

I_134_1302

134th General Assembly
Regular Session
2021-2022

. B. No.

A BILL

To amend sections 3701.021 and 3701.022 of the 1
Revised Code to expand eligibility for the 2
Program for Medically Handicapped Children to 3
individuals up to age 26 and to make an 4
appropriation. 5

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

Section 1. That sections 3701.021 and 3701.022 of the 6
Revised Code be amended to read as follows: 7

Sec. 3701.021. (A) The director of health shall adopt, in 8
accordance with Chapter 119. of the Revised Code, such rules as 9
are necessary to carry out sections 3701.021 to 3701.0210 of the 10
Revised Code, including, but not limited to, rules to establish 11
the following: 12

(1) ~~Medical~~ Subject to division (D) of this section, 13
medical and financial eligibility requirements for the program 14
for medically handicapped children; 15

(2) Subject to division (C) of this section, eligibility 16
requirements for providers who provide goods and services for 17



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the program for medically handicapped children;	18
(3) Procedures to be followed by the department of health in disqualifying providers for violating requirements adopted under division (A) (2) of this section;	19 20 21
(4) Procedures to be used by the department regarding application for diagnostic services under division (B) of section 3701.023 of the Revised Code and payment for those services under division (E) of that section;	22 23 24 25
(5) Standards for the provision of service coordination by the department of health and city and general health districts;	26 27
(6) Procedures for the department to use to determine the amount to be paid annually by each county for services for medically handicapped children and to allow counties to retain funds under divisions (A) (2) and (3) of section 3701.024 of the Revised Code;	28 29 30 31 32
(7) Financial eligibility requirements for services for Ohio residents twenty-one years of age or older who have cystic fibrosis;	33 34 35
(8) Criteria for payment of approved providers who provide goods and services for medically handicapped children;	36 37
(9) Criteria for the department to use in determining whether the payment of health insurance premiums of participants in the program for medically handicapped children is cost- effective;	38 39 40 41
(10) Procedures for appeal of denials of applications under divisions (A) and (D) of section 3701.023 of the Revised Code, disqualification of providers, and amounts paid for services;	42 43 44 45

(11) Terms of appointment for members of the medically 46
handicapped children's medical advisory council created in 47
section 3701.025 of the Revised Code; 48

(12) Eligibility requirements for the hemophilia program, 49
including income and hardship requirements; 50

(13) If a manufacturer discount program is established 51
under division (J) (1) of section 3701.023 of the Revised Code, 52
procedures for administering the program, including criteria and 53
other requirements for participation in the program by 54
manufacturers of drugs and nutritional formulas. 55

(B) The department of health shall develop a manual of 56
operational procedures and guidelines for the program for 57
medically handicapped children to implement sections 3701.021 to 58
3701.0210 of the Revised Code. 59

(C) A medicaid provider, as defined in section 5164.01 of 60
the Revised Code, is eligible to be a provider of the same goods 61
and services for the program for medically handicapped children 62
that the provider is approved to provide for the medicaid 63
program and the director shall approve such a provider for 64
participation in the program for medically handicapped children. 65

(D) In establishing medical and financial eligibility 66
requirements for the program for medically handicapped children, 67
the director of health shall not, on or after July 1, 2022, 68
specify an age restriction that excludes from eligibility an 69
individual who is less than twenty-one years of age or is any of 70
the following: 71

