

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>General</b>			
<b>1 JFS - 34 Expenditure of Federal Grant Funds</b>			
R.C. 131.33 Permits federal grant funds that are obligated by ODJFS for financial allocations to county family services agencies and local workforce investment boards to be available for expenditure for the duration of the federal grant period. <b>Fiscal effect: County family services agencies and local workforce investment boards will be able to spend federal grant dollars awarded in federal fiscal years (Oct. 1 to Sept. 30) in subsequent state fiscal years as necessary.</b>	R.C. 131.33 Same as the Executive. <b>Fiscal effect: Same as the Executive.</b>	R.C. 131.33 Same as the Executive. <b>Fiscal effect: Same as the Executive.</b>	R.C. 131.33 Same as the Executive. <b>Fiscal effect: Same as the Executive.</b>
<b>2 JFS - 5 Collaboration on Welfare Reform Training</b>			
R.C. 5101.072, (Repealed) Ends a requirement that ODJFS collaborate with county departments of job and family services to develop and provide training regarding county departments' duties under previous welfare reform legislation. <b>Fiscal effect: Potential minimal decrease in costs related to training.</b>	R.C. 5101.072, (Repealed) Same as the Executive. <b>Fiscal effect: Same as the Executive.</b>	R.C. 5101.072, (Repealed) Same as the Executive. <b>Fiscal effect: Same as the Executive.</b>	R.C. 5101.072, (Repealed) Same as the Executive. <b>Fiscal effect: Same as the Executive.</b>

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<b>3 JFS - 26 ODJFS General Services Administration and Operating Fund</b>			
<p><b>R.C. 5101.073</b></p> <p>Creates in the state treasury GSF Fund 5DM0, General Services Administration and Operating.</p> <p>Requires the Treasurer of State to transfer money in 7090 Fund R012, Refunds and Audit Settlements, to Fund 5DM0, on receipt of a report the ODJFS Director must submit when there is a final closeout of a federal grant regarding a program ODJFS administers or a reconciliation of all final transactions with the federal government regarding federal funds for a program ODJFS administers.</p> <p>Provides for money in Fund 5DM0 to be used for ODJFS's administrative expenses.</p> <p><b>Fiscal effect: Allows ODJFS to access unused federal grant money following a final closeout or reconciliation of federal funds for programs administered by ODJFS and use them for administrative expenses.</b></p>	<p><b>R.C. 5101.073</b></p> <p>Same as the Executive.</p> <p>Same as the Executive, but permits, rather than requires, the ODJFS Director to submit the report and provides that the report is provided after completion of the reconciliation of all final transactions with the federal government regarding a federal grant for a program ODJFS administers and a final closeout for the grant.</p> <p>Same as the Executive, but provides for the money to be used also for the expenses of the programs ODJFS administers.</p> <p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>R.C. 5101.073</b></p> <p>Same as the Executive.</p> <p>Same as the House.</p> <p>Same as the House.</p> <p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>R.C. 5101.073</b></p> <p>Same as the Executive.</p> <p>Same as the House.</p> <p>Same as the House.</p> <p><b>Fiscal effect: Same as the Executive.</b></p>

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<b>4 JFS - 142 Action Against a County Regarding Family Services Duties</b>			
No provision.	No provision.	No provision.	<p data-bbox="2032 370 2295 397"><b>R.C. 5101.24</b></p> <p data-bbox="2032 428 2610 760">Provides that a board of county commissioners, county children services board, or child support enforcement agency is not entitled to an administrative review when ODJFS, pursuant to its authority to take various actions against a county regarding a family services duty, performs or contracts with another entity to perform the family services duty if ODJFS determines that an emergency exists.</p> <p data-bbox="2032 776 2610 837"><b>Fiscal effect: Potential decrease in costs for ODJFS.</b></p>
<b>5 JFS - 69 Assisted Living Home First Report</b>			
No provision.	<p data-bbox="790 977 1069 1005"><b>R.C. 5111.894</b></p> <p data-bbox="790 1036 1373 1230">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 data-bbox="790 1252 1292 1349"><b>Fiscal effect: The Department could realize a minimal decrease in administrative costs.</b></p>	<p data-bbox="1408 977 1688 1005"><b>R.C. 5111.894</b></p> <p data-bbox="1408 1036 1677 1063">Same as the House.</p> <p data-bbox="1408 1252 1876 1279"><b>Fiscal effect: Same as the House.</b></p>	<p data-bbox="2032 977 2311 1005"><b>R.C. 5111.894</b></p> <p data-bbox="2032 1036 2295 1063">Same as the House.</p> <p data-bbox="2032 1252 2494 1279"><b>Fiscal effect: Same as the House.</b></p>

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<b><u>Workforce Development</u></b>			
6 JFS - 125 Expenditures from the Local Workforce Development Funds			
No provision.	No provision.	<p>R.C. 6301.03</p> <p>Allows local workforce development funds to reimburse county public assistance funds for workforce development activities.</p> <p><b>Fiscal effect: None.</b></p>	<p>R.C. 6301.03</p> <p>Same as the Senate.</p> <p><b>Fiscal effect: Same as the Senate.</b></p>
7 JFS - 95 Workforce Investment Act			
	<p><b>Sections: 309.60, 309.60.10, 309.60.20, 309.60.30</b></p>		
No provision.	<p>Makes the following earmarks of FED Fund 3V00 appropriation item 60688, Workforce Investment Act:</p> <p>(1) \$1 million in each fiscal year to reimburse nurse assistant training programs that service TANF-eligible individuals;</p>	No provision.	No provision.
No provision.	<p>(2) \$2 million in fiscal year 2010 for programs that provide skill-based education and assistance to individuals eligible for Ohio Works First;</p>	No provision.	No provision.
No provision.	<p>(3) \$700,000 in each fiscal year to support the Nursing Faculty Fellowship Grant Program.</p>	No provision.	No provision.
No provision.	<p>Reappropriates any of funds unspent for those earmarks at the end of fiscal year 2010 for fiscal year 2011.</p>	No provision.	No provision.

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As Passed by the House

As Passed by the Senate

As Enacted

**Child Care**

8 JFS - 149 **\*\*VETOED\*\*** Review of Associations and Institutions

No provision.

No provision.

No provision.

R.C. 5103.02, 5103.03

[\*\*\*VETOED: Extends from two to four years the period of time within which ODJFS must pass upon the fitness of an institution or association that receives children, or desires to receive and care for children, or places children in private homes, but retains the two-year period for individuals who, for compensation, receive or care for children for two or more consecutive weeks.\*\*\*]

**Fiscal effect: Potential savings.**

9 JFS - 85 Publicly Funded Child Care Providers

No provision.

R.C. 5104.01, 5104.38, 309.10, 309.45.80

Defines "full-time" for publicly funded child care providers as being at least 32.5 hours and not more than 60 hours per week for licensed child care centers and licensed Type A homes, and at least 32.5 hours and not more than 50 hours per week for certified Type B providers.

No provision.

No provision.

No provision.

Automatically repeals the above definition of "full-time" for publicly funded child care providers effective July 1, 2011.

No provision.

No provision.

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No provision.	<p>Codifies the reimbursement ceiling for providers of publicly funded child care for fiscal years 2010 and 2011 at the 51st percentile of the child care market rate survey commissioned by ODJFS in 2008.</p> <p><b>Fiscal effect: Defining a "full-time" week at 32.5 hours may increase costs by about \$11.4 million above the executive's plan of defining a "full-time" week at 35 hours through rule (up from the current definition of 25 hours).</b></p> <p><b>Codifying the reimbursement ceiling at 51% of the 2008 market rate survey may affect costs depending on how the amounts compare to the executive's plan to continue with current rate ceilings of 65% of the 2006 market rate survey.</b></p>	No provision.	No provision.

10 JFS - 150 Day-care Center and Home Inspections

No provision.	No provision.	No provision.	<p><b>R.C. 5104.04</b></p> <p>Reduces the number of mandatory inspections of a child day-care center or type A family day-care home from twice to once during each 12-month period of operation and permits all inspections to be unannounced.</p>
No provision.	No provision.	No provision.	<p>Specifies that, if a center or type A home has been notified that it is in violation of the day-care laws and it fails to timely correct the violation by the date established by ODJFS, commencement of an action to</p>

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			revoke the center's or home's license is sufficient notice that the correction has not been made.  <b>Fiscal effect: Potential savings due to fewer inspection.</b>
<b>11 JFS - 97 Liability Insurance for Family Day-Care Homes</b>			
No provision.	<p><b>R.C. 5104.041</b></p> <p>Requires the parent, guardian, or custodian of each child receiving child care from a type A or type B family day-care home that is not covered by liability insurance to sign a written statement, instead of an affidavit, provided by the licensee of the type A family day-care home or the provider of the type B family day-care home stating that the family day-care home does not carry liability insurance.</p> <p><b>Fiscal effect: None.</b></p>	<p><b>R.C. 5104.041</b></p> <p>Same as the House.</p> <p><b>Fiscal effect: Same as the House.</b></p>	<p><b>R.C. 5104.041</b></p> <p>Same as the House.</p> <p><b>Fiscal effect: Same as the House.</b></p>
<b>12 JFS - 83 Publicly Funded Child Care Reimbursements</b>			
No provision.	<p><b>R.C. 5104.42, 5104.30, 5104.32, 5104.341, 5104.35, and 5104.39, and Section 309.40.60</b></p> <p>Permits the Director of ODJFS to adopt rules that establish a different system for the payment of publicly funded child care.</p>	No provision.	<p><b>R.C. 5104.42, 5104.30, 5104.32, 5104.341, 5104.35, and 5104.39</b></p> <p>Same as the House.</p>

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No provision.	Eliminates the requirement that county departments of job and family services specify the maximum number of days providers of publicly funded child care will be provided certificates of payment for days the provider would have provided publicly funded child care had the child been present.	No provision.	Same as the House.
No provision.	Eliminates the requirement that county departments of job and family services automatically review the fee paid by a caretaker parent for publicly funded child-care every six months, and instead requires county departments of job and family services to adjust the fee if the parent reports changes in income, family size, or both.	No provision.	Same as the House.
	<b>Fiscal effect: Minimal decrease in county administrative costs to review fees.</b>		<b>Fiscal effect: Same as the House.</b>

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As Passed by the House

As Passed by the Senate

As Enacted

**Child Support Enforcement**

14 JFS - 50 Office of Child Support Requests for Medical Insurance Information

R.C. 3119.371

Defines "health insurance provider," for the purposes of this provision, as (1) a person authorized to engage in the business of sickness and accident insurance, (2) a person or government entity providing coverage for medical services or items to individuals on a self-insurance basis, (3) a health insuring corporation, (4) a group health plan, (5) any organization, business, or association described in 42 U.S.C. 1396a(a)(25), or (6) a managed care organization.

Defines "information," for the purposes of this provision, as (1) an individual's name, address, date of birth, and Social Security number, (2) the group or plan number or other identifier assigned by a health insurance provider to a policy held by an individual or a plan in which the individual participates and the nature of the coverage, and (3) any other data specified by the ODJFS Director in rule.

Requires health insurance providers to send information to the Office of Child Support in ODJFS identifying policy holders and policy information upon request.

R.C. 3119.371

Same as the Executive.

Same as the Executive.

Same as the Executive.

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Same as the Executive.

Same as the Executive.

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Same as the Executive.

Same as the Executive.

Same as the Executive.

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<p><b>Fiscal effect: Potential savings for ODJFS as this provision enables the Office of Ohio Health Plans to share certain information it receives with the Office of Child Support.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>
<p>15 JFS - 106 Issuance of Income Withholding Notices</p>			
<p>No provision.</p>	<p>No provision.</p>	<p>R.C. 3121.03, 3121.035                      Authorizes a court or child support enforcement agency to issue a child support withholding or deduction notice to required persons by secure electronic format instead of regular mail.</p>	<p>R.C. 3121.03, 3121.035                      Same as the Senate.</p>
<p><b>Fiscal effect: Potential savings to ODJFS to receive child support payments electronically.</b></p>		<p><b>Fiscal effect: Potential savings to ODJFS.</b></p>	<p><b>Fiscal effect: Same as the Senate.</b></p>
<p>16 JFS - 48 Mandatory Electronic Remittance of Child Support by Certain Payors</p>			
<p>R.C. 3121.19, 3121.037, 3121.0311, and 3121.20</p>	<p>R.C. 3121.19, 3121.037, 3121.0311, and 3121.20</p>	<p>R.C. 3121.19, 3121.037, 3121.0311, and 3121.20</p>	<p>R.C. 3121.19, 3121.037, 3121.0311, and 3121.20</p>
<p>Requires payors who submit combined child support payments to provide the individual case numbers from the income withholding or deduction notice. Requires employers with more than 50 employees to send child support by electronic means.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>
<p><b>Fiscal effect: Potential savings to ODJFS to receive child support payments electronically.</b></p>		<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>

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<b>17 JFS - 49 Waiver and Compromise of Assigned Child Support Arrearages</b>			
<b>R.C. 3125.25</b> Requires the ODJFS Director to adopt rules for the compromise and waiver of child support arrearages owed to the state and federal governments, consistent with the federal Title IV-D program.  <b>Fiscal effect: ODJFS may experience additional administrative costs associated with the adoption of rules.</b>	<b>R.C. 3125.25</b> Same as the Executive.  <b>Fiscal effect: Same as the Executive.</b>	<b>R.C. 3125.25</b> Same as the Executive.  <b>Fiscal effect: Same as the Executive.</b>	<b>R.C. 3125.25</b> Same as the Executive.  <b>Fiscal effect: Same as the Executive.</b>

**Child Welfare and Adoption**

<b>18 JFS - 151 Children Available for Adoption and Prospective Adoptive Parents</b>			
No provision.	No provision.	No provision.	<b>R.C. 5103.154, 5153.163</b> Eliminates the required listing of all children who are in the permanent custody of an institution or association certified by ODJFS and the required listing of all persons who wish to adopt children and who are approved by an agency so empowered under Chapter 5103. of the Revised Code.
No provision.	No provision.	No provision.	Eliminates the requirement that ODJFS compile a report with conclusions regarding the effectiveness of the listing program and submit it to the General Assembly.  <b>Fiscal effect: Potential savings.</b>

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19 JFS - 148 Adoption Subsidies			
No provision.	No provision.	No provision.	<p><b>R.C. 5153.163</b></p> <p>Eliminates the requirement that a public children services agency must enter into an agreement with a special needs child's adoptive parent, under certain circumstances, under which the agency must make state adoption maintenance subsidy payments, and instead permits the agency to enter into an agreement if state funds are available.</p>
No provision.	No provision.	No provision.	<p>Eliminates the requirement that if, after a child's adoption is finalized, a public children services agency considers the child to be in need of public care or protective services, the agency must enter into an agreement with the child's adoptive parent under which the agency must make post adoption special services subsidy payments to the extent state funds are appropriated, and instead permits the agency to enter into an agreement if state funds are available.</p> <p><b>Fiscal effect: Potential cost savings.</b></p>

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<p>20 JFS - 55 Alternative Response</p>			
<p><b>Section: 309.40.40</b></p>	<p><b>Section: 309.45.10</b></p>	<p><b>Section: 309.45.10</b></p>	<p><b>Section: 309.45.10</b></p>
<p>Requires ODJFS to implement, oversee, and evaluate an 18-month pilot program based on the "Alternative Response" approach to reports of child abuse, neglect, and dependency. Requires the pilot program to be implemented in not more than ten counties selected by ODJFS that agree to participate in the program.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>
<p>Requires ODJFS to assure that the Alternative Response pilot program is independently evaluated with respect to outcomes for children and families, costs, worker satisfaction, and any other criteria determined by ODJFS to be useful in the consideration of the statewide implementation of Alternative Response.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>
<p>Allows ODJFS to expand the Alternative Response approach statewide at any point during, or at the conclusion of the pilot period and requires ODJFS to seek statutory framework for the Alternative Response approach to child protection if the independent evaluation recommends statewide implementation.</p>	<p>Replaces the Executive provision with a provision that allows ODJFS to expand the Alternative Response approach statewide through a schedule determined by ODJFS if the independent evaluation of the pilot program recommends statewide implementation.</p>	<p>Same as the House.</p>	<p>Same as the House.</p>
<p>No provision.</p>	<p>Permits ODJFS to adopt rules as if they were internal management rules, as necessary to carry out the purposes of the Alternative Response Pilot Program.</p>	<p>Same as the House.</p>	<p>Same as the House.</p>

