

5160:1-4-03

**MAGI-based medicaid: coverage for Ribicoff and former foster care ~~adults~~children.**

(A) This rule describes ~~medicaid~~the eligibility criteria for applications for medical assistance for individuals:

- (1) Who are ~~age~~age nineteen or twenty years of age ; or
- (2) Who aged out of foster care ~~on their eighteenth birthday~~, are younger than ~~age~~age twenty-six years of age, and are not otherwise eligible under rule 5160:1-4-02 of the Administrative Code for a mandatory category of coverage under the medicaid state plan. An individual who is eligible for coverage both as a former foster care child and under the coverage described in section 1902(a)(10)(A)(i) (VIII) of the Social Security Act (as in effect October 1, 2020) shall be placed in the former foster care eligibility category.

(B) Eligibility criteria for coverage because an individual is ~~age~~age nineteen or twenty years of age in accordance with 42 C.F.R. 435.222 (as in effect ~~July 1, 2014~~October 1, 2020).

- (1) The individual must be ~~age~~age nineteen or twenty years of age.
- (2) The individual's family size and household income must be calculated as described in rule 5160:1-4-01 of the Administrative Code.
- (3) The individual's household income must not exceed forty-four per cent of the federal poverty level for the family size.

(C) Eligibility criteria for coverage because an individual aged out of foster care in accordance with ~~section 1902(a)(10)(A)(i)(IX) of the Social Security Act~~42 C.F.R. 435.150 (as in effect ~~July 1, 2014~~October 1, 2020).

- (1) The individual must:
  - (a) Be at least eighteen years ~~old~~old of age and younger than twenty-six years ~~old~~old of age;
  - (b) Have been in foster care under the responsibility of the state of Ohio on the individual's eighteenth birthday, or at the time of aging out of the state's foster care program;
  - (c) Have been eligible for and enrolled in medicaid while in such foster care; and
  - (d) Cooperate in establishing eligibility, which includes signing and dating the application.

- (2) Under this paragraph, there is no income test for coverage because an individual aged out of foster care.

Effective: 6/1/2021

Five Year Review (FYR) Dates: 3/8/2021 and 06/01/2026

CERTIFIED ELECTRONICALLY

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Certification

05/19/2021

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Date

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