

Changes in Medicaid

In December 2022, Congress passed the Consolidated Appropriations Act (CAA). Per the CAA, the continuous coverage condition that prohibited states from disenrolling members from Medicaid will expire on March 31, 2023. This means that states will resume routine eligibility operations. All Ohio Medicaid members will have their eligibility re-determined and if found ineligible, will be dis-enrolled from the program.

What does this mean for you?

- Make sure you meet current eligibility guidelines for the Medicaid you are enrolled in. Get onto the Department of Medicaid website to review eligibility requirements.
- Contact your ODJFS case worker to discuss your current eligibility status.
- If you are working with a Work Incentive Planning and Assistance (WIPA) program in your area contact your CWIC to discuss or if you are eligible for WIPA services, (WIPA Information) which means you are working, receiving a disability benefit from SSA, and in the age range of 14-64, contact the WIPA in your area to discuss your work situation.

What happens if I get disenrolled?

- You may be able to contact 211 in your county to see if you qualify for any supplemental services in the lapse of Medicaid services.

Best Practices

- Keep all mail you receive from ODJFS and SSA.
- Keep ODJFS and SSA updated on address, phone number, and income changes.

