



# PATIENT LIABILITY & MEDICAID BUY-IN for WORKERS WITH DISABILITIES

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# PATIENT LIABILITY

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## What Is Patient Liability?

### [Ohio Administrative Code 5101:1-39-24:](#)

**defines Patient Liability as “the individuals financial obligation toward the Medicaid cost of care”.**

It is the amount the individual is required to contribute (pay) each month for Medicaid Services in order to maintain Medicaid eligibility.



# PATIENT LIABILITY

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- The amount of the patient liability is determined by the Department of Job and Family Services (JFS). It is calculated based on a formula that considers the individuals available resources, such as income \* and assets.

- $\text{Income minus Deductions} = \text{Patient Liability}$

\*Some types of income are excluded. Contact CDJFS for a list of excluded types of income.



## How often is PL Determined?

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- PL is determined at least once per year in connection with the individuals annual Medicaid redetermination.
- If an individuals resources change during the course of the year, they are required to report the changes to JFS so that his/her PL can be recalculated.



# PATIENT LIABILITY

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## How do I know if someone has a PL and who is responsible for paying PL?

- The County Board of Developmental Disabilities is responsible for sharing Patient Liability information with providers.
- The County Board is notified by the Ohio DoDD if an individual has been assigned a Patient Liability. The County Board then determines which **provider is responsible for deducting the amount of the Patient Liability from their billing for that month. The provider is responsible for collecting the Patient Liability amount from the individual.**
- The Ohio DoDD reviews all Patient Liability claims on a regular basis. If the appropriate amounts have not been deducted, DoDD will deduct all past due Patient Liability amounts from current claims.



# PATIENT LIABILITY

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## **Who do I contact if I have questions about Patient Liability?**

- Questions regarding how to submit claims for individuals with PL should be directed to Provider Support:

Phone: (800)617-6733

E-mail: [Provider.Support@list.dodd.ohio.gov](mailto:Provider.Support@list.dodd.ohio.gov)

- Questions regarding the monthly update of PL reports, or claims adjustments to recoup/refund PL should be addressed to Jessica McGonigle:

Phone: (614)728-0185- (option 5)

E-mail: [Jessica.McGonigle@dodd.ohio.gov](mailto:Jessica.McGonigle@dodd.ohio.gov)

- Questions regarding notification of PL should be directed to Lori Chick

Phone: (216) 736-8363

E-mail: [chick.lori@cuyahogabdd.org](mailto:chick.lori@cuyahogabdd.org)

- Questions related to the calculation of the amount of PL for an individual should be directed to the County Jobs and Family Services (JFS) caseworker.



# Medicaid Buy In for Workers with Disabilities (MBIWD)

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## **What is MBIWD?**

- MBIWD is an Ohio Medicaid program that was created to encourage Ohioans with disabilities to work and still keep their Medicaid coverage.



# Who is eligible for MBIWD?

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To qualify for MBIWD, a person must:

- Be a U.S. citizen
- Be a resident of Ohio
- Be 16-64 years of age
- Have a disability
- Be employed in paid work (full or part time)
- Pay a premium (if applicable)
- Meet certain financial criteria (resources cannot exceed \$10,580<sup>\*</sup>)

<sup>\*</sup> This resource limit is subject to change





# FAQ's

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**Q. How do you apply for MBIWD?**

A. Your JFS caseworker or CCBDD Medicaid Liaison can assist with applying for MBIWD.

**Q. Does the CB notify providers about MBIWD premiums?**

A. No. Invoices for MBIWD premiums are mailed directly to the consumer or to the address listed on the application. A provider may list their address on the application if they want to receive MBIWD statements for a consumer.



## FAQ's

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**Q. Can MBIWD premiums be deducted from billing claims like PL?**

A. No. MBIWD premiums must be paid directly to ODJFS. This amount cannot be deducted from billing claims.

**Q. Does the consumer still have to pay a PL?**

A. No. There is no PL for MBIWD consumers although the report from DoDD may still show an amount in the PL column (see example).



# Medicaid Buy In for Workers with Disabilities (MBIWD)

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## **Who do I contact if I have questions about MBIWD?**

- Questions regarding apply for MBIWD should be directed to the JFS caseworker or CCBDD Medicaid Liaison

### **Medicaid Liaison East- Mahalie Young**

Phone: 216-761-3384

E-mail: [Mahalie.Young@cuyahogabdd.org](mailto:Mahalie.Young@cuyahogabdd.org)

### **Medicaid Liaison West- Sheila Cooney**

Phone: 216-898-0039

E-mail: [Sheila.Cooney@cuyahogabdd.org](mailto:Sheila.Cooney@cuyahogabdd.org)

- Questions regarding calculation of premiums and financial eligibility criteria should be directed to the JFS caseworker.