(1) Beginning on July 1, 2022, less than twenty-two years 72
of age; 73

(2) Beginning on July 1, 2023, less than twenty-three 74

<u>years of age;</u>	75
<u>(3) Beginning on July 1, 2024, less than twenty-four years</u>	76
<u>of age;</u>	77
<u>(4) Beginning on July 1, 2025, less than twenty-five years</u>	78
<u>of age;</u>	79
<u>(5) Beginning on July 1, 2026, less than twenty-six years</u>	80
<u>of age.</u>	81
Sec. 3701.022. As used in sections 3701.021 to 3701.0210	82
of the Revised Code:	83
(A) "Medically handicapped child" means an Ohio resident	84
under twenty one years of age who meets the age requirements set	85
forth in division (D) of section 3701.021 of the Revised Code	86
who suffers primarily from an organic disease, defect, or a	87
congenital or acquired physically handicapping and associated	88
condition that may hinder the achievement of normal growth and	89
development.	90
(B) "Provider" means a health professional, hospital,	91
medical equipment supplier, and any individual, group, or agency	92
that is approved by the department of health pursuant to	93
division (C) of section 3701.023 of the Revised Code and that	94
provides or intends to provide goods or services to a child who	95
is eligible for the program for medically handicapped children.	96
(C) "Service coordination" means case management services	97
provided to medically handicapped children that promote	98
effective and efficient organization and utilization of public	99
and private resources and ensure that care rendered is family-	100
centered, community-based, and coordinated.	101
(D) (1) "Third party" means any person or government entity	102

other than the following:	103
(a) A medically handicapped child participating in the	104
program for medically handicapped children or the child's parent	105
or guardian;	106
(b) The department or any program administered by the	107
department, including the "Maternal and Child Health Block	108
Grant," Title V of the "Social Security Act," 95 Stat. 818	109
(1981), 42 U.S.C.A. 701, as amended;	110
(c) The "caring program for children" operated by the	111
nonprofit community mutual insurance corporation.	112
(2) "Third party" includes all of the following:	113
(a) Any trust established to benefit a medically	114
handicapped child participating in the program or the child's	115
family or guardians, if the trust was established after the date	116
the medically handicapped child applied to participate in the	117
program;	118
(b) That portion of a trust designated to pay for the	119
medical and ancillary care of a medically handicapped child, if	120
the trust was established on or before the date the medically	121
handicapped child applied to participate in the program;	122
(c) The program awarding reparations to victims of crime	123
established under sections 2743.51 to 2743.72 of the Revised	124
Code.	125
(E) "Third-party benefits" means any and all benefits paid	126
by a third party to or on behalf of a medically handicapped	127
child participating in the program or the child's parent or	128
guardian for goods or services that are authorized by the	129
department pursuant to division (B) or (D) of section 3701.023	130

of the Revised Code. 131

(F) "Hemophilia program" means the hemophilia program the 132
department of health is required to establish and administer 133
under section 3701.029 of the Revised Code. 134

Section 2. That existing sections 3701.021 and 3701.022 of 135
the Revised Code are hereby repealed. 136

Section 3. All items in this act are hereby appropriated 137
as designated out of any moneys in the state treasury to the 138
credit of the designated fund. For all operating appropriations 139
made in this act, those in the first column are for fiscal year 140
2022 and those in the second column are for fiscal year 2023. 141
The operating appropriations made in this act are in addition to 142
any other operating appropriations made for the FY 2022-FY 2023 143
biennium. 144

Section 4. 145

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	1	2	3	4	5
A			DOH DEPARTMENT OF HEALTH		
B		General Revenue Fund			
C	GRF	440505	Medically Handicapped Children	\$500,000	\$500,000
D		TOTAL GRF	General Revenue Fund	\$500,000	\$500,000
E		TOTAL ALL BUDGET	FUND GROUPS	\$500,000	\$500,000

Section 5. Within the limits set forth in this act, the 147
Director of Budget and Management shall establish accounts 148

indicating the source and amount of funds for each appropriation	149
made in this act, and shall determine the form and manner in	150
which appropriation accounts shall be maintained. Expenditures	151
from operating appropriations contained in this act shall be	152
accounted for as though made in the main operating	153
appropriations act of the 134th General Assembly. The operating	154
appropriations made in this act are subject to all provisions of	155
the main operating appropriations act of the 134th General	156
Assembly that are generally applicable to such appropriations.	157