SSDI WORK INCENTIVES

Background
The federal Ticket to Work and Work Incentives Improvement Act of 1999 allows states to provide Medicaid to workers with disabilities. Historically, people with disabilities were often discouraged from working because their earnings and resources made them ineligible for Medicaid health coverage. On June 30, 2007, House Bill 119 was signed into Ohio law creating the Medicaid Buy-In for Workers with Disabilities (MBIWD) program. Enrollment in the MBIWD program began April 1, 2008.

What is MBIWD?
MBIWD is an Ohio Medicaid program that provides health care coverage to working Ohioans with disabilities. MBIWD was created to encourage Ohioans with disabilities to work and still keep their health care coverage.

Who is eligible?
To qualify for MBIWD, a person must:
• Be a U.S. citizen or meet citizenship requirements;
• Be a resident of Ohio;
• Be 16 to 64 years old;
• Have a disability as defined by the Social Security Administration (SSA) or be eligible under the MBIWD medically improved category;
• Be employed in paid work (includes part-time and full-time work);
• Pay a premium (if applicable);
• Meet certain financial criteria.
Financial Eligibility Criteria
Income and resources (e.g., cash, stocks, bonds) are used to determine eligibility for MBIWD. The following financial criteria must be met for MBIWD:

- After income deductions, the applicant’s annual income must be less than or equal to 250% of the federal poverty level (FPL);
- Resources must not exceed $12,555. (This resource limit is adjusted annually.)

Applicants with annual income greater than 250% of federal poverty level should still apply for MBIWD because certain deductions are given. (Anyone applying for MBIWD should consult a Benefits Specialist first.)

Premiums
Monthly premiums are required for those eligible for MBIWD with an annual gross income greater than 150% FPL. These enrollees will be sent a monthly statement with the monthly premium amount. To obtain and maintain health coverage, the full amount of the premium must be received by the due date or it will be considered a non-payment. Late payments will be applied to the most delinquent premium. Those who do not pay their premium for two consecutive months will be subject to MBIWD termination. To re-enroll in MBIWD, an individual must pay all MBIWD delinquent premiums and meet eligibility requirements.

How Premiums are Calculated
Premiums are determined through a set of calculations based on income, family size, and certain standard deductions (e.g., health insurance premiums, impairment-related work expenses, etc.). Individuals should direct questions about standard deductions or their premium calculation to their Benefits Specialist.

FREQUENTLY ASKED QUESTIONS
How do applicants apply?
Applicants who are new to Medicaid should contact their local county Job and Family Services (JFS) Board. Existing Medicaid consumers interested in MBIWD should contact their caseworker or the Medicaid Consumer Hotline: 1-800-324-8680. No face-to-face interview is required for this program.

Can MBIWD consumers receive long-term care and waiver services (e.g., nursing home services, assisted living, etc.)?
Yes. Consumers are permitted to receive long-term care and waiver services while enrolled in MBIWD.
Do MBIWD consumers have to pay a spenddown?
No. There is no spenddown for those enrolled in MBIWD. (Depending on a person’s situation, a small premium may have to be paid.)

What happens if an MBIWD consumer loses disability status?
If an MBIWD consumer loses disability status, he/she may continue to receive health care coverage through MBIWD’s medically improved category. To qualify for the medically improved category, consumers must meet certain conditions. Ask a caseworker for more information.

What happens if an MBIWD consumer loses his/her job?
MBIWD consumers that lose their job will have up to six months of MBIWD coverage if they meet certain conditions. (Please note: Premiums are based on the MBIWD consumer’s income. If there is a reduction in income, there will also be a reduction in the premium amount.)

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