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State/Territory Name: **Ohio**

State Plan Amendment (SPA) #: **23-0013**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

OH - Submission Package - OH2023MS00030 - (OH-23-0013) - Eligibility

Summary Reviewable Units Versions Correspondence Log Analyst Notes **Approval Letter** Transaction Logs News Related Actions

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Medicaid and CHIP Operations Group
601 E. 12th Street, Room 355
Kansas City, MO 64106



Center for Medicaid & CHIP Services

June 20, 2023

Maureen Corcoran
Director
Ohio Department of Medicaid
50 West Town Street
Columbus, OH 43215

Re: Approval of State Plan Amendment OH-23-0013

Dear Director Corcoran,

On April 06, 2023, the Centers for Medicare and Medicaid Services (CMS) received Ohio State Plan Amendment (SPA) OH-23-0013, in which the state proposed to adopt new income and resource disregards, authorized under section 1902(r)(2)(A) of the Social Security Act, for the eligibility determinations of the non-MAGI groups covered under the state plan.

We approve Ohio State Plan Amendment (SPA) OH-23-0013 with an effective date(s) of April 01, 2023.

If you have any questions regarding this amendment, please contact Christine Davidson at christine.davidson@cms.hhs.gov

Sincerely,
Ruth A. Hughes
Acting Director, Division of Program
Operations
Center for Medicaid & CHIP Services

OH - Submission Package - OH2023MS00030 - (OH-23-0013) - Eligibility

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Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | OH2023MS00030 | OH-23-0013

CMS-10434 OMB 0938-1188

Package Header

Package ID	OH2023MS00030	SPA ID	OH-23-0013
Submission Type	Official	Initial Submission Date	4/6/2023
Approval Date	06/20/2023	Effective Date	N/A
Superseded SPA ID	N/A		

State Information

State/Territory Name: Ohio

Medicaid Agency Name: Ohio Department of Medicaid

Submission Component

- State Plan Amendment
- Medicaid
- CHIP

Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | OH2023MS00030 | OH-23-0013

Package Header

Package ID OH2023MS00030
Submission Type Official
Approval Date 06/20/2023
Superseded SPA ID N/A

SPA ID OH-23-0013
Initial Submission Date 4/6/2023
Effective Date N/A

SPA ID and Effective Date

SPA ID OH-23-0013

Reviewable Unit	Proposed Effective Date	Superseded SPA ID
Mandatory Eligibility Groups	4/1/2023	OH-23-0006
Qualified Medicare Beneficiaries	4/1/2023	OH-22-0040
Specified Low Income Medicare Beneficiaries	4/1/2023	OH-22-0040
Qualifying Individuals	4/1/2023	OH-22-0040
Optional Eligibility Groups	4/1/2023	OH-22-0040
Individuals Eligible for but Not Receiving Cash Assistance	4/1/2023	OH-22-0040
Individuals Eligible for Cash Except for Institutionalization	4/1/2023	OH-22-0040
Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules	4/1/2023	OH-22-0022
Individuals in Institutions Eligible under a Special Income Level	4/1/2023	OH-22-0040
Ticket to Work Basic	4/1/2023	OH-22-0040
Ticket to Work Medical Improvements	4/1/2023	OH-22-0040

Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | OH2023MS00030 | OH-23-0013

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Approval Date	06/20/2023	Effective Date	N/A
Superseded SPA ID	N/A		

Executive Summary

Summary Description Including Goals and Objectives This State Plan Amendment is required to implement the addition of an income and resource disregard for all Non-Modified Adjusted Gross Income (Non-MAGI) based programs. As authorized in Section 1902(r)(2) of the Social Security Act, an income and resource disregard would be added for all other Non-MAGI based programs.

Federal Budget Impact and Statute/Regulation Citation

Federal Budget Impact

	Federal Fiscal Year	Amount
First	2023	\$0
Second	2024	\$0

Federal Statute / Regulation Citation

1902(r)(2) of the Social Security Act

Supporting documentation of budget impact is uploaded (optional).

Name	Date Created	
No items available		

Submission - Summary

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Superseded SPA ID	N/A		

Governor's Office Review

- No comment
- Comments received
- No response within 45 days
- Other

Describe The state Medicaid Director is the Governors' designee.

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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Medicaid State Plan Eligibility

Mandatory Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | OH2023MS00030 | OH-23-0013

CMS-10434 OMB 0938-1188

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Superseded SPA ID	OH-23-0006		
	User-Entered		

Mandatory Coverage








A. The state provides Medicaid to mandatory groups of individuals. The mandatory groups covered are:

Families and Adults

Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type
Infants and Children under Age 19		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Parents and Other Caretaker Relatives		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Pregnant Women		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Deemed Newborns		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Children with Title IV-E Adoption Assistance, Foster Care or Guardianship Care		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Former Foster Care Children		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	APPROVED
Transitional Medical Assistance		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Extended Medicaid due to Spousal Support Collections		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW

Aged, Blind and Disabled

Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type
SSI Beneficiaries		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Closed Eligibility Groups		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Deemed To Be Receiving SSI		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW

Eligibility Group Name		Covered In State Plan	Include RU In Package 	Included in Another Submission Package	Source Type 
Working Individuals under 1619(b)		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Qualified Medicare Beneficiaries		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	APPROVED
Qualified Disabled and Working Individuals		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Specified Low Income Medicare Beneficiaries		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	APPROVED
Qualifying Individuals		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	APPROVED

Mandatory Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | OH2023MS00030 | OH-23-0013


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B. The state elects the Adult Group, described at 42 CFR 435.119.