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<p>No provision.</p> <p><b>Fiscal effect: ODJFS began implementation of the Alternative Response Pilot Program in July 2008. In the FY 2010-FY 2011 biennium, ODJFS will experience costs associated with contracting for an independent evaluation.</b></p>	<p>No provision.</p> <p><b>Fiscal effect: Same as the Executive.</b></p>	<p>Requires ODJFS to adopt rules through JCARR prior to statewide implementation of the Alternative Response approach.</p> <p><b>Fiscal effect: Same as the Executive, but with additional minimal costs to adopt rules prior to statewide implementation.</b></p>	<p>Same as the Senate.</p> <p><b>Fiscal effect: Same as the Senate.</b></p>
<p>21 JFS - 98 <b>**VETOED**</b> Independent Living Services</p>			
<p>No provision.</p>	<p><b>Section: 309.45.15</b></p> <p>[<b>**VETOED:</b> Earmarks \$1,500,000 in each fiscal year of GRF appropriation item 600523, Children and Family Services, for independent living services to foster youth and former foster youth between 16 and 21 years of age. <b>**</b>]</p>	<p><b>Section: 309.45.15</b></p> <p>Same as the House.</p>	<p><b>Section: 309.45.15</b></p> <p>Same as the House.</p>
<p>22 JFS - 123 Adoption Assistance Loan</p>			
<p>No provision.</p>	<p>No provision.</p>	<p><b>Section: 309.45.25</b></p> <p>Allows ODJFS to use up to 10% of appropriation item 600634, Adoption Assistance Loan, for administration of loans to prospective adoptive parents.</p>	<p><b>Section: 309.45.25</b></p> <p>Same as the Senate.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b><u>Title IV-A Temporary Assistance for Needy Families</u></b>			
23 JFS - 18 Fraudulent Assistance			
<p><b>R.C. 5101.83</b></p> <p>Ends a prohibition against an assistance group's participation in the Prevention, Retention, and Contingency program until a member repays the cost of fraudulent assistance that a county director of job and family services determines the assistance group received.</p>	<p><b>R.C. 5101.83</b></p> <p>Same as the Executive.</p>	<p>No provision.</p>	<p>No provision.</p>
<p>Provides that the prohibition applies only to fraudulent cash assistance received under the Ohio Works First program rather than any fraudulent assistance or services received under that program.</p>	<p>Same as the Executive.</p>	<p>No provision.</p>	<p>No provision.</p>
<p><b>Fiscal effect: Potential minimal increase in TANF expenditures from county allocations, as these individuals could potentially receive PRC services that under current law, they are otherwise ineligible to receive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>		

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p>24 JFS - 4 Felony Drug Conviction Not a Bar to TANF Program</p>			
<p><b>R.C. 5101.84</b>                      Provides that an individual is not to be denied aid under any TANF program (rather than just the Ohio Works First or Prevention, Retention, and Contingency programs) on the basis of having been convicted of a felony offense that has as an element the possession, use, or distribution of a controlled substance.   <b>Fiscal effect: This provision would allow such individuals to be eligible for other programs supervised by ODJFS that are funded with TANF funds. This may include publicly funded child care, as well as other TANF-funded programs that ODJFS may establish. This could result in a minimal increase in TANF expenditures.</b></p>	<p><b>R.C. 5101.84</b>                      Same as the Executive.   <b>Fiscal effect: Same as the Executive.</b></p>	<p>No provision.</p>	<p>No provision.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
25 JFS - 1 Ohio Works First Sanctions			
<p>R.C. 5107.16, 5107.05, 5107.17, 5111.01</p> <p>Provides that an Ohio Works First member's failure or refusal to comply in full with a provision of a self-sufficiency contract is deemed to have ceased on the date a county department of job and family services receives the compliance form from the member if the compliance form is completed and provided to the county department in the manner specified in ODJFS's rules.</p>	<p>R.C. 5107.16, 5107.05, 5107.17, 5111.01</p> <p>Same as the Executive.</p>	<p>R.C. 5107.16, 5107.05, 5107.17, 5111.01</p> <p>Same as the Executive.</p>	<p>R.C. 5107.16, 5107.05, 5107.17, 5111.01</p> <p>Same as the Executive.</p>
<p>Requires ODJFS to provide an Ohio Works First assistance group member, who causes a sanction, a compliance form the member may complete to indicate willingness to come into full compliance with a provision of a self-sufficiency contract.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>
<p>Reenacts prior law that provides for a sanction under the Ohio Works First Program to continue for the longer of one to six months (depending on the number of previous sanctions) and the date the failure or refusal to comply with a self-sufficiency contract ceases.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>
<p>Provides that an Ohio Works First assistance group must reapply to participate in Ohio Works First before resuming participation following a sanction if a county department does not receive the compliance form within a period of time specified in</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>

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ODJFS rules.			
<b>Fiscal effect: This provision will standardize sanctions across all counties.</b>	<b>Fiscal effect: Same as the Executive.</b>	<b>Fiscal effect: Same as the Executive.</b>	<b>Fiscal effect: Same as the Executive.</b>
<b>26 JFS - 141 Notices of Number of Months of Ohio Works First Participation</b>			
No provision.	No provision.	No provision.	<p data-bbox="2032 500 2295 527"><b>R.C. 5107.78</b></p> <p data-bbox="2032 558 2601 922">Eliminates a requirement that ODJFS include, with each cash assistance payment provided under the Ohio Works First Program to an assistance group residing in a county in which the Support Enforcement Tracking System is in operation, a notice of the number of months the assistance group has participated in the Program and the remaining number of months the assistance group may participate as a result of the Program's time limits.</p> <p data-bbox="2032 938 2532 971"><b>Fiscal effect: Potential cost savings.</b></p>
<b>27 JFS - 140 Suspensions of Prevention, Retention, and Contingency Programs</b>			
No provision.	No provision.	No provision.	<p data-bbox="2032 1112 2421 1140"><b>R.C. 5108.04, 5108.07</b></p> <p data-bbox="2032 1170 2601 1300">Permits a county department of job and family services to temporarily suspend operation of its Prevention, Retention, and Contingency (PRC) Program.</p> <p data-bbox="2032 1317 2510 1386"><b>Fiscal effect: Potential decrease in county PRC expenditures.</b></p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>28 JFS - 88 Economic and Community Development Institute</b>			
No provision.	<p><b>Section: 309.40.35</b> Earmarks \$325,000 of GRF appropriation item 600410, TANF State, in each fiscal year for the Economic and Community Development Institute.</p>	No provision.	No provision.
<b>29 JFS - 31 Child Support Collections/TANF MOE</b>			
<p><b>Section: 309.40.50</b> Requires that GSF Fund 4A80 appropriation item 600658, Child Support Collections, be used by ODJFS to meet the TANF maintenance of effort (MOE) requirements. Specifies that once the state is assured that it will meet the MOE requirements, ODJFS may use the funds from the appropriation item to support public assistance activities.</p>	<p><b>Section: 309.40.50</b> Same as the Executive. Same as the Executive.</p>	<p><b>Section: 309.40.50</b> Same as the Executive. Same as the Executive.</p>	<p><b>Section: 309.40.50</b> Same as the Executive. Same as the Executive.</p>
<p><b>Fiscal effect: Persons receiving child support and OWF cash assistance are required to assign ODJFS to receive their child support payments to cover part of their cash assistance benefits. These funds are deposited into GSF Fund 4A80 and expended through appropriation item 600658. ODJFS plans to use \$23 million in each fiscal year to meet the state's TANF MOE requirements.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>Medicaid</b>			
30 JFS - 7 Inflation Adjustments Used in ICF/MR Rates			
<p>R.C. 5111.23, 5111.235, 5111.241, 5111.251</p>	No provision.	No provision.	No provision.
<p>Removes from statute specific inflation measuring systems used in determining the Medicaid rates for the direct, indirect, capital, and other protected costs of ICFs/MR and provides instead for the ODJFS Director to specify in rules the inflation measuring systems or inflation factors to be used in those cases.</p>			
<p>Removes from statute a requirement that the difference between the actual and estimated inflation rate used in determining the Medicaid rates for an ICF/MR for a fiscal year be added to or subtracted from the inflation rate estimated for the following fiscal year.</p>	No provision.	No provision.	No provision.
<p><b>Fiscal effect: The fiscal impact on the state will depend on the inflation measuring systems for nursing facilities and ICFs/MR that ODJFS is to specify in rules and the difference between the actual and estimated inflation rate.</b></p>			

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>31 JFS - 20 Disqualifying Offenses -- Medicaid Providers and Home and Community Waiver Services Providers</b>			
<b>R.C. 109.572, 5111.032, 5111.033, 5111.034</b>	<b>R.C. 109.572, 109.572, 5111.032, 5111.033, 5111.034</b>	<b>R.C. 109.572, 109.572, 5111.032, 5111.033, 5111.034</b>	<b>R.C. 109.572, 109.572, 5111.032, 5111.033, 5111.034</b>
<p>Adds to the offenses that disqualify a person from being a Medicaid provider or employed by a Medicaid provider, applies the same disqualifying offenses to a provider of home and community-based waiver services and any of its employees, and includes the following among the additional disqualifying offenses: cruelty to animals, permitting child abuse, menacing, arson, and a violation of any municipal ordinance that is substantially equivalent to the new or existing disqualifying offenses.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>
<p>No provision.</p>	<p>Specifies that the date a person was convicted of, entered a guilty plea for, or was found eligible for intervention in lieu of conviction for an offense that disqualifies the person from being a Medicaid provider, provider of home and community-based services, or an employee of such providers is irrelevant for purposes of determining the person's eligibility to be a provider or employee.</p>	<p>Same as the House.</p>	<p>Same as the House.</p>
<p><b>Fiscal effect: None.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p>32 JFS - 9 Nursing Home Franchise Permit Fee</p>	<p>R.C. 3721.51, 3721.50, 3721.511, 3721.512, 3721.513, 3721.53, 3721.55, 3721.56</p>	<p>R.C. 3721.51, 3721.50, 3721.511, 3721.512, 3721.513, 3721.53, 3721.55, 3721.56</p>	<p>R.C. 3721.51, 3721.50, 3721.511, 3721.512, 3721.513, 3721.53, 3721.55, 3721.56</p>
<p>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.</p>	<p>Same as the Executive.</p>	<p>Replaces the Executive provision with a provision that changes the amount of the franchise permit fee to an amount determined by a formula rather than an express dollar amount. (The formula is expected to set the franchise permit fee at \$11.70 per bed per day.)</p>	<p>Replaces the Executive provision with a provision that (1) creates a formula (different from the formula included in the Senate) for determining the franchise permit fee that is based in part on 5.5% of net patient revenues of nursing homes and hospital long-term care units and a base of \$11.95 and (2) requires ODJFS to recalculate the franchise permit fee if the amount assessed for a fiscal year exceeds 5.5% of the actual net patient revenues for all nursing homes and hospital long-term care units for that fiscal year and to credit nursing homes' and hospitals' franchise permit fees for the following fiscal year.</p>
<p>No provision.</p>	<p>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</p>	<p>Same as the House, but requires ODJFS to include in the federal waiver request a provision to reduce the franchise permit fee to zero for nursing homes that have an affiliation agreement with a university for education and research related to Alzheimer's disease and meet certain other requirements.</p>	<p>Same as the Senate, but (1) requires ODJFS to apply for the waiver not later than four months, rather than one month, after July 1, 2009, and (2) revises conditions a nursing home with a written affiliation agreement with a university for education and research related to Alzheimer's disease must meet to qualify for the reduction by requiring that the nursing home have been constructed pursuant to a certificate of need granted under a provision of legislation from the 116th General Assembly, rather than requiring that the nursing home have been</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
No provision.	<p>the waiver.</p> <p>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.</p>	Same as the House.	<p>granted the certificate of need.</p> <p>Same as the House.</p>
No provision.	No provision.	No provision.	<p>Requires ODJFS to determine the amount of the franchise permit fee for a fiscal year not later than the 15th day of September, rather than August, of that fiscal year and to mail each nursing home and hospital notice of the amount of the fee not later than the 15th day of October, rather than September, of that fiscal year. Provides that the first installment payment of the franchise permit fee for a fiscal year is due not later than 45 days after the last day of October, rather than September, of that fiscal year.</p>
<p>Revises how the money generated by the franchise permit fee is to be deposited into certain funds by providing for SSR Fund 4J50, Home and Community-Based Services for the Aged, to receive 9.09% of the money and for SSR Fund 5R20, Nursing Facility Stabilization, to receive 90.91%.</p>	Same as the Executive.	<p>Same as the Executive, but provides for SSR Fund 4J50, Home and Community-Based Services for the Aged, to receive 8.55% of the money and for SSR Fund 5R20, Nursing Facility Stabilization, to receive 91.45%.</p>	<p>Same as the Executive, but creates a formula for determining how much of the money raised by the franchise permit fee is to be deposited into SSR Fund 4J50, Home and Community-Based Services for the Aged, rather than, as under current law, specifying the percentage. (SSR Fund 5R20, Nursing Facility Stabilization, continues to receive the remainder of the money raised by the franchise permit fee.)</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p><b>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.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive, but increases the amount of fee revenue that will be generated.</b></p>	<p><b>Fiscal effect: Same as the Senate, but further increases the amount of fee revenue that will be generated.</b></p>
<p><b>33 JFS - 62 Medicaid Managed Care Prompt Payment</b></p>			
<p>No provision.</p>	<p><b>R.C. 3901.3814, 3901.38, 3901.383, 3901.3815, Repealed: R.C. 5111.178</b></p> <p>Applies Ohio's prompt payment law (which establishes timeframes for paying health insurance claims) to Medicaid managed care organizations.</p>	<p>No provision.</p>	<p>No provision.</p>
<p>No provision.</p>	<p>Repeals a provision requiring the ODJFS Director to determine whether a waiver of federal Medicaid requirements is necessary in order to apply the prompt payment law to Medicaid managed care organizations.</p> <p><b>Fiscal effect: Potential increase in expenditures for the Department of Insurance to monitor compliance with prompt pay requirements.</b></p>	<p>No provision.</p>	<p>No provision.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>34 JFS - 14 Third Party Liability - Prior Authorization</b>			
<p><b>R.C. 5101.573</b>                      Requires a third party against which ODJFS has a right of recovery for payment of a medical item or service provided to a Medicaid recipient to do the following: (1) consider ODJFS's payment to be the equivalent of the recipient having obtained prior authorization for the item or service from the third party and (2) not deny a claim solely on the basis of the Medicaid recipient's failure to obtain prior authorization from the third party.</p>	<p><b>R.C. 5101.573</b>                      Same as the Executive.</p>	<p><b>R.C. 5101.573</b>                      Same as the Executive.</p>	<p><b>R.C. 5101.573</b>                      Same as the Executive.</p>
<p><b>Fiscal effect: By enhancing the state's ability to recover payments from liable third parties for certain claims, the state may realize cost savings in the Medicaid Program.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>35 JFS - 107 Medicaid Coverage of Optional Groups and Services</b>			
No provision.	No provision.	<p><b>R.C. 5111.01, 5111.0211</b></p> <p>Prohibits the Medicaid Program from covering a group of persons or a service designated by federal law as a group or service that a state, at its option, may cover under its Medicaid Program unless the Medicaid Program covers the group or service on the effective date of this provision of the bill or Ohio law enacted after that date expressly authorizes the Medicaid Program to cover the group or service.</p> <p><b>Fiscal effect: None.</b></p>	No provision.
<b>36 JFS - 87 Annual Medicaid Eligibility Redeterminations for Parents</b>			
No provision.	<p><b>R.C. 5111.0121, 5111.0120</b></p> <p>Provides that a parent who qualifies for Medicaid due to family income not exceeding 90% of the federal poverty guidelines is not required to undergo an eligibility redetermination for Medicaid more often than once every 12 months unless there are reasonable grounds to believe that circumstances have changed that may affect the parent's eligibility.</p> <p><b>Fiscal effect: None.</b></p>	<p><b>R.C. 5111.0121, 5111.0120</b></p> <p>Same as the House, but instead of statewide implementation, permits a county department of job and family services to implement the policy subject to the state receiving any needed federal Medicaid waiver.</p> <p><b>Fiscal effect: Same as the House.</b></p>	<p><b>R.C. 5111.0121, 5111.0120</b></p> <p>Same as the House.</p> <p><b>Fiscal effect: Same as the House.</b></p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
37 JFS - 114 Prior Authorization for High-Technology Radiological Services			
No provision.	No provision.	<p>R.C. 5111.0210</p> <p>Prohibits ODJFS and Medicaid managed care organizations from reimbursing a provider for providing a high-technology radiological service to a Medicaid recipient unless the service is prior authorized in accordance with rules.</p>	No provision.
No provision.	No provision.	<p>Provides that the prior authorization requirement does not apply if the high-technology radiological service is needed due to a documented, medical emergency or used as part of mammography screening or cytological screening covered by Medicaid.</p> <p><b>Fiscal effect: Potential savings to the Medicaid Program for not reimbursing a provider for providing a high-technology radiological service without prior authorization.</b></p>	No provision.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>38 JFS - 133 Advanced Diagnostic Imaging Services</b>			
No provision.	No provision.	No provision.	<p data-bbox="2032 370 2327 397"><b>R.C. 5111.0210</b></p> <p data-bbox="2032 428 2596 659">Requires ODJFS to implement evidence-based, best practice guidelines or protocols and decision support tools for advanced diagnostic imaging services available under the fee-for-service component of the Medicaid Program not later than January 1, 2010.</p> <p data-bbox="2032 678 2548 740"><b>Fiscal effect: Potential savings to the Medicaid Program.</b></p>
<b>39 JFS - 67 Time-Limited Medicaid Provider Agreements</b>			
No provision.	<p data-bbox="790 878 1069 906"><b>R.C. 5111.028</b></p> <p data-bbox="790 932 1365 1198">Modifies the law regarding time-limited Medicaid provider agreements by (1) extending the phase-in period to January 1, 2015 (from January 1, 2011), (2) extending the duration of time-limited agreements to seven years (from three), and (3) exempting hospitals from the requirement that provider agreements be time-limited.</p> <p data-bbox="790 1218 1252 1279"><b>Fiscal effect: May reduce ODJFS administrative costs.</b></p>	<p data-bbox="1408 878 1688 906"><b>R.C. 5111.028</b></p> <p data-bbox="1408 932 1677 959">Same as the House.</p> <p data-bbox="1408 1218 1876 1247"><b>Fiscal effect: Same as the House.</b></p>	<p data-bbox="2032 878 2311 906"><b>R.C. 5111.028</b></p> <p data-bbox="2032 932 2290 959">Same as the House.</p> <p data-bbox="2032 1218 2494 1247"><b>Fiscal effect: Same as the House.</b></p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
40 JFS - 101 Surety Bond for Medicaid Providers	No provision.	No provision.	R.C. 5111.035
		Requires each Medicaid provider selected by ODJFS to give a surety bond against the risk of fraud, and requires ODJFS to apply the bond requirement to each Medicaid provider investigated for any criminal offense of fraud.	No provision.
		<b>Fiscal effect: A surety bond would reimburse the state for Medicaid expenditures made due to fraud.</b>	

