

**MEMORANDUM**

**TO:** Tommi Potter, Ohio Department of Medicaid

**FROM:** Sydney King, Regulatory Policy Advocate

**DATE:** January 12, 2016

**RE:** **CSI Review – ODM-Administered Waiver Provider Enrollment Process (OAC 5160-45-04)**

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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<sup>1</sup> proposed by the Ohio Department of Medicaid (ODM). The rule package was submitted to the CSI Office on December 04, 2015 and the public comment period was held open through December 11, 2015.

The proposed rule establishes the enrollment process for administered waiver service providers. Medicaid waivers are services, including home and community-based services, provided to individuals that meet specific age, financial, and level of care need criteria. The regulations require providers to complete the Medicaid provider enrollment process and submit a waiver provider application in order to provide waiver services to consumers.

According to the BIA, ODM performed stakeholder outreach during the early drafting of the

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<sup>1</sup> Rule 5160-45-04 is being amended by more than 50 percent. Therefore, the Legislative Service Commission requires that the existing rule be rescinded and replaced by a new rule that has the same rule number.

language. Stakeholders, including the Ohio Council for Home Care and Hospice, the Midwest Care Alliance, CareSource, CareStar, Council on Aging, Public Consulting Group, Ohio Olmstead Task Force, and Disability Rights Ohio, provided feedback on the language. The BIA details the amendments to the rule language that were a result of stakeholder input. No comments were received during the CSI public comment period.

ODM identifies waiver service providers as the impacted industry. This includes personal care aides, registered nurses/licensed practical nurses, home care attendants, and home health agencies. ODM provided a detailed analysis of the costs associated with the application process. Providers are required to submit a completed application, revalidate a provider agreement every five years, and complete database and criminal records checks. The CSI Office inquired about the purpose for the additional waiver provider application if the provider is already required to complete a Medicaid provider enrollment application. ODM stated that it is not necessarily a second application and that it is part of the application completed online by the provider when enrolling to become an ODM provider. ODM states that administered waiver enrollment process ensures Medicaid program integrity and indicates to ODM the type of waiver services the provider wants to enroll in. Therefore, the CSI Office has determined that 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.