Yes No

Families and Adults

Eligibility Group Name		Covered In State Plan	Include RU In Package 	Included in Another Submission Package	Source Type 
Adult Group		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED

C. Additional Information (optional)

Eligibility Groups Deselected from Coverage

The following eligibility groups were previously covered in the source approved version of the state plan and deselected from coverage as part of this submission package:

- N/A

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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Medicaid State Plan Eligibility

Eligibility Groups - Mandatory Coverage

Qualified Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | OH2023MS00030 | OH-23-0013

Individuals with income equal to or less than 100% of the FPL, who are entitled to Medicare Part A, and who qualify for Medicare cost-sharing.

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CMS-10434 OMB 0938-1188

Not Started

In Progress

Complete

Package Header

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	System-Derived		

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The state covers the mandatory qualified Medicare beneficiaries group in accordance with the following provisions:

A. Characteristics

[Collapse](#)

Individuals qualifying under this eligibility group must meet the following criteria:

1. Are entitled to hospital insurance benefits under part A of title XVIII (Medicare Part A), including individuals who have purchased a premium to enroll in Part A.
2. Have income and resources at or below the standard for this group.

B. Financial Methodologies

[Collapse](#)

1. SSI methodologies are used in calculating household income. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

[View approved version of Non-MAGI Methodologies](#)

2. Less restrictive methodologies are used in calculating countable income.

- Yes
- No

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

Description of disregard: Disregard Census Bureau Wages for all Census Activities.

A specified type of income is disregarded:

Name of income type:	Description:
Norfolk Southern Railroad train derailment compensation payments.	Disregard the amount of inconvenience payments and/or reimbursement payments for food and/or lodging, not including judgments from a civil action or other legal settlements, to residents of East Palestine, Ohio and surrounding areas that were issued by Norfolk Southern Corporation or its subsidiaries as compensation for matters related to the Norfolk Southern train derailment, which occurred on February 3, 2023.

3. Less restrictive methodologies are used in calculating countable resources.

- Yes
- No

The less restrictive resource methodologies are:

- A specified type of resource is disregarded:

Name of resource type:	Description:
Real or personal property listed for sale	The value of otherwise-countable real and/or personal property that is listed for sale and which has not been sold shall be disregarded for as long as the applicant/beneficiary continues to list the property for sale at an amount equal to the fair market value determined by the county auditor, where available, or other knowledgeable source.
Ticket to Work Basic or Medically Improved premium refunds	The amount of premiums refunded to individuals who paid such premiums while enrolled in the Ticket to Work Basic or Medically Improved eligibility groups shall be disregarded for a period of 12 months beginning with the month of receipt.
Norfolk Southern Railroad train derailment compensation payments	The amount of inconvenience payments and/or reimbursement payments for food and/or lodging, not including judgments from a civil action or other legal settlements, to residents of East Palestine, Ohio and surrounding areas that were issued by Norfolk Southern Corporation or its subsidiaries as compensation for matters related to the Norfolk Southern train derailment, which occurred on February 3, 2023, shall be disregarded beginning with the month of receipt of the payment(s).

C. Income Standard Used

[Collapse](#)

The amount of the income standard for this group is 100% FPL.

D. Resource Standard Used

[Collapse](#)

The resource standard is the same used to determine eligibility for the Medicare Part D full-benefit low-income subsidy (LIS) (but without regard to the life insurance policy exclusion applied in LIS resource eligibility determinations). This standard is three times the SSI resource standard, adjusted annually in accordance with the consumer price index.

E. Medical Assistance Provided

Medical assistance is limited to payment of co-insurance and deductibles for Medicare Parts A, B and C and payment for the premiums for Medicare Parts A and B.

Medical assistance begins the first day of the month following the month in which the individual is determined to qualify for this eligibility group.

F. Additional Information (optional)

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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Medicaid State Plan Eligibility

Eligibility Groups - Mandatory Coverage

Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | OH2023MS00030 | OH-23-0013

Individuals with income above 100% and below 120% of the FPL who are entitled to Medicare Part A, who qualify for payment of Medicare Part B premiums.

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Package ID	OH2023MS00030	SPA ID	OH-23-0013
Submission Type	Official	Initial Submission Date	4/6/2023
Approval Date	06/20/2023	Effective Date	4/1/2023
Superseded SPA ID	OH-22-0040		
	System-Derived		

The state covers the mandatory specified low income Medicare beneficiaries group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

1. Would qualify as Qualified Medicare Beneficiaries (described in section 1905(p)(1) of the Act), except that their income exceeds the income level for that eligibility group.
2. Have income below the income standard and resources at or below the resource standard for this group.

Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | OH2023MS0003O | OH-23-0013

Package Header

Package ID OH2023MS0003O
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Superseded SPA ID OH-22-0040
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SPA ID OH-23-0013
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Effective Date 4/1/2023

B. Financial Methodologies

1. SSI methodologies are used in calculating household income. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

2. Less restrictive methodologies are used in calculating countable income.

- Yes
- No

The less restrictive income methodologies are:

- Census Bureau wages are disregarded.
- A specified type of income is disregarded:

Description of disregard: Disregard Census Bureau Wages for all Census Activities.

Name of income type:	Description:
Norfolk Southern Railroad train derailment compensation payments.	Disregard the amount of inconvenience payments and/or reimbursement payments for food and/or lodging, not including judgments from a civil action or other legal settlements, to residents of East Palestine, Ohio and surrounding areas that were issued by Norfolk Southern Corporation or its subsidiaries as compensation for matters related to the Norfolk Southern train derailment, which occurred on February 3, 2023.

3. Less restrictive methodologies are used in calculating countable resources.

- Yes
- No

The less restrictive resource methodologies are:

- A specified type of resource is disregarded:

Name of resource type:	Description:
Real or personal property listed for sale	The value of otherwise-countable real and/or personal property that is listed for sale and which has not been sold shall be disregarded for as long as the applicant/beneficiary continues to list the property for sale at an amount equal to the fair market value determined by the county auditor, where available, or other knowledgeable source.
Ticket to Work Basic or Medically Improved premium refunds	The amount of premiums refunded to individuals who paid such premiums while enrolled in the Ticket to Work Basic or Medically Improved eligibility groups shall be disregarded for a period of 12

Name of resource type:	Description:
Norfolk Southern Railroad train derailment compensation payments	months beginning with the month of receipt. The amount of inconvenience payments and/or reimbursement payments for food and/or lodging, not including judgments from a civil action or other legal settlements, to residents of East Palestine, Ohio and surrounding areas that were issued by Norfolk Southern Corporation or its subsidiaries as compensation for matters related to the Norfolk Southern train derailment, which occurred on February 3, 2023, shall be disregarded beginning with the month of receipt of the payment(s).

Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | OH2023MS0003O | OH-23-0013

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C. Income Standard Used

Family income must be above 100% FPL and below 120% FPL.

D. Resource Standard Used

The resource standard is the same used to determine eligibility for the Medicare Part D full-benefit low-income subsidy (LIS) (but without regard to the life insurance policy exclusion applied in LIS resource eligibility determinations). This standard is three times the SSI resource standard, adjusted annually in accordance with the consumer price index.

E. Medical Assistance Provided

Medical assistance is limited to payment for Medicare Part B premiums.

Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | OH2023MS0003O | OH-23-0013

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F. Additional Information (optional)

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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Medicaid State Plan Eligibility

Eligibility Groups - Mandatory Coverage

Qualifying Individuals

MEDICAID | Medicaid State Plan | Eligibility | OH2023MS00030 | OH-23-0013

Individuals with income at or above 120% and below 135% of the FPL who are entitled to Medicare Part A, who qualify for payment of Medicare Part B premiums.

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Not Started

In Progress

Complete

Package Header

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[VIEW ALL RESPONSES](#)

The state covers the mandatory qualifying individuals group in accordance with the following provisions:

A. Characteristics

[Collapse](#)

Individuals qualifying under this eligibility group must meet all of the following criteria:

1. Would qualify as Qualified Medicare Beneficiaries (described in section 1905(p)(1) of the Act), except that their income exceeds the income level for that eligibility group.
2. Are not otherwise eligible for Medicaid under the state plan.
3. Have income below the income standard and resources at or below the resource standard for this group.

B. Financial Methodologies

[Collapse](#)

1. SSI methodologies are used in calculating household income. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

[View approved version of Non-MAGI Methodologies](#)

2. Less restrictive methodologies are used in calculating countable income.

- Yes
- No

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

Description of disregard: Disregard Census Bureau Wages for all Census Activities.

A specified type of income is disregarded:

Name of income type:	Description:
Norfolk Southern Railroad train derailment compensation payments.	Disregard the amount of inconvenience payments and/or reimbursement payments for food and/or lodging, not including judgments from a civil action or other legal settlements, to residents of East Palestine, Ohio and surrounding areas that were issued by Norfolk Southern Corporation or its subsidiaries as compensation for matters related to the Norfolk Southern train derailment, which occurred on February 3, 2023.

3. Less restrictive methodologies are used in calculating countable resources.

- Yes
- No

The less restrictive resource methodologies are:

- A specified type of resource is disregarded:

Name of resource type:	Description:
Real or personal property listed for sale	The value of otherwise-countable real and/or personal property that is listed for sale and which has not been sold shall be disregarded for as long as the applicant/beneficiary continues to list the property for sale at an amount equal to the fair market value determined by the county auditor, where available, or other knowledgeable source.
Ticket to Work Basic or Medically Improved premium refunds	The amount of premiums refunded to individuals who paid such premiums while enrolled in the Ticket to Work Basic or Medically Improved eligibility groups shall be disregarded for a period of 12 months beginning with the month of receipt.
Norfolk Southern Railroad train derailment compensation payments	The amount of inconvenience payments and/or reimbursement payments for food and/or lodging, not including judgments from a civil action or other legal settlements, to residents of East Palestine, Ohio and surrounding areas that were issued by Norfolk Southern Corporation or its subsidiaries as compensation for matters related to the Norfolk Southern train derailment, which occurred on February 3, 2023, shall be disregarded beginning with the month of receipt of the payment(s).