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>41 JFS - 8 **PARTIALLY VETOED** Administrative Actions Relative to Medicaid Provider Agreements</b>			
<p><b>R.C. 5111.06</b></p> <p>Provides that ODJFS is not required to issue an order pursuant to an adjudication conducted in accordance with the Administrative Procedure Act when (1) denying, terminating, or not renewing a Medicaid provider agreement because a provider's owner, officer, authorized agent, associate, manager, or employee has been convicted of an offense that caused the provider agreement to be suspended, (2) terminating or not renewing a Medicaid provider agreement because the provider has not billed or otherwise submitted a Medicaid claim to ODJFS for at least two years, regardless of whether ODJFS has determined that the provider has moved from the address on record with ODJFS without leaving an active forwarding address, or (3) denying, terminating, or not renewing a Medicaid provider agreement because the provider fails to provide to ODJFS the National Provider Identifier assigned to the provider.</p>	<p><b>R.C. 5111.06</b></p> <p>Same as the Executive, but [***VETOED: when action is taken against a provider for failing to give its National Provider Identifier to ODJFS, requires ODJFS to send a notice by certified mail rather than regular mail.***]</p>	<p><b>R.C. 5111.06</b></p> <p>Same as the Executive.</p>	<p><b>R.C. 5111.06</b></p> <p>Same as the House.</p>
<p><b>Fiscal effect: None.</b></p>	<p><b>Fiscal effect: Potential increase in mailing costs.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the House.</b></p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
42 JFS - 130 Special Dispensing Fee and Reimbursement Rate for Certain 340B Drugs			
No provision.	No provision.	<p><b>R.C. 5111.071, 5111.085</b></p> <p>Requires the ODJFS Director to pay a dispensing fee of \$12 to a Medicaid pharmacist-provider (rather than the dispensing fee established by the ODJFS Director on a biennial basis (currently \$3.70)) if (1) the prescription was filled for a Medicaid recipient who received the prescription while being treated by a licensed health care professional who is an employee or agent of, or volunteer for, an organization that participates in the federal 340B Drug Pricing Program, and (2) the per unit price that the organization paid to acquire the drug from the drug's manufacturer is \$20 or more.</p>	No provision.
No provision.	No provision.	<p>Requires the ODJFS Director to reimburse a pharmacy for each prescription filled under the conditions described above an amount that equals the product of (1) the per unit price the 340B participating organization paid to acquire the drug from the manufacturer, and (2) the total number of units of the drug dispensed.</p>	No provision.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p><b>Fiscal effect: Potential cost savings from paying organizations that participate in the federal 340B Drug Pricing Program a reduced payment for prescription drugs (partially offset by increase in the dispensing fee) based on their relatively lower costs of acquiring prescription drugs through the 340B Program (generally 25%-30% lower than Medicaid). Increase in administrative costs associated with developing a method for processing and adjudicated claims from these organizations according to the specified criteria.</b></p>			
<p><b>43 JFS - 17 Medicaid E-Prescribing System</b></p>			
<p><b>R.C. 5111.083</b>                      Repeals law that expressly permits the ODJFS Director to establish an e-prescribing system for the Medicaid Program.   <b>Fiscal effect: This provision removes the requirement for e-prescribing from the law. However, beginning March 2009, ODJFS will begin offering, on a voluntary basis, e-prescribing to all Medicaid providers who prescribe or dispense prescription medications within the traditional fee-for-service Medicaid system.</b></p>	<p><b>R.C. 5111.083</b>                      Same as the Executive.   <b>Fiscal effect: Same as the Executive.</b></p>	<p><b>R.C. 5111.083</b>                      Replaces the Executive provision with a provision that requires the ODJFS Director to establish the e-prescribing system.   <b>Fiscal effect: By making e-prescribing mandatory the state could experience additional savings in the millions of dollars.</b></p>	<p>No provision.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
44 JFS - 102 <b>**PARTIALLY VETOED**</b> Pharmacy and Therapeutics Committee			
		R.C. 5111.084	R.C. 5111.084
No provision.	No provision.	Requires ODJFS's existing Pharmacy and Therapeutics Committee to assist ODJFS with developing and maintaining a preferred drug list for the Medicaid Program.	Same as the Senate.
No provision.	No provision.	Modifies the administration and membership of the Committee. <b>***VETOED: Prohibits the Director from appointing a member who is employed by the Department.***</b>	Same as the Senate.
No provision.	No provision.	<b>***VETOED: Requires the Committee to establish guidelines necessary for the Committee's operation. Allows the Committee to establish one or more subcommittees.***</b>	Same as the Senate.
No provision.	No provision.	Requires ODJFS to post Committee guidelines, agendas, and recommendations, and any determinations made by the ODJFS Director, on the ODJFS web site.	Same as the Senate.
No provision.	No provision.	<b>***VETOED: Requires the Director to act on the Committee's recommendations not later than 30 days after the recommendations are posted on the Department's web site.***</b>	Same as the Senate.
		<b>Fiscal effect: The Departments may realize a minimal increase in administrative costs.</b>	<b>Fiscal effect: Same as the Senate.</b>

Executive	As Passed by the House	As Passed by the Senate	As Enacted	
<p>45 JFS - 103 <b>**PARTIALLY VETOED**</b> Medicaid Fraud, Waste, and Abuse Report</p>	<p>No provision.</p>	<p>No provision.</p>	<p><b>R.C. 5111.092</b>                      Requires ODJFS to prepare an annual Medicaid fraud, waste, and abuse report in collaboration with fraud and investigative personnel from the Attorney General's office, State Auditor's office, and other state and local agencies that administer Medicaid services.</p> <p>[<b>**VETOED:</b> Requires the report to include at least both of the following with regard to minimizing fraud, waste, and abuse in the medicaid program: (1) Goals and objectives; (2) Performance measures for monitoring all state and local activities. <b>**</b>]</p> <p><b>Fiscal effect: The agencies will incur a minimal increase in administrative costs to produce the report.</b></p>	<p><b>R.C. 5111.092</b>                      Same as the Senate, but (1) does not require ODJFS to prepare the annual report in collaboration with the fraud and investigative personnel specified by the Senate and (2) requires ODJFS to submit a copy of each report to the Governor and General Assembly.</p> <p>Same as the Senate.</p> <p><b>Fiscal effect: ODJFS will incur a minimal increase in administrative costs to produce the report.</b></p>
<p>46 JFS - 112 Local Reports on Medicaid Expenditures</p>	<p>No provision.</p>	<p>No provision.</p>	<p><b>R.C. 5111.093</b>                      Requires local agencies administering parts of the Medicaid program to report annually to ODJFS and the Office of Budget and Management regarding Medicaid expenditures.</p> <p><b>Fiscal effect: Increases reporting costs for local agencies.</b></p>	<p>No provision.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>47 JFS - 110 Medicaid Disease Management Program</b>			
No provision.	No provision.	<p><b>R.C. 5111.141</b></p> <p>Requires ODJFS to establish a disease management program for Medicaid recipients, other than Medicaid recipients participating in the Medicaid managed care program, and permits ODJFS to implement the disease management program as part of the bill's alternative care management program.</p> <p><b>Fiscal effect: May result in an increase or decrease in Medicaid costs depending on the design of the disease management program.</b></p>	No provision.
<b>48 JFS - 111 Medicaid Case Management Program</b>			
No provision.	No provision.	<p><b>R.C. 5111.142</b></p> <p>Requires ODJFS to (1) conduct a review of case management services provided under the fee-for-service component of the Medicaid Program and (2) designate individuals who are ineligible to participate in the Medicaid managed care program as participants in an alternative care management model included in the bill's alternative care management program.</p>	No provision.

Executive

As Passed by the House

As Passed by the Senate

As Enacted

**Fiscal effect: May result in an increase or decrease in Medicaid costs depending on the design of the case management program.**

**49 JFS - 19 Medicaid Managed Care Reimbursement Rate for Noncontracting Hospitals**

**R.C. 5111.162**

Revises the requirement that a hospital not under contract with a Medicaid managed care organization (MCO) provide services to Medicaid recipients enrolled in the MCO and accept from the MCO, as payment in full, the amount that would have been paid under the Medicaid fee-for-service system by: (1) requiring that medically necessary services be provided whenever authorized by the MCO, rather than only on referral, (2) extending the fee-for-service reimbursement rate to other types of noncontracting providers in a hospital system, including physicians, and (3) eliminating the exemption that applies to any hospital that had a contract with at least one MCO before January 1, 2006, and has retained one such contract.

No provision.

No provision.

No provision.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p><b>Fiscal effect: Indirect. The state pays MCO's a monthly capitated rate for the provision of services for Medicaid recipients. This provision governs the payments by MCO's to hospital systems. Any change in payments may, or may not, impact future capitation rates paid by the state to MCO's. The Executive budget assumes savings of \$35.1 million in FY 2010 and \$110.5 million in FY 2011 (\$9.5 million state share in FY 2010 and \$34.9 million in FY 2011).</b></p>			
<p>50 JFS - 104 Medicaid Alternative Care Management Program</p>			
No provision.	No provision.	<p><b>R.C. 5111.165, 5111.16</b> Requires ODJFS to implement an Alternative Care Management Program and provides that the program is separate from the existing Medicaid Care Management System.</p>	No provision.
No provision.	No provision.	<p>Requires ODJFS to evaluate the effectiveness of each model created under the Alternative Care Management Program and to maintain certain statistics on each model.</p>	No provision.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p><b>Fiscal effect: May result in an increase or decrease in Medicaid costs depending on the design of the Medicaid Care management system. The Departments may realize a minimal increase in administrative costs for evaluating the effectiveness of the system.</b></p>			
<p><b>51 JFS - 15 Medicaid Health Insuring Corporation Franchise Permit Fee</b></p>			
<p><b>R.C. 5111.176</b>                      Terminates the assessment of a franchise permit fee on Medicaid health insuring corporations after the third quarter of calendar year 2009.  <b>Fiscal effect: The executive estimates the state will lose \$520 million in revenue annually.</b></p>	<p><b>R.C. 5111.176</b>                      Same as the Executive.  <b>Fiscal effect: Same as the Executive.</b></p>	<p><b>R.C. 5111.176</b>                      Same as the Executive.  <b>Fiscal effect: Same as the Executive.</b></p>	<p><b>R.C. 5111.176</b>                      Same as the Executive.  <b>Fiscal effect: Same as the Executive.</b></p>
<p><b>52 JFS - 135 Composition of Direct Care and Ancillary and Support Costs</b></p>			
<p>No provision.</p>	<p>No provision.</p>	<p>No provision.</p>	<p><b>R.C. 5111.20</b>                      Provides that the costs of oxygen, rather than just emergency oxygen, are reimbursable as part of a nursing facility's direct care costs.</p>
<p>No provision.</p>	<p>No provision.</p>	<p>No provision.</p>	<p>Adds the costs of over-the-counter pharmacy products, physical therapists, physical therapy assistants, occupational therapists, occupational therapy assistants, speech therapists, and audiologists to the</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
No provision.	No provision.	No provision.	<p>costs that are reimbursable as part of a nursing facility's direct care costs.</p> <p>Adds wheelchairs and resident transportation to the costs that are reimbursable as part of a nursing facility's ancillary and support costs.</p> <p><b>Fiscal effect: This provision along with the provision "Costs of Therapy and Covered Therapy Services" may result in cost savings for the state.</b></p>
<b>53 JFS - 118 Future Nursing Facility Medicaid Rate Adjustments</b>			
No provision.	No provision.	<p><b>R.C. 5111.222</b></p> <p>Requires ODJFS, beginning in FY 2013, to adjust nursing facilities' total Medicaid rates annually by the market basket index used in calculating skilled nursing facilities' Medicare rates.</p> <p><b>Fiscal effect: Increases future Medicaid costs based on the market basket index.</b></p>	No provision.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p>54 JFS - 116 Inflation Adjustments Used in Nursing Facility Rates</p>			
<p><b>R.C. 5111.231, 5111.24</b> Removes from statute specific indexes used to measure inflation for purposes of determining the Medicaid rates for nursing facilities' direct care and ancillary and support costs and provides instead for the ODJFS Director to specify in rules the inflation measuring systems or inflation factors to be used in those cases.</p>	<p>Same as the Executive.</p>	<p><b>R.C. 5111.231, 5111.24</b> Replaces the Executive provision with a provision that requires that successor indexes published by the United States Bureau of Labor Statistics be used if the indexes specified by current law cease to be published.</p>	<p><b>R.C. 5111.231, 5111.24</b> Replaces the Executive provision with a provision that (1) provides that ODJFS is not required to use a new index until the first time it recalculates (i.e., rebases) peer groups' rates for direct care and ancillary and support costs, (2) requires ODJFS to use, in the case of direct care costs, the Employment Cost Index for Total Compensation, Nursing and Residential Care Facilities Occupational Group, and, in the case of ancillary and support costs, the Consumer Price Index for All Items for All Urban Consumers for the Midwest Region when it rebases peer groups' rates for those costs, and (3) requires ODJFS, if the U.S. Bureau of Labor ceases to publish either of those indexes, to use the successor index the U.S. Bureau subsequently publishes.</p>
<p><b>Fiscal effect: Will depend upon the indexes ODJFS chooses to use to measure inflation.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Depends upon the relationship between the current indexes and future indexes published by the United States Bureau of Labor Statistics.</b></p>	<p><b>Fiscal effect: Depends upon the relationship between the current indexes and future indexes published by the United States Bureau of Labor Statistics.</b></p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
55 JFS - 117 Adjustments to Direct Care and Ancillary and Support Rates			
No provision.	No provision.	<p><b>R.C. 5111.231, 5111.24</b></p> <p>Revises the law governing nursing facilities' Medicaid rates for direct care costs by (1) using the nursing facility in each peer group that is at the median, rather than the 25th percentile, of the cost per case-mix unit in a certain calculation and (2) changing the percentage used in that calculation.</p>	No provision.
No provision.	No provision.	<p>Revises the law governing nursing facilities' Medicaid rates for ancillary and support costs by changing, beginning with FY year 2012, (1) the percentile used in determining which nursing facility in each peer group is to be used in a certain calculation and (2) the percentage used in that calculation.</p>	No provision.
No provision.	No provision.	<p>Requires ODJFS to use various factors from calendar year 2003 in determining nursing facilities' rates for direct care and ancillary and support costs until FY 2015 rates are calculated.</p>	No provision.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
		<p><b>Fiscal effect: The provisions "FY 2010 Medicaid Reimbursement Rate for Nursing Facilities", "FY 2011 Medicaid Reimbursement Rate for Nursing Facilities", and "Adjustments to Direct Care and Ancillary and Support Rates" will increase Medicaid costs by an estimated \$67.2 million in FY 2010 and \$76.1 million in FY 2011 (\$18.0 million state share in FY 2010 and \$24.0 million in FY 2011).</b></p>	
<p><b>56 JFS - 2 Deadline for Nursing Facility to Submit Corrections</b></p>			
<p><b>R.C. 5111.232</b></p>	<p><b>R.C. 5111.232</b></p>	<p><b>R.C. 5111.232</b></p>	<p><b>R.C. 5111.232</b></p>
<p>Revises the deadline for a nursing facility to submit corrections to assessment information by providing that ODJFS may not assign a quarterly average case-mix score due to late submission of the corrections unless the nursing facility fails to submit the corrections before the earlier of (1) the 46th (rather than 81st) day after the end of the calendar quarter to which the information pertains or (2) the deadline established by federal Medicare and Medicaid regulations.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>
<p><b>Fiscal effect: None.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
57 JFS - 122 ICF/MR Off-Site Day Programming	No provision.	No provision.	R.C. 5111.233
		<p>Requires, for purpose of Medicaid reimbursement, that the costs of day programming be part of the direct care costs of an ICF/MR as off-site day programming if the area in which the day programming is provided is not certified as an ICF/MR and regardless of whether (1) the area in which the day programming is provided is less than 200 feet away from the ICF/MR or (2) the provider of the day programming is a related party to the ICF/MR.</p> <p><b>Fiscal effect: Potential increase in Medicaid costs for ICFs/MR that would now qualify for reimbursement.</b></p>	<p>Same as the Senate.</p> <p><b>Fiscal effect: Same as the Senate.</b></p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p>58 JFS - 92 <b>**PARTIALLY VETOED**</b> Medicaid Coverage of Oxygen Services to ICF/MR Residents</p>	<p>R.C. 5111.236, Section 309.30.12</p>	<p>R.C. 5111.236, Section 309.30.12</p>	<p>R.C. 5111.236, Section 309.30.12</p>
<p>No provision.</p>	<p>Requires the Medicaid Program to cover oxygen services provided by a medical supplier to a medically fragile child residing in an ICF/MR regardless of certain circumstances. <b>***VETOED: Requires medical suppliers of oxygen service to bill ODJFS directly for such services.***</b> (It is unclear whether this entire provision is vetoed or whether it is partially vetoed. There appears to be a discrepancy between the veto message and the boxed text.)</p>	<p>Same as the House.</p>	<p>Same as the House.</p>
<p>No provision.</p>	<p><b>***VETOED: Earmarks \$30,000 in each fiscal year from GRF appropriation item 600525, Health Care/Medicaid, to reimburse medical suppliers of oxygen services to ICF/MR residents.***</b></p>	<p>Same as the House.</p>	<p>Same as the House.</p>
	<p><b>Fiscal effect: ODJFS projects a cost of \$297,528 per year. This is based on the assumption that about half of the 328 children who are currently served in ICFs/MR might be eligible under this provision.</b></p>	<p><b>Fiscal effect: Same as the House.</b></p>	<p><b>Fiscal effect: Same as the House.</b></p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted	
59 JFS - 136 Franchise Permit Fee Rates	No provision.	No provision.	No provision.	<p><b>R.C. 5111.243</b></p> <p>Sets the Medicaid reimbursement rate paid to nursing facilities for the franchise permit fee at \$6.25 per resident per day rather than, as under current law, the amount of the franchise permit fee per resident per day.</p> <p><b>Fiscal effect: May result in cost savings to the state.</b></p>
60 JFS - 77 Nursing Facilities' Medicaid Rates for Capital Costs	No provision.	<p><b>R.C. 5111.25, 5111.222</b></p> <p>Provides that a nursing facility's Medicaid rate for capital costs cannot be less than the sum of (1) the capital costs portion of its FY 2005 rate or, if it did not have a FY 2005 Medicaid rate, its initial Medicaid rate for capital costs and (2) any capital compensation per diem for which it qualified during the first three quarters of FY 2008.</p>	<p><b>R.C. 5111.25, 5111.222</b></p> <p>Same as the House.</p>	No provision.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
	<p><b>Fiscal effect: The provisions "FY 2010 Medicaid Reimbursement Rate for Nursing Facilities", "FY 2011 Medicaid Reimbursement Rate for Nursing Facilities", and "Nursing Facilities' Medicaid Rates for Capital Costs" will increase Medicaid costs by an estimated \$56.4 million or more in FY 2010 and \$177.3 million or more in FY 2011 (\$15.6 million state share in FY 2010 and \$57.0 million in FY 2011).</b></p>	<p><b>Fiscal effect: Same as the House.</b></p>	
<p><b>61 JFS - 146 Nursing Facility Refund of Excess Depreciation</b></p>			
<p>No provision.</p>	<p>No provision.</p>	<p>No provision.</p>	<p><b>R.C. 5111.25</b>                      Eliminates the requirement that a nursing facility refund to ODJFS the amount of excess depreciation paid to the facility under Medicaid if the facility is sold.  <b>Fiscal effect: Potential loss of refunds.</b></p>
<p><b>62 JFS - 3 Limits on Costs of Outside ICF/MR Resident Meals</b></p>			
<p><b>R.C. 5111.261</b>                      Eliminates ODJFS's authorization to place limits on the costs for resident meals prepared and consumed outside an ICF/MR when determining whether an ICF/MR's direct care and indirect care costs are allowable.</p>	<p><b>R.C. 5111.261</b>                      Same as the Executive.</p>	<p><b>R.C. 5111.261</b>                      Same as the Executive.</p>	<p><b>R.C. 5111.261</b>                      Same as the Executive.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p><b>Fiscal effect: Removing ODJFS' authorization to place limits on certain costs could increase state Medicaid costs for ICFs/MR. A portion of the increased costs may be reimbursed by the federal government.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>
<p><b>63 JFS - 137 Prohibitions on Certain Medicaid Billings</b></p>			
<p>No provision.</p>	<p>No provision.</p>	<p>No provision.</p>	<p><b>R.C. 5111.262</b>                      Prohibits persons, other than nursing facility providers, from billing the Medicaid Program for a service provided to a nursing facility resident if the service is included in a Medicaid payment to the nursing facility provider or in the reimbursable expenses reported on the provider's Medicaid cost report.</p>
<p>No provision.</p>	<p>No provision.</p>	<p>No provision.</p>	<p>Prohibits a nursing facility provider from submitting a separate Medicaid claim for a service provided to a resident if the service is included in a Medicaid payment made to the provider under the statutory price formula or in the reimbursable expenses on the provider's Medicaid cost report.  <b>Fiscal effect: May result in cost savings for the state.</b></p>

