

Medicaid Buy-In for Workers with Disabilities

Submitted March 1, 2019

The Ohio Department of Medicaid

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This report is submitted in accordance with Ohio Revised Code Section 5162.133 which states:

"Not less than once each year, the medicaid director shall submit a report on the medicaid buy-in for workers with disabilities program to the governor, general assembly, and joint medicaid oversight committee. The copy to the general assembly shall be submitted in accordance with section 101.68 of the Revised Code. The report shall include all of the following information:

- (A) The number of individuals who participated in the medicaid buy-in for workers with disabilities program;
- (B) The cost of the program;
- (C) The amount of revenue generated by premiums that participants pay under section 5163.094 of the Revised Code;
- (D) The average amount of earned income of participants' families;
- (E) The average amount of time participants have participated in the program;
- (F) The types of other health insurance participants have been able to obtain."

Data included in the report is based on the state fiscal year (SFY) 2018, which is July 1, 2017 through June 30, 2018.

Background

On June 30, 2007, House Bill 119 was signed into law creating the Medicaid Buy-In for Workers with Disabilities (MBIWD) program in Ohio. The program is the result of a federal act, the Ticket to Work and Work Incentives Improvement Act of 1999, which allows states to expand the availability of health care coverage for individuals with disabilities. Under MBIWD, certain individuals can increase their income and resources without the risk of losing coverage for their medically necessary care and supports.

Unlike most employer sponsored health insurance benefits, Medicaid offers unique home-based supports and personal care services which people with severe disabilities need to maintain their independence. In the past, people with disabilities were often discouraged from working because their earnings made them ineligible for Medicaid coverage.

The Ohio Revised Code (5160.02, 5163.02, and 5163.091 - 5163.098) details the parameters of MBIWD in Ohio. The cites along with 5160:1-5-03 of the Administrative Code include program qualifications and eligibility requirements for the MBIWD program as managed by the Ohio Department of Medicaid (ODM) with the help of the Ohio Department of Developmental Disabilities (DODD) and the Opportunities for Ohioans with Disabilities (OOD).

Enrollment in Ohio's MBIWD program that began April 1, 2008 continues to date. Since 2015, the program has experienced some minor fluctuations in enrollment, yet without any program disruptions.

Participants and Enrollment

Individuals enrolled in the MBIWD program:

- meet certain citizenship requirements;
- are residents of Ohio;
- meet the definition of disability as used by the Social Security Administration (SSA) regardless of whether the individual is receiving SSI or SSDI;
- are at least sixteen years of age but younger than sixty-five years of age;
- meet financial criteria prescribed in 5160:1-5-03(D) of the Administrative Code;
- pay a premium if applicable and as defined and calculated pursuant to 5160:1-5-03(E) of the Administrative Code; and
- are employed in paid work (includes part-time and full-time work).

11,257 participants who met the noted requirements were enrolled in MBIWD at some point during SFY 2018. This is 4% decrease over SFY 2017. Program enrollment has increased 26% since the inception of the program. The table below details the number of participants, as well as the total and average number of months participants were enrolled in MBIWD.

State Fiscal Year	Number of Participants	Total Member Months	Average Member Months
2011	8,921	66,547	7.5
2012	10,591	88,288	8.3
2013	11,854	102,689	8.7
2014	11,626	110,380	9.5
2015	11,899	115,684	9.7
2016	12,728	122,400	9.6
2017	11,730	114,996	9.8
2018	11,257	105,652	9.4

Program Cost and Revenue

The cost of the MBIWD program in SFY 2018 was reported to be \$328,870,196.17, based on Medicaid claims for individuals enrolled in the program.

Participants with incomes that exceed 150% FPL are required to pay monthly premiums. Ohio Administrative Code Rule 5160:1-5-03 establishes the criteria, including all the Medicaid income eligibility requirements set forth in Administrative Code Rule 5160:1-3-03.2.

State Fiscal Year	Total Program Cost	Revenue Generated Through Premiums	
2011	\$127,930,817.88	\$524,826.96	
2012	\$152,548,489.64	\$572,245.80	
2013	\$196,472,432.96	\$751,626.00	
2014	\$216,850,503.80	\$846,155.00	
2015	\$232,577,008.00	\$927,706.00	
2016	\$375,488,332.32	\$962,704.02	
2017	\$379,657,179.45	\$886,087.30	
2018	\$328,870,196.17	\$672,820.80	

Earned Income

Participants in the MBIWD program work sporadically or parts of the year, with the average enrollment period for SFY 2018 being 9.4 months. Consequently, the annual average earned income per participants families is underrepresented and not accurately or completely recorded. ODM does not, and is not required to, maintain information regarding household or additional familial income.

Per Ohio Administrative Code 5160:1-5-03, MBIWD enrollees may earn up to 250 percent of the federal poverty level (FPL) after income deductions. For SFY 2018, participants may also have up to \$11,901 in resources. This will increase in 2019 to \$12,175.

STABLE accounts are one resource available to individuals. These accounts are made possible by the Achieving a Better Life Experience (ABLE) Act that allows individuals with disabilities the ability to save and invest up to \$15,000 per year without losing government benefits such as Medicaid or Supplemental Security Income. STABLE Accounts were created by the Office of the Ohio Treasurer to offer savings and investment solutions for people with disabilities. The Office of the Ohio Treasurer offers STABLE Accounts to all people with disabilities, regardless of their state of residence.

- Nationwide enrollment for individuals with disabilities
- Tax-free savings plan for disability-related expenses
- Save and invest without losing needs-based benefits

Money in a STABLE account may be used to pay for medical and nonmedical expense related to an individual's disability, such as living expenses, transportation, education, assistive technology, employment training, and personal support services.

Other Health Insurance

One of the objectives of MBIWD is to encourage individuals to pursue commercial health insurance through employers or other third-party insurers, when possible, in order to reduce the overall cost of the program. During SFY 2018, over 93% of participants in MBIWD had either supplemental insurance or were dually eligible for Medicare premium assistances at some point during their eligibility period.* Medicare premium assistance is a program whereby the state Medicaid program pays the cost of Medicare insurance premiums for certain individuals based on their eligibility for both programs. More detailed information about the Medicare Premium Assistance Program (MPAP) can be found online at mediciad.ohio.gov/MPAP.

^{*} This percentage may include duplicate enrollments.