C. Income Standard Used

[Collapse](#)

Family income must be at or above 120% FPL and below 135% FPL.

D. Resource Standard Used

[Collapse](#)

The resource standard is the same used to determine eligibility for the Medicare Part D full-benefit low-income subsidy (LIS) (but without regard to the life insurance policy exclusion applied in LIS resource eligibility determinations). This standard is three times the SSI resource standard, adjusted annually in accordance with the consumer price index.

E. Medical Assistance Provided

Medical assistance is limited to payment for Medicare Part B premiums.

F. Additional Information (optional)

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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Medicaid State Plan Eligibility

Optional Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | OH2023MS00030 | OH-23-0013

[↓ Spell Check Instructions](#) | [? Request System Help](#)

CMS-10434 OMB 0938-1188

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Superseded SPA ID	OH-22-0040		
	System-Derived		

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A. Options for Coverage

Collapse







The state provides Medicaid to specified optional groups of individuals.

Yes No


















The optional eligibility groups covered in the state plan are (elections made in this screen may not be comprehensive during the transition period from the paper-based state plan to MACPro):

Families and Adults

Eligibility Group Name		Covered In State Plan	Include RU In Package [?]	Included in Another Submission Package	Source Type [?]
Optional Coverage of Parents and Other Caretaker Relatives		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Reasonable Classifications of Individuals under Age 21		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Children with Non-IV-E Adoption Assistance		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Independent Foster Care Adolescents		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Optional Targeted Low Income Children		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Individuals above 133% FPL under Age 65		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW

Eligibility Group Name		Covered In State Plan	Include RU In Package 	Included in Another Submission Package	Source Type 
Individuals Needing Treatment for Breast or Cervical Cancer		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Eligible for Family Planning Services		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Individuals with Tuberculosis		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Electing COBRA Continuation Coverage		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW

Aged, Blind and Disabled

Eligibility Group Name		Covered In State Plan	Include RU In Package 	Included in Another Submission Package	Source Type 
Individuals Eligible for but Not Receiving Cash Assistance		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	APPROVED
Individuals Eligible for Cash Except for Institutionalization		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	APPROVED
Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="radio"/>	APPROVED
Optional State Supplement Beneficiaries		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals in Institutions Eligible under a Special Income Level		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="radio"/>	APPROVED
PACE Participants		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Receiving Hospice		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Children under Age 19 with a Disability		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Age and Disability-Related Poverty Level		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Work Incentives		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Ticket to Work Basic		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	APPROVED
Ticket to Work Medical Improvements		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	APPROVED
Family Opportunity Act Children with a Disability		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Receiving State Plan Home and Community-Based Services		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	APPROVED
Individuals Receiving State Plan Home and Community-Based		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW

Eligibility Group Name		Covered In State Plan	Include RU In Package ?	Included in Another Submission Package	Source Type ?
Services Who Are Otherwise Eligible for HCBS Waivers					

B. Medically Needy Options for Coverage

[Collapse](#)

The state provides Medicaid to specified groups of individuals who are medically needy.

Yes No

C. Additional Information (optional)

[Collapse](#)

Eligibility Groups Deselected from Coverage

[Collapse](#)

The following eligibility groups were previously covered in the source approved version of the state plan and deselected from coverage as part of this submission package:

- N/A

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

Individuals Eligible for but Not Receiving Cash Assistance

MEDICAID | Medicaid State Plan | Eligibility | OH2023MS00030 | OH-23-0013

Individuals who are eligible for but not receiving federal cash assistance or an optional state supplement.

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Superseded SPA ID	OH-22-0040		
	System-Derived		

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The state covers the optional Individuals Eligible for but Not Receiving Cash Assistance eligibility group in accordance with the following provisions:

A. Characteristics

[Collapse](#)

Individuals qualifying under this eligibility group must meet the following criteria:

1. Meet the eligibility requirements of at least one of the following cash assistance programs:

- a. SSI
- b. Optional State Supplement
- c. AFDC

2. Do not receive cash assistance under these programs.

B. Individuals Covered

[Collapse](#)

1. The state covers all individuals who meet the characteristics described in section A.

- Yes
- No

2. The state covers the following populations:

- a. Individuals age 65 or older
- b. Individuals who have blindness
- c. Individuals who have a disability
- d. All children under a specified age limit:
- e. Reasonable classifications of children

- f. Parents and other caretaker relatives
- g. Pregnant women
- h. Other population

C. Financial Methodologies

[Collapse](#)

1. In calculating household income and resources for individuals who are seeking eligibility on the basis of being age 65 or older or having blindness or disability, SSI methodologies are used. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

[View approved version of Non-MAGI Methodologies](#)

3. Less restrictive methodologies are used in calculating countable income.

- Yes
- No

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

Description of disregard: Disregard Census Bureau Wages for all Census Activities.