Executive

As Passed by the House

As Passed by the Senate

As Enacted

64 JFS - 139 Costs of Therapy and Covered Therapy Services

No provision.

No provision.

No provision.

R.C. 5111.263

Repeals law that provides, with an exception, that costs of therapy are not allowable costs for nursing facilities for purposes of calculating their reimbursement rate under the statutory price formula and law that establishes restrictions on nursing facilities' billing for covered therapy services.

**Fiscal effect: This provision along with the provision "Composition of Direct Care and Ancillary and Support Costs" may result in cost savings for the state.**

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p>65 JFS - 124 <b>**VETOED**</b> Collection of Long-Term Care Facilities' Medicaid Debts</p>	<p>No provision.</p>	<p>R.C. 5111.65, 5111.68, 5111.681, 5111.685, 5111.686, 5111.689</p> <p>[**VETOED: Revises the law governing the collection of a long-term care facility's Medicaid debts when the facility undergoes a change of operator, closes, or ceases to participate in Medicaid, including by (1) permitting rather than requiring ODJFS to withhold an amount from a Medicaid payment to a facility, (2) providing for a withholding to equal the total amount specified in a notice regarding the facility's estimated Medicaid debts rather than the greater of (a) the total amount of the facility's actual and potential Medicaid debts and (b) an amount equal to the average amount of monthly Medicaid payments to the facility for a 12-month period, (3) prohibiting ODJFS from making the withholding if an entering operator or qualified affiliated operator assumes liability for the entire amount of the facility's estimated Medicaid debts, (4) requiring ODJFS to reduce the amount to be withheld if an entering operator or qualified affiliated operator assumes liability for the portion of the facility's estimated Medicaid debts that represents the nursing home or ICF/MR franchise permit fee, (5) reducing from 90 to 60 the number of days ODJFS has to determine a facility's actual Medicaid debts following the date the facility files a</p>	<p>R.C. 5111.65, 5111.68, 5111.681, 5111.685, 5111.686, 5111.689</p> <p>Same as the Senate.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
		cost report or ODJFS waives the cost report, (6) establishing a process for a facility or qualified affiliated operator to request an informal settlement conference regarding ODJFS's determination of the facility's actual Medicaid debts, (7) permitting a qualified affiliated operator who executes a successor liability agreement (in addition to the exiting operator) to request an adjudication under the Administrative Procedure Act regarding ODJFS's determination of the facility's actual Medicaid debts and providing that any part of ODJFS's determination is subject to the adjudication, and (8) revising the timeframes for ODJFS to release a withholding.***]	
		<b>Fiscal effect: May reduce debt revenue.</b>	<b>Fiscal effect: Same as the Senate.</b>
<b>66 JFS - 12 Funds Withheld During Medicaid Debt Collection Process</b>			
R.C. 5111.688, 5111.65, 5111.651, 5111.689, 5111.874, 5111.875  Establishes GSF Fund 5FX0, Exiting Operator Fund.  Provides for money withheld from a nursing facility or ICF/MR undergoing a change of operator, facility closure, voluntary termination, or voluntary withdrawal of participation for purposes of collecting debts the facility owes the Medicaid Program to be temporarily deposited in the Exiting Operator Fund.	R.C. 5111.688, 5111.65, 5111.651, 5111.689, 5111.874, 5111.875  No provision.  Same as the Executive, but provides for such money to be temporarily deposited into the existing Medicaid Payment Withholding Fund.	R.C. 5111.688, 5111.65, 5111.651, 5111.689, 5111.874, 5111.875  No provision.  Same as the House.	R.C. 5111.688, 5111.65, 5111.651, 5111.689, 5111.874, 5111.875  No provision.  Same as the House.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p><b>Fiscal effect: None. This provision allows ODJFS to maintain a distinct fund for Medicaid nursing facility or ICF/MR provider payment withholding. It is an accounting change and thus has no fiscal impact on the state.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>

67 JFS - 16 Home First Rules for Home and Community-Based Services

R.C. 5111.85, 5111.705, 5111.851	R.C. 5111.85, 5111.705, 5111.851	R.C. 5111.85, 5111.705, 5111.851	R.C. 5111.85, 5111.705, 5111.851
<p>Permits the ODJFS Director to adopt rules establishing procedures for (1) identifying individuals who are eligible and on a waiting list for a Medicaid waiver program that provides home and community-based services; are receiving inpatient hospital services or residing in an ICF/MR or nursing facility; and choose to be enrolled in the waiver program and (2) approving such individuals' enrollment in the waiver program.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>
<p><b>Fiscal effect: The provision may result in a savings to the Medicaid Program to the extent to which individuals admitting to nursing facilities or ICFs/MR enroll in Home First, which is less expensive. However, the savings to Medicaid would depend on the number of individuals leaving nursing facilities or ICFs/MR and the individual's needs, which cannot be estimated at this time.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>68 JFS - 13 Home Care Attendant Services</b>			
<p>R.C. <i>5111.88, 5111.881 - 5111.889, 5111.8810, 5111.8811</i></p>	<p>R.C. <i>5111.88, 5111.881 - 5111.889, 5111.8810, 5111.8811</i></p>	<p>R.C. <i>5111.88, 5111.881 - 5111.889, 5111.8810, 5111.8811</i></p>	<p>R.C. <i>5111.88, 5111.881 - 5111.889, 5111.8810, 5111.8811</i></p>
<p>Permits the ODJFS Director to seek federal approval to have the Ohio Home Care Medicaid waiver program and the Ohio Transitions II Aging Carve-Out Medicaid waiver program cover home care attendant services.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>
<p>Establishes requirements an individual must meet to be able to provide home care attendant services under either of the Medicaid waiver programs.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>
<p>Places limits on a health care attendant's authority to assist a consumer with nursing tasks and self-administration of medication.</p>	<p>Same as the Executive, but extends to any medication, not just a controlled substance, the restriction that a home care attendant provide assistance to a consumer with self-administration of medication only when it is administered orally, topically, or via a gastrostomy or jejunostomy tube.</p>	<p>Same as the House.</p>	<p>Same as the House.</p>
<p>Establishes requirements a home care attendant must follow when providing home care attendant services.</p>	<p>Same as the Executive, but provides that a home care attendant may count a medication in the presence of a consumer or consumer's authorized representative, rather than just the consumer, when the medication is administered to the consumer and may perform the monthly recount of the medication in the presence of the consumer or consumer's authorized representative, rather than just the consumer.</p>	<p>Same as the House.</p>	<p>Same as the House.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p><b>Fiscal effect: This provision may result in savings to the Medicaid Program if the services that are to be provided by health care attendants are less expensive than those currently provided.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>
<p>69 JFS - 68 Assisted Living Program</p>			
<p>No provision.</p>	<p>R.C. <i>5111.89, 5111.891</i>                      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>R.C. <i>5111.89, 5111.891</i>                      Same as the House.</p>	<p>R.C. <i>5111.89, 5111.891</i>                      Same as the House.</p>
<p>No provision.</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.  <b>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.</b></p>	<p>Same as the House.  <b>Fiscal effect: Same as the House.</b></p>	<p>Same as the House.  <b>Fiscal effect: Same as the House.</b></p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
70 JFS - 22 ICF/MR Franchise Permit Fee			
R.C. 5112.30, 5112.31, 5112.37, 5112.371, 5112.372	R.C. 5112.30, 5112.31, 5112.37, 5112.371, 5112.372	R.C. 5112.30, 5112.31, 5112.37, 5112.371, 5112.372	R.C. 5112.30, 5112.31, 5112.37, 5112.371 ( <i>repealed</i> ), 5112.371 ( <i>new</i> ), 5112.39, and 5123.0417
Subjects ICFs/MR that ODODD operates (i.e., developmental centers) to the ICF/MR franchise permit fee.	Same as the Executive.	Same as the Executive.	Same as the Executive, but provides that developmental centers are not subject to franchise permit fee until August 1, 2009.
Increases the franchise permit fee on ICF/MR beds to \$14.25 per day from \$11.98.	Same as the Executive.	Same as the Executive.	Replaces the Executive provision with a provision that (1) continues the franchise permit fee of \$11.98 until August 1, 2009, (2) increases the fee to \$14.75 for the period between August 1, 2009, and June 30, 2010, (3) sets the fee at \$13.55 for fiscal year 2011, and (4) sets the fee, for each successive fiscal year, at the amount set for the previous fiscal year as adjusted by a composite inflation factor.
No provision.	No provision.	No provision.	Requires ODJFS to recalculate the franchise permit fee if the amount assessed by the fee for a fiscal year exceeds 5.5% of the actual net patient revenue for all ICFs/MR for that fiscal year and to credit the franchise permit fees to ICFs/MR for the following fiscal year.
Provides for the money raised by the ICF/MR franchise permit fee to be deposited as follows: (1) 74.89% in FY 2010 and 70.67% in FY 2011 and thereafter into the SSR Fund 4K80, Home and Community Based Services, (2) 3.78% in FY 2010 and 3.57% in FY 2011 and thereafter into SSR Fund 5CT0, Children with Intensive	Same as the Executive.	Same as the Executive.	Replaces the Executive provision with a provision that (1) requires 84.2% (in FY 2010) and 79.12% (in FY 2011 and thereafter) of the money raised by the franchise permit fee to be deposited into SSR Fund 4K80, Home and Community Based Services, and 15.8% (in FY 2010) and 20.88% (in FY 2011 and thereafter) to

Executive	As Passed by the House	As Passed by the Senate	As Enacted
Behavioral Needs Programs, and (3) 21.33% in FY 2010 and 25.76% in FY 2011 and thereafter into a new fund called the Developmental Disabilities Operating and Services Fund.			be deposited into the new Developmental Disabilities Operating and Services Fund and (2) abolishes SSR Fund 5CT0, Children with Intensive Behavioral Needs Programs, but maintains the requirement for the Director of Developmental Disabilities to establish one or more programs for individuals under age 21 who have intensive behavioral needs which, under current law, are funded with money in SSR Fund 5CT0.
Provides for money in the Developmental Disabilities Operating and Services Fund to be used for expenses of the programs that the Department of Developmental Disabilities administers and the Department's administrative expenses.	Same as the Executive.	Same as the Executive.	Same as the Executive.
<b>Fiscal effect: Increasing the ICF/MR franchise permit fee as well as subjecting developmental centers to the fee will generate several million dollars in additional revenue for the Medicaid Program each year.</b>	<b>Fiscal effect: Same as the Executive.</b>	<b>Fiscal effect: Same as the Executive.</b>	<b>Fiscal effect: Same as the Executive, but changes the allocation of franchise fee revenue to state funds.</b>

Executive	As Passed by the House	As Passed by the Senate	As Enacted	
71 JFS - 138 Disability Medical Assistance Program	No provision.	No provision.	No provision.	<p>R.C. 5115.10 to 5115.14, 9.24, 127.16, 131.23, 173.71, 173.76, 323.01, 329.04, 329.051, 2305.234, 2744.05, 3111.04, 3119.54, 3702.74, 4123.27, 4731.65, 4731.71, 5101.16, 5101.181, 5101.26, 5101.31, 5101.36, 5101.571, 5101.58, 5112.03, 5112.08, 5112.17, 5115.20, 5115.22, and 5115.23</p> <p>Eliminates the Disability Medical Assistance (DMA) Program, which provides medical assistance to persons who are medication dependent and not eligible for Medicaid.</p> <p><b>Fiscal effect: Reduce state costs by \$2.7 million in FY 2010 and \$9.5 million in FY 2011. The DMA Program is 100% state funded.</b></p>
72 JFS - 134 Postponent of Recalibration for Hospitals	No provision.	No provision.	No provision.	<p>Section: 125.10</p> <p>Requires ODJFS to postpone the recalibration of certain Medicaid rates for hospital services that were to occur on January 1, 2010, and January 1, 2011, to January 1, 2012, and January 1, 2013, respectively.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
			<b>Fiscal effect: Increase in state costs of \$100 million over the FY 2010-FY 2011 biennium.</b>
<b>73 JFS - 108 Medicaid Managed Care Long-Term Care Report</b>			
No provision.	No provision.	<p><b>Section: 209.45</b></p> <p>Requires the ODJFS Director and Director of Aging to issue a report on the feasibility of including in the Medicaid managed care program certain aged, blind, and disabled Medicaid recipients who are excluded by current law from the program.</p> <p><b>Fiscal effect: ODJFS and the Department of Aging will incur an increase in administrative costs to produce the report.</b></p>	No provision.
<b>74 JFS - 132 Medicaid Provider Audits</b>			
No provision.	No provision.	<p><b>Section: 309.30.03</b></p> <p>Requires that \$1.4 million in each fiscal year of line item 600417, Medicaid Provider Audits, is to be used by the Auditor of State, in consultation with the Department of Job and Family Services, to perform audits of providers of Medicaid services.</p>	No provision.

Executive

As Passed by the House

As Passed by the Senate

As Enacted

75 JFS - 121 Savings in Quarterly Cost Management Report

No provision.

No provision.

