
OHIO MEDICAID 101

November 20, 2024



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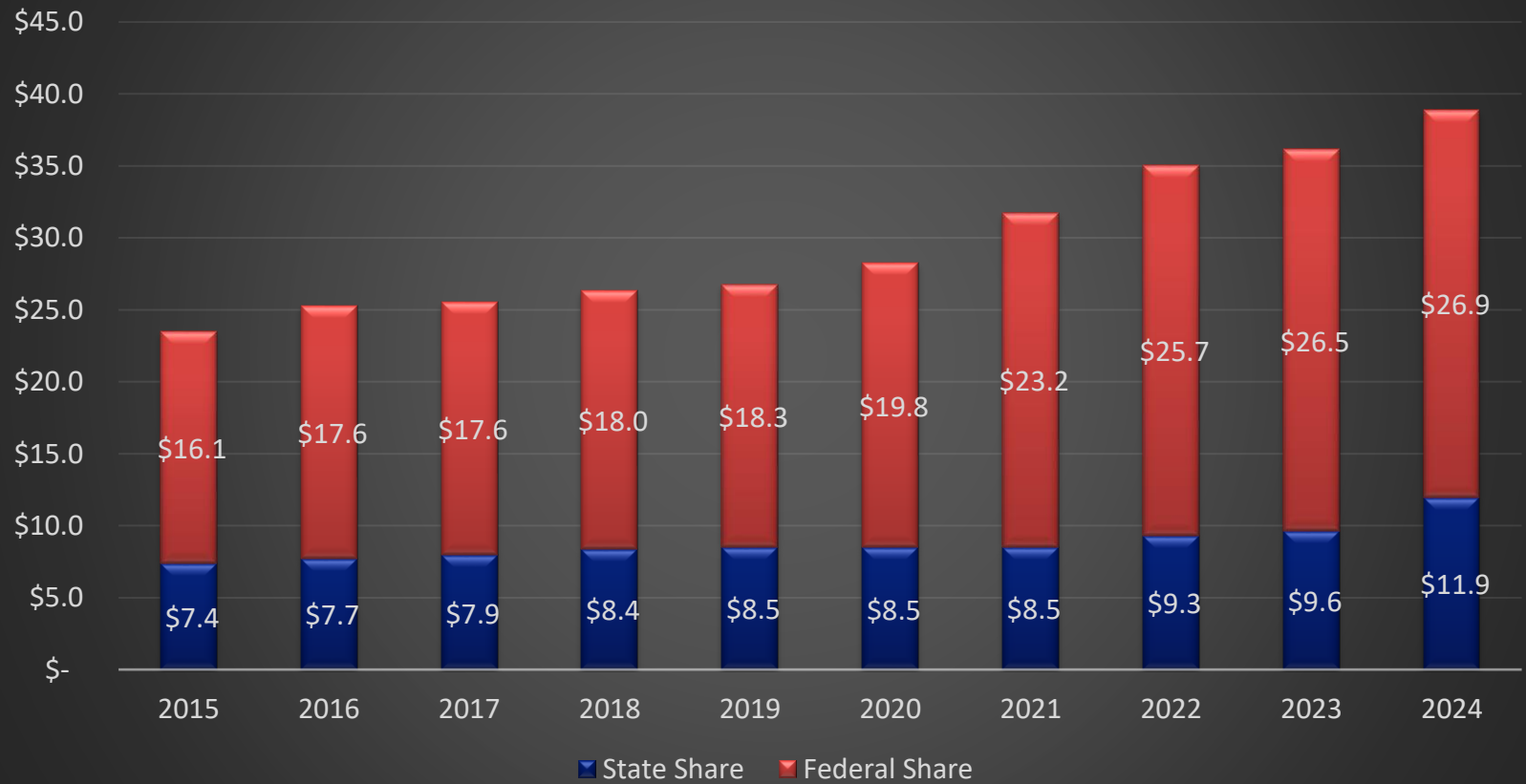
WHY MEDICAID IS IMPORTANT