A specified type of income is disregarded:

Name of income type:	Description:
Norfolk Southern Railroad train derailment compensation payments.	Disregard the amount of inconvenience payments and/or reimbursement payments for food and/or lodging, not including judgments from a civil action or other legal settlements, to residents of East Palestine, Ohio and surrounding areas that were issued by Norfolk Southern Corporation or its subsidiaries as compensation for matters related to the Norfolk Southern train derailment, which occurred on February 3, 2023.

4. Less restrictive methodologies are used in calculating countable resources.

- Yes
- No

The less restrictive resource methodologies are:

A specified type of resource is disregarded:

Name of resource type:	Description:
Real or personal property listed for sale	The value of otherwise-countable real and/or personal property that is listed for sale and which has not been sold shall be disregarded for as long as the applicant/beneficiary continues to list the property for sale at an amount equal to the fair market value determined by the county auditor, where available, or other knowledgeable source.
Ticket to Work Basic or Medically Improved premium refunds	The amount of premiums refunded to individuals who paid such premiums while enrolled in the Ticket to Work Basic or Medically Improved eligibility groups shall be disregarded for a period of 12 months beginning with the month of receipt.
Norfolk Southern Railroad train derailment compensation payments	The amount of inconvenience payments and/or reimbursement

Name of resource type:	Description:
	payments for food and/or lodging, not including judgments from a civil action or other legal settlements, to residents of East Palestine, Ohio and surrounding areas that were issued by Norfolk Southern Corporation or its subsidiaries as compensation for matters related to the Norfolk Southern train derailment, which occurred on February 3, 2023, shall be disregarded beginning with the month of receipt of the payment(s).

- A beneficiary of a "qualified state long-term care insurance partnership" policy (partnership policy), as defined in section 1917(b)(1)(C) of the Social Security Act and 45 CFR 144.200 et seq., is provided a resource disregard, equal to the amount of the insurance benefit payments made to or on behalf of the individual from the partnership policy.

D. Income Standard Used

[Collapse](#)

The income standard used is the standard of the most closely related cash assistance program.

E. Resource Standard Used

[Collapse](#)

The resource standard used is the standard of the most closely related cash assistance program.

F. Additional Information (optional)

[Collapse](#)

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules

MEDICAID | Medicaid State Plan | Eligibility | OH2023MS00030 | OH-23-0013

Individuals who would be eligible for Medicaid if they were in an institution and who receive home and community-based services.

CMS-10434 OMB 0938-1188

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Submission Type	Official	Initial Submission Date	4/6/2023
Approval Date	06/20/2023	Effective Date	<u>4/1/2023</u>
Superseded SPA ID	OH-22-0022		
	System-Derived		

The state operates the Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules eligibility group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

1. Would be eligible for Medicaid if in a medical institution.
2. But for the provision of home and community-based services under a waiver granted under section 1915(c), (d) or (e) of the Act:
 - a. For waivers granted under 1915(c), the individuals would otherwise require the level of care furnished in a hospital, a nursing facility or an intermediate care facility for individuals with intellectual disabilities.
 - b. For waivers granted under 1915(d) or (e), the individuals would otherwise require the level of care furnished in a hospital or nursing facility.
3. Will receive the waived services.

Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules

MEDICAID | Medicaid State Plan | Eligibility | OH2023MS00030 | OH-23-0013

Package Header

Package ID	OH2023MS00030	SPA ID	OH-23-0013
Submission Type	Official	Initial Submission Date	4/6/2023
Approval Date	06/20/2023	Effective Date	4/1/2023
Superseded SPA ID	OH-22-0022		
	System-Derived		

B. Income and Resource Methodologies

1. The income and resource methodologies used for this group are those used to determine eligibility for a state plan group under which the individual would be eligible if in an institution.

2. Less restrictive methodologies are used in calculating countable income.

- Yes
 No

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

Description of disregard: Disregard Census Bureau Wages for all Census Activities.

A specified type of income is disregarded:

Name of income type:	Description:
Norfolk Southern Railroad train derailment compensation payments.	Disregard the amount of inconvenience payments and/or reimbursement payments for food and/or lodging, not including judgments from a civil action or other legal settlements, to residents of East Palestine, Ohio and surrounding areas that were issued by Norfolk Southern Corporation or its subsidiaries as compensation for matters related to the Norfolk Southern train derailment, which occurred on February 3, 2023.

3. Less restrictive methodologies are used in calculating countable resources.

- Yes
 No

The less restrictive resource methodologies are:

A beneficiary of a "qualified state long-term care insurance partnership" policy (partnership policy), as defined in section 1917(b)(1)(C) of the Social Security Act and 45 CFR 144.200 et seq., is provided a resource disregard, equal to the amount of the insurance benefit payments made to or on behalf of the individual from the partnership policy.

Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules

MEDICAID | Medicaid State Plan | Eligibility | OH2023MS00030 | OH-23-0013

Package Header

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Approval Date	06/20/2023	Effective Date	4/1/2023
Superseded SPA ID	OH-22-0022		
	System-Derived		

C. Income and Resource Standards

The income and resource standards used for this group are those used to determine eligibility for a state plan group under which the individual would be eligible if in an institution.

Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules

MEDICAID | Medicaid State Plan | Eligibility | OH2023MS00030 | OH-23-0013

Package Header

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	System-Derived		

D. Additional Information (optional)

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules

MEDICAID | Medicaid State Plan | Eligibility | OH2023MS00030 | OH-23-0013

Individuals who would be eligible for Medicaid if they were in an institution and who receive home and community-based services.

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Superseded SPA ID	OH-22-0022		
	System-Derived		

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[VIEW ALL RESPONSES](#)

The state operates the Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules eligibility group in accordance with the following provisions:

A. Characteristics

[Collapse](#)

Individuals qualifying under this eligibility group must meet the following criteria:

- Would be eligible for Medicaid if in a medical institution.
- But for the provision of home and community-based services under a waiver granted under section 1915(c), (d) or (e) of the Act:
 - For waivers granted under 1915(c), the individuals would otherwise require the level of care furnished in a hospital, a nursing facility or an intermediate care facility for individuals with intellectual disabilities.
 - For waivers granted under 1915(d) or (e), the individuals would otherwise require the level of care furnished in a hospital or nursing facility.
- Will receive the waived services.

B. Income and Resource Methodologies

[Collapse](#)

1. The income and resource methodologies used for this group are those used to determine eligibility for a state plan group under which the individual would be eligible if in an institution.

2. Less restrictive methodologies are used in calculating countable income.

- Yes
- No

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

Description of disregard: Disregard Census Bureau Wages for all Census Activities.

A specified type of income is disregarded:

Name of income type:	Description:
Norfolk Southern Railroad train derailment compensation payments.	Disregard the amount of inconvenience payments and/or reimbursement payments for food and/or lodging, not including judgments from a civil action or other legal settlements, to residents of East Palestine, Ohio and surrounding areas that were issued by Norfolk Southern Corporation or its subsidiaries as compensation for matters related to the Norfolk Southern train derailment, which occurred on February 3, 2023.

3. Less restrictive methodologies are used in calculating countable resources.

- Yes
- No

The less restrictive resource methodologies are:

A beneficiary of a "qualified state long-term care insurance partnership" policy (partnership policy), as defined in section 1917(b)(1)(C) of the Social Security Act and 45 CFR 144.200 et seq., is provided a resource disregard, equal to the amount of the insurance benefit payments made to or on behalf of the individual from the partnership policy.

C. Income and Resource Standards

[Collapse](#)

The income and resource standards used for this group are those used to determine eligibility for a state plan group under which the individual would be eligible if in an institution.

D. Additional Information (optional)

[Collapse](#)

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[← Individuals Receiving Home and Community- Based Waiver Services under Institutional Rules](#) | [Ticket to Work Basic](#) →

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Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

Individuals in Institutions Eligible under a Special Income Level

MEDICAID | Medicaid State Plan | Eligibility | OH2023MS00030 | OH-23-0013

Individuals who are in medical institutions for at least 30 consecutive days who are eligible under a special income level.

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Package Header

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Superseded SPA ID	OH-22-0040		
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[VIEW ALL RESPONSES](#)

The state covers Individuals in Institutions Eligible under a Special Income Level in accordance with the following provisions:

A. Characteristics

[Collapse](#)

Individuals qualifying under this eligibility group must meet the following criteria:

1. Have been in a medical institution for at least 30 consecutive days.
2. Have income at or below a standard described in section D.

B. Individuals Covered

[Collapse](#)

1. The state covers all individuals who meet the characteristics described in section A.

- Yes
- No

C. Financial Methodologies

[Collapse](#)

1. In calculating household income, the methodologies of the most closely related cash assistance program are used, except that disregards are not applied.
2. In calculating household resources, the methodologies of the most closely related cash assistance program are used. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

[View approved version of Non-MAGI Methodologies](#)

3. Less restrictive methodologies are used in calculating countable resources.

- Yes
- No

The less restrictive resource methodologies are:

A specified type of resource is disregarded:

Name of resource type:	Description:
Real or personal property listed for sale	The value of otherwise-countable real and/or personal property that is listed for sale and which has not been sold shall be disregarded for as long as the applicant/beneficiary continues to list the property for sale at an amount equal to the fair market value determined by the county auditor, where available, or other knowledgeable source.
Ticket to Work Basic or Medically Improved premium refunds	The amount of premiums refunded to individuals who paid such premiums while enrolled in the Ticket to Work Basic or Medically Improved eligibility groups shall be disregarded for a period of 12 months beginning with the month of receipt.
Norfolk Southern Railroad train derailment compensation payments	The amount of inconvenience payments and/or reimbursement payments for food and/or lodging, not including judgments from a civil action or other legal settlements, to residents of East Palestine, Ohio and surrounding areas that were issued by Norfolk Southern Corporation or its subsidiaries as compensation for matters related to the Norfolk Southern train derailment, which occurred on February 3, 2023, shall be disregarded beginning with the month of receipt of the payment(s).

