



OhioRISE Waiver Overview for Children, Youth, and Caregivers

What is the OhioRISE Waiver?

Ohio Resilience through Integrated Systems and Excellence (OhioRISE) is a specialized managed care program that focuses on providing services to children and youth who have complex behavioral health and multisystem needs. Young people with multi-system needs require support from community systems such as schools, developmental disabilities, child protection, juvenile justice, and mental health and addiction.

As part of OhioRISE, the Ohio Department of Medicaid (ODM) also created a new 1915(c) Home and Community Based Services (HCBS) Medicaid waiver to offer additional services for qualifying children and youth who have some of the greatest needs within the program. These services include:

- » Out-of-Home Respite – Respite care provided to a child or youth outside of their home to help their caregiver(s) get temporary relief.
- » Transitional Services and Supports – A short-term intensive service that assists the young person and their caregiver(s) in their home and community after they go through changes in circumstances – for example, at the time the young person comes home from a mental health hospital stay or residential mental health treatment.
- » Secondary Flex Funds – Services, equipment, or supplies that help a young person with their behavioral needs. Funds must be used to decrease the need for other Ohio Medicaid services, promote the child or youth's opportunities for full inclusion in the community, or increase their safety in the home.

If a child or youth is eligible for, and enrolled on, the OhioRISE Waiver, they will also get:

- » Mental health and substance use disorder care through the OhioRISE managed care program, and
- » Physical health services and pharmacy coverage through an Ohio Medicaid managed care organization. If they are not eligible for managed care, they will get physical health services and pharmacy coverage through Medicaid's fee-for-service program.

Who is eligible for the OhioRISE Waiver?

Young people would be considered eligible for this waiver if they meet all of the following eligibility criteria:

- » Live in a family home or other private residence.
 - Please note: Children and youth who do not currently live in a home or private residence, but plan on transitioning to this setting soon, may still apply for the OhioRISE Waiver. If they meet all other eligibility criteria, the child or youth will be enrolled on the waiver when they move to a home or other private residence.
- » Need at least one of the OhioRISE Waiver services mentioned above.
- » Meet the OhioRISE Waiver Level of Care, which means they must have:
 - A serious emotional disturbance (SED) diagnosis, and
 - Documented functional impairment and behaviors that substantially interfere with, or limit, the child or youth's role or functioning in family, school, or community activities which result in recommended institutionalization and potential relinquishment of custody to the child protection system, and
 - An Inpatient Psychiatric Level of Care.
- » Are already enrolled in Ohio Medicaid or are determined to be eligible for, and enroll in, Ohio Medicaid after they are determined to meet the OhioRISE Waiver Level of Care.

What is an Inpatient Psychiatric Level of Care and How is it Assessed?

All of Ohio Medicaid's 1915(c) Home and Community-Based waivers help people who have very high levels of need to be able to live in a home environment instead of in a facility or institution.

The OhioRISE Waiver is intended for young people who would otherwise need to be in a hospital or psychiatric institution because of their mental health and/or substance use disorder challenges. This level of need is called the "Inpatient Psychiatric Level of Care."

The Ohio Department of Medicaid (ODM) is responsible for determining if a child or youth meets the Inpatient Psychiatric Level of Care. OhioRISE Care Management Entities (CMEs) help with this process by:

- » Telling the child or youth and/or their caregiver(s) about the OhioRISE Waiver and its services to make sure the waiver can help them meet their needs.
- » Gathering information about where the young person lives.
- » Reviewing recent documentation about the child or youth's diagnoses to determine if they have an applicable Serious Emotional Disturbance diagnosis.
- » Conducting a Child and Adolescent Needs and Strengths (CANS) Waiver LOC assessment to understand the circumstances of the child or youth.
- » Determining if the child or youth has one of the specific types of impairments or behaviors that a child or youth must have to be eligible for the OhioRISE Waiver. A list of these limitations can be found in the OhioRISE Waiver Handbook – see the [OhioRISE Waiver Handbook at aetnabetterhealth.com](https://www.aetnabetterhealth.com/ohiorise-waiver-handbook).

After collecting the information above, the CME will add the information to the child or youth's Waiver LOC Assessment file for ODM to determine if the child or youth is eligible for the OhioRISE Waiver.

What happens next after an Inpatient Psychiatric LOC Assessment?

Once the Ohio Department of Medicaid (ODM) receives the information described above from the Care Management Entity (CME), they will determine if the young person meets the OhioRISE Waiver Level of Care.

- » If the child or youth meets the OhioRISE Waiver Level of Care, ODM will continue the process for determining eligibility and potential enrollment.
- » If the child or youth does not meet the OhioRISE Waiver Level of Care, ODM will send a notice of denial and hearing rights will be sent to the child or youth's mailing address.

Young people who are not enrolled in Medicaid at the time of their Level of Care Assessment may apply for Medicaid coverage after their Waiver Level of Care Assessment is complete. Instructions on how to apply for Medicaid can be found in the document titled, "Medicaid Eligibility Handout".

Young people who are found ineligible for Medicaid will be sent a notice of denial with hearing rights.

Children and youth who meet all OhioRISE Waiver eligibility requirements, including having an OhioRISE Waiver Level of Care and being enrolled in Medicaid, will be enrolled on the OhioRISE Waiver.

What Happens After Being Enrolled on the OhioRISE Waiver?

Young people who enroll on the OhioRISE Waiver will receive notification and materials in the mail, including new member materials from Aetna Better Health of Ohio (Aetna), the OhioRISE Plan.

Children or youth and/or their caregiver(s) will also be contacted by an OhioRISE care coordinator from Aetna or their local care management entity (CME) within days of enrollment. The OhioRISE care coordinator will reach out to arrange meetings with the young person, their caregiver(s), and anyone else the child/youth and caregiver(s) want to have as part of their Child and Family Team. Together, the Child and Family Team will develop individualized Child and Family-Centered Care Plan to help the young person achieve their goals.

Where can I get help or more information on OhioRISE?

For information on OhioRISE, including information on new and improved covered services:

- » Visit managedcare.medicaid.ohio.gov/OhioRISE or [AetnaBetterHealth.com/OhioRISE](https://www.aetnabetterhealth.com/OhioRISE).
- » Call OhioRISE Member Services at 1-833-711-0773 (TTY: 711) from 7 a.m. - 8 p.m. Monday - Friday.

The Ohio Department of Medicaid (ODM) follows state and federal civil rights laws that protect you from discrimination or unfair treatment. To help you understand this brochure, language assistance, interpretation services, auxiliary aids and services are available upon request at no cost to you. You can request these services by calling ODM's Civil Rights/ADA Coordinator at 614-995-9981/TTY 711, fax 1-614-644-1434, or email: ODM_EEO_EmployeeRelations@medicaid.ohio.gov.