ODM Coronavirus (COVID-19) Frequently Asked Questions
Updated March 24, 2020

Medicaid Eligibility:

Q: We had several Nursing facilities (Authorized Representatives) with concerns on the ability to obtain verifications during this emergency. How do we proceed with LTC cases during the State of Emergency in which the individual's POA, Authorized Representative, and/or Community Spouse is limited to accessing verification of Resources and Income due to the many restrictions in place?

A: During the COVID-19 public health emergency, self-attestation will be appropriate for all Information except for citizenship and immigration status. This is true for MAGI, non-MAGI and LTC categories. All self-attested information should be recorded in OBWP. The information will need to be verified and updated at the individual's next annual renewal.

Q: ODJFS has just given guidance that in the event we have exhausted electronic verification, collateral contact, and have to use client statement to process the case we should do so in real time and not send a 7105 and delay eligibility. The thought is to not have people trying to go out and provide verifications for our programs. Is this ODM's stance as well for case processing?

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Q: There has been chatter among county supervisors whether or not there is direction about taking any negative action on any Medicaid cases at this time. We know that Medicaid Renewal queues are being closed at this time and we are refocusing our attention on processing applications, however what we are not sure of is how to handle changes and known information that normally would result in a termination.

A: Yes, please suspend processing negative changes except for death, individual moved out of state or the individual requested closure. All positive changes should still be worked (examples: adding pregnancy information, job loss reported and all address/phone number updates).

System Related:

Q: We received the following information as part of an OB Communication:
        Beginning Monday, March 23, 2020 and until further notice, the following Ohio Benefits
        systems will be available to counties from 6 a.m. until 11 p.m. daily:
- Ohio Benefits
- EDMS
- CSS/IVR

        Does this mean we have to have coverage from 6 am to 11 pm? Will clients be told there are
        agents available during this entire timeframe?

A: The additional hours were worked out for those counties who are doing different shifts for their
        staff due to daycare issues or simply to allow for social distancing while staff are at work by
        splitting staff in-office at any given time.

Q: Would you be able to tell me what the availability of the state system (Ohio Benefits, EDMS
        Document Imaging, etc.) is so we can determine what hours our employees could potentially
        work.   We're trying to determine when workers can come in and be able to access everything
        they need.

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