

Executive

As Passed by the House

1 AGE - 15 Ohio Community Service Council

R.C. 121.40, 121.401 and 121.402

Removes the Department of Aging as the Council's fiscal agent. Instead, requires the Council to enter into a written agreement with another state agency to serve as the fiscal agent. Eliminates the prohibition that the Council's fiscal agent approves any payroll or other personnel related documents, or any biennial budget, grant, expenditure, audit, or other fiscal-related document. Specifies that the agreement must specify all fiscal matters and financial transactions for which the fiscal agent will be responsible. Requires the Council to work with and consult with the fiscal agent with regard to the Council's fiscal matter and to follow all state fiscal, human resources, statutory, and administrative rule requirements.

Requires the Council, when appointing an Executive Director, to do so with the advice and consent of the Governor.

Adds the Director of the Governor's Office of Faith-based and Community Initiatives to the Ohio Community Service Council as a nonvoting member.

Fiscal effect: The Department may realize a minimal decrease in administrative costs.

R.C. 121.40, 121.401 and 121.402

Same as the Executive.

Same as the Executive.

Same as the Executive.

Fiscal effect: Same as the Executive.

Executive

As Passed by the House

2 AGE - 2 Civil Penalties Against Long-Term Care Providers

R.C. 173.28

Permits the Director of Aging to impose civil fines for violating prohibitions against (1) subjecting a long-term care facility resident or community long-term care services recipient to retaliation for filing a complaint or (2) denying the Long-Term Care Ombudsperson access to a long-term care facility or community-based long-term care site to investigate a complaint.

Provides that the imposition of civil fines may be in lieu of the existing criminal fines for violating the prohibitions, and requires the Attorney General to collect unpaid civil fines.

Fiscal effect: There could be a decrease in local prosecutorial costs if the Department of Aging fines a long-term care provider for violations rather than seeks action through the criminal courts. As a result, local courts would lose the fine revenues associated with these cases. Instead, these fines would be deposited into the Regional Long-Term Care Ombudsman Program Fund (Fund 4C40), used by the Department. The amount deposited would depend on the number of violations. The Attorney General's Office may realize an increase in costs if the Office is required to prosecute cases to collect any unpaid fines.

R.C. 173.28

Same as the Executive.

Same as the Executive.

Fiscal effect: Same as the Executive.

Executive		As Passed by the House
3	AGE - 1 Community-Based Long-Term Care Services	
	<p>R.C. 173.392</p> <p>Expressly provides that a community-based long-term care agency is not required to be certified in order to receive payment from the Department of Aging if the agency has a grant agreement with the Department or the Department's designee to provide community-based long-term care services.</p> <p>Expressly requires the Director of Aging to adopt rules governing grant agreements regarding the services.</p> <p>Extends the Director's rulemaking authority regarding contracts and grant agreements by including those that are entered into by the Department's designee.</p> <p>Fiscal effect: There could be a minimal increase in costs associated with rulemaking.</p>	<p>R.C. 173.392</p> <p>Same as the Executive.</p> <p>Same as the Executive.</p> <p>Same as the Executive.</p> <p>Fiscal effect: Same as the Executive.</p>
4	AGE - 34 PASSPORT Home First Report	
	<p>No provision.</p>	<p>R.C. 173.401</p> <p>Eliminates a requirement that the ODJFS Director report annually on the number of individuals enrolled in PASSPORT, which the Department of Aging administers, pursuant to the home first process and the costs incurred and savings achieved as a result of the enrollments.</p> <p>Fiscal effect: The Departments may realize a minimal decrease in administrative costs.</p>

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5 AGE - 33 Statewide Expansion of Choices Program

No provision.

R.C. 173.402

Requires that the Choices Program be available statewide, subject to federal approval.

