ACTION: Final DATE: 11/18/2014 2:38 PM



MEMORANDUM

TO: Tommi Potter, Ohio Department of Medicaid

FROM: Sophia Papadimos, Regulatory Policy Assistant

DATE: August 18, 2014

RE: CSI Review – Medicaid Consumer Liability (OAC 5160-1-13.1)

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 amended rule being proposed by the Ohio Department of Medicaid (ODM) pursuant to the five-year review requirement of ORC 119.032. The rule package was submitted to the CSI Office on July 17, 2014 and the public comment period was held open through July 24, 2014. One comment was received during this time.

Ohio Administrative Code (OAC) 5160-1-13.1 pertains to Medicaid consumer liability and defines conditions under which Medicaid consumers may or may not be billed for services. This rule implements federal regulations which require states to provide necessary safeguards to assure that services delivered through the Medicaid program are in the best interests of the recipients. This rule is being amended to update a rule reference and the Department's name.

The adverse impacts described in the BIA are the time and cost associated with providers submitting information to Medicaid consumers. Medicaid explained in the BIA that submitting this information can prevent Medicaid consumers from high medical-related debt, compounding interest from collections, and potential bankruptcies.

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One comment was received during the public comment period from Pro Seniors, Inc. expressing concerns that the rule violated federal regulations. ODM assured the CSI Office and Pro Seniors, Inc. the rule is in full compliance with federal regulations and the rule ensures that recipients are fully informed of the ramifications of any decisions, while allowing the Department to hold providers accountable when a provider deviates from these safeguards.

After reviewing the proposed rule and associated BIA, the CSI Office has determined the purpose of the rule is justified.

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.

cc: Mark Hamlin, Lt. Governor's Office