

Rule Summary and Fiscal Analysis

Part A - General Questions

Rule Number: 5160-58-02.1
Rule Type: Amendment
Rule Title/Tagline: MyCare Ohio plans: termination of enrollment.
Agency Name: Ohio Department of Medicaid
Division:
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I. Rule Summary

1. **Is this a five year rule review?** No
 - A. **What is the rule's five year review date?** 1/1/2025
2. **Is this rule the result of recent legislation?** No
3. **What statute is this rule being promulgated under?** 119.03
4. **What statute(s) grant rule writing authority?** 5164.02
5. **What statute(s) does the rule implement or amplify?** 5164.02, 5164.91, 5167.02
6. **What are the reasons for proposing the rule?**

Rule 5160-58-02.1 is being amended to incorporate federal regulatory changes under the Comprehensive Addiction and Recovery Act (CARA) and 42 CFR 423 relating to the administration of the MyCare Ohio program.

7. **Summarize the rule's content, and if this is an amended rule, also summarize the rule's changes.**

OAC Rule 5160-58-02.1 "MyCare Ohio plans: termination of enrollment" sets forth the reasons why a MyCare Ohio Plan member may be terminated from enrollment in the plan and the process for termination. This rule is being proposed for amendment

in order to align with Medicare Part D changes. The Comprehensive Addiction and Recovery Act (CARA) allows CMS to establish drug management programs in Medicare Part D and to prevent Medicare recipients from switching plans when they are identified as "potentially at-risk" or "at-risk" as defined in 42 CFR 423.100 (October 1, 2019). New language in this rule precludes MyCare enrollees from switching plans when they are in a Medicare Part D drug management program and in a potentially at-risk or at-risk status.

8. **Does the rule incorporate material by reference? Yes**
9. **If the rule incorporates material by reference and the agency claims the material is exempt pursuant to R.C. 121.71 to 121.76, please explain the basis for the exemption and how an individual can find the referenced material.**

This rule incorporates one or more references to another rule or rules of the Administrative Code. This question is not applicable to any incorporation by reference to another Administrative Code rule because such reference is exempt from compliance with RC 121.71 to 121.74 pursuant to RC 121.75(A)(1). OAC Medicaid rules may be found online at: <http://codes.ohio.gov/oac/5160>.

This rule incorporates one or more dated references to the Code of Federal Regulations (CFR). This question is not applicable to any dated incorporation by reference to the CFR because such reference is exempt from compliance with RC 121.71 to 121.74 in accordance with RC 121.75(A)(2). The eCFR is available online at: <http://www.ecfr.gov/cgi-bin/ECFR?page=browse>.

10. **If revising or re-filing the rule, please indicate the changes made in the revised or re-filed version of the rule.**

Not Applicable

II. Fiscal Analysis

11. **As a result of this proposed rule, please estimate the increase / decrease in revenues or expenditures affecting this agency, or the state generally, in the current biennium or future years. If the proposed rule is likely to have a different fiscal effect in future years, please describe the expected difference and operation.**

This will have no impact on revenues or expenditures.

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not applicable

12. What are the estimated costs of compliance for all persons and/or organizations directly affected by the rule?

The amendment to this rule does not result in additional costs of compliance.

This rule requires a MyCare Ohio plan (MCOP) to provide documentation when a member requests termination of plan enrollment for just cause. It also requires the MCOP to submit a request for termination for a member when the member is uncooperative, disruptive or acts fraudulently. MCOPs are paid per member per month and receive funds to cover required services. ODM must pay MCOPs rates that are actuarially sound, as determined by an outside actuary in accordance with 42 CFR 438.4 and CMS's 2018-2019 Medicaid Managed Care Rate Development Guide (May 2018). All rates and actuarial methods can be found on the ODM website in Appendix E of the Medicaid MyCare Ohio provider agreement.

13. Does the rule increase local government costs? (If yes, you must complete an RSFA Part B). No

14. Does the rule regulate environmental protection? (If yes, you must complete an RSFA Part C). No

III. Common Sense Initiative (CSI) Questions

15. Was this rule filed with the Common Sense Initiative Office? Yes

16. Does this rule have an adverse impact on business? Yes

A. Does this rule require a license, permit, or any other prior authorization to engage in or operate a line of business? No

B. Does this rule impose a criminal penalty, a civil penalty, or another sanction, or create a cause of action, for failure to comply with its terms? No

C. Does this rule require specific expenditures or the report of information as a condition of compliance? Yes

Rule 5160-58-02.1 requires the MCOP to provide documentation when a member requests termination of plan enrollment for just cause. It also requires

the MCOP to submit a request for termination for a member when the member is uncooperative, disruptive or acts fraudulently.

This rule is not likely to increase expenses or decrease revenue of impacted providers.