

Rule Summary and Fiscal Analysis

Part A - General Questions

Rule Number: 5160-58-02.2
Rule Type: Amendment
Rule Title/Tagline: MyCare Ohio waiver: eligibility and 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?** 1/1/2024
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
5. **What statute(s) does the rule implement or amplify?** 5164.02, 5164.91, 5166.02, 5166.16
6. **Does the rule implement a federal law or rule in a manner that is more stringent or burdensome than the federal law or regulation requires?** No
 - A. **If so, what is the citation to the federal law or rule?** Not Applicable
7. **What are the reasons for proposing the rule?**

This rule is being proposed for amendment to clarify policy relating to the administration of the Medicaid MyCare Ohio program.
8. **Summarize the rule's content, and if this is an amended rule, also summarize the rule's changes.**

OAC rule 5160-58-02.2, entitled "MyCare Ohio waiver: eligibility and enrollment." This rule establishes standards for member eligibility and enrollment in the MyCare Ohio waiver program. Minor updates are being proposed to clarify the MyCare Ohio member eligibility requirements in accordance with pending waiver changes.

- 9. Does the rule incorporate material by reference? Yes**
- 10. 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>.

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

Language in 5160-58-02.2(A)(4) has been revised in response to stakeholder feedback. The revisions are meant to clarify ODM's original intent for monthly and annual service waivers.

II. Fiscal Analysis

- 12. 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.

13. 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 with the changes to this rule. MyCare Ohio Plans (MCOPs) are paid a per member per month amount. ODM must pay MCOPs rates that are actuarially sound, as determined by an outside actuary in accordance with 42 CFR 438.4, 42 CFR 438.5, and CMS's Medicaid Managed Care Rate Development Guide. ODM's actuary will develop capitation rates for the MCOs and MCOPs that are "actuarially sound" for the period covered by the certification, projected capitation rates and other revenue sources provide for all reasonable, appropriate, and attainable costs. Costs include but are not limited to expected health benefits, health benefit settlement expenses, administrative expenses, the cost of capital and government mandated assessments, fees, and taxes.

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

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

16. 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

17. Was this rule filed with the Common Sense Initiative Office? No

18. Does this rule have an adverse impact on business? No

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? No

- 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. Regulatory Restriction Requirements under S.B. 9. Note: This section only applies to agencies described in R.C. 121.95(A).

- 19. Are you adding a new or removing an existing regulatory restriction as defined in R.C. 121.95? Yes
 - A. How many new regulatory restrictions do you propose adding to this rule? 1
5160-58-02.2(E): adding "requires."
 - B. How many existing regulatory restrictions do you propose removing from this rule? 1
5160-58-02.2(A)(4): removing "require."
 - C. If you are not removing existing regulatory restrictions from this rule, please list the rule number(s) from which you are removing restrictions.
 - D. Please justify the adoption of the new regulatory restriction(s).
The new regulatory restrictions are necessary to clarify MyCare Ohio Plan obligations as part of the MyCare Ohio Program.