Ohio's Medicaid Program is the:

- Largest health insurer in the state
- Largest payer of long-term care in the state
- Largest state program in Ohio

MEDICAID EXPENDITURES GROW MORE THAN 65% OVER PAST DECADE

Medicaid Expenditures (\$ in billions, SFY)



AGENDA

- Overview
- Eligibility
- Benefits
- Delivery Systems
- Budget

OVERVIEW

- Medicaid Program Description
- Administration
- Medicaid and Medicare

MEDICAID PROGRAM DESCRIPTION

- Congress established Medicaid in 1965
- Medicaid provides:
 - Health care services to the poor
 - Health care and long-term care services to the elderly and disabled
- Eligible individuals entitled to receive services
- Federal government sets guidelines
- Following guidelines, states administer their own Medicaid programs

ADMINISTRATION

Ohio Department of Medicaid (ODM) is the single state agency administering Medicaid in Ohio. ODM contracts with other state agencies, including:

- Developmental Disabilities – provides institutional and community-based services to individuals with intellectual disabilities
- Aging – administers programs for older Ohioans
- Education and Workforce – administers the Medicaid Schools Program
- Higher Education – provide workforce development support

ADMINISTRATION - (CONTINUED) ODM CONTRACTS WITH OTHER STATE AGENCIES, INCLUDING:

- Health – surveys and certifies facilities (e.g. nursing homes)
- Job and Family Services – reimburses local administration and transportation
- Mental Health and Addiction Services – administers programs related to behavioral health
- State Board of Pharmacy – integration of its prescription reporting system into electronic medical records
- Children and Youth – administers programs related to children services

ADMINISTRATION

Local administration

- County departments of job and family services
- County boards of developmental disabilities
- Area agencies on aging
- County behavioral health boards
- Schools

MEDICAID AND MEDICARE: WHAT'S THE DIFFERENCE?

Attribute	Medicaid	Medicare
Administration	State	Federal
Funding source(s)	State, federal, local	Federal
Population served	Kids, parents, adults, disabled and elderly	Elderly (65+) and some disabled
Income limits	Low-income	No limits
Coverage	Varies by state	Standard across nation
Care	Primary, acute, and long-term	Primary and acute

ELIGIBILITY

- Eligibility Requirements
- Eligible Populations

ELIGIBILITY REQUIREMENTS

To be eligible for Medicaid, one must:

- Generally be a US citizen and an Ohio resident
- Meet income requirements – different income limitations for different populations
- Asset limitations
 - Applies only to aged, blind, and disabled population
 - \$2,000 for an individual and \$3,000 for a couple

FEDERAL POVERTY LEVEL (FPL), 2024

Family Size	100% FPL	200% FPL
1	\$15,060	\$30,120
2	\$20,440	\$40,880
3	\$25,820	\$51,640
4	\$31,200	\$62,400
5	\$36,580	\$73,160

ELIGIBILITY GROUPS IN OHIO

- Children, parents, pregnant women, and adults, as well as disabled and elderly individuals at different income levels are eligible for Ohio's Medicaid program
- Three major groups receiving full benefits:
 - Covered Families and Children (CFC)
 - Aged, Blind, and Disabled (ABD)
 - Affordable Care Act expansion adults (Group VIII)

