



Medicaid Eligibility Procedure Letter (MEPL) No. 179

Effective Date: March 1, 2024

Issue Date: January 24, 2024

OAC Rules: 5160:1-3-02.1, 5160:1-4-02, 5160:1-4-03, 5160:1-4-04, 5160:1-4-05, and 5160:1-5-03

To: All Medicaid Eligibility Manual Holders

From: Maureen M. Corcoran, Director

Subject: Medicaid: 2024 Federal Poverty Level Income Guidelines

Reason for Change: On January 12, 2024, the United States Department of Health and Human Services updated the federal poverty level (FPL) income guidelines. In accordance with Section 1905(p)(2)(D) of the Social Security Act, the annual cost-of-living adjustment (COLA) is deducted from an individual’s countable income for the Medicare Premium Assistance Programs (MPAP) until the annual federal poverty guidelines take effect.

New Policy: The FPL income guidelines for MAGI-Based Medicaid, Medicaid Buy-in for Workers with Disabilities (MBIWD), and the Medicare Premium Assistance Programs (MPAP) will be changed effective March 1, 2024.

Action Required: Beginning March 1, 2024, the County Department of Job and Family Services (CDJFS) must determine initial and ongoing eligibility for MAGI-Based Medicaid, MBIWD, and MPAP using the following FPL income guidelines:

MAGI-Based Medicaid

2024 Monthly Federal Poverty Level Income Guidelines for MAGI-Based Programs						
Family Size	Individuals Age 19 or 20 44%	Parents or Caretaker Relatives 90%	MAGI Adults 133%	Coverage for Children 156%*	Pregnant Women 200%	Coverage for Children 206%**
1	\$553	\$1,130	\$1,670	\$1,958	\$2,510	\$2,586
2	\$750	\$1,533	\$2,266	\$2,658	\$3,407	\$3,509
3	\$947	\$1,937	\$2,862	\$3,357	\$4,304	\$4,433
4	\$1,144	\$2,340	\$3,458	\$4,056	\$5,200	\$5,356
5	\$1,342	\$2,744	\$4,055	\$4,756	\$6,097	\$6,280
6	\$1,539	\$3,147	\$4,651	\$5,455	\$6,994	\$7,204

*This standard is used for children **with** creditable insurance.

This standard is used for children **without creditable insurance.

Medicaid Buy-in for Workers with Disabilities (MBIWD)

Beginning March 1, 2024, the CDJFS must determine initial and ongoing eligibility for the MBIWD individual using the updated 250% FPL income guideline below:

Individual Income Guideline 250%	\$3,138
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Beginning March 1, 2024, the CDJFS must determine MBIWD premiums using the updated 150% FPL guidelines below:

2024 Monthly FPL Income Guidelines for Premium Calculation	
Family Size	MBIWD 150%
1	\$1,883
2	\$2,555
3	\$3,228
4	\$3,900
5	\$4,573
6	\$5,245

Medicare Premium Assistance Programs (MPAP)

Beginning March 1, 2024, the CDJFS must determine eligibility for MPAP using the FPL guidelines below:

2024 Monthly Federal Poverty Level Income Guidelines for MPAP				
Family Size	Qualified Medicare Beneficiary (QMB) 100%	Specified Low-Income Medicare Beneficiary (SLMB) 120%	Qualified Individual-1 (QI-1) 135%	Qualified Disabled and Working Individual (QDWI) 200%
1	\$1,255	\$1,506	\$1,695	\$2,510
2	\$1,704	\$2,044	\$2,300	\$3,407
3	\$2,152	\$2,582	\$2,905	\$4,304
4	\$2,600	\$3,120	\$3,510	\$5,200
5	\$3,049	\$3,658	\$4,116	\$6,097
6	\$3,497	\$4,196	\$4,721	\$6,994

Ohio Benefits: A mass change will run after adverse action in January but prior to, or on, the last day of adverse action for February, so that MPAP benefits can be impacted as of March 1, 2024. A journal entry will be automatically entered when the Mass Change EDBC Batch was successful. A Notice of Action (NOA) will be generated advising of any changes. An alert or report will be provided for program blocks that are excluded from the Mass Change EDBC Batch. The assigned worker will need to review these cases to determine whether a manual EDBC is needed depending on the fallout reason, issue a manual NOA if there is an eligibility change, and document with a journal entry.

Medicaid Eligibility Procedure Letter No. 173 is obsolete upon the effective date of this MEPL.

This information is available on the Internet. The information may be accessed on the ODM website under the header **Resources for Providers > Policies & Guidelines > Medicaid Eligibility Procedure Letters (MEPLs):**

<https://medicaid.ohio.gov/resources-for-providers/policies-guidelines/medicaid-eligibility-procedure-letters/medicaid-eligibility-procedure-letters>