



Please click on the yellow highlighted areas to go to additional web sites for additional information.

- * <http://jfs.ohio.gov/ohp/consumers/application.stm>
- * <http://jfs.ohio.gov/ohp/consumers/benefits.stm>
- * <http://jfs.ohio.gov/ohp/consumers/familychild.stm>
- * <http://jfs.ohio.gov.ohp/consumer.stm>

Medicaid is a state and federally funded health program for certain low-income and medically vulnerable people. As an entitlement program, those who meet eligibility requirements are guaranteed coverage through the Medicaid program. In Ohio, Medicaid is administered by the Ohio Department of Job and Family Services (ODJFS) via 88 local county department of job and family services.

Medicaid was passed as part of the Social Security Act of 1965 and began in Ohio in 1968. Each state operates its own distinct program within guidelines established per the Social Security Act. The federal government plays a very active oversight role through the Centers for Medicare and Medicaid Services, part of the U.S. Department of Health and Human Services.

Ohio Medicaid provides coverage to the following:

- Children (up to age 19)
- Pregnant Women
- Families with children under age 18
- Adults age 65 and over
- Individuals who are legally blind
- Individuals with disabilities
- Certain women screened for breast and/or cervical cancer under the Center for Disease Control and Prevention's Breast & Cervical Cancer Early Detection Program



To qualify for Medicaid, a person must:

- be a U.S. citizen or meet Medicaid citizenship requirements;
- be an Ohio resident
- have or get a social security number; and
- meet certain financial requirements

Ohio Medicaid Benefits

Ohio's Medicaid program provides a rich package of services that includes preventive care for women and children, community mental health/alcohol and drug addiction treatment, and home care for people with serious disabilities, as well as doctor visits, hospitalization, nursing home care, and many other services. Some services are limited by dollar amount, number of visits per year, or setting in which they can be provided. With some exceptions, all services are available as medically necessary to everyone enrolled in Medicaid statewide.

Alphabetical List of Benefits

- Ambulance/ambulette services
- Chiropractic services (children only)
- Community alcohol and drug addiction services
- Community mental health services
- Dental services
- Durable medical equipment
- Family planning services and supplies
- Home and community-based services waivers (restricted enrollment)
- Home health services
- Hospice
- Inpatient hospital services
- Lab and X-ray services
- Nursing home care
- Nurse-midwife, certified family nurse practitioner, and certified pediatric nurse practitioner services
- Outpatient services, including Rural Health Clinics and Federally Qualified Health Centers (FQHCs)
- Physical therapy, occupational therapy, and speech therapy
- Physician services
- Podiatry
- Prescription drugs
- Screening and treatment services to children under age 21 under the HEALTHCHEK (EPSDT) program
- Transportation to medical appointments
- Vision care, including eyeglasses