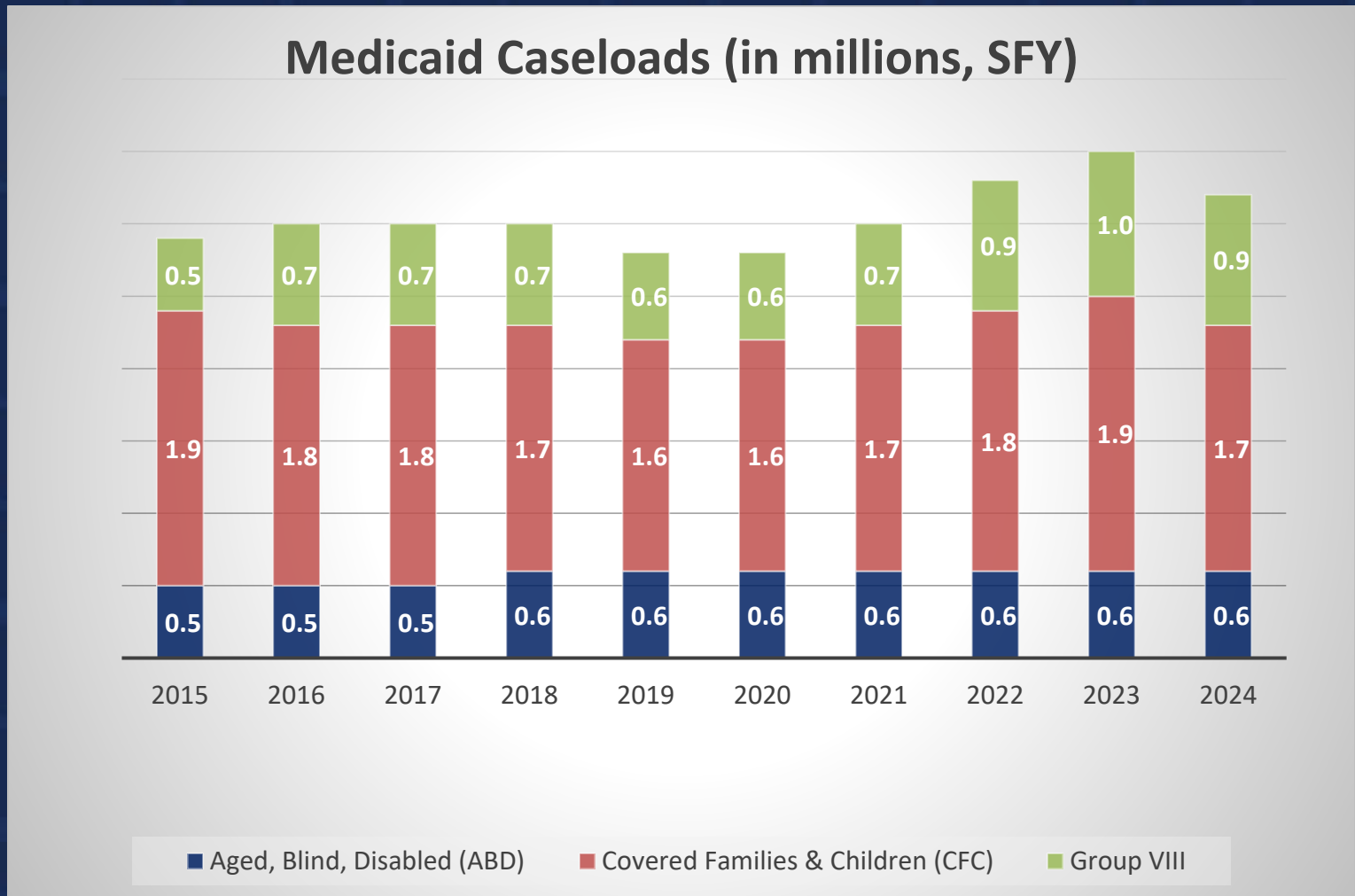
FAMILIES, CHILDREN, AND ADULTS 2024 MONTHLY FINANCIAL ELIGIBILITY

Eligible Populations	Income Limits (FPL)	Monthly Income	
		Family of 1	Family of 3
Parents/Care-taker Relatives	90%	\$1,130	\$1,937
Adults (age 19-64)	133%	\$1,670	\$2,862
Children with Insurance	156%	\$1,958	\$3,357
Pregnant Women	200%	\$2,510	\$4,304
Children without Insurance	206%	\$2,586	\$4,433