Section: 309.30.11

Requires ODJFS to achieve the following savings to the Medicaid Program as specified in the Department's Quarterly Cost Management Report on Ohio's Medicaid Program from November 9, 2007: (1) \$12,500,000 in FY 2010 and \$37,500,000 in FY 2011 by increasing medical support collections related to child support cases; (2) \$8,543,343 in FY 2010 and \$37,463,393 in FY 2011 by increasing Medicare enrollment for Medicaid recipients who qualify for Medicare; and (3) \$20,000,000 in FY 2011 by implementing a medical claims editing system to ungroup claims and identify questionable claims prior to payment.

No provision.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
76 JFS - 61 Cost Outlier and Supplemental Payments to Children's Hospitals	Section: 309.30.15	Section: 309.30.15	Sections: 309.30.15, 309.30.17
No provision.	Requires ODJFS to pay a children's hospital meeting certain criteria regarding outlier per cent and public assistance days to be paid, for each cost outlier claim made in FY 2010 and FY 2011, an amount equaling 100% of the product of the hospital's allowable charges and the hospital's Medicaid inpatient cost-to-charge ratio rather than (in the case of a claim for a case that has a cost at or below a certain amount set by ODJFS rule) an amount equaling 85% of that product, but requires ODJFS to cease paying 100% of that product and revert to paying 85% of that product (in the case of a claim for a case that has a cost at or below a certain amount set by ODJFS rule) when the difference between the total amount ODJFS pays for such outlier claims and the total amount ODJFS would have paid for such outlier claims under its rules exceeds the amount earmarked for the outlier claims (the sum of \$6 million and the corresponding federal match per fiscal year).	Same as the House, but increases the total amount for the outlier claims by \$4.4 million in FY 2010 and \$4 million in FY 2011 (using money from the Hospital Assessment Fund) plus the corresponding federal match.	Same as the Senate, but rewords the provision to reflect the restoration of the House provision (with changes) regarding hospital assessments (JFS-21).
No provision.	Requires ODJFS to make supplemental Medicaid payments to children's hospitals for inpatient services under a program modeled after a program ODJFS was required to create for previous fiscal years if ODJFS does not spend the entire amount	Same as the House, but clarifies that the amounts earmarked for the outlier claims and amounts made available from the Hospital Assessment Fund, plus the corresponding federal match, are to be available for the supplemental Medicaid	Same as the Senate.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
No provision.	<p>earmarked for the outlier claims discussed in the preceding paragraph.</p> <p>Prohibits the ODJFS Director from adopting, amending, or rescinding any rules that would result in decreasing the amount paid to children's hospitals for cost outlier claims.</p> <p><b>Fiscal effect: Directs how supplemental payments to children's hospitals are to be allocated.</b></p>	<p>payments if the amount spent on the outlier claims does not use the entire amount of the earmark, available amount from the Hospital Assessment Fund, and corresponding federal match.</p> <p>Same as the House.</p> <p><b>Fiscal effect: Same as the House, but increases the amount for outlier claims.</b></p>	<p>Same as the House.</p> <p><b>Fiscal effect: Same as the Senate.</b></p>

77 JFS - 10 FY 2010 Medicaid Reimbursement Rate for Nursing Facilities

**Section: 309.30.20**

Adjusts the formula used to calculate nursing facilities' Medicaid reimbursement rates for FY 2010 by (1) increasing the cost per case mix-unit, rate for ancillary and support costs, rate for capital costs, and rate for tax costs as calculated under the formula by 2%, then by another 2%, and then by 1%, (2) providing for the mean payment used in the calculation of the quality incentive payment to be \$3.03 per Medicaid day, and (3) reducing, if the federal government requires that the nursing home franchise permit fee be reduced or eliminated, the payments as necessary to reflect the loss of revenue and federal financial participation generated by the fee.

**Section: 309.30.20**

Same as the Executive, but further adjusts the formula by (1) specifying that the capital costs portion of the rate, before further adjustments, cannot be less than the capital costs portion of its FY 2005 rate plus any capital compensation per diem for which it qualified during the first three quarters of FY 2008 and (2) adding \$3 per Medicaid day to the total rate.

**Section: 309.30.20**

Same as the House, but does not add \$3 per Medicaid day to the total rate.

**Section: 309.30.20**

Same as the Executive, but further adjusts nursing facilities' FY 2010 rate by (1) a \$5.70 workforce development incentive payment, (2) a consolidated services rate, and (3) a percentage to be based on the amount of revenue available due to a portion of the franchise permit fee after the consolidated services rate adjustment is applied.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
No provision.	Reduces a nursing facility's total rate by one-half of the difference between the rate it would otherwise be paid for FY 2010 and its FY 2009 rate if the rate it would otherwise be paid for FY 2010 is more than its FY 2009 rate.	Replaces the House provision with a provision that reduces a nursing facility's total rate if the rate it would otherwise be paid for FY 2010 is more than the sum of (1) its FY 2009 rate and (2) 173% of the mean of certain amounts calculated for nursing facilities' direct care costs for FY 2011 (if the nursing facility pays the franchise permit fee) or zero (if the facility does not pay the fee). Provides for the reduction to equal one-half of the difference between the rate it would otherwise be paid for FY 2010 and the sum specified in the previous sentence.	Replaces the House provision with a provision that provides that a nursing facility's FY 2010 rate as determined under the statutory price formula, after the adjustments discussed above are made (other than the adjustments regarding the workforce development incentive payment and consolidated services rate), cannot be more than 101.75% of its FY 2009 rate.
No provision.	Increases a nursing facility's total rate by five-sixths of the difference between the rate it would otherwise be paid for FY 2010 and its FY 2009 rate if the rate it would otherwise be paid for FY 2010 is less than its FY 2009 rate.	Replaces the House provision with a provision that increases a nursing facility's total rate if the rate it would otherwise be paid for FY 2010 is less than the sum of (1) its FY 2009 rate and (2) 173% of the mean of certain amounts calculated for nursing facilities' direct care costs for FY 2011 (if the nursing facility pays the franchise permit fee) or zero (if the facility does not pay the fee). Provides for the increase to equal the difference between the rate it would otherwise be paid for FY 2010 and the sum specified in the previous sentence.	Replaces the House provision with a provision that provides that a nursing facility's FY 2010 rate as determined under the statutory price formula, after the adjustments discussed above are made (other than the adjustments regarding the workforce development incentive payment and consolidated services rate), cannot be less than 99% of its FY 2009 rate.
No provision.	No provision.	No provision.	Provides that a nursing facility's FY 2010 rate is not to be subjected to a stop gain or stop loss adjustment, regardless of later statutory adjustments, if its initial rate for the fiscal year is not subject to a stop gain or stop loss adjustment.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
No provision.	Adds, in the case of nursing facilities with more than 250 Medicaid-certified beds, \$5 per Medicaid day to the total rate after all other adjustments are made.	No provision.	No provision.
Requires the ODJFS Director to submit a state Medicaid plan amendment for federal approval as necessary to implement the FY 2011 rate changes.	No provision.	No provision.	No provision.
No provision.	No provision.	No provision.	Requires ODJFS to determine nursing facilities' FY 2010 rates not later than October 1, 2009, and to pay the rates retroactive to July 1, 2009.
<b>Fiscal effect: The executive estimates this provision will save the state \$55.9 million in FY 2010.</b>	<b>Fiscal effect: This provision along with the provision "Nursing Facilities' Medicaid Rates for Capital Costs" will increase Medicaid costs by \$56.4 million (\$15.6 million state share) in FY 2010.</b>	<b>Fiscal effect: This provision along with the provision "Adjustments to Direct Care and Ancillary and Support Rates" will increase Medicaid costs by \$67.2 million (\$18.0 million state share) in FY 2010.</b>	<b>Fiscal effect: Same as the Executive, but decreases Medicaid costs by \$8.0 million (\$2.1 million state share) in FY 2010.</b>

Executive

As Passed by the House

As Passed by the Senate

As Enacted

78 JFS - 11 FY 2011 Medicaid Reimbursement Rate for Nursing Facilities

**Section: 309.30.30**

Adjusts the formula used to calculate nursing facilities' Medicaid reimbursement rates for FY 2011 by (1) increasing the cost per case mix-unit, rate for ancillary and support costs, rate for capital costs, and rate for tax costs as calculated under the formula by 2%, then by another 2%, and then by 1%, (2) providing for the mean payment used in the calculation of the quality incentive payment to be \$3.03 per Medicaid day, and (3) reducing, if the federal government requires that the nursing home franchise permit fee be reduced or eliminated, the payments as necessary to reflect the loss of revenue and federal financial participation generated by the fee.

No provision.

**Section: 309.30.30**

Same as the Executive, but further adjusts the formula by (1) specifying that the capital costs portion of the rate, before further adjustments, cannot be less than the capital costs portion of its FY 2005 rate plus any capital compensation per diem for which it qualified during the first three quarters of FY 2008 and (2) adding \$5.35 per Medicaid day to the total rate.

Increases a nursing facility's total rate by two-thirds of the difference between the rate it would otherwise be paid for FY 2011 and its FY 2009 rate if the rate it would otherwise be paid for FY 2011 is less than its FY 2009 rate.

**Section: 309.30.20**

Same as the House, but does not add \$5.35 per Medicaid day to the total rate.

Replaces the House provision with a provision that increases a nursing facility's total rate if the rate it would otherwise be paid for FY 2011 is less than the sum of (1) its FY 2009 rate and (2) 173% of the mean of certain amounts calculated for nursing facilities' direct care costs for FY 2011 (if the nursing facility pays the franchise permit fee) or zero (if the facility does not pay the fee). Provides for the increase to equal the difference between the rate it would otherwise be paid for FY 2011 and the sum specified in the previous sentence.

**Section: 309.30.25**

Same as the Executive, but further adjusts nursing facilities' FY 2011 rates by (1) a \$5.70 workforce development incentive payment, (2) a consolidated services rate, and (3) a percentage to be based on the amount of revenue available due to a portion of the franchise permit fee after the consolidated services rate adjustment is applied.

Replaces the House provision with a provision that (1) imposes a stop gain reduction on a nursing facility's FY 2011 rate as determined under the statutory price formula and after the adjustments discussed above are made (other than the adjustments regarding the workforce development incentive payment and consolidated services rate) if that rate is more than 102.25% of its FY 2010 rate, less the portion of its FY 2010 rate that equals the sum of the workforce development incentive payment and the consolidated services rate adjustments for

Executive	As Passed by the House	As Passed by the Senate	As Enacted
No provision.	No provision.	No provision.	<p>that fiscal year and (2) provides a stop loss increase for a nursing facility's FY 2011 rate as determined under the statutory price formula and after the adjustments discussed above are made (other than the adjustments regarding the workforce development incentive payment and consolidated services rate) if that rate is less than 99% of its FY 2010 rate, less the portion of its FY 2010 rate that equals the sum of the workforce development incentive payment and consolidated services rate adjustments for that fiscal year.</p> <p>Provides that a nursing facility's FY 2011 rate is not to be subjected to a stop gain or stop loss adjustment, regardless of later statutory adjustments, if its initial rate for the fiscal year is not subject to a stop gain or stop loss adjustment or if its initial FY 2010 rate is an amount that is not subject to a stop gain or stop loss adjustment for FY 2010 even though its initial FY 2011 rate is an amount that otherwise would be subject to the adjustment.</p>
No provision.	<p>Adds, in the case of nursing facilities with more than 250 Medicaid-certified beds, \$5 per Medicaid day to the total rate after all other adjustments are made.</p>	No provision.	No provision.
<p>Requires the ODJFS Director to submit a state Medicaid plan amendment for federal approval as necessary to implement the FY 2011 rate changes.</p>	No provision.	No provision.	No provision.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p>No provision.</p> <p><b>Fiscal effect: The executive estimates this provision will save the state \$56.3 million in FY 2011.</b></p>	<p>No provision.</p> <p><b>Fiscal effect: This provision along with the provision "Nursing Facilities' Medicaid Rates for Capital Costs" will increase Medicaid costs by \$177.3 million or more (\$57.0 million state share) in FY 2011.</b></p>	<p>No provision.</p> <p><b>Fiscal effect: This provision along with the provisions "FY 2011 Medicaid Reimbursement Rate for Nursing Facilities" and "Adjustments to Direct Care and Ancillary and Support Rates" will increase Medicaid costs by \$76.1 million (\$24.0 million state share) in FY 2011.</b></p>	<p>Requires ODJFS to determine nursing facilities' FY 2011 rates not later than October 1, 2010, and to pay the rates retroactive to July 1, 2010.</p> <p><b>Fiscal effect: Same as the Executive, but increases Medicaid costs by \$18.3 million (\$5.7 million state share) in FY 2011.</b></p>
<p>79 JFS - 119 <b>**VETOED**</b> Nursing Facility Capital Costs Study</p>			
<p>No provision.</p>	<p>No provision.</p>	<p>Section: 309.30.30</p> <p>[**VETOED: Requires ODJFS, not later than December 31, 2010, to issue a report with recommendations for developing a new system for reimbursing nursing facilities' capital costs under the Medicaid Program.**]</p> <p><b>Fiscal effect: ODJFS will incur an increase in administrative costs to produce the report.</b></p>	<p>Section: 309.30.30</p> <p>Same as the Senate.</p> <p><b>Fiscal effect: Same as the Senate.</b></p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
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80 JFS - 25 FY 2010 Capital Compensation Payments to Nursing Facilities

**Sections: 309.30.40, 309.30.50**

Provides for qualifying nursing facilities to receive quarterly capital compensation payments during FY 2010.

No provision.

No provision.

No provision.

Provides that nursing facilities that qualify for the payments are (1) certain nursing facilities that were new as of fiscal year 2006, 2007, or 2008, (2) certain nursing facilities that completed a capital project before December 31, 2008, (3) certain nursing facilities that completed an activity for which a certificate of need is not needed before June 30, 2008, and (4) certain nursing facilities that completed a renovation before December 31, 2008.

No provision.

No provision.

No provision.

Creates formulas to be used to determine the amount of the capital compensation payments.

No provision.

No provision.

No provision.

Terminates all nursing facilities' eligibility for the capital compensation payments at the earlier of July 1, 2010, or the date the total amount of the payments equals \$40 million.

No provision.

No provision.

No provision.

Requires that payments made to qualifying nursing facilities for capital compensation be made from GRF appropriation item 600529, Capital Compensation Program.

No provision.

No provision.

No provision.

