



## Long Term Services and Supports (LTSS) Quick Reference

- **PASSPORT\*\***
  - 60 years old +
  - Meets ILOC (nursing facility level of function)
  - Medicaid eligible
  - Fax 216-472-4812 OR [MoRow@areaagingsolutions.org](mailto:MoRow@areaagingsolutions.org) OR on-line at [www.areaagingsolutions.org/](http://www.areaagingsolutions.org/)
- **Assisted Living\*\***
  - 21 years old +
  - Meets ILOC (nursing facility level of function)
  - Medicaid eligible
  - Must be ODA certified facility and unit
  - Only keep \$50 /mo. All other income go toward AL costs
  - Fax 216-472-4812 OR [MoRow@areaagingsolutions.org](mailto:MoRow@areaagingsolutions.org) or on-line at <https://www.areaagingsolutions.org/>
- **Ohio Home Care Waiver\*\***
  - 59 years old and younger
  - Meets ILOC (nursing facility level of function)
  - Medicaid eligible
  - IF NO active MEDICAID, complete ODM 2399 form and send to County JFS first.
  - IF HAVE MEDICAID--Referral sent to: [Ohio-Home-Care-Waiver@medicaid.ohio.gov](mailto:Ohio-Home-Care-Waiver@medicaid.ohio.gov)
    - Must include Medicaid ID# or Case # for referral to be accepted
- **MyCare Ohio members (all ages)**
  - Dually eligible; have Medicare and Medicaid
  - Requesting LTSS—refer directly to Managed Care Organization (Buckeye, CareSource and United) Member Services number on their card or their Care Manager to request waiver services
- **SRS Program (Specialized Recovery System).**
  - Age 21+
  - No ILOC required. Allows at risk individuals to keep and/or attain Medicaid eligibility through enrollment for the following population:
    - Individuals with chronic Mental Health
    - Individuals have a MH provider; MH Case Manager, MH Agency, etc.
    - Individuals with certain chronic health conditions
      - Examples: Malignancy, End State Renal, HIV/AIDS, transplant
  - Referrals sent to: [BHCP@medicaid.ohio.gov](mailto:BHCP@medicaid.ohio.gov) and should include:
    - Medicaid ID# if applicable
    - Name, Address and Phone number
    - Email address if applicable
  - Medicaid eligibility with NO RESOURCE limit.

- **PACE**
  - 55 years old +
  - Resident of Cuyahoga County only
  - Meets ILOC (nursing facility level of function)
  - Agree to receive all care via PACE, including medical care
  - Referrals made to PACE at 216-791-3580 or [www.mcgregorpace.org](http://www.mcgregorpace.org)
  
- **RSS (Residential State Supplement) provides Group Home supplement**
  - 18 years old +
  - Protective Level of Care needed
  - Receiving Social Security, Supplemental Security Income (SSI) and/or Supplemental Security Disability Insurance (SSDI) benefits
  - Medicaid eligibility
  - Referral form/Application found at [mha.ohio.gov](http://mha.ohio.gov)
    - Complete form, other requirements found on form and fax to 614-485-9747
  
- **Home Choice**
  - 18 years or older
  - Has resided in a long term care facility for at least 90 consecutive days at time of discharge
  - Is enrolled in Medicaid (need Medicaid number to complete app)
  - Has income to sustain community living
  - Has care needs that can be adequately met in a community setting
  - Moves into qualified housing within 180 days of Home Choice enrollment
  - Applications found at: [www.medicaid.ohio.gov/HomeChoice](http://www.medicaid.ohio.gov/HomeChoice)
  - Completed form can be submitted online
    - Completed form can be emailed or faxed
    - Email: [HOME\\_CHOICE@medicaid.ohio.gov](mailto:HOME_CHOICE@medicaid.ohio.gov) (underscore \_ between HOME and CHOICE) Fax: (614) 360-3549
  
- **Long Term Care Consultation\*\***
  - Any age but original intent was 50+ population
  - In-person assessment to explore current needs and available resources or to assist in planning for potential future long term care needs
  - Referrals: Fax 216-472-4812 OR [MoRow@areaagingsolutions.org](mailto:MoRow@areaagingsolutions.org) OR 216-539-9240
  
- **Family Caregiver Support Program\*\***
  - Funded through Older Americans Act or Title III funding
  - Provides reimbursement and support services to unpaid, informal caregivers
    - Respite Services including in-home or facility-based
    - Support/Care Management
    - Education and training
    - Variety of other options
  - Person being provided the care must be aged 60+
  - Referrals: 216-586-3441 or 800-626-7277 ext. 3131
  
- **Older American's Act Programs\*\***
  - Federal funding also called Title III
  - Provides services to individuals aged 60+ with no attached financial eligibility
  - Services include Meals, Transportation, Homemaking, Respite, Adult Day Care, Chore, Legal Assistance and Wellness Programs provided through Community Organizations
  - More information or locating services: 800-626-7277
  
- \*\* Can be initiated at WRAAA. All other referrals/requests must start with those programs.

- **Transition Care Coordination**

- Medicare Advantage, Commercial and OPERS members
- Provider Care Transition Intervention coaching after hospitalizations
- Services are dependent on specific managed care partner
- More information on Transition Care Coordination or Care Transition Intervention Coach training, call 216-539-9272 or email [transitioncoordination@areaagingsolutions.org](mailto:transitioncoordination@areaagingsolutions.org)

January 2020