

**Public Notice Summary: Level One Waiver
Level One Waiver Renewal and
Conversion from a 209(b) State to a Section 1634 State**

Introduction

The Level One Waiver is due for renewal by the Centers for Medicare and Medicaid Services (CMS) effective July 1, 2016. A renewal application governing five new waiver years (July 1, 2016 - June 30, 2021) must be submitted to the CMS no later than April 1, 2016. It must include new enrollment and cost neutrality projections.

Additionally, as a result of the new single disability determination process for Medicaid and SSI, Ohio is seeking a Medicaid state plan amendment to adopt criteria authorized in section 1634 of the Social Security Act. The income standard will be raised from 64 percent of the federal poverty level (FPL) to 75 percent FPL, the resource limits will be raised from \$1,500 to \$2,000, people on SSI will automatically become eligible for Medicaid and the spend down process will be eliminated.

The Level One Waiver renewal application must be updated to reflect the State's conversion to section 1634, and it must identify the Medicaid eligibility groups included under section 1634, and include a plan for continued access to services for individuals who have income over the eligibility threshold but otherwise meet the requirements for Medicaid.

The proposed effective date of the waiver renewal application is July 1, 2016.

Renewal Application Summary

Major changes contained in the renewal application include the following:

- Increase the number of unduplicated enrollment projections in Appendix B-3-a.
- New Cost Neutrality Estimates in Appendix J-2-a, -b, -c and -d.
- Appendix C-1/C-3: Summary of Services Covered, amended provider types for residential respite.

The waiver renewal application also documents the conversion from Section 209(b) state, which applies rules that are more restrictive than SSI in determining Medicaid eligibility of SSI beneficiaries, to a Section 1634 state, under which the Social Security Administration determines Medicaid eligibility at the same time that eligibility for SSI benefits is determined. As a result:

- Main 8, Attachment #1 describes the plan to ensure every individual enrolled on the waiver who is potentially impacted by the conversion receives adequate notice of the conversion and potential impact on his or her Medicaid eligibility, is educated on his or

her options, and has access to assistance with establishing a Qualified Income Trust (QIT), also called a Miller Trust.

- Appendix B-4, specifies the Medicaid eligibility groups served in the waiver, under a section 1634 authority.
- Appendix B-5 describes the post-eligibility calculation process, including the spousal impoverishment rules, to determine the amount that the waiver participant is liable to pay for the cost of waiver services.

Finally, the renewal application also contains revised statewide transition plan timelines submitted through the portal on December 3, 2015:

- Ohio Main Attachment #2 reflects updated language of the statewide transition plan.
- Appendix C-5 Main 8.B. Attachment Optional reflects Public Comments on the statewide transition plan from December 2015.