

State/Territory: Ohio

Citation: Groups Covered

B. Optional Groups Other Than the Medically Needy (Continued)
1902(a)(10)(A)(ii)(XXI)
1902(ii)

- 23. Family planning services for non-pregnant individuals not otherwise eligible.
 - Individuals who are *not* pregnant and whose income does not exceed the State established income standard of 200% of the Federal Poverty Level. This amount does not exceed the highest income limit for pregnant women in this State Plan, which is 200% of the Federal Poverty Level.

In determining eligibility for this group, the State applies the same standard that is used for pregnant women, which increases the family size by one.

- In determining eligibility for this group, the State considers only the income of the applicant or recipient.

Note: Services are limited to family planning services and family planning-related services as described in section 4.c(ii) of Attachment 3.1-A.

1920C

Presumptive Eligibility for Family Planning:

- The State provides a period of presumptive eligibility for family planning services to individuals determined by a qualified entity, based on preliminary information from the individual, describe in the group the State has elected to make eligible under the above option. The period of presumptive eligibility ends on the earlier of the date a formal determination of Medicaid eligibility is made under 1902(a)(10)(A)(ii)(XXI), or, when no application has been filed, the last day of the month following the month during which the qualified entity determines the individual presumptively eligible.
- In addition to family planning services, the State covers family planning-related services to such individuals during the period of presumptive eligibility.

State/Territory: Ohio

AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY

- 4. a. Nursing facility services (other than services in an institution for mental diseases) for individuals 21 years of age or older.
 Provided: No limitations With limitations*
- b. Early and periodic screening, diagnostic and treatment services for individuals under 21 years of age, and treatment of conditions found.*
- c. (i) Family planning services and supplies for individuals of child-bearing age and for individuals eligible pursuant to Attachment 2.2-A, B, if this eligibility option is elected by the State.
 Provided: No limitations With limitations*
- (ii) Family planning-related services provided under the above State Eligibility Option.
- 5. a. Physicians' services whether furnished in the office, the patient's home, a hospital, a nursing facility or elsewhere.
 Provided: No limitations With limitations*
- b. Medical and surgical services furnished by a dentist (in accordance with section 1905 (a)(5)(B) of the Act).
 Provided: No limitations With limitations*
- 6. Medical care and any other type of remedial care recognized under State law, furnished by licensed practitioners within the scope of their practice as defined by State law.
 - a. Podiatrists' services.
 Provided: No limitations With limitations*
 - Not provided.

*Description provided on attachment.

4. c. (i) Family planning services and supplies for individuals of child-bearing age and for individuals eligible pursuant to Attachment. 2.2-A, if this eligibility option is elected by the State.

Family planning services are services and supplies that prevent or delay pregnancy. Such services are Medicaid-coverable and available to Medicaid-eligible beneficiaries who want to prevent pregnancy.

Services and supplies that prevent or delay pregnancy are services provided for the primary purpose of contraceptive management. These services are identified in Ohio Administrative Code and may include the following:

1. Office and other outpatient visits and consultations;
2. Counseling and education;
3. Medical procedures;
4. Laboratory examinations and tests;
5. Pharmaceutical supplies and devices to prevent conception, including all methods of contraception approved by the Federal Food and Drug Administration, both male and female sterilization procedures provided in accordance with 42 CFR 441, Subpart F, and natural family planning.

The following services and supplies may be covered by Medicaid but are not covered as family planning services under Ohio Medicaid family planning provisions:

1. Hysterectomy;
2. Treatment of medical complications resulting from a family planning service that is provided in a level of care higher than an office or a clinic;
3. Preconception services;
4. Pregnancy services;
5. Pregnancy termination (induced abortions); and
6. Transportation.

Infertility services are not covered by Ohio Medicaid.

4. c. (ii) Family planning-related services provided under the above State Eligibility Option

The following family planning-related services are provided under the State Eligibility Option for Family Planning Services:

Family planning-related services include the following, when conducted as part of a visit for the purpose of delivering family planning services or as a follow-up to a visit for the purpose of delivering family planning services:

- diagnostic procedures and treatment of sexually transmitted infections;
- mammography when indicated by breast exam; and
- HPV and hepatitis B vaccinations provided per ACIP recommendations.