Grove City CARES Program

Administrative Questions

The program is a reimbursement program, which means the application will arrive after the expense has been incurred and paid.

1) Does the applicant need to be a Grove City resident at the time of application if the applicant was a Grove City during the period for which the applicant is seeking reimbursement?

2) Does the applicant need to have been a resident of Grove City during the period for which the applicant is seeking reimbursement if the applicant is a current resident?

3) If an applicant was only a part-year resident for year for which the applicant is seeking reimbursement, does the $400 limit get pro-rated? Is it limited to premiums paid for coverage effective during the time the applicant was a resident?

4) What is the first year eligible for reimbursement?

5) What is our "statute of limitations"? For example, if in 2028 a resident finds out he could have applied for reimbursement for 2025, can he still file for 2025?

6) RITA returns for 2025 won't be available until 2026. Electronic returns are generally available within days of filing. Paper returns received in April with a mountain of other returns won't be available until June. Returns on extension won't be available until November or December of 2026. Are we going to designate a specific filing window?

7) Do we need to see IRS Form 8962 to make sure the IRS has not refunded all of the premiums paid throughout the year for which the applicant is providing receipts?

8) For the payments to qualify for the General Welfare Exclusion, we need to determine their income which can include items not shown on the RITA return which could put them way over the $30k such as unemployment compensation, interest, dividends and income from trusts holding stocks and bonds. Do we want to see the IRS return or add a declaration to the application (see example).

9) What if the applicant has an off-exchange/off-market plan (like a student insurance plan through their university)? Are their premiums eligible?

10) Are Medicare Part B (non-hospital medical insurance) has a monthly **premium** for many people. Medicare Part D (drug coverage) also has a monthly premium. Are these **premium** payments eligible?

11) The tax information release was too broad. Please see the attached a draft revised version.

GROVE CITY
FINANCE

4035 Broadway
Grove City, OH 43123
614-277-3025
GroveCityOhio.gov

Tax Information Authorization
Grove City Finance Department

Don't sign this form unless all applicable lines have been completed.

Taxpayer Information			
Taxpayer name			Last 4 digits of social security number XXX-XX-
Street address			Date this authorization
City	State	ZIP code	Daytime phone number

For 90 days beginning on the authorization date shown above, I authorize the Grove City Income Tax Administrator to release to the Grove City CARES program the following confidential tax information:

1) Whether or not I filed a Grove City income tax return with RITA for the year covered by my Grove City CARES program application to which this authorization is attached.
2) Whether or not I the Grove City income tax return I filed for the year covered by my Grove City CARES program application indicated I reported less than $30,000 in taxable income.

I certify that I have the legal authority to execute this form. I understand that this document is a public records and that the information released will become part of a public record.

Signature _______________ Date _______________

4035 Broadway
Grove City, OH 43123
614-277-3025
GroveCityOhio.gov

GROVE CITY
FINANCE

Grove City CARES Application
Grove City Finance Department

For Calendar Year 2025

Applicant Information		
Applicant's Name:	Contact Phone:	
Street Address:	Email:	
City:	State:	Zip:

Amount of Reimbursement Requested (cannot exceed the lesser of $400 or actual out-of pocket premium costs)	$

I declare under penalties of perjury that the reimbursement amount I am requesting has not been refunded to me by the IRS as a credit on my federal income tax return. I further declare that any income I may have received in 2025 that is not reportable on my RITA return when combined with the income reported on my RITA will not exceed $30,000. I understand that unemployment compensation, social security payments, pension payments, interest, dividends and some trust income may not be reported on my RITA return but does count towards the $30,000 income eligibility cut-off.

Signature _______________________ Date _______________

Your application will be rejected if it does not include:

1) Proof of residency such as a utility bill, a copy of your driver's license, a copy of your lease, or any other document proving you are a Grove City resident. We will use your RITA return to confirm residency for the year of the requested reimbursement.
2) Receipt for premium payments made for health insurance. ***Black-out your social security number if it appears on the receipt(s). This application and all associated documents are public records.***
3) A signed Tax Information Authorization form. *Your application will not be processed until your 2025 RITA tax return can be reviewed. Do not file your application before you file your 2025 RITA return.*

Return your application and all required documents to:

City of Grove City
4035 Broadway
Grove City OH 43123

GROVE CITY
FINANCE

4035 Broadway
Grove City, OH 43123
614-277-3025
GroveCityOhio.gov

Grove City CARES Disclaimer
Grove City Finance Department

I acknowledge that my participation in the Grove City CARES program is voluntary.

