



## Common Sense Initiative

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

**Sean McCullough**, Director

### MEMORANDUM

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

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

**DATE:** July 15, 2021

**RE:** **CSI Review - Comprehensive Primary Care Program (OAC 5160-19-01 and 5160-19-02)**

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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 Agency as provided for in ORC 107.54.

#### Analysis

This rule package consists of two amended rules proposed by the Ohio Department of Medicaid (ODM). This rule package was submitted to the CSI Office on June 16, 2021, and the public comment period was held open through June 24, 2021. Unless otherwise noted below, this recommendation reflects the version of the proposed rules filed with the CSI Office on June 16, 2021.

Ohio Administrative Code (OAC) Chapter 5160-19 establishes requirements for patient-centered medical homes (PCMH) related to the Comprehensive Primary Care (CPC) Program and CPC for Kids Program. OAC 5160-19-01 establishes requirements for provider eligibility, including definitions, lists of eligible types of providers, and required activities. The rule is amended to remove year numbers that are no longer accurate, introduce new definitions, and updates related to ages of children in the list of clinical quality metrics and conducting activity requirement evaluations. OAC 5160-19-02 concerns payments to PCMHs and is amended to correct a typographical error.

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During early stakeholder outreach, ODM sent the rules to CPC participants. ODM states that stakeholder input was used to make many of the proposed amendments, including removal of unnecessary dates. ODM did not make changes that suggested including more program operation details, as those details are discussed in program materials and on the ODM website. No comments were received during the CSI public comment period.

The business community impacted by these rules includes providers enrolled in Ohio's Medicaid fee-for-service program, Medicaid managed care plans, and other providers contracted with Medicaid managed care plans. The adverse impact created by the rules is primarily the requirement to meet quality metrics through service provision, which can vary based on the size and scope of the practice. Practices that do not continually complete activities will no longer receive payment through the program. ODM states that the rules are beneficial to practices through performance-based incentives that link program participants to better care.

### **Recommendations**

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

### **Conclusion**

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