**Fiscal effect: This provision increases state Medicaid costs by \$40 million in FY 2010.**

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>81 JFS - 23 FY 2010 Medicaid Reimbursement Rate for ICFs/MR</b>			
<p><b>Section: 309.30.60</b></p> <p>Adjusts the formula used to calculate ICFs/MR's Medicaid reimbursement rates for FY 2010 by (1) limiting an ICF/MR's rate to a maximum of 108% of its FY 2009 rate, (2) requiring ODJFS to reduce the FY 2010 Medicaid rates for ICFs/MR if the mean total per diem rate for all ICFs/MR, weighted by May 2009 Medicaid days and calculated as of July 1, 2009, after application of the 108% limit, exceeds \$277.25, (3) prohibiting, for the remainder of FY 2010, further adjustments otherwise authorized by law governing Medicaid payments to ICFs/MR, and (4) if the federal government requires that the franchise permit fee for ICFs/MR be reduced or eliminated, reducing the payments to ICFs/MR as necessary to reflect the loss of revenue and federal financial participation generated by the fee.</p> <p>Requires the ODJFS Director to implement the changes to the FY 2010 Medicaid rate for ICFs/MR retroactive to the later of the effective date of the state Medicaid plan amendment regarding the changes and July 1, 2009.</p> <p><b>Fiscal effect: Freezes the reimbursement rate at the FY 2009 level.</b></p>	<p><b>Section: 309.30.60</b></p> <p>Same as the Executive, but does not limit an ICF/MR's rate to a maximum of 108% of its FY 2009 rate.</p> <p>Same as the Executive, but establishes the retroactive implementation date as the later of the effective date of the state Medicaid plan amendment or (rather than and) July 1, 2009.</p> <p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Section: 309.30.60</b></p> <p>Same as the House, but increases the mean total per diem rate that is used in setting the FY 2010 rate from \$277.25 to \$279.88.</p> <p>Same as the House.</p> <p><b>Fiscal effect: Increases costs to the state due to the increase in the mean total per diem rate.</b></p>	<p><b>Section: 309.30.60</b></p> <p>Same as the House, but (1) provides for an ICF/MR to be paid, for services provided during the period from the effective date of this provision to July 31, 2009, the Medicaid rate the ICF/MR was paid on June 29, 2009, and (2) provides that the mean total per diem rate that is used in setting the Medicaid reimbursement rate for the period from August 1, 2009, to June 30, 2010, is \$278.15.</p> <p>No provision.</p> <p><b>Fiscal effect: Same as the Senate, but with a lesser impact due to a smaller increase in the mean total per diem rate than the Senate.</b></p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>82 JFS - 24 FY 2011 Medicaid Reimbursement Rate for ICFs/MR</b>			
<b>Section: 309.30.70</b>	<b>Section: 309.30.70</b>	<b>Section: 309.30.70</b>	<b>Section: 309.30.70</b>
<p>Adjusts the formula used to calculate ICFs/MR's Medicaid reimbursement rates for FY 2011 by (1) limiting an ICF/MR's rate to a maximum of 107% of its FY 2010 rate, (2) requiring ODJFS to reduce the FY 2011 Medicaid rates for ICFs/MR if the mean total per diem rate for all ICFs/MR, weighted by May 2010 Medicaid days and calculated as of July 1, 2010, after application of the 107% limit, exceeds \$277.25, (3) prohibiting, for the remainder of FY 2011, further adjustments otherwise authorized by law governing Medicaid payments to ICFs/MR, and (4) if the federal government requires that the franchise permit fee for ICFs/MR be reduced or eliminated, reducing the payments to ICFs/MR as necessary to reflect the loss of revenue and federal financial participation generated by the fee.</p>	<p>Same as the Executive, but does not limit an ICF/MR's rate to a maximum of 107% of its FY 2010 rate.</p>	<p>Same as the House, but increases the mean total per diem rate that is used in setting the FY 2011 rate from \$277.25 to \$282.54.</p>	<p>Same as the House, but increases the mean total per diem rate that is used in setting the FY 2011 rate from \$277.25 to \$278.15.</p>
<p>Requires the ODJFS Director to implement the changes to the fiscal year 2011 Medicaid rate for ICFs/MR retroactive to the later of the effective date of the state Medicaid plan amendment regarding the changes and July 1, 2010.</p>	<p>Same as the Executive, but establishes the retroactive implementation date as the later of the effective date of the state Medicaid plan amendment or (rather than and) July 1, 2010.</p>	<p>Same as the House.</p>	<p>No provision.</p>
<p><b>Fiscal effect: Freezes the reimbursement rate at the FY 2009 level.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Increases costs to the state due to the increase in the mean total per diem rate.</b></p>	<p><b>Fiscal effect: Same as the Senate, but with a lesser impact due to a smaller increase in the mean total per diem rate than the Senate.</b></p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
83 JFS - 94 <b>**VETOED**</b> ICF/MR Reimbursement Study Council	<p><b>Section: 309.30.71</b></p> <p>[***VETOED: Establishes the ICF/MR Reimbursement Study Council and requires the Council to submit a report, not later than July 1, 2010, on its review of Ohio's system for Medicaid reimbursement of ICF/MR services.***]</p> <p><b>Fiscal effect: Minimal increase in costs associated with the Study Council and the report. Members of the Council are to serve without compensation or reimbursement.</b></p>	<p><b>Section: 309.30.71</b></p> <p>Same as the House, but [***VETOED: adds two members of the Ohio Association of County Boards of Mental Retardation and Developmental Disabilities to the Council.***]</p> <p><b>Fiscal effect: Same as the House.</b></p>	<p><b>Section: 309.30.71</b></p> <p>Same as the Senate.</p> <p><b>Fiscal effect: Same as the House.</b></p>
84 JFS - 105 Study of System for Wheelchair Reallocation	No provision.	<p><b>Section: 309.30.72</b></p> <p>Requires ODJFS to (1) study the potential use of a system under which manual and power wheelchairs received by Medicaid recipients are reallocated for reuse by other eligible Medicaid recipients when the wheelchairs are discarded, no longer required, or otherwise unused, and (2) issue a report by January 1, 2010.</p> <p><b>Fiscal effect: ODJFS will incur a minimal increase in administrative costs to conduct the study and produce the report.</b></p>	No provision.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
85 JFS - 80 Increase in Medicaid Rates for Hospital Services	<p data-bbox="790 370 1077 397"><b>Section: 309.30.73</b></p> <p data-bbox="790 427 1373 560">Increases the Medicaid reimbursement rate for hospital inpatient and outpatient services provided between January 1, 2010, and June 30, 2011, by 5%.</p> <p data-bbox="790 610 1373 743"><b>Fiscal effect: None. This was assumed in the executive budget. The bill includes \$87.9 million in FY 2010 and \$178.5 million in FY 2011 to fund the provision.</b></p>	<p data-bbox="1408 370 1696 397"><b>Section: 309.30.73</b></p> <p data-bbox="1408 427 1991 524">Same as the House, but provides for the increase to begin July 1, 2009, rather than January 1, 2010.</p> <p data-bbox="1408 610 1991 743"><b>Fiscal effect: Same as the House, but increases Medicaid costs by approximately \$81.7 million (\$21.9 million state share) in FY 2010.</b></p>	<p data-bbox="2026 370 2314 397"><b>Section: 309.30.73</b></p> <p data-bbox="2026 427 2610 589">Same as the House, but provides for the increase to begin October 1, 2009, rather than January 1, 2010, and for the rate increase to apply only to rates paid under a prospective payment system.</p> <p data-bbox="2026 610 2610 743"><b>Fiscal effect: Same as the House, but increases Medicaid costs by approximately \$41.3 million (\$11.1 million state share) in FY 2010.</b></p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p>86 JFS - 21 Hospital Assessments</p>	<p>R.C. 5112.40, 5112.41, 5112.42, 5112.43, 5112.44, 5112.45, 5112.46, 5112.47, 5112.48</p>	<p>Sections: 309.30.74, 309.30.75, 690.20, 690.21</p>	<p>Sections: 309.30.74, 309.30.75, 690.20, 690.21</p>
<p>Imposes an annual assessment on hospitals based on their total facility costs. Sets the first annual assessment at 1.27% of a hospital's total facility costs and sets the second and subsequent annual assessments at 1.37%.</p>	<p>Same as the Executive, but increases the first annual assessment to 1.52% and increases the second and subsequent annual assessments to 1.61%.</p>	<p>Same as the Executive, but (1) moves the provision to an uncodified section, (2) provides that ODJFS may not implement the assessments unless the federal government approves the Hospital Inpatient and Outpatient Supplemental Upper Payment Limit Program, (3) provides for the assessments to be for FY 2010 and FY 2011 rather than assessment program years that begin on the first day of October of a calendar year and end the last day of September of the following calendar year, (4) changes the first assessment to 1.61% and the second assessment to 1.52%, (5) excludes hospitals that do not charge patients for their services from the assessments, (6) requires that a hospital's assessment for FY 2010 be based on the hospital's 12-month, Medicare cost reporting period that falls during the period beginning January 1, 2007, and ending June 30, 2008, and that a hospital's assessment for FY 2011 be based on the hospital's 12-month, Medicare cost reporting period that falls during the period beginning January 1, 2008, and ending June 30, 2009, (7) revises the time frame for ODJFS to notify hospitals</p>	<p>Same as the House, but (1) excludes hospitals that do not charge any of their patients for their services from the assessments, (2) provides that a hospital's total facility costs excludes selling, rather than buying, durable medical equipment as shown on the cost-reporting data used for purposes of determining the hospital's assessment, (3) provides that the amount of the assessment for the second year and each successive year (if any) is to be 1.61% of a hospital's total facility costs only if the federal government denies a waiver for a tiered assessment, and (4) provides, subject to ODJFS adopting rules that establish a different payment schedule, that 28% of a hospital's assessment is due on the last business day of October, 31% is due on the last business day of February, and 41% is due on the last business day of May.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p>Permits ODJFS to audit a hospital to ensure that the hospital properly pays its assessment and requires ODJFS to take action to recover from a hospital any amount the audit reveals that the hospital should have paid but did not.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>
<p>Creates SSR Fund 5GF0, Hospital Assessment, in the state treasury into which the hospital assessments are to be deposited and requires ODJFS to use the money in the fund to pay costs of the Medicaid Program, including administrative costs.</p>	<p>Same as the Executive, but requires that 16.45% of the amounts raised by the hospital assessments during the first year be used for the Hospital Inpatient and Outpatient Supplemental Upper Payment Limit Program and requires that 14.91% of the amounts raised by the hospital assessments in the second and subsequent years be used for that program.</p>	<p>Same as the Executive, but revises how the money in the fund is to be used. First, ODJFS is to use the money in the fund to fund the bill's 5% Medicaid rate increase for hospital inpatient and outpatient services. Second, ODJFS is to use \$4.4 million in FY 2010 and \$4 million in FY 2011 of the amount remaining in the fund to pay for the bill's Medicaid payments to children's hospitals for outlier claims and supplemental Medicaid payments to children's hospitals. Third, ODJFS is to use as much of the remainder as is available to fund the bill's Hospital Inpatient and Outpatient</p>	<p>Same as the Executive, but requires that 9.16% of the amounts raised by the hospital assessments during the first year be used for the Hospital Inpatient and Outpatient Supplemental Upper Payment Limit Program and requires that 10.29% of the amounts raised by the hospital assessments in the second year be used for that program.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
No provision.	Requires the ODJFS Director to seek federal approval to create the Hospital Inpatient and Outpatient Supplemental Upper Payment Limit Program under which supplemental Medicaid payments would be made to hospitals for inpatient services and outpatient services covered by the Medicaid program.	<p>Supplemental Upper Payment Limit Program. Fourth, ODJFS is to use as much of the remainder as is available for the bill's increase in Medicaid rates for hospital home health services. Fifth, ODJFS is to use as much of the remainder as is available for the bill's increase in Medicaid rates for hospital ambulance services. Sixth, ODJFS is to use as much of the remainder as is available for the bill's increase in Medicaid rates for hospital hospice services.</p> <p>Same as the House, but (1) excludes children's hospitals from the program, (2) requires that the program use a payment system that (a) is fair and equitable to all hospitals, (b) recognizes, to the extent permitted by federal law, the amount of the hospitals' assessments, and (c) ensures that payments to children's hospitals for cost outlier claims and supplemental Medicaid payments to children's hospitals are not reduced or eliminated due to the upper payment limits on Medicaid payments established by federal regulations, and (3) requires, to the extent compatible with the requirement discussed above to protect payments to children's hospitals, that payments to a hospital under the program be made in three equal installments for FY 2010 and three equal installments for FY 2011 that are due not later than 15 days after the date the hospital makes the corresponding installment payment for its assessment.</p>	Same as the House, but moves the provision to an uncodified section and, as in the Senate, excludes children's hospitals from the program.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p>Requires ODJFS to take all necessary actions to cease implementation of the hospital assessment if the United States Secretary of Health and Human Services determines that the assessment is an impermissible health care-related tax under federal Medicaid law.</p>	<p>Same as the Executive, but requires ODJFS also to cease implementation of the Hospital Inpatient and Outpatient Supplemental Upper Payment Limit Program.</p>	<p>Same as the House.</p>	<p>Same as the House.</p>
<p>Repeals the law governing the hospital assessment effective October 1, 2011.</p>	<p>Same as the Executive, but repeals the law governing the Hospital Inpatient and Outpatient Supplemental Upper Payment Limit Program on the same date.</p>	<p>Same as the House, but repeals the laws effective July 1, 2011, rather than October 1, 2011, and provides that the repeal does not eliminate the requirement for a hospital to make an installment payment of the hospital's assessment that is due after the repeal and does not eliminate ODJFS's requirement to make an installment payment under the Hospital Inpatient and Outpatient Supplemental Upper Payment Limit Program that is due after the repeal.</p>	<p>Same as the Executive.</p>
<p><b>Fiscal effect: The executive estimates the assessment will generate \$282.8 million in FY 2010 and \$315.6 million in FY 2010.</b></p>	<p><b>Fiscal effect: Same as the Executive, but increases hospital assessment revenue by \$55.7 million in FY 2010 and \$55.3 million in FY 2011. Increase in federal Medicaid reimbursement of \$151.5 million in FY 2010 and \$119.3 million in FY 2011.</b></p>	<p><b>Fiscal effect: Same as the House, but increases assessment revenue by \$18.5 million in FY 2010 and decreases assessment revenue by \$16.9 million in FY 2011.</b></p>	<p><b>Fiscal effect: Same as the House.</b></p>

Executive

As Passed by the House

As Passed by the Senate

As Enacted

87 JFS - 82 Medicaid Rates for Community Behavioral Health Services

No provision.

**Section: 309.30.75**

Increases the Medicaid rate ceilings for community behavioral health services provided during FY 2010 by 1/2% over the rate ceilings for FY 2009 and the Medicaid rate ceilings for those services provided during FY 2011 by 1/2% over the rate ceilings for FY 2010.

**Fiscal effect: Funding for the rate increase is provided through earmarks in the Departments of Mental Health and Alcohol and Drug Addiction Services.**

No provision.

**Section: 309.30.75**

No provision.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p>88 JFS - 143 Reduction in Medicaid Rates for Community Provider Services</p>	<p>No provision.</p>	<p>No provision.</p>	<p>No provision.</p>
			<p><b>Section: 309.30.75</b></p> <p>Requires the ODJFS Director to reduce the Medicaid reimbursement rate for the following services by at least 3% effective January 1, 2010: advanced practice nursing services, ambulatory surgery center services, chiropractic services, durable medical equipment, home health services, ambulance and ambulette services, physician services, physical therapy services, podiatry services, private duty nursing services, vision services, clinic services (other than rural health clinics and federally qualified health centers), occupational therapy services, dental services, services provided under an ODJFS-administered home and community-based waiver program, and other services the ODJFS Director identifies (other than services for which state statute sets the Medicaid reimbursement rate).</p> <p><b>Fiscal effect: Savings of \$29.4 million (\$7.9 million state share) in FY 2010 and \$51.6 million (\$16.1 million state share) in FY 2011.</b></p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p>89 JFS - 127 Increase in Medicaid Rates for Hospital Home Health Services</p>	<p>No provision.</p>	<p>No provision.</p>	<p><b>Section: 309.30.76</b>                      Requires the ODJFS Director to increase the Medicaid rates for home health services provided by a provider wholly owned or controlled by one or more hospitals (other than a children's hospital) or one or more nonprofit entities that own or control one or more hospitals in Ohio (other than a children's hospital) to the maximum extent permitted by federal law for FY 2010 and FY 2011 but makes payment of the rate increase subject to funds being available in the Hospital Assessment Fund after money in the fund is used to pay for the rate increase for hospital inpatient and outpatient services, children's hospitals' cost outlier claims and supplemental Medicaid payments to children's hospitals, and the Hospital Inpatient and Outpatient Supplemental Upper Payment Limit Program.</p>
<p>90 JFS - 144 Medicaid Dispensing Fee for Noncompounded Drugs</p>	<p>No provision.</p>	<p>No provision.</p>	<p><b>Section: 309.30.76</b>                      Sets the Medicaid dispensing fee for noncompounded drugs at \$1.80 for the period beginning January 1, 2010, and ending June 30, 2011.</p>

Executive

As Passed by the House

As Passed by the Senate

As Enacted

Fiscal effect: Savings of \$6.2 million (\$1.7 million state share) in FY 2010 and \$14.8 million (\$4.6 million state share) in FY 2011.

91 JFS - 128 Increase in Medicaid Rates for Hospital Ambulance Services

No provision.

No provision.

Section: 309.30.77

Requires the ODJFS Director to increase the Medicaid rates for ambulance services provided by a provider wholly owned or controlled by one or more hospitals (other than a children's hospital) or one or more nonprofit entities that own or control one or more hospitals in Ohio (other than a children's hospital) to the maximum extent permitted by federal law for FY 2010 and FY 2011 but makes payment of the rate increase subject to funds being available in the Hospital Assessment Fund after money in the fund is used to pay for the rate increase for hospital inpatient and outpatient services, children's hospitals' cost outlier claims and supplemental Medicaid payments to children's hospitals, the Hospital Inpatient and Outpatient Supplemental Upper Payment Limit Program, and the rate increase for hospital home health services.

No provision.

Executive

As Passed by the House

As Passed by the Senate

As Enacted

92 JFS - 129 Increase in Medicaid Rates for Hospital Hospice Services

No provision.

No provision.

Section: 309.30.78

Requires the ODJFS Director to increase the Medicaid rates for hospice services provided by a provider wholly owned or controlled by one or more hospitals (other than a children's hospital) or one or more nonprofit entities that own or control one or more hospitals in Ohio (other than a children's hospital) to the maximum extent permitted by federal law for FY 2010 and FY 2011 but makes payment of the rate increase subject to funds being available in the Hospital Assessment Fund after money in the fund is used to pay for the rate increase for hospital inpatient and outpatient services, children's hospitals' cost outlier claims and supplemental Medicaid payments to children's hospitals, the Hospital Inpatient and Outpatient Supplemental Upper Payment Limit Program, the rate increase for hospital home health services, and the rate increase for hospital ambulance services.

