

As Introduced

134th General Assembly
Regular Session
2021-2022

H. B. No. 744

Representative Manchester

A BILL

To amend section 5164.91 and to enact sections 1
173.525, 5162.137, 5166.122, and 5166.162 of the 2
Revised Code regarding self-direction in certain 3
Medicaid home and community-based services 4
waiver programs. 5

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

Section 1. That section 5164.91 be amended and sections 6
173.525, 5162.137, 5166.122, and 5166.162 of the Revised Code be 7
enacted to read as follows: 8

Sec. 173.525. (A) As used in this section, "self-directed 9
services" has the same meaning as in 42 U.S.C. 1396n(i)(1)(G) 10
(iii)(II). 11

(B) Unless the medicaid-funded component of the PASSPORT 12
program is terminated pursuant to division (C) of section 173.52 13
of the Revised Code, the department of aging shall do both of 14
the following: 15

(1) Streamline the provider enrollment process for self- 16
directed services under the medicaid-funded component of the 17
PASSPORT program in accordance with division (C) of this 18
section; 19

(2) Ensure that PASSPORT program participants are enrolled 20
and able to receive self-directed services not later than thirty 21
days after the date of application for those services. The 22
department shall create an exception to this requirement in the 23
event that there are insufficient service providers or other 24
delays that are through no fault of the provider. 25

(C) The department shall streamline the enrollment process 26
for self-directed services under the medicaid-funded component 27
of the PASSPORT program by doing all of the following: 28

(1) Combining participant orientation meetings into one 29
meeting to ensure the orientation is effective and efficient; 30

(2) Establishing timelines for completing the provider 31
certification processes; 32

(3) Establishing reporting requirements to monitor 33
compliance with the certification timelines established under 34
division (C) (2) of this section; 35

(4) To the extent possible under federal law, combining 36
provider certification steps concurrently, rather than 37
sequentially; 38

(5) Collecting and compiling data on when a PASSPORT 39
program participant requests self-directed services and the 40
start date of those services to ensure timely access to 41
services. 42

(D) The department shall establish goals for the number of 43
medicaid-funded component PASSPORT program participants electing 44
to participate in self-directed services. 45

(E) The director of aging shall adopt rules as necessary 46
to implement the provisions of this section. 47

Sec. 5162.137. The medicaid director shall annually report 48
to the joint medicaid oversight committee and, in accordance 49
with section 101.68 of the Revised Code, the members of the 50
general assembly, the number and per cent of waiver program 51
participants electing to self-direct services in each of the 52
following medicaid waiver programs: 53

(A) The medicaid-funded component of the PASSPORT program; 54

(B) The Ohio home care waiver program; 55

(C) The integrated care delivery system medicaid waiver 56
component. 57

Sec. 5164.91. The medicaid director may implement a 58
demonstration project called the integrated care delivery system 59
to test and evaluate the integration of the care that dual 60
eligible individuals receive under medicare and medicaid. No 61
provision of Title LI of the Revised Code applies to the 62
integrated care delivery system if that provision implements or 63
incorporates a provision of federal law governing medicaid and 64
that provision of federal law does not apply to the system. 65

As soon as practicable, as determined by the director, but 66
not later than nine months after the effective date of this 67
amendment, the director shall expand the integrated care 68
delivery system so it is available in all counties of this 69
state. 70

Sec. 5166.122. (A) As used in this section, "self-directed 71
services" has the same meaning as in 42 U.S.C. 1396n(i) (1) (G) 72
(iii) (II). 73

(B) Unless the Ohio home care waiver program is terminated 74
pursuant to section 5166.12 of the Revised Code, the department 75
of medicaid shall implement self-directed services in the 76

program as soon as practicable, as determined by the medicaid 77
director, but not later than nine months after the effective 78
date of this section. 79

(C) Once implemented under division (B) of this section, 80
the department of medicaid shall do both of the following: 81

(1) Streamline the provider enrollment process for self- 82
directed services under the Ohio home care waiver program in 83
accordance with division (D) of this section; 84

(2) Ensure that Ohio home care waiver program participants 85
are enrolled and able to receive self-directed services not 86
later than thirty days after the date of application for those 87
services. The department shall create an exception to this 88
requirement in the event that there are insufficient service 89
providers or other delays that are through no fault of the 90
provider. 91

(D) The department shall streamline the enrollment process 92
for self-directed services under the Ohio home care waiver by 93
doing all of the following: 94

(1) Combining participant orientation meetings into one 95
meeting to ensure the orientation is effective and efficient; 96

(2) Establishing timelines for completing the provider 97
certification processes; 98

(3) Establishing reporting requirements to monitor 99
compliance with the certification timelines established under 100
division (D) (2) of this section; 101

(4) To the extent possible under federal law, combining 102
provider certification steps concurrently, rather than 103
sequentially; 104

(5) Collecting and compiling data on when an Ohio home care waiver participant requests self-directed services and the start date of those services to ensure timely access to services; 105
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(6) Permitting providers to provide conditional self-directed services for up to sixty days while undergoing any required criminal background checks and training. 109
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(E) The department shall establish goals for the number of Ohio home care waiver participants electing to participate in self-directed services. 112
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(F) The medicaid director shall adopt rules as necessary to implement the provisions of this section. 115
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Sec. 5166.162. (A) As used in this section, "self-directed services" has the same meaning as in 42 U.S.C. 1396n(i)(1)(G)(iii)(II). 117
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(B) If the medicaid director creates a home and community-based services medicaid waiver component under section 5166.16 of the Revised Code as part of the integrated care delivery system, the department of medicaid shall do both of the following: 120
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(1) Streamline the provider enrollment process for self-directed services under the ICDS medicaid waiver component in accordance with division (C) of this section; 125
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(2) Ensure that ICDS medicaid waiver participants are enrolled and able to receive self-directed services not later than thirty days after the date of application for those services. The department shall create an exception to this requirement in the event that there are insufficient service providers or other delays that are through no fault of the 128
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<u>provider.</u>	134
<u>(C) The department shall streamline the enrollment process</u>	135
<u>for self-directed services under the ICDS medicaid waiver</u>	136
<u>component by doing all of the following:</u>	137
<u>(1) Combining participant orientation meetings into one</u>	138
<u>meeting to ensure the orientation is effective and efficient;</u>	139
<u>(2) Establishing timelines for completing the provider</u>	140
<u>certification processes;</u>	141
<u>(3) Establishing reporting requirements to monitor</u>	142
<u>compliance with the certification timelines established under</u>	143
<u>division (C) (2) of this section;</u>	144
<u>(4) To the extent possible under federal law, combining</u>	145
<u>provider certification steps concurrently, rather than</u>	146
<u>sequentially;</u>	147
<u>(5) Collecting and compiling data on when an ICDS medicaid</u>	148
<u>waiver component participant requests self-directed services and</u>	149
<u>the start date of those services to ensure timely access to</u>	150
<u>services;</u>	151
<u>(6) Permitting providers to provide conditional self-</u>	152
<u>directed services for up to sixty days while undergoing any</u>	153
<u>required criminal background checks and training.</u>	154
<u>(D) The department shall establish goals for the number of</u>	155
<u>integrated care delivery system enrollees electing to</u>	156
<u>participate in self-directed services.</u>	157
<u>(E) The medicaid director shall adopt rules as necessary</u>	158
<u>to implement the provisions of this section.</u>	159
Section 2. That existing section 5164.91 of the Revised	160

Code is hereby repealed.

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