



Ohio Revised Code

Section 5166.401 Enrollment for healthy Ohio program participants.

Effective: September 29, 2015

Legislation: House Bill 64 - 131st General Assembly

A healthy Ohio program participant shall enroll in a comprehensive health plan offered by a managed care organization under contract with the department of medicaid. All of the following apply to the health plan:

- (A) It shall cover physician, hospital inpatient, hospital outpatient, pregnancy-related, mental health, pharmaceutical, laboratory, and other health care services the medicaid director determines necessary.
 - (B) It shall not begin to pay for any services it covers until the amount of the noncore portion of the participant's buckeye account is zero.
 - (C) It shall require copayments for services covered by the health plan, except that a participant's copayments shall be waived whenever the amount of the core portion of the participant's buckeye account is zero.
 - (D) It shall have the following payout limits:
 - (1) Three hundred thousand dollars per year;
 - (2) One million dollars for a participant's lifetime.
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