

Ohio Waiver: Ohio Group VIII Work Requirement and Community Engagement Section 1115 Demonstration

Overview

On March 15, 2019, the Centers for Medicare & Medicaid Services (CMS) approved the Ohio Group VIII Work Requirement and Community Engagement Section 1115 Demonstration. The demonstration authorized a work and community engagement requirement as a condition of eligibility for the new adult group.

The information in this fact sheet describes Ohio's demonstration as approved. However, the Biden Administration withdrew approval for the demonstration on August 10, 2021, meaning the demonstration and its policies are no longer active (CMS 2021).

Demonstration Goals

The Ohio Group VIII Work Requirement and Community Engagement Section 1115 Demonstration seeks to promote economic stability and financial independence and to improve health outcomes. These goals will inform the hypotheses in the state's evaluation design plan and include, but are not limited to, determining whether the demonstration aided in:

- improving health outcomes;
- transitioning beneficiaries to employer-based coverage; and,
- increasing the rate of sustained employment among the new adult group.

Populations Included

The demonstration applies to the new adult group – adults eligible through the Medicaid expansion authorized in the Patient Protection and Affordable Care Act (ACA, P.L. 111-148, as amended) (also known as Group VIII) with incomes at or below 133 percent of the federal poverty level (FPL).¹



Work and Community Engagement Requirement

Ohio will require beneficiaries ages 19 through 49 to fulfill work and community engagement requirements.² The state expects to implement this requirement in January 2021. Upon implementation, the state will notify beneficiaries of whether they are required to participate or whether they are exempt. New beneficiaries will receive notice of the requirement at eligibility determination and existing beneficiaries will receive notice upon renewal. Non-exempt beneficiaries must participate in qualifying activities for a minimum of 80 hours per month. They will be given 60 days to report compliance in person, over the phone, online, or by mail. Reporting occurs only once per year—after this point beneficiaries are not required to report compliance unless they experience a change in circumstance.³

TABLE 1. Work and Community Engagement Requirement Exemptions and Qualifying Activities

Exempt populations	Non-exempt populations
<p>Beneficiaries who are:</p> <ul style="list-style-type: none"> • pregnant women and women during the 60-day postpartum period • 50 years of age or older • applicants for or recipients of SSI • applicants for or recipients of unemployment compensation • Medicaid eligible but incarcerated • physically or mentally unfit for employment or other community engagement activities • participating in the Specialized Recovery Services Program • caring for a disabled/incapacitated household member • parents, caretakers, or beneficiaries residing in the same household with a child under age 19 • in school at least halftime, including GED programs • participating in SUD treatment • medically frail • exempt from SNAP or TANF work registration or employment and training programs • residents of an Ohio county approved by the USDA for a waiver of the Able-Bodied Adults without Dependents time limit 	<p>Required participation in 80 hours per month of some combination of the following:</p> <ul style="list-style-type: none"> • employment or self-employment or work in exchange for money or goods and services • unpaid work, including formal and informal volunteer, community service, and public service activities • education and training activities • formal and informal job search or job readiness programs (up to 30 days a year, unless combined with another qualifying activity and less than half the hours are spent on job search or job readiness programs) • participation in and compliance with SNAP or TANF work registration or employment and training programs

Notes. SSI is Supplemental Security Income. GED is General Education Development. SUD is substance use disorder. SNAP is Supplemental Nutrition Assistance Program. TANF is Temporary Assistance for Needy Families. USDA is U.S. Department of Agriculture.

Source. CMS 2019.

Penalties for non-compliance. Beneficiaries have a 60 day grace period to verify compliance with the work and community engagement requirement. If the state cannot verify compliance through beneficiary self-attestation or data available through existing state systems, beneficiaries will be disenrolled from Medicaid. Disenrollment is effective the first day of the month following receipt of appropriate notice and



the grace period. Beneficiaries can avoid disenrollment by demonstrating good cause for their failure to comply or meeting criteria for an exemption.⁴ Disenrolled individuals can reapply for Medicaid immediately; prior noncompliance with the work requirement is not considered in future eligibility determinations. Beneficiaries are automatically reenrolled if they apply for and demonstrate good cause, they are determined to qualify for an exemption, or they become eligible through a different pathway.

State assurances. Ohio must make a number of assurances, including maintaining a mechanism to stop payments to managed care plans following disenrollment, ensuring timely and adequate beneficiary notices and outreach, and coordinating compliance with the Supplemental Nutrition Assistance Program (SNAP) and Temporary Assistance for Needy Families (TANF). Ohio must also provide appeal and due process mechanisms, make good faith efforts to connect beneficiaries to existing community supports (e.g., non-Medicaid transportation assistance, child care, and language services), assess areas within the state that have limited employment or educational opportunities to determine further necessary exemptions, monitor exemptions to ensure there is no disparate impact due to race or ethnicity, and provide reasonable modifications for individuals with disabilities.⁵

Additionally, Ohio must submit a community engagement implementation plan to CMS within 90 calendar days of the approval (i.e., by June 13, 2019). The plan must include state definitions (e.g., medically frail, half-time enrollment) and describe reporting processes, application assistance, and coordination with other state agencies. Ohio must submit a monitoring protocol to CMS within 150 calendar days of the demonstration approval (i.e., by August 12, 2019). The protocol must describe both the required quantitative metrics and the operational updates that will be reported.

Benefits

Beneficiaries who are eligible for the demonstration will receive the Ohio state plan benefit package.

Delivery System

Demonstration enrollees receive medical services through the same managed care or fee for service arrangements as currently authorized in the state.

For a summary of the section 1115 demonstrations approved to test new approaches to coverage please see [Testing New Program Features through Section 1115 Waivers](#).

Endnotes

¹ The ACA also set a single income eligibility disregard equal to 5 percentage points of the FPL. For this reason, eligibility is often referred to at its effective level of 138 percent FPL, even though the federal statute specifies 133 percent FPL.



² For information on other states with approved or pending requests to implement work requirements, see [Medicaid Work and Community Engagement Requirements](#).

³ During the annual renewal process, the state will send beneficiaries a prepopulated form to confirm they are still completing qualifying activities.

⁴ Good cause exemptions can be defined by the state; however, at minimum, exemptions must include beneficiaries who are victims of domestic violence, or beneficiaries who experience a hospitalization, serious illness, or have a disability as defined by federal law and were unable to meet requirements because of that disability, or have an immediate family member living in their home who experiences one of these circumstances.

⁵ Reasonable modifications could include providing support services or requiring fewer hours of participation in qualifying work or community engagement activities.

References

Centers for Medicare & Medicaid Services (CMS), U.S. Department of Health and Human Services. 2021. Letter from Chiquita Brooks-LaSure to Maureen Corcoran regarding “CMS letter to state.” August 10, 2021. Baltimore, MD: CMS. <https://www.medicaid.gov/medicaid/section-1115-demonstrations/downloads/oh-work-requirement-community-engagement-state-ltr-08102021.pdf>.

Centers for Medicare & Medicaid Services (CMS), U.S. Department of Health and Human Services. 2019. Section 1115 of the Social Security Act Medicaid demonstration amendment: Ohio group VIII work requirement and community engagement section 1115 demonstration. March 15, 2019. Baltimore, MD: CMS. <https://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Waivers/1115/downloads/oh/oh-work-requirement-community-engagement-ca.pdf>.