Fiscal effect: The Choices Program is funded with moneys appropriated to PASSPORT and the program is only open to individuals currently on PASSPORT. Choices consumers typically have higher average per member per month costs than PASSPORT consumers. Thus, there could be an increase in expenditures for those consumers who decide to enroll in Choices.

6 AGE - 32 Restriction on Certain State Plan Services

No provision.

R.C. 173.403

Provides that an individual enrolled in a Medicaid waiver program the Department of Aging administers may not receive home health services, private duty nursing services, durable medical equipment, services of a clinical nurse specialist, or services of a certified nurse practitioner unless those Medicaid state plan services are provided in conjunction with Medicaid case management services.

Fiscal effect: If this is not currently done, it is possible that there could be a reduction in expenses in any Medicaid waiver program administered by the Department of Aging since Medicaid case management may decrease duplicative or unnecessary service allotments.

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As Passed by the House

7 AGE - 7 Long-Term Care Consultations

R.C. 173.42

Requires the Long-Term Care Consultation Program to be administered in a manner that includes (1) coordination and collaboration regarding funding, (2) assessments of service needs, (3) assessments of on-going eligibility for services, (4) assistance in accessing and coordinating services, (5) procedures for monitoring the provision of health and long-term care services and supports, including the quality and cultural competence of the services and supports, and (6) priorities for using resources efficiently and effectively.

Requires that a consultation be provided to (1) each nursing facility resident, in place of the current requirement that is based on a resident's potential eligibility for Medicaid and (2) each individual identified as being likely to benefit from a consultation and, for this purpose, grants the Department of Aging or a program administrator access to nursing facility resident assessment data.

Eliminates the requirement to provide a written summary of each consultation.

Permits the Director of Aging to fine a nursing facility for denying access to the facility or a resident as needed to perform a consultation or implement the program and requires the Director to give notice and an opportunity for a hearing before imposing any fine.

R.C. 173.42, 173.421 - 173.425

Same as the Executive, but requires the program to be administered in a manner that includes procedures for monitoring the quality of long-term care services and supports and the health and welfare of individuals receiving the services and supports (rather than procedures for monitoring the provision of health and long-term care services and supports). Requires that the procedures include procedures for assessing the extent to which long-term care services and supports are provided in a culturally competent manner (rather than procedures for monitoring the quality and cultural competence of the services and supports).

Same as the Executive, but permits rather than requires that a consultation be provided to each nursing facility resident.

Same as the Executive.

Same as the Executive.

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As Passed by the House

Authorizes the adoption of additional rules regarding: (1) criteria and procedures for identifying and recommending service options, (2) types of nursing facility information needed to assist a resident with relocation, and (3) standards to prevent conflicts of interest relative to referrals made by persons providing consultations.

Same as the Executive.

No provision.

Permits the Department to establish, as part of the program, procedures for periodic or follow-up consultations for nursing facility residents.

No provision.

Requires the Department or entity administering the program, as part of the program, to assist an individual or individual's representative in accessing all sources of care and services that are appropriate and for which the individual is eligible.

No provision.

Requires the Department or entity administering the program to monitor individuals who are the subject of a consultation and elect to receive certain Medicaid-covered home and community-based services.

No provision.

Requires the Department to develop and implement procedures necessary to comply with federal law if, under federal law, an individual's eligibility for certain Medicaid-covered home and community-based services is dependent on an evaluation of the individual's needs and capabilities and an individualized plan of care or services.

No provision.

Requires the Department to prepare an annual report regarding individuals who are the subjects of consultations and elect to receive certain Medicaid-covered home and community-based services.

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Fiscal effect: These provisions could increase the number of long-term care consultations performed and thus increase costs for the Department of Aging. However, if more consultations are performed then it is possible that services may be more efficiently allocated, which could ultimately save costs for the Department. The Department may realize an increase in fine revenue for denying access to the facility or to a resident as needed to perform consultations. Minimal administrative savings could occur for entities conducting the consultations due to the elimination of the requirement to provide a written summary of each consultation performed.

