



## Common Sense Initiative

**Mike DeWine**, Governor  
**Jon Husted**, Lt. Governor

**Carrie Kuruc**, Director

### MEMORANDUM

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

**FROM:** Jacob Ritzenthaler, Regulatory Policy Advocate

**DATE:** October 2, 2020

**RE:** **CSI Review – Presumptive Eligibility (OAC 5160:1-2-13)**

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On behalf of Lt. Governor Jon Husted, 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 Department as provided for in ORC 107.54.

#### Analysis

This rule package consists of one amended rule proposed by the Ohio Department of Medicaid (ODM). This rule package was submitted to the CSI Office on March 3, 2020, and the public comment period was held open through March 10, 2020. ODM submitted a revised BIA with additional amendments to the CSI Office on September 11, 2020. The proposed amendments had been distributed to stakeholders on September 1, 2020. Unless otherwise noted below, this recommendation reflects the version of the proposed rules filed with the CSI Office on September 11, 2020.

Ohio Administrative Code (OAC) 5160:1-2-13 establishes the conditions in which an individual may receive time-limited medical assistance based on presumptive eligibility. The rule sets forth the conditions for presumptive coverage, including eligibility criteria, duration, scope, and responsibilities of state agencies and qualified entities when providing assistance. The rule is being amended to include the Ohio Department of Rehabilitation and Correction and special supplemental nutrition programs as organizations that can determine presumptive eligibility, as well as general updates that clarify and organize the contents of the rule. The rule was resubmitted

77 SOUTH HIGH STREET | 30TH FLOOR | COLUMBUS, OHIO 43215-6117

[CSIPublicComments@governor.ohio.gov](mailto:CSIPublicComments@governor.ohio.gov)

with additional changes, such as including ODM as a qualified entity for the purposes of approving presumptive eligibility, notifying individuals of determination approval, and additional presumptive eligibility determination abilities for hospitals that are qualified entities.

During early stakeholder outreach, ODM sent the proposed rule to relevant industry stakeholders, including health care associations, county departments, and industry-involved law firms. No comments were received during this time or during the CSI public comment period. The rule was distributed to stakeholders again on September 1, 2020 with additional proposed changes and no comments were received.

The business community impacted by the rule are all qualified entity businesses operating in Ohio, including county Departments of Job and Family Services, hospitals, federally qualified health centers, local health departments, and special nutrition programs. The adverse impact created by this rule is primarily the administrative effort spent by qualified entities determining eligibility and sending notices of approval or denial. ODM states that qualified entities make an average of 50 determinations regarding presumptive eligibility per month, with the determination and approval process taking approximately five minutes per individual. ODM states in the BIA that the rule is necessary to comply with state and federal statutes regarding determinations of presumptive eligibility.

### **Recommendations**

Based on the information above, the CSI Office has no recommendations on this rule package.

### **Conclusion**

The CSI Office concludes that the Ohio Department of Medicaid should proceed in filing the proposed rules with the Joint Committee on Agency Rule Review.