Rule Summary and Fiscal Analysis <u>Part A</u> - 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. <u>Rule Summary</u>

- 1. Is this a five year rule review? Yes
 - A. What is the rule's five year review date? 4/15/2022
- 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, 5166.02, 5167.02
- 5. What statute(s) does the rule implement or amplify? 5164.02, 5166.02, 5167.02
- 6. What are the reasons for proposing the rule?

OAC rule 5160-58-02.1, entitled "MyCare Ohio plans: termination of enrollment," is being proposed for amendment in compliance with five year rule review and to update policy related to the administration of the Ohio Medicaid 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, entitled "MyCare Ohio plans: termination of enrollment", sets forth the reasons why an individual enrolled in a MyCare Ohio plan may be terminated and the process for termination. Changes to the rule include: changing references

from "plan" to "MCOP" for consistency throughout Chapter 5160-58, clarifying when termination of enrollment from a MyCare Ohio plan would occur when a third-party payer has been identified excluding Medicare in paragraph (A)(5), other grammatical and technical edits as necessary, and updating references to the Code of Federal Regulations (CFR).

- 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. 121.75, 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. Please estimate the increase / decrease in the agency's revenues or expenditures in the current biennium due to this rule.

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?

There are no new 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 capitated payments to cover required services and administrative costs. 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 Managed Care Rate Setting Consultation Guide. 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
- 15. If the rule imposes a regulation fee, explain how the fee directly relates to your agency's cost in regulating the individual or business.

Not Applicable

III. Common Sense Initiative (CSI) Questions

- 16. Was this rule filed with the Common Sense Initiative Office? Yes
- 17. 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

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. D. Is it likely that the rule will directly reduce the revenue or increase the expenses of the lines of business of which it will apply or applies? No

IV. <u>Regulatory Restrictions (This section only applies to agencies indicated in</u> <u>R.C. 121.95 (A))</u>

- **18.** Are you adding a new or removing an existing regulatory restriction as defined in **R.C. 121.95**? No
 - A. How many new regulatory restrictions do you propose adding?

Not Applicable

B. How many existing regulatory restrictions do you propose removing?

Not Applicable