Fiscal effect: Same as the Executive, but since the consultations for nursing facilities are permissive, the Department will perform them as appropriations allow. Costs could increase for provisions requiring the Department to assist individuals in accessing all appropriate sources of care and services and monitoring individuals who have received a consultation and received certain Medicaid services. Minimal increases in administrative costs could occur as a result of the provision requiring the Department to prepare an annual report regarding individuals who are subjects of consultations and elect to receive certain Medicaid services.

8 AGE - 3 Home First Process for PACE

R.C. 173.501, 173.50

Establishes a home first process for the Program for All-Inclusive Care (PACE) under which an individual who is admitted to a nursing facility while on a waiting list for PACE is to be enrolled in the program in accordance with priorities established in rules if it is determined that PACE is appropriate for the individual and the individual would rather participate in PACE than continue residing in the nursing facility.

Requires the Director of Aging to report annually on the number of individuals enrolled in PACE pursuant to the home first process and the costs incurred and savings achieved as a result of the enrollments.

Fiscal effect: If individuals are enrolled into PACE and thus diverted from nursing homes, there could be savings to the state since PACE service costs are lower than nursing home service costs. The savings would depend upon the number of individuals diverted.

R.C. 173.501, 173.50

Same as the Executive.

No provision.

Fiscal effect: Same as the Executive, but there could be minimal savings as a result of the elimination of the report requirement.

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9 AGE - 10 Ohio's Best Rx Program

Sections: 209.50, R.C. 127.16, 173.99, 2921.13,
Repealed: R.C. 173.71 - 173.91

Discontinues the Best Rx Program and requires the Director of Aging to wind up the program's affairs according to the following timeline: (1) program enrollment ceases on the bill's effective date, (2) previously enrolled persons may purchase drugs until November 15, 2009, (3) program accounts are to be reconciled between November 15, 2009, and January 1, 2010, and (4) all statutes governing the program are repealed on January 1, 2010.

No provision.

Abolishes SSR Fund 5AA0, Ohio's Best Rx Administration, on January 1, 2010 and transfers any cash balance to the GRF. Cancels any existing encumbrances against SSR Fund 5AA0 appropriation item 490673, Ohio's Best Rx Administration.

R.C. 209.50, R.C. 127.16, 173.70, 173.99, 2921.13,
Repealed: R.C. 173.71 - 173.91

Same as the Executive, but repeals statutes governing the Best Rx Program on July 1, 2009, rather than January 1, 2010, and requires the Director of Aging to conclude the Program's operation within a month of the repeal date, while allowing accounts with drug manufacturers and pharmacies to be settled until October 1, 2009.

Permits the Director of Aging to contract with any person for the operation of a drug discount program similar to the Best Rx Program and allows the Director to provide the person with information that identifies individuals who participated in the Best Rx Program.

Same as the Executive, but changes the abolishment of Fund 5AA0 to October 1, 2009 and transfers cash from Fund 5AA0 to the GRF on August 1, 2009, with a subsequent and final transfer occurring on October 1, 2009. Specifies that Fund 5AA0 will remain open after August 1, 2009, to allow for accounts to be settled with drug manufacturers and pharmacies.

10 AGE - 8 Brain Injury Advisory Committee

R.C. 3304.231

Adds the Director of Aging to the Brain Injury Advisory Committee.

R.C. 3304.231

Same as the Executive.

Executive

As Passed by the House

Fiscal effect: None.

Fiscal effect: Same as the Executive.

11 AGE - 36 Consolidated Federal Medicaid Waiver

R.C. 5111.861, 173.40, 173.401, 173.402, 173.403, 5111.89, 5111.891, 5111.894, 5111.971

No provision.

Requires the ODJFS Director to seek federal approval to consolidate the Assisted Living Program, Choices Program, and PASSPORT Program into one Medicaid waiver.

No provision.

