

**As Introduced**

**134th General Assembly**

**Regular Session**

**2021-2022**

**H. B. No. 572**

**Representatives Ginter, Carruthers**

**Cosponsors: Representatives Seitz, Carfagna, Johnson, Troy, Young, T., Click,  
Lanese, Gross, Denson, Grendell**

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**A BILL**

To enact sections 173.57 and 5166.45 of the Revised Code to require the Departments of Aging and Medicaid to establish programs to provide payment to residential care facilities that have one or more residents who are Assisted Living waiver recipients or meet other criteria.

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

**Section 1.** That sections 173.57 and 5166.45 of the Revised Code be enacted to read as follows:

**Sec. 173.57.** (A) As used in this section:

(1) "Nursing facility" has the same meaning as in section 5165.01 of the Revised Code.

(2) "Residential care facility" has the same meaning as in section 3721.01 of the Revised Code.

(B) Unless the medicaid-funded component of the assisted living program is terminated pursuant to division (C) of section 173.54 of the Revised Code, the director of aging shall

establish a program under the medicaid-funded component of the 17  
assisted living program to provide payment to residential care 18  
facilities that meet both of the following qualifications: 19

(1) One or more of the facility's residents are enrolled 20  
in the assisted living program. 21

(2) At least forty per cent of the facility's occupied 22  
units are subject to a federal extended low-income housing 23  
commitment and are occupied by either of the following: 24

(a) Residents with incomes of not more than sixty per cent 25  
of the geographic area's median income; 26

(b) Residents with incomes of not more than eighty per 27  
cent of the geographic area's median income, with the average 28  
imputed income for units occupied by such residents being not 29  
more than sixty per cent of the area's median gross income. 30

(C) Not later than ninety days after the effective date of 31  
this section, the director shall adopt rules authorized under 32  
section 173.54 of the Revised Code to establish and implement 33  
the program. The rules shall establish a payment rate for 34  
residential care facilities under the program that equals at 35  
least fifty but not more than sixty per cent of the average 36  
medicaid day payment rate provided to nursing facilities under 37  
Chapter 5165. of the Revised Code. 38

**Sec. 5166.45. (A) As used in this section:** 39

(1) "Nursing facility" has the same meaning as in section 40  
5165.01 of the Revised Code. 41

(2) "Residential care facility" has the same meaning as in 42  
section 3721.01 of the Revised Code. 43

(B) The medicaid director shall establish a program to 44

provide payment to residential care facilities that meet either 45  
of the following qualifications: 46

(1) More than fifty per cent of the facility's residents 47  
receive services under a medicaid waiver component. 48

(2) At least forty per cent of the facility's occupied 49  
units are subject to a federal extended low-income housing 50  
commitment and are occupied by either of the following: 51

(a) Residents with incomes of not more than sixty per cent 52  
of the geographic area's median income; 53

(b) Residents with incomes of not more than eighty per 54  
cent of the geographic area's median income, with the average 55  
imputed income for units occupied by such residents being not 56  
more than sixty per cent of the area's median gross income. 57

(C) Not later than ninety days after the effective date of 58  
this section, the director shall adopt rules authorized under 59  
section 5166.02 of the Revised Code to establish and implement 60  
the program. The rules shall establish a payment rate for 61  
residential care facilities under the program that equals at 62  
least fifty but not more than sixty per cent of the average 63  
medicaid day payment rate provided to nursing facilities under 64  
Chapter 5165. of the Revised Code. 65