I understand that participating in the Grove City CARES program may affect my eligibility for other benefits and programs. I understand that it is my responsibility to comply with the obligations of any other program in which I participate including any obligations I have under the other benefit programs to report the assistance I am receiving under the Grove City CARES program. I understand that I am fully responsible for any potential consequences of not reporting my participation in the Grove City CARES program to other benefit programs when required.

Additionally, I understand that the Grove City CARES program is subject to funding and changes, and that receiving Grove City CARES benefits does not guarantee continued eligibility.

______________________________ ____________

Signature Date

____

Print Name

2025 Ohio Medicaid Guidelines

Medicaid offers free healthcare coverage for families, children under age 19, and pregnant women. Coverage includes doctor visits, hospital care, prescriptions, vision, dental, mental health services, and more.

The Complex Medical Help Program (CMH) requires participating familes to file an application for Medicaid if their monthly income is within the guidelines listed below. Families with incomes greater than the guidelines in Chart # 2 do not need to apply.

Chart #1

Families with monthly incomes lower than these guidelines MUST apply.	
Family Size	Monthly Income*
1	$1,956
2	$2,644
3	$3,331
4	$4,019
5	$4,706
6	$5,394
7	$6,081
8	$6,769
9	$7,456
10	$8,144

Chart #2

Families with monthly incomes higher than the amount in the first column, but lower than the amount in the second column MUST apply if they do not have private health insurance		
Family Size	Monthly Income*	
1	$1,956	$2,608
2	$2,644	$3,525
3	$3,331	$4,442
4	$4,019	$5,358
5	$4,706	$6,275
6	$5,394	$7,192
7	$6,081	$8,108
8	$6,769	$9,025
9	$7,456	$9,942
10	$8,144	$10,858

*Do not include SSI, child support, VA benefits, worker's compensation, or grandparent income when calculating monthly income.

**Stepparent income should be included in monthly income calculation.

Step 1: If your **gross** monthly income is lower than the guidelines in Chart #1 you must apply for Medicaid even if you have private health insurance. Applications for Medicaid can be made online at www.Benefits.Ohio.gov or by calling 800-324-8680.

Step 2: If your **gross** monthly income is between the guidelines in Chart #2 **AND** your family **does not** have private health insurance, you **must** apply for Medicaid before sending your financial application to CMH.

Step 3: Send a copy of your approval or denial letter to CMH. If you are denied for "over income" or "having health insurance," often known as creditable insurance, please send a completed CMH Financial Application and current income verifications (pay stubs, first two pages of your most recent federal tax return, and IRS Schedule 1) to CMH with the copy of your letter.

2025 Ohio Medicaid Guidelines (annualized)

Eligible Regardless of Private Health Insurance	
Family Size	Annual Income
1	23,472
2	31,728
3	39,972

Eligible for Medicaid Even with Private Health Insurance (must apply)	
Family Size	Annual Income
1	31,296
2	42,300
3	53,304

What does Medicare cost?

Generally, you pay a monthly premium for Medicare coverage and part of the costs each time you get a covered service. There's no yearly limit on what you pay out-of-pocket, unless you have supplemental coverage, like a Medicare Supplement Insurance (Medigap) policy, or you join a Medicare Advantage Plan.

What's a premium, deductible, coinsurance, or copayment?

Costs for Part A (Hospital Insurance)

Costs:	What you pay in 2025:
Part A Premium	**$0 for most people** (because they paid Medicare taxes long enough while working - generally at least 10 years). This is sometimes called "premium-free Part A." Do I qualify? If you don't qualify for a premium-free Part A, you might be able to buy it. In 2025, the premium is either $285 or $518 each month, depending on how long you or your spouse worked and paid Medicare taxes. • You also have to sign up for Part B to buy Part A. • If you don't buy Part A when you're first eligible for Medicare (usually when you turn 65), you might pay a penalty. How much is the Part A penalty?