Requires those programs to be operated as separate Medicaid waivers until the state receives federal approval for the consolidated Medicaid waiver.

Fiscal effect: May increase or decrease Medicaid waiver program costs. May allow for more efficient allocation of resources.

12 AGE - 14 Long-Term Care

Section: 209.20

Section: 209.20

Specifies that the Department of Aging is required to provide long-term care consultations to assist individuals in planning for long-term health care needs. GRF appropriation item 490423, Long Term Care Budget - State, and FED 3C40 appropriation item 490623, Long Term Care Budget, may be used to provide preadmission screening and resident review.

Same as the Executive.

Specifies that GRF appropriation items 490423, Long Term Care Budget State, and FED Fund 3C40 appropriation item 490623, Long Term Care Budget, may be used to provide long-term care consultations regardless of Medicaid eligibility.

Same as the Executive.

Executive

As Passed by the House

Specifies that GRF appropriation item 490423, Long Term Care Budget State, and FED Fund 3C40 appropriation item 490623, Long Term Care Budget, may be used to provide nonwaiver funded PASSPORT services to persons determined to be eligible to participate in the program, including those persons not yet determined to be financially eligible to participate by a county department of job and family services.

Same as the Executive.

Specifies that the Department is required to administer the PASSPORT, Choices, Assisted Living, and PACE programs as delegated through an interagency agreement with the Department of Job and Family Services. Specifies that GRF appropriation item 490423, Long Term Care Budget State, be used for the state match for federal Medicaid funds supporting the previously mentioned programs. Specifies that FED Fund 3C40 appropriation item 490623, Long Term Care Budget, be used for the federal match for all program costs eligible for Medicaid reimbursement. Allows both appropriation items to be used to support the Department of Aging's administrative costs relating to the programs.

Same as the Executive.

No provision.

Earmarks \$200,000 in GRF appropriation item 490423, Long Term Care State Budget - State, in each fiscal year for the Visiting Nurse Association Health Care Partners of Ohio for the Chronic Disease Management Home Health Aide Workforce Training Program.

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13 AGE - 16 Allocation of PACE Slots

Section: 209.20

Allows the Director of Aging, as appropriate and to the extent funding is available, to allocate funds for the Program for All-Inclusive Care (PACE) between the PACE sites in Cleveland and Cincinnati.

Fiscal effect: None, the provision only allows for funds to be allocated between the two sites.

Section: 209.20

Replaces the Executive provision with a provision that specifies that the Director of Aging may expand PACE to regions of Ohio beyond those currently served by the two PACE sites in Cleveland and Cincinnati, but prohibits the Director, when expanding PACE, from reducing the number of PACE slots below 880 for the counties and parts of counties currently participating in PACE.

Fiscal effect: The expansion of PACE sites will be dependent upon available funds and perhaps federal approval.

14 AGE - 28 Home First Program

Section: 209.20

Specifies that on a quarterly basis, on receipt of certified expenditures related to sections 173.401, 173.351, and 5111.894 of the Revised Code, the Director of Budget and Management may do the following:

- (1) Transfer cash from SSR Fund 5R20, Nursing Facility Stabilization, used by the Department of Job and Family Services, to SSR Fund 4J40, PASSPORT/Residential State Supplement, used by the Department of Aging;
- (2) Authorize additional expenditures from FED Fund 3C40, PASSPORT, when receipts credited exceed appropriated amounts;
- (3) Authorize additional expenditures from FED Fund 3G50, Interagency Reimbursement, used by the Department of Job and Family Services, when receipts

Section: 209.20

Same as the Executive.

Same as the Executive.

Same as the Executive.

Same as the Executive.

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credited exceed appropriated amounts.

Specifies that individuals placed in the PASSPORT, Assisted Living, Residential State Supplement, and PACE pursuant to this section must be in addition to the individuals placed on these programs during FY 2010 and FY 2011 before any transfers to GRF appropriation item 490423, Long Term Care Budget - State, are made.

