

As Introduced

134th General Assembly

Regular Session

2021-2022

H. B. No. 600

Representative Roemer

Cosponsors: Representatives Hoops, Lipps, Manchester, Seitz, Stein

A BILL

To amend sections 173.50 and 173.501 of the Revised Code to expand Ohio's Medicaid component known as the Program of All-Inclusive Care for the Elderly (PACE) and to make an appropriation.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:

Section 1. That sections 173.50 and 173.501 of the Revised Code be amended to read as follows:

Sec. 173.50. (A) As used in this section and section 173.501 of the Revised Code:

(1) "CMS" means the United States centers for medicare and medicaid services.

(2) "Entity" has the same meaning as in 42 C.F.R. 460.10.

(3) "PACE center," "PACE organization," "participant," and "state administering agency" have the same meanings as in 42 C.F.R. 460.6.

(B) Pursuant to a contract entered into with the department of medicaid as an interagency agreement under section 5162.35 of the Revised Code, the department of aging shall carry

out, as the state administering agency, the day-to-day 18
administration of the component of the medicaid program known as 19
the program of all-inclusive care for the elderly or PACE. The 20
department of aging shall carry out its PACE administrative 21
duties in accordance with the provisions of the interagency 22
agreement and all applicable federal laws, including the "Social 23
Security Act," section 1934, 42 U.S.C. 1396u-4 and 42 C.F.R. 24
Part 460. 25

~~(B)~~ (C) Not later than ninety days after the effective 26
date of this amendment, the department of aging shall issue a 27
request for proposals from any entity interested in becoming a 28
PACE organization for service areas in the counties, or 29
contiguous zip codes within the counties, or extending from the 30
counties, of Franklin, Hamilton, Montgomery, Lorain, Lucas, and 31
Summit. Proposals shall be submitted to the department not later 32
than ninety days after the date the department issues the 33
request for proposals. 34

(D) To be eligible for approval by the department to 35
become a PACE organization, an entity shall meet all of the 36
following requirements: 37

(1) The entity is one of the following or is owned by 38
either of the following: 39

(a) A nonprofit entity that is exempt from federal income 40
taxation under section 501(c)(3) of the Internal Revenue Code; 41

(b) A for-profit entity. 42

(2) The entity provides a feasibility study of its 43
proposed service area to the department within ninety days after 44
providing a letter of intent to apply to the department. 45

(3) The entity has a current, valid provider agreement, as 46

defined in section 5164.01 of the Revised Code, or is eligible 47
to enter into a provider agreement. 48

(4) The entity meets all federal requirements applicable 49
to PACE organizations. 50

(5) The entity demonstrates to the satisfaction of the 51
department that the organization has experience providing health 52
care services to frail older adults and that each member of the 53
entity's staff, including employees and contractors, complies 54
with 42 C.F.R. 460.64. 55

(6) The entity has a facility suitable to be a PACE 56
center, or plans to acquire, build, or expand a facility 57
suitable to be a PACE center prior to beginning services, in its 58
proposed service area, as described in the request for proposals 59
process. 60

(7) The entity meets any additional requirements in rules 61
adopted by the department pursuant to division (K) of this 62
section. 63

(E) The department shall review all proposals submitted in 64
accordance with this section. For each of the six service areas 65
identified in division (C) of this section, the department shall 66
determine from the proposals which entity it approves to become 67
PACE organization for each service area. The determination shall 68
be made not later than one hundred eighty days after the date 69
the department issues the request for proposals. 70

(F) The department shall provide each entity it approves 71
to become a PACE organization with a statement of assurances to 72
CMS that indicates that the department considers the entity to 73
be qualified to be a PACE organization and is willing to enter 74
into a PACE program agreement with the entity. 75