No provision.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>93 JFS - 35 Residential State Supplement Transfer</b>			
<p><b>Section: 309.30.80</b></p> <p>Authorizes the Department of Aging to transfer cash, by intrastate transfer voucher, from GRF appropriation item 490412, Residential State Supplement, and SSR Fund 4J40, PASSPORT/Residential State Supplement, to SSR Fund 4J50, Home and Community-Based Services for the Aged, used by ODJFS. The funds transferred are to be used to make benefit payments to RSS recipients.</p>	<p><b>Section: 309.30.80</b></p> <p>Same as the Executive.</p>	<p><b>Section: 309.30.80</b></p> <p>Same as the Executive.</p>	<p><b>Section: 309.30.80</b></p> <p>Same as the Executive.</p>
<b>94 JFS - 27 Fiscal Activities Related to Medicaid Waiver Programs</b>			
<p><b>Section: 309.30.90</b></p> <p>Permits the Director of Budget and Management to seek Controlling Board approval to do the following activities in support of any home and community-based services Medicaid waiver program: (1) create new funds and appropriation items associated with a unified long-term care budget; (2) transfer cash between funds used by affected agencies; and (3) transfer appropriation between appropriation items within a fund and used by the same state agency. Appropriates any transfers of cash approved by the Controlling Board under this section.</p>	<p><b>Section: 309.30.90</b></p> <p>Same as the Executive.</p>	<p><b>Section: 309.30.90</b></p> <p>Same as the Executive.</p>	<p><b>Section: 309.30.90</b></p> <p>Same as the Executive.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>95 JFS - 28 Money Follows the Person Enhanced Reimbursement Fund</b>			
<p><b>Section: 309.31.10</b> Creates SSR Fund 5AJ0, Money Follows the Person Enhanced Reimbursement, into which the federal grant the state receives under the Money Follows the Person Demonstration Program is to be deposited.</p> <p><b>Fiscal effect: The executive estimates that the enhanced portion of the federal reimbursement will be about \$6.2 million in each fiscal year.</b></p>	<p><b>Section: 309.31.10</b> Same as the Executive.</p> <p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Section: 309.31.10</b> Same as the Executive.</p> <p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Section: 309.31.10</b> Same as the Executive.</p> <p><b>Fiscal effect: Same as the Executive.</b></p>
<b>96 JFS - 36 Medicare Part D</b>			
<p><b>Section: 309.31.20</b> Allows ODJFS to use GRF appropriation item 600526, Medicare Part D, for the implementation and operation of the Medicare Part D requirements. Allows the Director of Budget and Management to increase the state share of appropriations in either GRF appropriation item 600525, Health Care/Medicaid, or GRF appropriation item 600526, with a corresponding decrease in the state share of the other appropriation item.</p>	<p><b>Section: 309.31.20</b> Same as the Executive.</p>	<p><b>Section: 309.31.20</b> Same as the Executive, but requires ODJFS to provide notification to the Controlling Board of any transfers between line items 600525 and 600526 at the next scheduled Controlling Board meeting.</p>	<p><b>Section: 309.31.20</b> Same as the Senate.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>97 JFS - 154 Medicare Part D Appropriations</b>			
No provision.	No provision.	No provision.	<p><b>Section: 309.31.23</b></p> <p>Authorizes an increase to the appropriations in GRF line item 600526, Medicare Part D, if the Centers for Medicare and Medicaid Services do not reduce the Medicaid grant award in lieu of state payments for Medicare Part D services as planned in FY 2010 and FY 2011.</p>
<b>98 JFS - 37 Ohio Access Success Project and Identification of Overpayments</b>			
<p><b>Section: 309.31.30</b></p> <p>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.</p>	<p><b>Section: 309.31.30</b></p> <p>Same as the Executive, but corrects a fund number reference.</p>	<p><b>Section: 309.31.30</b></p> <p>Same as the House.</p>	<p><b>Section: 309.31.30</b></p> <p>Same as the House.</p>

Executive

As Passed by the House

As Passed by the Senate

As Enacted

99 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.

Section: 309.31.40

Same as the House.

Section: 309.31.40

Same as the House.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>100 JFS - 39 Provider Franchise Fee Offsets</b>			
<p><b>Section: 309.31.50</b></p> <p>Requires, at least quarterly, the ODJFS Director to certify to the Director of Budget and Management both of the following: (1) The amount of NF franchise permit fee offsets withheld from payments made from GRF; (2) The amount of ICF/MR franchise permit fee offsets withheld from payments made from GRF. Allows the Director of Budget and Management to transfer cash from the GRF to all of the following: (1) SSR Fund 4J50, Home and Community Based Services/Aged, or SSR Fund 5R20, Nursing Facility Stabilization, in accordance with sections 3721.56 and 3721.561 of the Revised Code; (2) SSR Fund 4K10, ICF/MR Bed Assessments. Appropriates the amounts transferred.</p>	<p><b>Section: 309.31.50</b></p> <p>Same as the Executive.</p>	<p><b>Section: 309.31.50</b></p> <p>Same as the Executive.</p>	<p><b>Section: 309.31.50</b></p> <p>Same as the Executive.</p>
<b>101 JFS - 113 Committee to Study Medicaid Provider Franchise Permit Fees</b>			
<p>No provision.</p>	<p>No provision.</p>	<p><b>Section: 309.31.55</b></p> <p>Creates a committee consisting of two members of the Senate, two members of the House of Representatives, and members appointed by the Governor to study the issue of funding the Medicaid Program through franchise permit fees on providers of health-care services.</p>	<p><b>Section: 309.31.55</b></p> <p>Replaces the Senate provision with a provision that requires ODJFS, if it studies the issue of funding the Medicaid Program through franchise permit fees on providers of health-care services, to submit a copy of a report regarding the study to the General Assembly.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
		<p><b>Fiscal effect: Members of the committee are to serve without compensation, except to the extent that serving on the committee is considered part of their regular employment duties. ODJFS is to provide any support staff the committee needs. Therefore, ODJFS may incur some administrative costs.</b></p>	<p><b>Fiscal effect: If ODJFS chooses to conduct the study and submit a report, it will incur a minimal increase in administrative costs.</b></p>
<p><b>102 JFS - 40 Transfer of Funds to the Department of Developmental Disabilities</b></p>			
<p><b>Section: 309.31.60</b></p>	<p><b>Section: 309.31.60</b></p>	<p><b>Section: 309.31.60</b></p>	<p><b>Section: 309.31.60</b></p>
<p>Requires ODJFS to transfer, by intrastate transfer voucher, cash from SSR Fund 4K10, ICF/MR Bed Assessments, to SSR Fund 4K80, Home and Community-Based Services, used by the Department of Developmental Disabilities. Requires the total amount transferred to equal \$12,000,000 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.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>	<p>Same as the Executive.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>103 JFS - 41 Funding For Transition Waiver Services</b>			
<p><b>Section: 309.31.70</b>                      Allows ODJFS, in each fiscal year, to use cash from SSR Fund 4K10, ICF/MR Bed Assessments Fund, in excess of the amounts needed for transfers to SSR Fund 4K80, Home and Community-Based Services Fund, which is used by the Department of Developmental Disabilities, to cover costs of care provided to participants in a waiver with an ICF/MR level of care requirement administered by ODJFS.</p>	<p><b>Section: 309.31.70</b>                      Same as the Executive.</p>	<p><b>Section: 309.31.70</b>                      Same as the Executive.</p>	<p><b>Section: 309.31.70</b>                      Same as the Executive.</p>
<b>104 JFS - 43 Health Care Services Administration Fund</b>			
<p><b>Section: 309.31.90</b>                      Requires that, of the amount received by ODJFS during FY 2010 and FY 2011 from the first installment of assessments paid under section 5112.06 of the Revised Code and intergovernmental transfers made under section 5112.07 of the Revised Code, the ODJFS Director deposit \$350,000 in each fiscal year into the state treasury to the credit of SSR Fund 5U30, Health Care Services Administration, which is used by ODJFS.</p>	<p><b>Section: 309.31.90</b>                      Same as the Executive.</p>	<p><b>Section: 309.31.90</b>                      Same as the Executive.</p>	<p><b>Section: 309.31.90</b>                      Same as the Executive.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>105 JFS - 44 Medicaid Program Support Fund - State</b>			
<b>Section: 309.32.10</b>	<b>Section: 309.32.10</b>	<b>Section: 309.32.10</b>	<b>Section: 309.32.10</b>
Specifies that GSF Fund 5C90 appropriation item 600671, Medicaid Program Support, be used by ODJFS to pay for Medicaid services and contracts. Specifies that ODJFS may also deposit to GSF Fund 5C90, Medicaid Program Support, revenues received from other state agencies for Medicaid services under the terms of interagency agreements between ODJFS and the other state agencies, and all funds ODJFS recovers because the benefits a person received under the disability medical assistance program were determined to be covered by the Medicaid Program.	Same as the Executive.	Same as the Executive.	Same as the Executive.
<b>106 JFS - 45 Transfers of IMD/DSH Cash to the Department of Mental Health</b>			
<b>Section: 309.32.20</b>	<b>Section: 309.32.20</b>	<b>Section: 309.32.20</b>	<b>Section: 309.32.20</b>
Requires ODJFS to transfer, by intrastate transfer voucher, cash from GSF Fund 5C90, Medicaid Program Support, to SSR Fund 4X50, Behavioral Health Medicaid Services, used by the Department of Mental Health in accordance with an interagency agreement that delegates authority from ODJFS to the Department of Mental Health to administer specified Medicaid services.	Same as the Executive.	Same as the Executive.	Same as the Executive.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>107 JFS - 152 Transfers of IMD/DSH Cash to the Department of Mental Health</b>			
No provision.	No provision.	No provision.	<p><b>Section: 309.32.20</b>                      Requires ODJFS to transfer \$14,700,000, through intrastate transfer voucher, during the FY 2010-FY 2011 biennium, from the Medicaid Program Support Fund (Fund 5C90), to the Sale of Goods and Services Fund (Fund 1490), used by the Department of Mental Health.</p>
<b>108 JFS - 153 Transfer to the Nursing Facility Stabilization Fund</b>			
No provision.	No provision.	No provision.	<p><b>Section: 309.32.20</b>                      Requires the Director of Budget and Management to transfer \$4.7 million in FY 2010 and \$3.2 million in FY 2011 from the Medicaid Program Support Fund (Fund 5C90) to the Nursing Facility Stabilization Fund (Fund 5R20).</p>
<b>109 JFS - 46 Prescription Drug Rebate Fund</b>			
<p><b>Section: 309.32.30</b>                      Specifies that GSF Fund 5P50 appropriation item 600692, Health Care Services, be used by ODJFS to pay for Medicaid services and contracts.</p>	<p><b>Section: 309.32.30</b>                      Same as the Executive.</p>	<p><b>Section: 309.32.30</b>                      Same as the Executive.</p>	<p><b>Section: 309.32.30</b>                      Same as the Executive.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>110 JFS - 79 **PARTIALLY VETOED** Federal Medicaid Match for ADAMHS Boards</b>			
No provision.	<p><b>Section: 309.32.40</b></p> <p>Requires the ODJFS Director to seek federal approval to establish a system under which community behavioral health boards obtain federal financial participation for the allowable administrative activities the boards perform in the administration of the Medicaid program.</p> <p><b>Fiscal effect: Potential revenue gain for ADAMHS boards.</b></p>	<p><b>Section: 309.32.40</b></p> <p>Same as the House, but [***VETOED: sets a deadline of October 1, 2009, for the ODJFS Director to seek federal approval.***]</p> <p><b>Fiscal effect: Same as the House.</b></p>	<p><b>Section: 309.32.40</b></p> <p>Same as the Senate.</p> <p><b>Fiscal effect: Same as the House.</b></p>
<b>111 JFS - 126 **VETOED** Funding of Medicaid-Covered Community Behavioral Health Services</b>			
No provision.	No provision.	<p><b>R.C. 5111.023, 5111.912, 5111.913</b></p> <p>[***VETOED: Provides that a community behavioral health board is (1) required to use state funds provided to the board for the purpose of funding community behavioral health services to pay a provider for services under a Medicaid component ODMH or ODADAS administers and (2) permitted to use money raised by a county tax levy to make the payment if using the money for that purpose is consistent with the purpose for which the tax was levied.***]</p>	<p><b>Section: 309.32.43</b></p> <p>Same as the Senate, but [***VETOED: moves the provision to an uncodified section of the bill and specifies that it expires July 1, 2011.***]</p>
No provision.	No provision.	<p>[***VETOED: Provides that the comprehensive annual plan is permitted, rather than required, to certify the availability</p>	<p>Same as the Senate, but [***VETOED: moves the provision to an uncodified section of the bill and specifies that it expires July 1,</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
		of unencumbered community mental health local funds to match Medicaid reimbursement funds earned by community mental health facilities.***]	2011.***]
		<b>Fiscal effect: If local boards choose to no longer use local levy dollars for Medicaid community behavioral health services or pass sepcific non-Medicaid levies, then there may be an increase in costs to the state to pay the nonfederal share of Medicaid community behavioral health services currently paid for with local levy dollars.</b>	<b>Fiscal effect: Same as the Senate, but limits the potential fiscal impact to the FY 2010-FY 2011 biennium.</b>

112 JFS - 78 Nonemergency Medical Transportation Management

Executive	Section: 309.32.60	No provision.	Section: 309.32.45
No provision.	Requires ODJFS to establish a two-year pilot program under which county departments of job and family services serving a county with at least 400,000 persons may contract with nonemergency medical transportation management organizations to manage nonemergency medical transportation services provided to groups of Medicaid recipients the county department includes in the pilot program.	No provision.	Same as the House, but lowers to 200,000 (from 400,000) the minimum population that a county must have to be able to participate in the pilot program.
	<b>Fiscal effect: May result in an increase or decrease in Medicaid costs depending on the terms of the contract(s) for nonemergency medical transportation services.</b>		<b>Fiscal effect: Same as the House.</b>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>113 JFS - 115 Prior Authorization Study</b>			
No provision.	No provision.	<p><b>Section: 309.32.50</b></p> <p>Requires ODJFS to study the issue of requiring prior authorization for all services and goods available under the fee-for-service component of the Medicaid program and to submit a report of its study to the General Assembly not later than October 1, 2009.</p> <p><b>Fiscal effect: OJFS will incur a minimal increase in administrative costs to conduct the study and produce the report.</b></p>	No provision.
<b>114 JFS - 99 Third Party Liability - Pilot Program</b>			
No provision.	No provision.	<p><b>Section: 309.32.60</b></p> <p>Requires the ODJFS Director to establish and administer a pilot program for the purpose of identifying third parties that are liable for paying all or a portion of a claim for a medical item or service provided to a Medicaid recipient before the claim is submitted to, or paid by, the Medicaid Program and specifies that the pilot program may not be terminated prior to 18 months after it is established.</p>	No provision.
No provision.	No provision.	<p>Permits the ODJFS Director to enter into a contract with a person to administer the pilot program and specifies that the contract is</p>	No provision.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
No provision.	No provision.	<p>subject to competitive bidding and must contain certain terms.</p> <p>Requires the ODJFS Director to evaluate the effectiveness of the pilot program after one year and to prepare and submit a report to the Governor and leadership of the General Assembly's that summarizes the results of the evaluation, concludes whether the program achieves savings for the Medicaid program, and makes a recommendation as to whether the program should be extended or made permanent.</p> <p><b>Fiscal effect: ODJFS will incur a minimal increase in administrative costs. It may also incur costs associated with contracting for a person to administer the pilot program.</b></p>	No provision.
<b>115 JFS - 109 Report on Expenditures for Durable Medical Equipment</b>			
No provision.	No provision.	<p><b>Section: 309.32.70</b></p> <p>Requires ODJFS to submit a report to the General Assembly, by July 1, 2010, on Medicaid expenditures for durable medical equipment and requires the report to include recommendations on strategies to reduce the cost of such equipment.</p> <p><b>Fiscal effect: ODJFS will incur a minimal increase in administrative costs to produce the report.</b></p>	<p><b>Section: 309.32.70</b></p> <p>Same as the Senate.</p> <p><b>Fiscal effect: Same as the Senate.</b></p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
116 JFS - 145 Cash Transfers from the Tobacco Use Prevention and Control Foundation Endowment Fund			
No provision.	No provision.	No provision.	<p><b>Section: 512.90</b></p> <p>Permits the Director of Budget and Management to request the Treasurer of State to transfer \$258.6 million from moneys that were formerly to the credit of the Tobacco Use Prevention and Control Foundation Endowment Fund to the General Health and Human Service Pass-Through Fund (Fund 5HC0). Requires the Director of Budget and Management to transfer any cash transferred to the General Health and Human Service Pass-Through Fund as follows:</p>
No provision.	No provision.	No provision.	<p>(1) Up to \$46.0 million in each fiscal year to the Child and Adult Protective Services Fund (Fund 5GV0), used by ODJFS, to support child and adult protective services;</p>
No provision.	No provision.	No provision.	<p>(2) Up to \$31.8 million in fiscal year 2010 and up to \$129.8 million in fiscal year 2011 to the Health Care Services – Other (Fund 5HA0), used by ODJFS, to support health care services under the state Medicaid plan; and</p>
No provision.	No provision.	No provision.	<p>(3) Up to \$2.5 million in each fiscal year to the Breast and Cervical Cancer Fund (Fund 5HB0), used by the Department of Health, to support breast and cervical cancer screenings.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
No provision.	No provision.	No provision.	Appropriates any amount of cash that is transferred.

**Hospital Care Assurance Program**

**117 JFS - 42 Hospital Care Assurance Match**

Section: 309.31.80

Specifies that FED Fund 3F00 appropriation item 600650, Hospital Care Assurance Match, only be used for distributing funds to hospitals under the Hospital Care Assurance Program.

Section: 309.31.80

Same as the Executive.

Section: 309.31.80

Same as the Executive.

Section: 309.31.80

Same as the Executive.

**118 JFS - 29 Delay of Termination of Hospital Care Assurance Program**

Sections: 640.10, 640.11

Delays the termination of the Hospital Care Assurance Program to October 16, 2011.

**Fiscal effect: Total appropriations for the Hospital Care Assurance Program are \$582.7 million in FY 2010 and \$586.0 million in FY 2011. The program is funded using appropriation items 600649, Hospital Care Assurance Fund, and 600650, Hospital Care Assurance Match, in ODJFS.**

Sections: 640.10, 640.11

Same as the Executive.

**Fiscal effect: Same as the Executive.**

Sections: 640.10, 640.11

Same as the Executive.

**Fiscal effect: Same as the Executive.**

Sections: 640.10, 640.11

Same as the Executive.