AGED, BLIND, OR DISABLED INDIVIDUALS 2024 MONTHLY FINANCIAL ELIGIBILITY

Eligible Populations	Income Limits	Monthly Income	
		Family of 1	Family of 2
Aged, Blind, or Disabled Individuals	SSI Benefit Rate	\$943 Individual, \$1,415 Couple	
Medicaid Buy-In for Workers with Disabilities	250% FPL	\$3,138 Individual	
Qualified Medicare Beneficiary (QMB)	100% FPL	\$1,255	\$1,704
Specified Low-Income Medicare Beneficiary (SLMB)	120% FPL	\$1,506	\$2,044
Qualified Individuals (QI-1)	135% FPL	\$1,695	\$2,300

PANDEMIC CASELOAD INCREASES BEGIN TO EBB



BENEFITS

- Mandatory Benefits
- Optional Benefits

Mandatory Benefits

- Certified pediatric and family nurse practitioner services
- EPSDT: Early and Periodic Screening, Diagnostic, and Treatment Services (Ohio Healthchek)
- Family planning services
- Federally qualified health center services
- Freestanding birth center services
- Home health services
- Inpatient hospital services
- Laboratory and X-ray services
- Nursing facility services
- Certified pediatric and family nurse practitioner services
- Outpatient hospital services
- Physician services
- Rural health clinic services
- Transportation to medical care
- Tobacco cessation counseling for pregnant women
- Nurse midwife services

Optional Benefits

- Ambulance and ambulette services
- Case management
- Chiropractic care
- Community alcohol and drug addiction treatment
- Clinic services
- Community behavioral mental health care
- Dental Services
- Dentures, prosthetics, and eyeglasses
- Durable medical equipment and supplies
- Home & community-based services
- Optometry services
- Personal care
- TB related services
- Hospice
- Intermediate care facility
- Occupational therapy
- Physical therapy
- Podiatry services
- Prescription drugs
- Private duty nursing services
- Speech, hearing, and language disorder services
- Respiratory care services
- Other diagnostic, screening, preventive and rehabilitative services
- Other practitioner services
- Targeted case management
- Vision care
- And other approved services

DELIVERY SYSTEMS

- Fee for Service
- Managed Care

FEE FOR SERVICE

- The state contracts directly with providers
- Enrollees can receive services from any provider that contracts with Ohio Medicaid
- State pays providers directly for services

