

Mike DeWine, Governor Jon Husted, Lt. Governor

Joseph Baker, Director

Initiative

Common Sense

MEMORANDUM

TO:	Tommi Potter, Ohio Department of Medicaid
FROM:	Jacob Ritzenthaler, Business Advocate
DATE:	May 9, 2023
RE:	CSI Review – Presumptive Eligibility (OAC 5160:1-2-13)

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.

<u>Analysis</u>

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 31, 2023, and the public comment period was held open through April 7, 2023. Unless otherwise noted below, this recommendation reflects the version of the proposed rule filed with the CSI Office on March 31, 2023.

Ohio Administrative Code 5160:1-2-13 establishes requirements for determining presumptive eligibility for time-limited medical assistance. The rule sets forth criteria for eligibility, the duration and scope of coverage, and the responsibilities of qualified entities. The rule is amended to remove ODM as a qualified entity and remove the ability of a hospital that serves as a qualified entity to make presumptive eligibility determinations for individuals in long-term care. ODM states that these provisions were introduced in response to the COVID-19 pandemic and are requested for removal by the Centers for Medicare & Medicaid Services.

During early stakeholder outreach, ODM sent the proposed rule to industry stakeholders for feedback, including health care professional organizations, county departments of job and family

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services, and relevant law firms. No comments were received during that time or during the CSI public comment period.

The business community impacted by the rule includes medical providers participating in the presumptive eligibility program as qualified entities. The adverse impact created by the rule includes the time spent by providers to determine presumptive eligibility. ODM estimates that qualified entities make an average of fifty presumptive eligibility determinations per month. ODM states that the adverse impact is necessary to provide immediate medical care to individuals and to provide a framework for the determination process for providers.

Recommendations

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

Conclusion

The CSI Office concludes that ODM should proceed in filing the proposed rule with the Joint Committee on Agency Rule Review.