

Ohio Home Care Payer Cheat Sheet

PASSPORT · MyCare Ohio · Ohio Home Care Waiver · IO/SELF/Level One · VA

Quick reference for case managers, social workers, and discharge planners. What each payer covers for in-home personal care, who qualifies, and what to send the agency.

PASSPORT

- Who: Ohio Medicaid recipients age 60+ at nursing-facility level of care
- Covers: personal care, homemaker, respite, adult day, home-delivered meals, minor home modifications
- Authorizing entity: the Area Agency on Aging case manager
- Send the agency: AAA case manager name & direct line, current ISP, authorized hours per week

MYCARE OHIO (DUAL-ELIGIBLE)

- Plans: Aetna, Buckeye, CareSource, Molina, UnitedHealthcare
- Who: dual Medicare + Medicaid recipients in participating counties
- Covers: same long-term services as PASSPORT/OHCW, plus medical and pharmacy
- Authorizing entity: the plan's care coordinator (and the AAA for waiver members 60+)
- Send the agency: plan name, member ID, care coordinator name & direct line, authorized hours

OHIO HOME CARE WAIVER (ODM)

- Who: Medicaid recipients under 60 at nursing-facility level of care
- Covers: personal care aide, RN/LPN, home-delivered meals, transportation, adaptive equipment
- Authorizing entity: ODM case manager (through CareSource, Buckeye, etc. depending on county)
- Send the agency: case manager name & line, current service plan, authorized hours

DODD WAIVERS — IO, SELF, LEVEL ONE

- Who: Ohioans with developmental disabilities, all ages
- Covers: homemaker/personal care, respite, transportation, community engagement, adult day
- Authorizing entity: the county Board of DD's Service & Support Administrator (SSA)
- Send the agency: SSA name & line, current ISP, authorized HPC hours and span

VA AID & ATTENDANCE / VDC

- Who: wartime veterans (or surviving spouses) needing help with ADLs and meeting income/asset rules
- Covers: pension supplement the veteran uses to pay for caregiving
- Veteran-Directed Care: the veteran controls a monthly budget for caregivers, including family
- Send the agency: VA social worker name & line, monthly authorized budget, start date

IF YOU'RE NOT SURE WHICH ONE APPLIES

Call the partner line at 419-704-0316. Our coordinator will tell you in 5 minutes which payer fits, what the client likely qualifies for, and what to send us.