Same as the Executive.

15 AGE - 11 Residential State Supplement Program Income and Payment Standards

Section: 209.30

Specifies the amounts the Department of Aging must use to determine whether an individual is eligible for a payment under the Residential State Supplement Program and the amount each resident is to receive per month.

Section: 209.30

Same as the Executive.

16 AGE - 12 Residential State Supplement Workgroup

Section: 209.30

Creates the Residential State Supplement Workgroup and requires the Workgroup to examine the sole issue of which state agency is the most appropriate to administer the Residential State Supplement Program.

Fiscal effect: None, the members do not receive compensation for duties performed during their time on the Workgroup.

No provision.

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17	AGE - 17	Ohio Community Service Council	Section: 209.30	Same as the Executive.
<p>Section: 209.30</p> <p>Specifies that GRF appropriation item 490409, AmeriCorps Operations, and FED Fund 3R70 appropriation item 490617, AmeriCorps Programs, must be used in accordance with section 121.40 of the Revised Code.</p>				
18	AGE - 19	Senior Community Services	Section: 209.30	Section: 209.30
<p>Section: 209.30</p> <p>Specifies that GRF appropriation item 490411, Senior Community Services, be used for services designated by the Department of Aging and that service priority be given to low-income, frail, and cognitively impaired persons age 60 and over. Provides that cost sharing, including sliding-fee payments, be promoted when possible.</p>			Same as the Executive.	
19	AGE - 20	Transfer of Residential State Supplement Appropriations	Section: 209.30	Section: 209.30
<p>Section: 209.30</p> <p>Specifies that GRF appropriation item 490412, Residential State Supplement, and SSR Fund 4J40 appropriation item 490610, PASSPORT/Residential State Supplement, may be used by the Director of Aging to transfer cash, by intrastate transfer voucher, to SSR Fund 4J50, Home and Community Based Services for the Aged, used by the Department of Job and Family Services. Requires the transferred cash to be used for benefit payments to Residential State Supplement recipients.</p>			<p>Section: 209.30</p> <p>Same as the Executive, but allows the Department of Aging to also transfer cash for the Residential State Supplement (RSS) Program to the Department of Mental Health through an intrastate transfer voucher for RSS benefit payments.</p>	

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20	AGE - 21	Alzheimer's Respite	
	Section: 209.30	Specifies that GRF appropriation item 490414, Alzheimer's Respite, is to only be used to fund Alzheimer's disease services under section 173.04 of the Revised Code.	Section: 209.30 Same as the Executive.
21	AGE - 22	Alzheimer's Respite - Federal Stimulus	
	Section: 209.30	Specifies that GRF appropriation item 490625, Alzheimer's Respite - Federal Stimulus, must only be used to fund Alzheimer's disease services under section 173.04 of the Revised Code.	Section: 209.30 Same as the Executive.
22	AGE - 23	Education and Training	
	Section: 209.30	Specifies that GSF Fund 4800 appropriation item 490606, Senior Community Outreach and Education, may be used to provide training to workers in the aging field pursuant to division (G) of section 173.02 of the Revised Code.	Section: 209.30 Same as the Executive.
23	AGE - 24	Regional Long-Term Care Ombudsman Program	
	Section: 209.30	Specifies that SSR Fund 4C40 appropriation item 490609, Regional Long-Term Care Ombudsman, must be used to pay the costs of operating the regional long-term care ombudsman programs designated by the Long-Term Care Ombudsman.	Section: 209.30 Same as the Executive.

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As Passed by the House

24 AGE - 25 PASSPORT/Residential State Supplement

Section: 209.30

Specifies that SSR Fund 4J40 appropriation item 490610, PASSPORT/Residential State Supplement, may be used to fund the Residential State Supplement Program and that the remainder be used for PASSPORT.

Section: 209.30

Same as the Executive.

