



John R. Kasich, Governor
John B. McCarthy, Director

MEDICAID ELIGIBILITY MANUAL TRANSMITTAL LETTER NO. 116

To: All Medicaid Eligibility Manual Holders

From: John B. McCarthy, Director

Subject: Medicaid: 1634 base eligibility

Effective August 1, 2016, Ohio transitioned from being a 209(b) state to a 1634 state for Medicaid eligibility. The transition impacted how Medicaid eligibility is determined for aged, blind, or disabled individuals. Most of the eligibility requirements are now based on criteria established by the Social Security Administration for supplemental security income (SSI).

As a 209(b) State, Ohio used eligibility criterion more restrictive than the SSI program for Medicaid determinations and provided a mechanism for individuals to reduce their income to the income eligibility level through the use of Medicaid spenddown.

As a 1634 State, Ohio will now use SSA's determination of an individual's eligibility for SSI benefits as a determination for Medicaid coverage. Ohio has also chosen the option to determine eligibility for Medicaid coverage for individuals who do not receive SSI benefits but have a disability determination and meet the income and resource criterion for SSI.

As a result of these changes, the Ohio Department of Medicaid reviewed all existing eligibility rules on aged, blind, or disabled Medicaid. Some rules were significantly rewritten, while others were simply updated.

This MEMTL contains five new rules from Chapter 5160:1-3 of the Administrative Code to replace six rescinded rule from Chapter 5160:1-3 and two brand new covered group rules from Chapter 5160:1-3.

The effective date of the rules is August 1, 2016.

Chapter 5160:1-3 Medicaid for the Aged Blind, or Disabled**5160:1-3-01 Medicaid: coverage for the aged, blind, or disabled**

This rule was rescinded and made new to remove a reference to an eligibility group and removed references to rules that are moving to another chapter.

5160:1-3-02 Medicaid: criteria for age, blindness, or disability

This rule was rescinded and made new to remove language on presumptive disability, added language on limiting physical factor, and reorganized language for clarity.

5160:1-3-02.3 Medicaid: grandfathering provisions resulting from the implementation of the supplemental security income (SSI) program

This rule was rescinded and the language found in new OAC rule 5160:1-3-02.6.

5160:1-3-02.3 Medicaid: coverage for individuals receiving supplemental security income (SSI)

This new rule describes eligibility requirements for a new Medicaid covered group for individuals who receive SSI benefits.

5160:1-3-02.4 Medicaid: SSI recipients qualifying under section 1619 of the Social Security Act for continued medicaid coverage

This rule was rescinded and the language found in new OAC rule 5160:1-3-02.8.

5160:1-3-02.4 Medicaid: coverage for the categorically needy

This new rule describes eligibility requirements for a new Medicaid covered group for individuals who have been determined disabled and meet the income and resource criteria for SSI but do not receive SSI benefits.

5160:1-3-02.6 Medicaid: grandfathering provisions and deemed eligibility

This new rule replaced OAC rules 5160:1-3-02.3 5160:1-3-03.2 and added language on deemed eligibility groups.

5160:1-3-02.8 Medicaid: supplemental security income (SSI) recipients qualifying under section 1619 of the Social Security Act for continued medical assistance coverage

This new rule replaced OAC rule 5160:1-3-02.4 and removed language on spenddown.

5160:1-3-02.9 Medicaid: disability determination process

This rule was rescinded and made new to amend language on when to submit a disability packet, amended language on social security administrative appeals, removed language on presumptive disability, removed language on continued disability review, and reorganized language for clarity.

5160:1-3-03.2 Medicaid: treatment of social security payments made to certain individuals who are made ineligible for SSI due to such payments

This rule is rescinded and the language found in new OAC rule 5160:1-3-02.6.

The information is available on the Internet and may be accessed at www.medicaid.ohio.gov.