

As Introduced

136th General Assembly
Regular Session
2025-2026

H. B. No. 810

Representative Williams

To enact sections 113.65 and 5166.38 of the Revised Code to establish the American Dream Voluntary Transition Program as a component of the Medicaid program and to designate this act the American Dream Act.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:

Section 1. That sections 113.65 and 5166.38 of the Revised Code be enacted to read as follows:

Sec. 113.65. (A) As used in this section, "American dream voluntary transition program" means the medicaid waiver component established under section 5166.38 of the Revised Code.

(B) The treasurer of state, in consultation with the medicaid director, shall establish American dream savings accounts that may be utilized by individuals participating in the American dream voluntary transition program. All accounts shall be maintained in a financial institution insured by the federal deposit insurance corporation (FDIC).

(C) Participants in phase two or phase three of the American dream voluntary transition program shall deposit funds into an American dream savings account in accordance with the program requirements specified in section 5166.38 of the Revised

Code and rules adopted by the medicaid director. The treasurer 21
of state shall track and verify deposits and provide that 22
information to the medicaid director on a quarterly basis. 23

(D) Upon completion of the program, a participant may use 24
funds deposited into an American dream savings account for any 25
of the following purposes: 26

(1) Security deposits, housing down payments, or other 27
similar payments to secure housing; 28

(2) The purchase of or down payment on a motor vehicle; 29

(3) Education or job training; 30

(4) Employment-related relocation; 31

(5) Other workforce-related purposes. 32

(E) The treasurer of state shall adopt rules as necessary 33
to implement this section. The rules shall include a mechanism 34
by which the treasurer of state may require the forfeiture of 35
funds from an American dream savings account that are utilized 36
for a purpose not described in division (D) of this section. 37

Sec. 5166.38. (A) (1) The medicaid director shall establish 38
a medicaid waiver component in accordance with this section 39
under which certain individuals may elect to transition from the 40
medicaid program to private insurance coverage. The component 41
shall be known as the American dream voluntary transition 42
program. 43

(2) The American dream voluntary transition program shall 44
be a voluntary program for medicaid recipients who are 45
considered eligible for participation by the department of 46
medicaid under division (B) of this section. A medicaid 47
recipient's decision not to participate in the program shall not 48

affect the recipient's medicaid eligibility. 49

(B) The department shall establish eligibility criteria 50
for participation in the American dream voluntary transition 51
program. Any member of the expansion eligibility group shall be 52
eligible to participate in the program. Participation by a 53
member of the expansion eligibility group satisfies that 54
recipient's requirements to satisfy employment and training 55
requirements under the medicaid waiver component established 56
pursuant to section 5166.37 of the Revised Code or the community 57
engagement requirements required by section 1902(xx) of the 58
"Social Security Act," 42 U.S.C. 1396a(xx). 59

(C) (1) The American dream voluntary transition program 60
shall contain three phases. Under phase one of the program, a 61
medicaid recipient remains eligible for the medicaid program for 62
twelve months if the recipient's income does not exceed two 63
hundred fifty per cent of the federal poverty line. The 64
department or an entity under contract with the department shall 65
provide those participants with all of the following: 66

(a) Entrance orientation, including physical and mental 67
capacity screenings when indicated; 68

(b) Workforce development exposure; 69

(c) Career interest and aptitude assessments; 70

(d) Individualized employment and transition plans; 71

(e) Referral to the Ohiomeansjobs web site and workOhio 72
web site; 73

(f) Referral to other state or local workforce development 74
programs. 75

(2) A program participant whose income exceeds two hundred 76

fifty per cent but does not exceed three hundred per cent of the 77
federal poverty line shall be enrolled in phase two of the 78
program. Under phase two, a program participant remains eligible 79
for the medicaid program for twelve months if the participant 80
satisfies both of the following requirements: 81

(a) The participant maintains employment. 82

(b) The participant deposits an average of twenty-five per 83
cent of the participant's income that exceeds two hundred fifty 84
per cent of the federal poverty line into an American dream 85
savings account established by the treasurer of state under 86
section 113.65 of the Revised Code. 87

(3) A program participant who participates in phase two of 88
the program for twelve months or has an income that exceeds 89
three hundred per cent of the federal poverty line shall be 90
enrolled in phase three of the program. Except as provided in 91
division (C) (4) of this section and subject to division (C) (5) 92
of this section, under phase three of the program, a participant 93
is eligible for state-funded health insurance premium and cost- 94
sharing assistance for a period of twelve months if the 95
participant satisfies all of the following requirements: 96

(a) The participant maintains employment. 97

(b) The participant deposits an average of twenty-five per 98
cent of the participant's income that exceeds two hundred fifty 99
per cent of the federal poverty line into an American dream 100
savings account established by the treasurer of state under 101
section 113.65 of the Revised Code. 102

(c) The participant transitions from the medicaid program 103
to a qualified health plan as defined in section 1301 of the 104
"Patient Protection and Affordable Care Act," 42 U.S.C. 18021, 105

offered in this state through an exchange created under that 106
act. 107

(4) A program participant who is enrolled in phase three 108
of the program is ineligible for state-funded health insurance 109
premium and cost-sharing assistance if the participant receives 110
employer-sponsored health insurance. The ineligibility period 111
begins on the date the participant becomes covered under an 112
employer-sponsored health insurance plan and concludes on the 113
date the coverage ends. 114

(5) Notwithstanding the time limits specified in divisions 115
(C) (1), (2), and (3) of this section, no participant shall 116
participate in the American dream voluntary transition program 117
for a period greater than twenty-four months, regardless of 118
whether the participant has completed all three phases of the 119
program. 120

(D) The medicaid director shall coordinate with the 121
director of job and family services, the director of 122
development, and the treasurer of state as necessary to 123
implement the American dream voluntary transition program. The 124
medicaid director shall enter into all necessary interagency 125
agreements and establish any necessary reporting, verification, 126
and compliance systems to implement this section. 127

(E) The medicaid director shall prepare and submit an 128
annual report to the general assembly in accordance with section 129
101.68 of the Revised Code regarding the American dream 130
voluntary transition program. The report shall include all of 131
the following: 132

(1) The number of participants in the program, including 133
employment outcomes for participants, income growth, and 134

<u>transitions to private insurance coverage;</u>	135
<u>(2) The number of participants who are no longer enrolled</u>	136
<u>in the medicaid program;</u>	137
<u>(3) Account balances and asset development of program</u>	138
<u>participants' American dream savings accounts;</u>	139
<u>(4) The fiscal impact of the program;</u>	140
<u>(5) Any other information the director considers relevant</u>	141
<u>concerning the program.</u>	142
<u>(F) The medicaid director shall adopt rules authorized</u>	143
<u>under section 5166.02 of the Revised Code as necessary to</u>	144
<u>implement this section.</u>	145
Section 2. This act shall be known as the American Dream	146
Act.	147