25 AGE - 26 Transfer of Appropriations - Federal Independence Services and Federal Aging Grants

Section: 209.30

Specifies that at the request of the Director of Aging, the Director of Budget and Management may transfer appropriation between FED Fund 3M40 appropriation item 490612, Federal Independence Services, and FED Fund 3220 appropriation item 490618, Federal Aging Grants. Limits the amounts transferred to not exceeding 30% of the appropriation from which the transfer was made. Requires such transfers be reported at the next scheduled Controlling Board meeting.

Section: 209.30

Same as the Executive.

26 AGE - 27 Transfer of Resident Protection Funds

Section: 209.30

Specifies that the Director of Budget and Management may transfer \$600,000 cash in each fiscal year from SSR Fund 4E30, Resident Protection, used by the Department of Job and Family Services, to SSR Fund 5BA0, Ombudsman Support, used by the Department of Aging.

Section: 209.30

Same as the Executive.

Executive

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27	AGE - 35	JCFS Community Options	Section: 209.30
		No provision.	Makes the following earmarks in GRF appropriation item 490416, JCFS Community Options:
		No provision.	(1) \$80,000 to the Cleveland Jewish Community Center;
		No provision.	(2) \$70,000 to the Cincinnati Jewish Vocational Services;
		No provision.	(3) \$70,000 to the Wexner Heritage Village; and
		No provision.	(4) \$20,000 to the Columbus Jewish Community Center.
28	AGE - 13	Unified Long-Term Care Budget	Sections: 209.40, 173.43, 173.431 - 173.434
		Section: 209.40	Same as the Executive.
		Creates the Unified Long-Term Care Budget Workgroup and requires the Workgroup to develop a unified long-term care budget.	Same as the Executive, but requires the ODJFS Director to work with the Directors of Aging and Budget and Management on the annual report.
		Requires the Directors of Aging and Budget and Management to annually submit a written report describing the progress towards establishing, or if already established, the effectiveness of the unified long-term care budget.	Same as the Executive.
		Allows the Director of Budget and Management to seek Controlling Board approval to transfer cash from SSR Fund 5R20, Nursing Facility Stabilization, used by the Department of Job and Family Services, to SSR Fund	

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As Passed by the House

4J40, PASSPORT/Residential State Supplement, used by the Department of Aging. Appropriates any cash transferred to SSR Fund 4J40 appropriation item 490610, PASSPORT/Residential State Supplement.
No provision.

Provides, subject to federal approval, that (1) the Department of Aging must enter into an interagency agreement with ODJFS under which the Department is to establish for each biennium a unified long-term care budget for home and community-based services covered by Medicaid waiver programs the Department administers, (2) the Department must ensure that the budget covers and expands access to the home and community-based services, and (3) the Department or its designee must provide care management and authorization services with regard to state plan services the budget covers that are provided to participants of a Medicaid waiver the Department administers.

Fiscal effect: The Department could experience a minimal increase in administrative expenses.

Fiscal effect: Same as the Executive.

29 AGE - 18 Long-Term Care Ombudsman

Section: 290.30

Specifies that GRF appropriation item 490410, Long-Term Care Ombudsman, must be used to fund ombudsman program activities as authorized in sections 173.14 to 173.27 and 173.99 of the Revised Code.

Section: 290.30

Same as the Executive.

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Medicaid

30 JFS - 9 Nursing Home Franchise Permit Fee

R.C. 3721.51, 3721.56

Increases the franchise permit fee on nursing home beds and hospitals' long-term care beds from \$6.25 per day to \$11.00 per day.

No provision.

No provision.

Provides for SSR Fund 4J50, Home and Community-Based Services for the Aged, to receive 9.09% of the money generated by the nursing home/hospital franchise permit fee and for SSR Fund 5R20, Nursing Facility Stabilization, to receive 90.91%.