MANAGED CARE

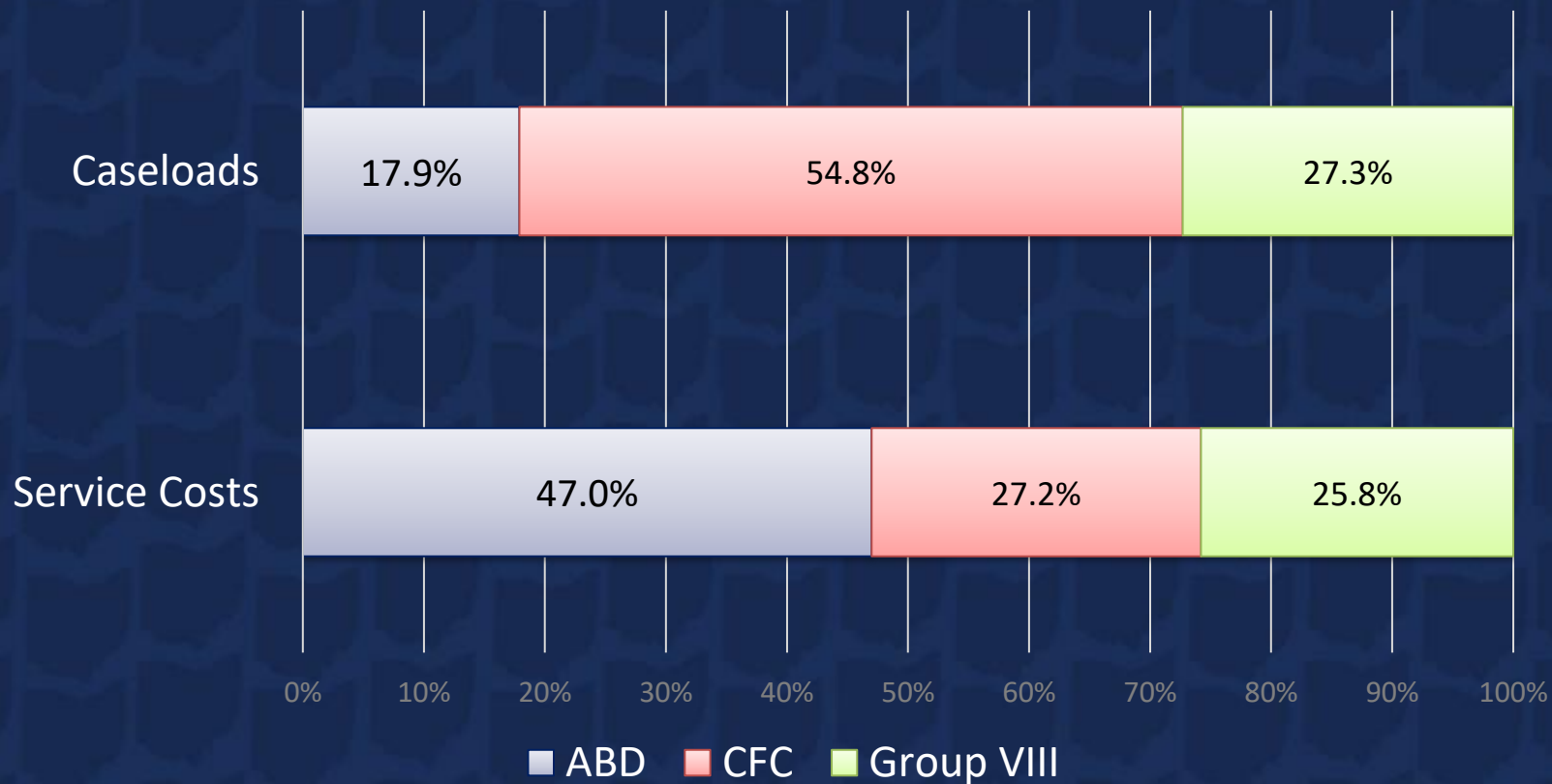
- Managed Care Organizations (MCOs) contract with providers
- Eligible enrollees must receive services from providers within their MCO's provider network
- State pays a monthly capitated rate for each enrolled individual
- MCOs assume risk for each enrollee's health care
- Most of Ohio's Medicaid population is enrolled in a managed care plan

BUDGET

- Spending
- Funding

ABD ACCOUNT FOR 18% OF MEDICAID CASELOADS BUT 47% OF SERVICE COSTS

Caseloads and Service Costs by Population Category, SFY 2023



MEDICAID SERVICE SPENDING BY PAYMENT CATEGORY

SFY 2024



Managed Care

DDD Services

All Other Services

Nursing Facilities

Hospitals

Home and Community Services

FEDERAL FUNDING

Federal Medicaid Assistance Percentages (FMAP)

- Percentage of Medicaid expenditures that the federal government reimburses
- FMAP varies by state and type of expenditure (service vs. administration)
- FMAP is based on the per capita income of each state, relative to the country's per capita income
- Ohio's rate for federal fiscal year (FFY) 2025 is 64.60%

STATE SOURCES OF FUNDING

- General Revenue Fund
- Provider fees and assessments
 - Hospitals
 - Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs/IID)
 - Managed Care Organizations
 - Nursing Facilities
- Rebates from prescription drug purchases

LEGISLATIVE BUDGET OFFICE

Ivy Chen, 644-7764, ivy.chen@lsc.ohio.gov

Nelson Lindgren, 387-2469, nelson.lindgren@lsc.ohio.gov

Brandon Minster, 387-1274, Brandon.minster@lsc.ohio.gov