(G) Each entity approved by the department to become a PACE organization shall apply to CMS to become a PACE organization and include with the application to CMS the department's statement of assurance. 76
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(H) Each entity approved to become a PACE organization by both the department and CMS shall begin providing services to participants not later than two years after the entity receives notice of its approval from CMS, but only if adequate federal financial participation is available. 80
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(I) A PACE organization and the department shall make eligibility determinations for individuals seeking to enroll in the PACE program pursuant to 42 C.F.R. 460.152. 85
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(J) So long as a PACE organization is providing access to PACE program services for all eligible individuals in the area served by the PACE organization, the department shall not authorize any other organization to serve as a PACE organization for that area. 88
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For purposes of this division, an individual is considered to have access to PACE program services if there is a PACE organization with an adult day health center, or approved alternative care setting, that is within a forty-five-minute drive from the individual's place of residence. 93
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(K) To the extent authorized by rules authorized by section 5162.021 of the Revised Code, the director of aging may adopt rules in accordance with Chapter 119. of the Revised Code regarding the PACE program, including rules establishing priorities for enrolling in the program pursuant to section 173.501 of the Revised Code. The rules shall address only those issues that are not addressed in rules adopted by the medicaid 98
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director for the PACE program.	105
Sec. 173.501. (A) As used in this section:	106
"Nursing, "nursing facility" has the same meaning as in	107
section 5165.01 of the Revised Code.	108
"PACE provider" has the same meaning as in the "Social	109
Security Act," section 1934(a) (3), 42 U.S.C. 1396u-4(a) (3).	110
(B) The department of aging shall establish a home first	111
component of the PACE program under which eligible individuals	112
may be enrolled in the PACE program in accordance with this	113
section. An individual is eligible for the PACE program's home	114
first component if both of the following apply:	115
(1) The individual has been determined to be eligible for	116
the PACE program.	117
(2) At least one of the following applies:	118
(a) The individual has been admitted to a nursing	119
facility.	120
(b) A physician has determined and documented in writing	121
that the individual has a medical condition that, unless the	122
individual is enrolled in home and community-based services such	123
as the PACE program, will require the individual to be admitted	124
to a nursing facility within thirty days of the physician's	125
determination.	126
(c) The individual has been hospitalized and a physician	127
has determined and documented in writing that, unless the	128
individual is enrolled in home and community-based services such	129
as the PACE program, the individual is to be transported	130
directly from the hospital to a nursing facility and admitted.	131

(d) Both of the following apply: 132

(i) The individual is the subject of a report made under 133
section 5101.63 of the Revised Code regarding abuse, neglect, or 134
exploitation or such a report referred to a county department of 135
job and family services under section 5126.31 of the Revised 136
Code or has made a request to a county department for protective 137
services as defined in section 5101.60 of the Revised Code. 138

(ii) A county department of job and family services and ~~an~~ 139
~~area agency on aging~~ a PASSPORT administrative agency have 140
jointly documented ~~in writing~~ that, unless the individual is 141
enrolled in home and community-based services such as the PACE 142
program, the individual should be admitted to a nursing 143
facility. 144

(C) Each month, the department of aging shall identify 145
individuals who are eligible for the home first component of the 146
PACE program. When the department identifies such an individual, 147
the department shall notify the PACE ~~provider serving the~~ 148
organization with a service area in which the individual 149
resides. The PACE ~~provider organization~~ shall determine whether 150
the PACE program is appropriate for the individual and whether 151
the individual would rather participate in the PACE program than 152
continue or begin to reside in a nursing facility. If the PACE 153
~~provider organization~~ determines that the PACE program is 154
appropriate for the individual and the individual would rather 155
participate in the PACE program than continue or begin to reside 156
in a nursing facility, the PACE ~~provider organization~~ shall so 157
notify the department of aging. On receipt of the notice from 158
the PACE ~~provider organization~~, the department of aging shall 159
approve the individual's enrollment in the PACE program in 160
accordance with priorities established in rules adopted under 161

section 173.50 of the Revised Code. 162

Section 2. That existing sections 173.50 and 173.501 of 163
the Revised Code are hereby repealed. 164

Section 3. All items in this act are hereby appropriated 165
as designated out of any moneys in the state treasury to the 166
credit of the designated fund. For all operating appropriations 167
made in this act, those in the first column are for fiscal year 168
2022 and those in the second column are for fiscal year 2023. 169
The operating appropriations made in this act are in addition to 170
any other operating appropriations made for the FY 2022-FY 2023 171
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Section 4. 173

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A	MCD DEPARTMENT OF MEDICAID				
B	Dedicated Purpose Fund Group				
C	5CV3	651687	PACE Program Expansion	\$50,000,000	\$0
D	TOTAL DPF Dedicated Purpose Fund Group			\$50,000,000	\$0
E	TOTAL ALL BUDGET FUND GROUPS			\$50,000,000	\$0

PACE PROGRAM EXPANSION 175

The foregoing appropriation item 651687, PACE Program 176
Expansion, shall be used to expand the component of the Medicaid 177
program known as the Program of All-Inclusive Care for the 178
Elderly or PACE to a total of six PACE organizations in 179

accordance with section 173.50 of the Revised Code, as amended 180
by this act. 181

Amounts equal to the unexpended, unencumbered balance of 182
the foregoing appropriation item, 651687, PACE Program 183
Expansion, at the end of fiscal year 2022 are hereby 184
reappropriated to the same appropriation item in fiscal year 185
2023 for the same purpose. 186

Section 5. Within the limits set forth in this act, the 187
Director of Budget and Management shall establish accounts 188
indicating the source and amount of funds for each appropriation 189
made in this act, and shall determine the form and manner in 190
which appropriation accounts shall be maintained. Expenditures 191
from operating appropriations contained in this act shall be 192
accounted for as though made in H.B. 110 of the 134th General 193
Assembly. The operating appropriations made in this act are 194
subject to all provisions of H.B. 110 of the 134th General 195
Assembly that are generally applicable to such appropriations. 196