### **Rule Summary and Fiscal Analysis (Part A)**

Department of Job and Family Services Agency Name			
Division of Medical Assistance	Mike 1	<u>Lynch</u>	
Division	Contac	t	
<u>30 E. Broad St., 31st Floor ODJFS, Office of</u> Services Columbus OH 43215-3414	<u>Legal</u>	<u>614-466-4605</u>	<u>614-752-8298</u>
Agency Mailing Address (Plus Zip)		Phone	Fax

<u>5101:3-33-03</u>

# AMENDMENT

Rule Number

TYPE of rule filing

Rule Title/Tag Line

Eligibility for the assisted living HCBS waiver program.

### RULE SUMMARY

1. Is the rule being filed consistent with the requirements of the RC 119.032 review? Yes

2. Are you proposing this rule as a result of recent legislation? Yes

Bill Number: HB153	General Assembly: 129	Sponsor: Representative
		Amstutz

3. Statute prescribing the procedure in accordance with the agency is required to adopt the rule: **119.03** 

4. Statute(s) authorizing agency to adopt the rule: **5111.85**, **5111.89** 

5. Statute(s) the rule, as filed, amplifies or implements: **5111.85**, **5111.89** 

6. State the reason(s) for proposing (i.e., why are you filing,) this rule:

This rule is being proposed for five year rule review.

The rule is also being amended to reflect a policy change in HB 153 (129th GA) that changes the eligibility criteria for the Assisted Living waiver program.

7. If the rule is an AMENDMENT, then summarize the changes and the content of the proposed rule; If the rule type is RESCISSION, NEW or NO CHANGE,

then summarize the content of the rule:

This rule outlines the criteria that must be met for an individual to be eligible to enroll in the assisted living waiver program.

The rule is being amended to:

1) Use the acronym HCBS in place of home and community based services;

2) Delete Paragraph (B)(3) which specifies that for a consumer to be eligible for the Assisted Living waiver, they must first reside in a NF, be a certain Medicaid waiver participant, or be a resident of a residential care facility that resided in the facility for six months before applying;

3) Specify that a residential care facility in which an Assisted Living waiver consumer resides must be certified by the Ohio Department of Aging; and

4) Update the OAC citations that deal with Medicaid eligibility.

8. If the rule incorporates a text or other material by reference and the agency claims the incorporation by reference is exempt from compliance with sections 121.71 to 121.74 of the Revised Code because the text or other material is **generally available** to persons who reasonably can be expected to be affected by the rule, provide an explanation of how the text or other material is generally available to those persons:

This rule incorporates one or more references to another rule or rules of the Ohio Administrative Code. This question is not applicable to any incorporation by reference to another OAC rule because such reference is exempt from compliance with RC 121.71 to 121.74 pursuant to RC 121.76(A)(3).

9. If the rule incorporates a text or other material by reference, and it was **infeasible** for the agency to file the text or other material electronically, provide an explanation of why filing the text or other material electronically was infeasible:

Not Applicable.

10. If the rule is being **rescinded** and incorporates a text or other material by reference, and it was **infeasible** for the agency to file the text or other material, provide an explanation of why filing the text or other material was infeasible:

Not Applicable.

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11. If **revising** or **refiling** this rule, identify changes made from the previously filed version of this rule; if none, please state so:

This rule is being refiled to revise paragraph (B)(2) to include a cross reference to the Ohio Department of Health's (ODH) rule 3701-17-59.1 (part-time intermittent skilled nursing care). This change will link the Assisted Living waiver's part-time intermittent skilled nursing care requirement to standards set by ODH, the state agency with regulatory authority over licensed RCFs in Ohio.

#### 12. 119.032 Rule Review Date: 7/14/2011

(If the rule is not exempt and you answered NO to question No. 1, provide the scheduled review date. If you answered YES to No. 1, the review date for this rule is the filing date.)

NOTE: If the rule is not exempt at the time of final filing, two dates are required: the current review date plus a date not to exceed 5 years from the effective date for Amended rules or a date not to exceed 5 years from the review date for No Change rules.

## FISCAL ANALYSIS

13. Estimate the total amount by which *this proposed rule* would **increase / decrease** either **revenues / expenditures** for the agency during the current biennium (in dollars): Explain the net impact of the proposed changes to the budget of your agency/department.

This will have no impact on revenues or expenditures.

0.00

There is no additional cost to implement the changes proposed in this rule. The state projects growth in the Assisted Living waiver over the biennium, and the possible increase in utilization that results from this change in eligibility is accounted for in the appropriation made to ODJFS through the biennial budget process.

14. Identify the appropriation (by line item etc.) that authorizes each expenditure necessitated by the proposed rule:

600-525

15. Provide a summary of the estimated cost of compliance with the rule to all directly affected persons. When appropriate, please include the source for your

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information/estimated costs, e.g. industry, CFR, internal/agency:

No new costs.

16. Does this rule have a fiscal effect on school districts, counties, townships, or municipal corporations? No

17. Does this rule deal with environmental protection or contain a component dealing with environmental protection as defined in R. C. 121.39? No