?
- Would equipment (like a shower chair) help make it easier?
- Would help lower your chance of injury?
- Are you adequately doing it yourself?

Examples of Activities of Daily Living

Hygiene: Bathing, dental care
Dressing: Choosing and putting on clothes
Eating: Avoiding spills or choking
Toileting: Getting on or off the toilet, cleaning
Mobility: Changing position, moving safely
Medication: Able to use and store safely

Eligibility for the Individual Options, Level One, or Self Waivers

- Developmental disability diagnosis before age 22
- “Substantial limitations” in three life areas (self care, receptive and expressive communication, learning, mobility, self-direction, capacity for independent living, economic self-sufficiency)
- Need for personalized plan of services, and a waiver benefit that cannot be met in another way

Eligibility for the Passport or Ohio Home Care Waiver

- Income below $2,349 (2022) each month. People with higher income can look into a special account called a Qualified Income Trust.
- A need for help with one of the following:
  - Two activities of daily living
  - One activity of daily living and medication administration
  - One skilled nursing service
  - One skilled rehabilitation service
  - 24-hour help to prevent harm due to a cognitive impairment
- Those who meet the eligibility criteria for either the Individual Options, Level One, or Self Waiver must also have an “unstable medical condition” and a need for one of the following to qualify:
  - Skilled nursing seven days per week
  - Skilled rehabilitation five days per week
Eligibility for the Medicaid Buy In for Workers with Disabilities Program

- 16 to 64 years old
- Employed in paid work (part-time or full-time)
- Income below $2,684 each month. Those earning between $1,610 and $2,684 each month pay a premium based on their income.
- Assets may not exceed $12,555
- Meet Social Security definition of disability. Medicaid makes exceptions for some people whose health has improved.

Eligibility for the Specialized Recovery Services Program

- 21 years of age or older
- Income below $2,349 each month
- Does not live in hospital-like setting
- Some applicants must meet the Social Security Administration definition of disability. Medicaid makes exceptions to this requirement, including for those over 65, on a transplant waiting list, or with kidney disease
- Active on transplant waiting list **OR** diagnosed with a **covered chronic condition**. Examples include:
  - Hemophilia
  - Sickle cell anemia
  - Behavioral health disorder
  - HIV/AIDS
  - Immune Deficiency
  - Kidney disease
  - Cancer
  - Cystic fibrosis
  - Previous Organ Transplant
  - Active on transplant waiting list **OR** diagnosed with a **covered chronic condition**.

**How do I apply?**

- **Online** [benefits.ohio.gov](http://benefits.ohio.gov)
- **In Person** at your [local Job and Family Services office](http://www.seols.org)
- **Phone** (844) 640-6446

**How do I appeal?**

You have **90 days** to appeal if you think your Medicaid was stopped or denied by mistake.

If your Medicaid is being stopped, you can appeal within **15 days** to keep your benefits on until you get a hearing decision.

Here are some of the ways you can ask for a state hearing:

- 1-866-635-3748
- **BSH@jfs.ohio.gov**
- **hearings.jfs.ohio.gov**
- ODJFS Bureau of State Hearings
  P.O. Box 182825
  Columbus, Ohio 43218

This information is based on current laws that are subject to change, and is not legal advice. Please reach out to us if:

- Your Medicaid is denied, stopped, or lowered and you think it was wrong
- Your appeal was denied

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