

FACT SHEET

Medicaid

Medicaid is a state and federally funded health care program that provides assistance to certain low-income and medically vulnerable people. Ohioans who are eligible for Medicaid are entitled to all medically necessary services. The state can not limit the number of eligible persons enrolled in Medicaid or deny access to medically necessary services in order to control costs.

Who is covered by Medicaid?

Ohio's Medicaid program provides health care coverage to people who meet certain eligibility requirements. Depending on income, insurance status may affect eligibility and some consumers may be required to pay monthly premiums or copays. The following individuals who meet eligibility criteria are covered by Medicaid:

- Children younger than age 19
- Pregnant women
- Families with children younger than age 18
- Adults age 65 and older may be eligible. Ohioans of any age who have disabilities, (including those who are legally blind) may also qualify for Medicaid.
- Individuals with low income and also Medicare eligible can receive help with all or part of their Part-B premiums, coinsurance and/or other deductible through the Medicare Premium Assistance Program. The amount of assistance available per individual depends on their income.

Eligibility

Ohio county departments of job and family services determine eligibility for Medicaid programs. Some programs require individuals to have a face-to-face meeting in order to apply for Medicaid; for other programs, an application by fax or mail is permissible. Individuals may call the Medicaid Consumer Hotline at 1-800-324-8680/TTY 1-800-292-3572 for information on applying for Medicaid and for the location of their county job and family services office.

How do consumers receive Medicaid services?

Medicaid provides health care services through both a managed care or fee-for service system. Each delivery system provides all medically necessary primary care, specialty care, emergency care and preventive health care services. Medicaid also provides home health care and facility-based services for consumers requiring a long-term care benefit package.

What services does Medicaid cover?

Ohio's Medicaid program includes services mandated by the federal government as well as some optional services Ohio has elected to provide. Some services are limited by dollar amount, the number of visits per year, or the setting in which they are provided. With some exceptions, medically necessary services are available to all Medicaid consumers. For a list of Medicaid services, go to: <http://jfs.ohio.gov/OHP/consumers/benefits.stm>

For more information about Ohio Medicaid, go to: <http://jfs.ohio.gov/OHP/>.