

AETNA BETTER HEALTH® OF OHIO MyCare Ohio Medicaid Home and Community-Based Services Waiver Program

Members enrolled in the MyCare Ohio Medicaid Home and Community-Based Services Waiver Program can receive additional services as part of an individualized care plan. Members must meet eligibility criteria described in the Ohio Administrative Code, 5160-58-02.2.

The Waiver Service Process:

1. Care Manager coordinates waiver service request.
2. Care Manager completes an in-person evaluation.
3. Care Manager and Trans-Disciplinary Team meet to discuss a care plan for member's clinical and non-clinical needs, goals, interventions and expected outcomes.
4. Care Manager completes all requests for waiver service needs and coordinates requests with member's provider and Trans-Disciplinary Team.

Waiver services include:

Please refer to your Home and Community-Based Services Waiver Program reference manual at www.aetnbetterhealth.com/ohio/providers/resources/tools for more details and a complete list of modifiers.

| Waiver Service | CPT Code |
|--|---|
| Adult Day Health Services | S5501, S5102, S5100 |
| Assisted Living | T2031 |
| Choices-Home Care Attendant Service (CHCAS) | S5121, T2025, S5120 |
| Chore Services | S5121 |
| Community Transition Services | T2038 |
| Home Medical Equipment (DME)/Supplemental Adaptive & Assistive Device Services Medication Dispensing Device (non-electronic) | T2029 |
| Emergency Response Services | S5160/S5161 (Installation and Testing/Service Fees per month) |
| Enhanced Community Living Services | T2025 |
| Homemaker Services | S5130 |
| Home Care Attendant | S5125 |
| Home Delivered Meals | S5170 |
| Home Modification, Maintenance & Repair | S5165 |
| Independent Living Assistance (ILA) | S5135 |
| Out of Home Respite | H0045 |
| Personal Care Attendant/services | T1019 |
| Pest Control | S5121 |
| Social Work Counseling (or psychologist) | G0155 |

| Waiver Service | CPT Code |
|--------------------------------------|----------------------------|
| Waiver Nursing | T1001/T1002 RN / T1003 LPN |
| Waiver Transportation | S0215 |
| Non-emergency Medical transportation | T2003 |
| Vehicle Modifications | T2029 |
| Nutritional Consultation | S9470 |
| Incontinent Supplies | T2029 |

Provider information and updates:

- **Medicare covered home nursing services**

- Requested by member’s PCP or specialist through prior authorization process. Medicare home care services require member be home bound.

- **Medicaid covered home nursing services**

- Requested by member’s PCP or specialist through prior authorization process. CPT Codes include G0156, and new codes G0299 and G0300.

- **Waiver Home Care Services**

- Requested by member’s Care Manager as part of their care plan. Waiver Home Care Services are not requested by the PCP or specialist through the standard prior authorization process. These are hours in addition to the standard Medicaid benefit, available only to a member enrolled in the Waiver program.

Home Health Aide (CPT Code G0156) and Personal Care Services (CPT Code T1019) may be submitted together for Waiver Program member needing both more than 14 hours per week. If approved, the first 14 hours may be approved through the state plan as Home Health Aide hours (G0156) and additional hours approved as Personal Care Services (T1019) are covered through the Waiver Program.

- **Home Medical Equipment (DME)/Supplemental Adaptive & Assistive Device Services, Medication Dispensing Device**

- Requested by member’s PCP through prior authorization process. May be covered by Medicare/Medicaid benefits.