Costs:	What you pay in 2025:
Part A Deductible	**$1,676** for each time you're admitted to the hospital per benefit period, before Original Medicare starts to pay. There's no limit to the number of benefit periods you can have.
Inpatient stays (copayments)	Days 1-60: $0 after you pay your Part A deductible Days 61-90: $419 each day Days 91-150: $838 each day while using your 60 lifetime reserve days After day 150: You pay all costs

Costs for Part B (Medical Insurance)

Costs:	What you pay in 2025:
Part B Premium	**$185 each month** (or higher depending on your income). The amount can change each year. You'll pay the premium each month, even if you don't get any Part B-covered services. Who pays a higher premium because of income? How do I pay my Part B premiums? You might pay a penalty if you don't sign up for Part B when you're first eligible for Medicare (usually when you turn 65). Check when I should sign up for Part B. **How much is the Part B late enrollment penalty?** • You'll pay an extra 10% for each year you could have signed up for Part B, but didn't. • This penalty is added to your monthly Part B premium. (You may also pay a higher premium depending on your income.)

Costs:	What you pay in 2025:
	• It's not a one-time late fee – you'll pay the penalty for as long as you have Part B. • Generally, you **won't** have to pay a penalty if you qualify for a Special Enrollment Period. To qualify, you (or your spouse) must still be working and you must have health coverage based on that job. Example of the Part B penalty.
Part B Deductible	**You'll pay $257, before Original Medicare starts to pay.** You pay this deductible once each year.
Costs for services (coinsurance)	You'll usually pay 20% of the cost for each Medicare-covered service or item after you've paid your deductible.

Get help with Part A & Part B costs
If you have limited income and resources, you may be able to get help from your state to pay your premiums and other costs, like deductibles, coinsurance, and copays. Learn more about help with costs.

Costs for plans & supplemental coverage

Drug coverage (Part D):

Costs:	What you pay in 2025:
Part D Premium	Monthly premiums vary based on which plan you join. The amount can change each year. You may also have to pay an extra amount each month based on your income. Who pays an extra amount because of income?

Costs:	What you pay in 2025:
	You might pay a penalty if you: • Don't join a Medicare drug plan when you first get Medicare, **and** • Go 63 days or more without creditable drug coverage (coverage that's similar in value to Part D). **How much is the Part D penalty?** • You'll pay an extra 1% for each month (that's 12% a year) you could have signed up for Part D, but didn't. • The penalty is added to your monthly premium. • It's not a one-time late fee — you'll pay the penalty each month for as long as you have Part D coverage (even if you change plans). • If you have creditable drug coverage or if you qualify for Extra Help, you **won't** have to pay a penalty. Example of the Part D penalty. ⓘ
When you get prescription drugs	Most plans charge a deductible, an amount you pay before the plan starts to pay, for prescriptions you fill. The deductible amount varies based on which plan you join. Your actual costs vary depending on the medicines you take, if they are on your plan's list of covered drugs, and which pharmacy you use.

Get help with drug costs
If you have limited income and resources, you may be able to get Extra Help to pay your plan premiums and other drug costs (like deductibles, coinsurance, and copays). If you qualify, you won't have to pay the Part D late enrollment penalty. Learn more about help with costs.

Medicare Advantage Plan (Part C):

- Monthly premiums vary based on which plan you join. The amount can change each year.
- You must keep paying your Part B premium to stay in your plan.
- Deductibles, coinsurance, and copayments vary based on which plan you join.
- Plans also have a yearly limit on what you pay out-of-pocket. Once you pay the plan's limit, the plan pays 100% for covered health services for the rest of the year.

Medicare Supplement Insurance (Medigap):

- Monthly premiums vary based on which policy you buy, where you live, and other factors. The amount can change each year.
- You must keep paying your Part B premium to keep your supplement insurance.
- Helps lower your share of costs for Part A and Part B services in Original Medicare.
- Some Medigap policies include extra benefits to lower your costs, like coverage when you travel out of the country.

Learn more about Medigap and its costs.

What do you want to do next?

Next Step

Discover how Medicare works

Find steps to set up coverage

Learn Steps

Take Action

Estimate my premium

Get estimate of your Part B premium

Check Estimate

More Details

Get cost details

Find details for deductibles, copays, and more

Get Cost Details

Signup for email updates

ENTER YOUR EMAIL ADDRESS

name@example.com

☐ By checking this box, you consent to our data privacy policy.