



Medicaid Covers More Low-Income Ohioans Including Community Behavioral Health (CBH) Services

On January 1, 2014, the Ohio Department of Medicaid expanded Medicaid eligibility to a new group of Ohioans: adults (between age 19 to 64) whose income is between 0 – 133% of the Federal Poverty Level (FPL) and who are not eligible for another Medicaid eligibility category. This expanded eligibility includes, parents whose income is between 91 – 133% FPL.

Individuals enrolled in the Medicaid expansion category will be enrolled into one of Ohio’s Medicaid managed care plans, all of whom are now serving clients in every Ohio County. For more information about Ohio’s Medicaid managed care plans visit this link in the Ohio Department of Medicaid web site:

<http://medicaid.ohio.gov/PROVIDERS/ManagedCare.aspx>

Monthly Income thresholds = 133% FPL *		Community Behavioral Health Services covered for the Medicaid Expansion Population	
HOUSEHOLD SIZE	Monthly 133% FPL	Alcohol and Other Drug	Mental Health
1	\$1,294	Ambulatory Detoxification	BH Counseling – Group
2	\$1,744	Assessment	BH Counseling – Individual
3	\$2,194	Case Management	CPST – Group
4	\$2,644	Crisis Intervention	CPST – Individual
5	\$3,094	Group Counseling	Crisis Intervention
6	\$3,544	Individual Counseling	Mental Health Assessment
		Intensive Outpatient	Partial Hospitalization
		Laboratory Urinalysis	Pharmacological Management
		Medical/Somatic	Psychiatric Diagnostic Interview
		Methadone Administration	Health Home

* The Affordable Care Act made significant changes in how income is counted when determining eligibility for public benefits, including Medicaid. People may be eligible even at income levels ABOVE 133% of FPL due to a 5% income disregard or other individual circumstances. If someone or their household has income CLOSE to the levels shown on this chart, they should contact their local County Department of Job and Family Services for eligibility determination. Contact information for Ohio CDJFS offices is here: http://jfs.ohio.gov/County/County_Directory.pdf

Benefit Limits for Community Behavioral Health Services:

Ohioans who are eligible under the Medicaid expansion ARE NOT subject to the established CBH service limits EXCEPT for CPST which is still limited to 104 annual hours, with more hours available if prior authorized. All Medicaid enrolled Ohioans including those in the Medicaid expansion category, may request additional CPST hours through the existing Prior Authorization process managed by Permedion. In addition provider payment reductions remain in place for Case Management and CPST services in excess of 1.5 hours per person, per day by the same provider.

Questions regarding the Medicaid Expansion population and their CBH service benefit may be directed to the Ohio Medicaid provider call center at 1-800-686-1516.