A beneficiary of a "qualified state long-term care insurance partnership" policy (partnership policy), as defined in section 1917(b)(1)(C) of the Social Security Act and 45 CFR 144.200 et seq., is provided a resource disregard, equal to the amount of the insurance benefit payments made to or on behalf of the individual from the partnership policy.

D. Income Standard Used

[Collapse](#)

The income standard for this group is:

- 1. 300% of the SSI Federal Benefit Rate (FBR) for an individual
- 2. Other lower income level

E.Resource Standard Used

[Collapse](#)

The resource standard for this group is the one used for the most closely-related cash assistance program.

F.Additional Information (optional)

[Collapse](#)

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

OH - Submission Package - OH2023MS00030 - (OH-23-0013) - Eligibility

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Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

Ticket to Work Basic

MEDICAID | Medicaid State Plan | Eligibility | OH2023MS00030 | OH-23-0013

Individuals between ages 16 and 64 with a disability, who have earned income.

[📄 Spell Check Instructions](#) | [🔗 Request System Help](#)

CMS-10434 OMB 0938-1188

Not Started

In Progress

Complete

Package Header

Package ID	OH2023MS00030	SPA ID	OH-23-0013
Submission Type	Official	Initial Submission Date	4/6/2023
Approval Date	06/20/2023	Effective Date	<u>4/1/2023</u>
Superseded SPA ID	OH-22-0040		
	System-Derived		

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[VIEW ALL RESPONSES](#)

The state covers the optional Ticket to Work basic eligibility group in accordance with the following provisions:

A. Characteristics

[Collapse](#)

Individuals qualifying under this eligibility group must meet the following criteria:

1. Are at least age 16 but less than 65 years of age.
2. Have earned income.
3. But for earned income, meet the SSI definition of disability.
4. Have income and resources that do not exceed the standards established by the state.

B. Financial Methodologies

[Collapse](#)

1. SSI methodologies are used in calculating household income and resources. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

[View approved version of Non-MAGI Methodologies](#)

2. Less restrictive methodologies are used in calculating countable income.

- Yes
- No

The less restrictive income methodologies are:

- Income from household members is disregarded.
- Income of the spouse is disregarded.

Description: Only the individual's income is considered.

A specified amount of earned income is disregarded.

Census Bureau wages are disregarded.

A specified type of income is disregarded:

Amount: \$20000.00

Description of disregard: \$20,000 is disregarded annually for income over the 250% FPL.

Description of disregard: Disregard Census Bureau Wages for all Census Activities.

Name of income type:	Description:
Norfolk Southern Railroad train derailment compensation payments.	Disregard the amount of inconvenience payments and/or reimbursement payments for food and/or lodging, not including judgments from a civil action or other legal settlements, to residents of East Palestine, Ohio and surrounding areas that were issued by Norfolk Southern Corporation or its subsidiaries as compensation for matters related to the Norfolk Southern train derailment, which occurred on February 3, 2023.

3. Less restrictive methodologies are used in calculating countable resources.

Yes

No

The less restrictive resource methodologies are:

Resources from household members are disregarded.

Resources of the spouse are disregarded.

Description: Only the individual's resources are considered.

A specified type of resource is disregarded:

Name of resource type:	Description:
Real or personal property listed for sale	The value of otherwise-countable real and/or personal property that is listed for sale and which has not been sold shall be disregarded for as long as the applicant/beneficiary continues to list the property for sale at an amount equal to the fair market value determined by the county auditor, where available, or other knowledgeable source.
Ticket to Work Basic or Medically Improved premium refunds	The amount of premiums refunded to individuals who paid such premiums while enrolled in the Ticket to Work Basic or Medically Improved eligibility groups shall be disregarded for a period of 12 months beginning with the month of receipt.
Norfolk Southern Railroad train derailment compensation payments	The amount of inconvenience payments and/or reimbursement payments for food and/or lodging, not including judgments from a civil action or other legal settlements, to residents of East Palestine, Ohio and surrounding areas that were issued by Norfolk Southern Corporation or its subsidiaries as compensation for matters related to the Norfolk Southern train derailment, which occurred on February 3, 2023, shall

Name of resource type:

Description:

be disregarded beginning with the month of receipt of the payment(s).

- A beneficiary of a "qualified state long-term care insurance partnership" policy (partnership policy), as defined in section 1917(b)(1)(C) of the Social Security Act and 45 CFR 144.200 et seq., is provided a resource disregard, equal to the amount of the insurance benefit payments made to or on behalf of the individual from the partnership policy.

C. Income Standard Used

[Collapse](#)

The income standard for this group is:

- 1. No income standard
- 2. A percentage of the federal poverty level:
- 3. A percentage of the SSI Federal Benefit Rate:
- 4. A dollar amount
- 5. Other

FPL 250.00%

D. Resource Standard Used

[Collapse](#)

The resource standard for this group is:

- 1. No resource standard
- 2. SSI resource standard
- 4. A dollar amount higher than the SSI resource standard

Single Individual \$12382.00

Couple \$12382.00

E. Premiums and Cost Sharing

[Collapse](#)

Requirements for premiums and cost sharing for this group are found in the premium and cost sharing sections of the state plan.

