

**MEMORANDUM**

TO: Tommi Potter, Ohio Department of Medicaid

FROM: Sydney King, Regulatory Policy Advocate

DATE: August 6, 2015

RE: **CSI Review – Determining Patient Liability (OAC 5160:1-3-04.3 and 5160:1-3-24)**

On behalf of Lt. Governor Mary Taylor, and pursuant to the authority granted to the Common Sense Initiative (CSI) Office under Ohio Revised Code (ORC) section 107.54, the CSI Office has reviewed the abovementioned administrative rule package and associated Business Impact Analysis (BIA). This memo represents the CSI Office's comments to the Agency as provided for in ORC 107.54.

Analysis

This rule package consists of one new rule and one rescinded rule being proposed by the Ohio Department of Medicaid (ODM). The rule package was submitted to the CSI Office on June 18, 2015 and the public comment period was held open through June 25, 2015.

The rule package establishes requirements for determining patient liability. Patient liability is defined as an individual's financial obligation toward the Medicaid cost of care. Medicaid providers must accept the patient liability amount from the individual and refund overpayments of patient liability when retroactive patient liability adjustments are made. Rule 5160:1-3-24 is being proposed for rescission with the language reorganized under new Rule 5160:1-3-04.3. ODM states the amendments to the rule package are required by recent statutory changes.

According to the BIA, ODM requested comment via email from stakeholders. The BIA described the input received and whether ODM amended the rules based on the suggestions. ODM received one comment during the CSI public comment period. The stakeholder inquired if ODM

considered amending the 365 day time limit for determining patient liability. This comment was also received during early stakeholder outreach but was not amended at the time. However, ODM amended the rule based on the input received during the CSI public comment period. This will allow unpaid medical expenses beyond 365 days to be calculated in determining the patient liability.

ODM identifies Medicaid providers as the impacted business community. ODM states the impacts are the associated costs with processing patient liability and refunding overpayments when retroactive patient liability adjustments are made. The BIA provides an estimated time necessary to comply to be minutes for electronic processing and hours for patients who pay by check. ODM states the requirements are necessary to comply with state and federal law.

Recommendation

For the reasons explained above, this office does not have any recommendations regarding this rule package.

Conclusion

Based on the above comments, the CSI Office concludes that the Ohio Department of Medicaid should proceed with the formal filing of this rule package with the Joint Committee on Agency Rule Review.