

## Rule Summary and Fiscal Analysis

### Part A - General Questions

**Rule Number:** 5160:1-6-06.5  
**Rule Type:** New  
**Rule Title/Tagline:** Medicaid: restricted medicaid coverage period.  
**Agency Name:** Ohio Department of Medicaid  
**Division:**  
**Address:** 50 West Town Street Suite 400 Columbus OH 43218-2709  
**Contact:** Tommi Potter  
**Email:** Tommi.Potter@medicaid.ohio.gov **Phone:** 614-752-3877

#### **I. Rule Summary**

1. Is this a five year rule review? No
  - A. What is the rule's five year review date?
2. Is this rule the result of recent legislation? No
3. What statute is this rule being promulgated under? 111.15
4. What statute(s) grant rule writing authority? 5160.02, 5163.02
5. What statute(s) does the rule implement or amplify? 5160.02, 5163.02
6. What are the reasons for proposing the rule?

To update policy relating to the administration of the Medicaid program.

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

This rule sets forth how to calculate and apply a restricted Medicaid coverage period when an institutionalized individual improperly transferred an asset. Differences between this rule and the rule it is replacing are the addition of language regarding how to calculate an initial pro-rated period of restricted coverage when a restricted

Medicaid coverage period begins after the first day of the month and the treatment of new or newly discovered improperly transferred assets.

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 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).

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

Paragraph (C) - Replaced paragraph language with "RMCP effective date".

Paragraph (C)(1) - Replaced paragraph language with "If an institutionalized individual is receiving any category of medical assistance at the time the determination is made that assets were transferred for less than fair market value, the RMCP will be effective on the first day of the month following the expiration of the required notice period under rule 5101:6-2-04 of the Administrative Code".

Paragraph (C)(2) - Replaced paragraph language with "If an institutionalized individual is not receiving any category of medical assistance at the time the determination is made that assets were transferred for less than fair market value, the RMCP will be effective on the date on which the institutionalized individual is eligible for medical assistance and would otherwise be receiving LTC services paid for by the medicaid program but for the imposition of the RMCP".

Paragraph (C)(2)(a) - Removed the paragraph and added the language to new paragraph (C)(3).

Paragraph (C)(2)(b) - Removed the paragraph and added the language to new paragraph (C)(4).

Paragraph (C)(2)(c) - Removed the paragraph and added the language to new paragraph (C)(5).

Paragraph (C)(2)(d) - Removed the paragraph and added the language to new paragraph (C)(6).

Paragraph (C)(2)(d)(i) - Removed the paragraph and added the language to new paragraph (C)(6)(a).

Paragraph (C)(2)(d)(ii) - Removed the paragraph and added the language to new paragraph (C)(6)(b).

## **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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No impact on current budget.

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

Not applicable

13. Does the rule increase local government costs? (If yes, you must complete an RSFA Part B). Yes

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? No

16. 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**

## Rule Summary and Fiscal Analysis

### Part B - Local Governments Questions

**1. Does the rule increase costs for:**

<b>A. Public School Districts</b>	No
<b>B. County Government</b>	Yes
<b>C. Township Government</b>	No
<b>D. City and Village Governments</b>	No

**2. Please estimate the total cost, in dollars, of compliance with the rule for the affected local government(s). If you cannot give a dollar cost, explain how the local government is financially impacted.**

The Ohio Department of Medicaid (ODM) supplies funding to Ohio's 88 counties through the Ohio Department of Job and Family Services, Bureau of County Finance and Technical Assistance. This funding is intended to properly supply counties with enough funding to conduct eligibility determinations and casework for the Medicaid Program. State funds are supplied for matching through a mechanism called the Income Maintenance (IM) Allocation. As expenditures are charged the federal portion of these expenditures is also supplied to the counties; however, the Department cannot estimate a cost of compliance that a county may face as each county operates daily at different work levels and funds the work done locally differently. Historically counties have not reported spending in excess of the allocation.

**3. Is this rule the result of a federal government requirement? No**

**A. If yes, does this rule do more than the federal government requires?** *Not Applicable*

**B. If yes, what are the costs, in dollars, to the local government for the regulation that exceeds the federal government requirement?**

*Not Applicable*

**4. Please provide an estimated cost of compliance for the proposed rule if it has an impact on the following:**

**A. Personnel Costs**

There will be an increase in training costs as a result of the new Medicaid eligibility rules; however, each county operates daily at different work levels and funds the work done locally differently. Historically counties have not reported spending in excess of the allocation and it is not expected that this change to policy would greatly change that dynamic.

**B. New Equipment or Other Capital Costs**

The Department of Medicaid does not expect any changes in capital costs.

**C. Operating Costs**

Counties may incur increased operating costs; however, each county operates daily at different work levels and funds the work done locally differently. Historically counties have not reported spending in excess of the allocation and it is not expected that this change to policy would greatly change that dynamic.

**D. Any Indirect Central Service Costs**

Counties may incur increased indirect central service costs; however, each county operates daily at different work levels and funds the work done locally differently. Historically counties have not reported spending in excess of the allocation and it is not expected that this change to policy would greatly change that dynamic.

**E. Other Costs**

The Department of Medicaid does not know whether counties will incur increased additional costs. There will be an increase in training costs as a result of the new Medicaid eligibility rules; however, each county operates daily at different work levels and funds the work done locally differently. Historically counties have not reported spending in excess of the allocation and it is not expected that this change to policy would greatly change that dynamic.

**5. Please explain how the local government(s) will be able to pay for the increased costs associated with the rule.**

The Ohio Department of Medicaid (ODM) supplies funding to Ohio's counties through the Ohio Department of Job and Family Services, which funds counties to conduct eligibility determinations and complete casework for the Medicaid program.

**6. What will be the impact on economic development, if any, as the result of this rule?**

The Department of Medicaid does not expect the proposed rule to have an impact on economic development.