F. Additional Information (optional)

[Collapse](#)

The resource limit for this group was initially set at \$10,000 in 2009, and is revised annually by the CPI-U in the Federal Register.

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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[← Ticket to Work Basic](#)

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Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

Ticket to Work Medical Improvements

MEDICAID | Medicaid State Plan | Eligibility | OH2023MS00030 | OH-23-0013

Employed individuals between ages 16 and 64 who are no longer disabled but still have a medical impairment.

[📄 Spell Check Instructions](#) | [🔗 Request System Help](#)

CMS-10434 OMB 0938-1188

Not Started

In Progress

Complete

Package Header

Package ID	OH2023MS00030	SPA ID	OH-23-0013
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Superseded SPA ID	OH-22-0040		
	System-Derived		

[View Implementation Guide](#)

[VIEW ALL RESPONSES](#)

The state covers the optional Ticket to Work medical improvements eligibility group in accordance with the following provisions:

A. Characteristics

[Collapse](#)

Individuals qualifying under this eligibility group must meet the following criteria:

- Are at least age 16 but less than 65 years of age.
- Lost eligibility for the Ticket to Work basic eligibility group because it was determined at a regular disability review that they no longer meet the disability criteria.
- Continue to have a severe medically determinable impairment.
- Are employed, using the following definition:
 - a. Earning at least the minimum wage and working at least 40 hours per month.
 - b. An alternative definition
- Have income and resources that do not exceed the standards established by the state.

B. Financial Methodologies

[Collapse](#)

- SSI methodologies are used in calculating household income and resources. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

[View approved version of Non-MAGI Methodologies](#)

2. Less restrictive methodologies are used in calculating countable income.

- Yes
- No

The less restrictive income methodologies are:

- Income from household members is disregarded.
 - Income of the spouse is disregarded.
- A specified amount of earned income is disregarded.
- Census Bureau wages are disregarded.
- A specified type of income is disregarded:

Description: Only the individual's income is considered.

Amount: \$20000.00

Description of disregard: \$20,000 is disregarded annually for income over the 250% FPL.

Description of disregard: Disregard Census Bureau Wages for all Census Activities.

Name of income type:	Description:
Norfolk Southern Railroad train derailment compensation payments.	Disregard the amount of inconvenience payments and/or reimbursement payments for food and/or lodging, not including judgments from a civil action or other legal settlements, to residents of East Palestine, Ohio and surrounding areas that were issued by Norfolk Southern Corporation or its subsidiaries as compensation for matters related to the Norfolk Southern train derailment, which occurred on February 3, 2023.

3. Less restrictive methodologies are used in calculating countable resources.

- Yes
- No

The less restrictive resource methodologies are:

- Resources from household members are disregarded.
 - Resources of the spouse are disregarded.
- A specified type of resource is disregarded:

Description: Only the individual's resources are considered.

Name of resource type:	Description:
Real or personal property listed for sale	The value of otherwise-countable real and/or personal property that is listed for sale and which has not been sold shall be disregarded for as long as the applicant/beneficiary continues to list the property for sale at an amount equal to the fair market value determined by the county auditor, where available, or other knowledgeable source.
Ticket to Work Basic or Medically Improved premium refunds	The amount of premiums refunded to individuals who paid such premiums while enrolled in the Ticket to Work Basic or Medically Improved eligibility groups shall be disregarded for a period of 12 months beginning with the month of receipt.
Norfolk Southern Railroad train derailment compensation payments	The amount of inconvenience payments and/or reimbursement payments for food and/or lodging, not including judgments from a civil action or other legal settlements, to residents of East Palestine, Ohio and surrounding areas that were issued by Norfolk Southern Corporation or

Name of resource type:	Description:
	its subsidiaries as compensation for matters related to the Norfolk Southern train derailment, which occurred on February 3, 2023, shall be disregarded beginning with the month of receipt of the payment(s).

- A beneficiary of a "qualified state long-term care insurance partnership" policy (partnership policy), as defined in section 1917(b)(1)(C) of the Social Security Act and 45 CFR 144.200 et seq., is provided a resource disregard, equal to the amount of the insurance benefit payments made to or on behalf of the individual from the partnership policy.

C. Income Standard Used

[Collapse](#)

The income standard for this group is:

- 1. No income standard
- 2. A percentage of the federal poverty level:

250.00% FPL

- 3. A percentage of the SSI Federal Benefit Rate:
- 4. A dollar amount
- 5. Other

D. Resource Standard Used

[Collapse](#)

The resource standard for this group is:

- 1. No resource standard
- 2. SSI resource standard
- 4. A dollar amount higher than the SSI resource standard

Single Individual \$12382.00

Couple \$12382.00

E. Premiums and Cost Sharing

[Collapse](#)

Requirements for premiums and cost sharing for this group are found in the premium and cost sharing sections of the state plan.

F. Additional Information (optional)

[Collapse](#)

The resource limit for this group was initially set at \$10,000 in 2009, and is revised annually by the CPI-U in the Federal Register.

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