

Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

Ticket to Work Basic

MEDICAID | Medicaid State Plan | Eligibility | OH2020MS00020 | OH-20-0015

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

Package Header

Package ID	OH2020MS00020	SPA ID	OH-20-0015
Submission Type	Official	Initial Submission Date	6/30/2020
Approval Date	9/23/2020	Effective Date	4/1/2020
Superseded SPA ID	07-021, 15-015		
	User-Entered		

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

Ticket to Work Basic

MEDICAID | Medicaid State Plan | Eligibility | OH2020MS00020 | OH-20-0015

Package Header

Package ID	OH2020MS00020	SPA ID	OH-20-0015
Submission Type	Official	Initial Submission Date	6/30/2020
Approval Date	9/23/2020	Effective Date	4/1/2020
Superseded SPA ID	07-021, 15-015		
	User-Entered		

A. Characteristics

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.

Ticket to Work Basic

MEDICAID | Medicaid State Plan | Eligibility | OH2020MS00020 | OH-20-0015

Package Header

Package ID OH2020MS00020	SPA ID OH-20-0015
Submission Type Official	Initial Submission Date 6/30/2020
Approval Date 9/23/2020	Effective Date 4/1/2020
Superseded SPA ID 07-021, 15-015 User-Entered	

B. Financial Methodologies

1. SSI methodologies are used in calculating household income and resources. 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:

- Income from household members is disregarded.
 - Income of the spouse 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.
- A specified amount of earned income is disregarded.

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

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 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.

Ticket to Work Basic

MEDICAID | Medicaid State Plan | Eligibility | OH2020MS00020 | OH-20-0015

Package Header

Package ID OH2020MS00020	SPA ID OH-20-0015
Submission Type Official	Initial Submission Date 6/30/2020
Approval Date 9/23/2020	Effective Date 4/1/2020
Superseded SPA ID 07-021, 15-015 User-Entered	

C. Income Standard Used

The income standard for this group is:

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

FPL 250.00%

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

Ticket to Work Basic

MEDICAID | Medicaid State Plan | Eligibility | OH2020MS00020 | OH-20-0015

Package Header

Package ID	OH2020MS00020	SPA ID	OH-20-0015
Submission Type	Official	Initial Submission Date	6/30/2020
Approval Date	9/23/2020	Effective Date	4/1/2020
Superseded SPA ID	07-021, 15-015		
	User-Entered		

D. Resource Standard Used

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

Ticket to Work Basic

MEDICAID | Medicaid State Plan | Eligibility | OH2020MS00020 | OH-20-0015

Package Header

Package ID	OH2020MS00020	SPA ID	OH-20-0015
Submission Type	Official	Initial Submission Date	6/30/2020
Approval Date	9/23/2020	Effective Date	4/1/2020
Superseded SPA ID	07-021, 15-015		
	User-Entered		

E. Premiums and Cost Sharing

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

Ticket to Work Basic

MEDICAID | Medicaid State Plan | Eligibility | OH2020MS00020 | OH-20-0015

Package Header

Package ID	OH2020MS00020	SPA ID	OH-20-0015
Submission Type	Official	Initial Submission Date	6/30/2020
Approval Date	9/23/2020	Effective Date	4/1/2020
Superseded SPA ID	07-021, 15-015		
	User-Entered		

F. Additional Information (optional)

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.