Fiscal effect: The executive estimates the increase in the fee will generate \$122.2 million in FY 2010 and \$162.9 million in FY 2011.

R.C. 3721.51, 3721.50, 3721.511, 3721.512, 3721.513, 3721.53, 3721.55, 3721.56

Same as the Executive.

Requires ODJFS to seek a federal waiver to (1) reduce the nursing home franchise permit fee to zero dollars for each nursing home that is exempt from state and federal taxation, does not participate in Medicaid or Medicare, and provides services for the life of each resident without regard to the resident's ability to secure payment for the services and (2) reduce, for each nursing facility with more than 200 Medicaid-certified beds, the franchise permit fee for a number of the facility's beds specified by ODJFS to the amount necessary to obtain approval of the waiver.

Permits ODJFS to increase uniformly the franchise permit fee for each nursing home and hospital not qualifying for a reduction to an amount that will have the franchise permit fee raise an amount of money that does not exceed the amount that would be raised if not for the waiver.

Same as the Executive.

Fiscal effect: Same as the Executive.

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31	JFS - 68	Assisted Living Program	<p>R.C. <i>5111.89, 5111.891</i></p> <p>No provision.</p> <p>No provision.</p> <p>Provides that the Assisted Living Program is hereby created rather than permitting the ODJFS Director to seek federal approval to implement the program.</p> <p>Eliminates the statutory limit (1,800) on the number of individuals who may participate in the program, but specifies that enrollment may not exceed any limit set by the federal government when it approves the program.</p> <p>Fiscal effect: The provision could result in an increase in expenses for the Assisted Living Program due to the elimination of the current state limit of 1,800 slots. The increase would be dependent upon the number of slots approved by the federal government.</p>
32	JFS - 69	Assisted Living Home First Report	<p>R.C. <i>5111.894</i></p> <p>No provision.</p> <p>Eliminates a requirement that the ODJFS Director report annually on the number of individuals enrolled in the Assisted Living Program pursuant to the home first process and the costs incurred and savings achieved as a result of the enrollments.</p> <p>Fiscal effect: The Department could realize a minimal decrease in administrative costs.</p>

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33 JFS - 37 Ohio Access Success Project and Identification of Overpayments

Section: 309.31.30

Allows ODJFS to use (1) up to \$3.0 million in each fiscal year for FY 2010 and FY 2011 to fund the state share of audits or limited reviews of Medicaid providers; (2) up to \$450,000 in each fiscal year for FY 2010 and FY 2011 to provide one-time transitional benefits under the Ohio Access Success Project, from SSR Fund 4J50, Home and Community-Based Services for the Aged, used by ODJFS, if the cash in the fund is in excess of the amounts needed for the required transfers to SSR Fund 4J40, PASSPORT/Residential State Supplement, used by the Department of Aging.

Section: 309.31.30

Same as the Executive, but corrects a fund number reference.

34 JFS - 38 Transfer of Funds to the Department of Aging

Section: 309.31.40

Requires ODJFS to transfer, by intrastate transfer voucher, cash from SSR Fund 4J50, Home and Community-Based Services for the Aged, used by ODJFS, to Fund 4J40, PASSPORT/Residential State Supplement, used by the Department of Aging. Limits the sum of the transfers to \$33,263,984 in each fiscal year. Specifies that the transfer may occur on a quarterly basis or on a schedule developed and agreed to by both departments.

Section: 309.31.40

Same as the Executive, but corrects a fund number reference.

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35 DMH - 20 Ohio Family and Children First Cabinet Council

No provision.

R.C. *121.37*

Adds the Directors of Aging and Rehabilitation and Corrections as members of the Ohio Family and Children First Cabinet Council.

Fiscal effect: Increase in costs for the Departments of Aging and Rehabilitation and Correction and an increase in revenue for DMH, which acts as the fiscal agent for the Ohio Family and Children First Cabinet Council, since state agencies represented on the Council share the Council's operating costs.