**Fiscal effect: Same as the Executive.**

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>State and County Funded Medical Programs</b>			
119 JFS - 75 <b>**VETOED**</b> School-Based Health Centers			
No provision.	<p>R.C. 5101.504, 5101.5110, 5101.5210</p> <p>[[**VETOED: Provides that a school-based health center may furnish health assistance services covered under the State Children's Health Insurance Program (SCHIP) Part I, II, or III if it meets the requirements applicable to other providers of those services.**]]</p> <p><b>Fiscal effect: By allowing school-based health centers to become health care providers under SCHIP the services the centers provide to eligible children will be reimbursed at the enhanced federal reimbursement rate.</b></p>	<p>R.C. 5101.504, 5101.5110, 5101.5210</p> <p>Same as the House.</p> <p><b>Fiscal effect: Same as the House.</b></p>	<p>R.C. 5101.504, 5101.5110, 5101.5210</p> <p>Same as the House.</p> <p><b>Fiscal effect: Same as the House.</b></p>
120 JFS - 76 Children's Buy-In Program			
No provision.	<p>R.C. 5101.5212</p> <p>Provides that an individual's countable family income must exceed 300% of the federal poverty guidelines rather than 250% for the individual to meet the income requirement for the Children's Buy-In Program.</p>	<p>R.C. 5101.5212, 5101.5213</p> <p>Same as the House, but includes a technical change in an additional Revised Code section.</p>	<p>R.C. 5101.5212, 5101.5213</p> <p>Same as the Senate.</p>
No provision.	<p>Revises the program's eligibility requirements regarding creditable coverage.</p>	<p>No provision.</p>	<p>Same as the House.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
	<p><b>Fiscal effect: The first provision has no fiscal effect because it changes the law to match ODJFS' current administration of the program. The second provision increases the number of eligibles for the Children's Buy-in Program at an estimated cost of \$1.2 million in FY 2010 and \$1.9 million in FY 2011.</b></p>	<p><b>Fiscal effect: None.</b></p>	<p><b>Fiscal effect: Same as the House.</b></p>

Executive

As Passed by the House

As Passed by the Senate

As Enacted

Social Services

121 JFS - 90 Direct Deposit System for Cash Assistance

	R.C. 329.03, 126.35	R.C. 329.03, 126.35	R.C. 329.03, 126.35
No provision.	Revises the law governing the method by which cash assistance is provided under the Ohio Works First and Disability Financial Assistance programs by (1) also applying the law to cash assistance provided under the Refugee Assistance Program, (2) eliminating law that permits a board of county commissioners to require a county department of job and family services to establish a voluntary or mandatory direct deposit system unless the ODJFS Director has provided for the cash assistance to be made by a state electronic benefit transfer system, (3) requiring each county department to establish a direct deposit system and inform applicants for and recipients of the programs that they must choose whether to receive the cash assistance under the county direct deposit system or the state electronic benefit transfer system, (4) eliminating law that (a) requires county departments to determine what type of account will be used for direct deposit, (b) requires county departments to negotiate with financial institutions to determine the charges, if any, to be imposed, and (c) specifies whether a county department must or may pay the charges, (5) eliminating law that permits a recipient to	Same as the House.	Same as the House.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
	<p>elect to receive cash assistance in the form of a paper warrant, and (6) eliminating law that requires county departments to bear the full cost of the amount of a replacement warrant under certain circumstances.</p> <p><b>Fiscal effect: Standardizes delivery of cash assistance benefits across counties.</b></p>	<p><b>Fiscal effect: Same as the House.</b></p>	<p><b>Fiscal effect: Same as the House.</b></p>
<b>122 JFS - 63 Child, Family, and Adult Community and Protective Services</b>			
No provision.	<p><b>Sections: 309.45.21, 309.10</b></p> <p>Requires that GRF appropriation item 600533, Child, Family, and Adult Community &amp; Protective Services, (\$50 million in each fiscal year) be distributed to each county department of job and family services using the formula ODJFS uses when distributing Title XX funds to county departments and requires county departments to use the funds for specified purposes.</p>	<p><b>Sections: 309.45.21, 309.10</b></p> <p>Same as the House.</p>	<p><b>Sections: 309.45.21, 309.10</b></p> <p>Same as the House (appropriation reduced to \$15 million in each fiscal year).</p>
<b>123 JFS - 86 Early Care and Education</b>			
No provision.	<p><b>Sections: 309.45.40, 309.45.50, 309.10</b></p> <p>Makes the following earmarks of GRF appropriation item 600535, Early Care and Education:</p> <p>(1) \$1.5 million in each fiscal year for the Children's Hunger Alliance.</p>	No provision.	No provision.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
No provision.	(2) \$9 million in each fiscal year for the Ohio Child Care Resource and Referral Association to distribute funds to organizations that provide summer and after-school programs to TANF-eligible youth.	No provision.	No provision.
No provision.	(3) \$1 million in each fiscal year for the Ohio Alliance of Boys and Girls Clubs to provide after-school programs for TANF-eligible youth.	No provision.	No provision.

**124 JFS - 65 Kinship Permanency Incentive Program**

Executive	Sections: <i>309.45.70, 309.10</i>	Section: <i>309.40.55</i>	Section: <i>309.40.55</i>
No provision.	Requires GRF appropriation item 600541, Kinship Permanency Incentive Program, (\$5 million in each fiscal year) be used to support the Kinship Permanency Incentive Program.	Replaces the House provision with a provision that allows ODJFS to use up to \$10 million in each fiscal year of federally funded line item 600689, TANF Block Grant, to support the activities of the Kinship Permanency Incentive Program, and requires ODJFS to submit a report on program outcomes and expenditures to the Governor, the Speaker and Minority Leader of the House of Representatives, and the President and Minority Leader of the Senate not later than December 31, 2009, and December 31, 2010.	Same as the House.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p>125 JFS - 91 <b>**VETOED**</b> Reallocation of Unused County Funds</p>	<p><b>Section: 309.45.90</b>                      [***VETOED: Requires ODJFS to reallocate income maintenance funds, TANF funds, TANF Title XX transfer funds, and Title XX social services funds to counties when ODJFS is informed a county will not use the full amount allocated to it for FY 2010 or FY 2011.***]  <b>Fiscal effect: Potential minimal increase in ODJFS administrative costs. Potential revenue gain for some counties.</b></p>	<p><b>Section: 309.45.90</b>                      Same as the House, but also [***VETOED: requires ODJFS to reallocate the funds when ODJFS determines through an annual close out or reconciliation of funds that a county did not use the entire amount of the funds.***]  <b>Fiscal effect: Same as the House.</b></p>	<p><b>Section: 309.45.90</b>                      Same as the Senate.  <b>Fiscal effect: Same as the House.</b></p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
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**Food Stamp Program**

126 JFS - 6 Supplemental Nutrition Assistance Program

Executive	As Passed by the House	As Passed by the Senate	As Enacted
R.C. 5101.54, 176.05, 329.042, 329.06, 955.201, 2913.46, 3119.01, 3121.898, 3123.952, 3770.05, 4141.162, 5101.11, 5101.16, 5101.162, 5101.33, 5101.47, 5101.54, 5101.541, 5101.542, 5101.544, 5101.84, 5502.01, 5502.14, 5502.15, 5739.02, Section 309.40.20	R.C. 5101.54, 176.05, 329.042, 329.06, 955.201, 2913.46, 3119.01, 3121.898, 3123.952, 3770.05, 4141.162, 5101.11, 5101.16, 5101.162, 5101.33, 5101.47, 5101.54, 5101.541, 5101.542, 5101.544, 5101.84, 5502.01, 5502.14, 5502.15, 5739.02, Section 309.40.20	R.C. 5101.54, 176.05, 329.042, 329.06, 955.201, 2913.46, 3119.01, 3121.898, 3123.952, 3770.05, 4141.162, 5101.11, 5101.16, 5101.162, 5101.33, 5101.47, 5101.54, 5101.541, 5101.542, 5101.544, 5101.84, 5502.01, 5502.14, 5502.15, 5739.02, Section 309.40.20	R.C. 5101.54, 176.05, 329.042, 329.06, 955.201, 2913.46, 3119.01, 3121.898, 3123.952, 3770.05, 4141.162, 5101.11, 5101.16, 5101.162, 5101.33, 5101.47, 5101.54, 5101.541, 5101.542, 5101.544, 5101.84, 5502.01, 5502.14, 5502.15, 5739.02, Section 309.40.20

Renames the Food Stamp Program the Supplemental Nutrition Assistance Program (SNAP) to provide for state law to be consistent with a change made to federal law but permits the ODJFS Director to refer to the program as the Food Stamp Program or the Food Assistance Program in rules and documents.

Same as the Executive.

Same as the Executive.

Same as the Executive.

Requires ODJFS, immediately following a county department of job and family services' certification that a household in immediate need of nutrition assistance is eligible for SNAP, to provide for the household to be sent by regular United States mail an electronic benefit transfer card containing the amount of benefits the household is eligible to receive under the program, rather than requiring a county department staff member to personally hand an authorization-to-participate card to such a

Same as the Executive.

Same as the Executive.

Same as the Executive.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p>household.</p> <p>Eliminates law that provides that food stamps and any document necessary to obtain food stamps are, except while in the custody of the United States Postal Service, the property of ODJFS from the time ODJFS receives the food stamps from the federal agency responsible for their delivery until they are received by the household entitled to receive them or by that household's authorized representative.</p>	Same as the Executive.	Same as the Executive.	Same as the Executive.
<p><b>Fiscal effect: Potential minimal decrease in administrative costs due to reducing administrative procedures in delivering electronic benefit transfer cards to participants.</b></p>	<b>Fiscal effect: Same as the Executive.</b>	<b>Fiscal effect: Same as the Executive.</b>	<b>Fiscal effect: Same as the Executive.</b>

127 JFS - 32 Food Assistance Transfer

**Section: 309.40.10**

Permits the Director of Budget and Management, on July 1, 2009, or as soon as possible thereafter, to transfer up to \$1 million in cash from the Food Stamps Program Fund (Fund 3840) to the Food Assistance Fund (Fund 5ES0).

**Section: 309.40.10**

Same as the Executive.

**Section: 309.40.10**

Same as the Executive.

**Section: 309.40.10**

Same as the Executive.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p><b>Fiscal effect: Cash from this transfer is used to support SSR Fund 5ES0 appropriation item 600630, Food Assistance, which totals \$500,000 in each fiscal year. These funds are used to provide assistance to the Ohio Association of Second Harvest Food Banks.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>
<p>128 JFS - 33 Ohio Association of Second Harvest Food Banks</p>			
<p><b>Section: 309.40.30</b>                      Requires the ODJFS Director in FY 2010 and FY 2011 to provide assistance to the Ohio Association of Second Harvest Food Banks in an amount equal to the assistance provided in FY 2009 notwithstanding any other provision.                      No provision.  <b>Fiscal effect: The Ohio Association of Second Harvest Food Banks will receive \$8.5 million in FY 2010 and FY 2011, as this is the amount that the Association is expected to receive in FY 2009.</b></p>	<p><b>Section: 309.40.30</b>                      Same as the Executive.                      Requires that newly created GRF appropriation item 600540, Second Harvest Food Banks, (\$3.5 million in each fiscal year) be distributed to the Ohio Association of Second Harvest Food Banks to purchase and distribute food products.  <b>Fiscal effect: Increases the amount that the Ohio Association of Second Harvest Food Banks will receive from ODJFS to \$12 million in each fiscal year.</b></p>	<p><b>Section: 309.40.30</b>                      Same as the Executive.                      Same as the House.  <b>Fiscal effect: Same as the House.</b></p>	<p><b>Section: 309.40.30</b>                      Same as the Executive.                      Same as the House.  <b>Fiscal effect: Same as the House.</b></p>

Executive

As Passed by the House

As Passed by the Senate

As Enacted

Appropriation Language

129 JFS - 57 Agency Fund Group

Section: 309.20.10

Specifies that the Agency Fund Group (AGY) and the Holding Account Redistribution Fund Group (7090) are to be used to hold revenues until the appropriate fund is determined or until the revenues are directed to another governmental agency other than ODJFS. Permits the ODJFS Director to request the Director of Budget and Management to authorize expenditures from AGY Fund 1920, Support Intercept-Federal, AGY Fund 5830, Support Intercept-State, AGY Fund 5B60, Food Stamp Offset, and 7090 Fund R012, Refunds and Audit Settlements, and 7090 Fund R013, Forgery Collections, if receipts credited to these funds exceed appropriations. Appropriates the additional amounts upon approval of the Director of Budget and Management.

Section: 309.20.10

Same as the Executive.

Section: 309.20.10

Same as the Executive.

Section: 309.20.10

Same as the Executive.

Executive

As Passed by the House

As Passed by the Senate

As Enacted

Unemployment Compensation

130 JFS - 147 Remuneration for Cost Savings Days

No provision.

No provision.

No provision.

R.C. 124.392, 4141.01, and 4141.31

Requires unemployment compensation benefits otherwise payable for any week to be reduced by the amount of remuneration or other payments a claimant receives with respect to such week for the determinable value of cost savings days. Defines "cost savings day" as any unpaid day off from work in which employees continue to accrue employee benefits which have a determinable value including, but not limited to, vacation, pension contribution, sick time, and life and health insurance.

No provision.

No provision.

No provision.

Specifies that the reduction of unemployment compensation benefits for vacation pay or allowance payable under the terms of a labor-management contract or agreement, or other contract of hire, provided for in current law also include vacation pay or allowance payable under the law.

No provision.

No provision.

No provision.

Specifies that remuneration for personal services includes cost savings days for which employees continue to accrue employee benefits that have a determinable value.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
			<b>Fiscal effect: The state's payments to the Unemployment Compensation Trust Fund may be reduced.</b>
<b>131 JFS - 54 Removal of Unemployment Compensation Advisory Council Members from PERS</b>			
<p>R.C. 4141.08, 145.012</p> <p>Removes current and future Unemployment Compensation Advisory Council members from the Public Employees Retirement System (PERS) on and after the effective date of the bill. Specifies that the General Assembly does not intend this removal to prohibit the use of such service for calculation of benefits under the PERS Law for service prior to the provision's effective date. Specifies that the \$50 per day each Council member currently receives is to be considered a "meeting stipend."</p> <p><b>Fiscal effect: Reduces ODJFS' employer contribution to PERS for council members who are no longer defined as state employees under PERS law.</b></p>	<p>R.C. 4141.08, 145.012</p> <p>Same as the Executive.</p> <p><b>Fiscal effect: Same as the Executive.</b></p>	<p>R.C. 4141.08, 145.012</p> <p>Same as the Executive.</p> <p><b>Fiscal effect: Same as the Executive.</b></p>	<p>R.C. 4141.08, 145.012</p> <p>Same as the Executive.</p> <p><b>Fiscal effect: Same as the Executive.</b></p>

Executive

As Passed by the House

As Passed by the Senate

As Enacted

132 JFS - 56 Payments from the Unemployment Compensation Special Administrative Fund

R.C. 4141.11

Removes the requirement that the ODJFS Director receive approval from the Unemployment Compensation Advisory Council in order to use the Unemployment Compensation Special Administrative Fund (UCSAF) for any of the following reasons: (1) The proper administration of the Unemployment Compensation Law (UCL) and either (a) no federal funds are available for the specific purpose for which the expenditure is to be made, under specified conditions; or (b) for which purpose appropriations from federal funds have been requested and approved but not received, provided the fund would be reimbursed upon receipt of the federal appropriation; (2) To the extent possible, the repayment to the Unemployment Compensation Administration Fund of moneys found by the proper U.S. agency to have been lost or expended for purposes other than, or an amount in excess of, those found necessary by the agency for UCL administration. Allows the ODJFS Director, rather than the Council under current law, to determine whether amounts in the UCSAF are considered to be excessive in order to have the excessive amounts transferred into the Unemployment Compensation Fund. Removes the requirement that UCSAF

R.C. 4141.11

Same as the Executive.

No provision.

No provision.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p>funds be continuously available to the Council for expenditures consistent with the UCL, but retains the requirement that those funds be continuously available to the Director.</p> <p><b>Fiscal effect: Since the provision removes the requirement of Council-approval, the Council may meet less often resulting in a decrease in council-related costs for ODJFS.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>		
<p>133 JFS - 51 Employer Surcharge</p>			
<p><b>Sections: 309.50, 309.50.10</b></p> <p>Reinstates ODJFS's ability to collect an employer surcharge and any associated fines assessed between calendar years 1988 and 1990. (Prior law required contributing employers to pay a surcharge in order to generate revenues to meet the costs of automating the Bureau.) Directs collected revenues to be deposited into SSR Fund 4A90, Unemployment Compensation Administrative.</p> <p><b>Fiscal effect: Potential increase in revenue deposited into Fund 4A90 as ODJFS collects any outstanding fees from delinquent employers. This provision generates a few thousand dollars in revenue each year.</b></p>	<p><b>Sections: 309.50, 309.50.10</b></p> <p>Same as the Executive.</p> <p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Sections: 309.50, 309.50.10</b></p> <p>Same as the Executive.</p> <p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Sections: 309.50, 309.50.10</b></p> <p>Same as the Executive.</p> <p><b>Fiscal effect: Same as the Executive.</b></p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>134 JFS - 52 Federal Unemployment Programs</b>			
<p><b>Section: 309.50.20</b>                      Appropriates any unspent funds from FY 2009 in FED Fund 3V40 appropriation item 600678, Federal Unemployment Programs, to ODJFS. At the request of the ODJFS Director, authorizes the Director of Budget and Management to increase appropriations for FY 2010 by the amount remaining unspent from the FY 2009 appropriation and increase appropriations for FY 2011 by the amount remaining unspent from the FY 2010 appropriation. Specifies that the appropriation be used for administrative activities for the UC program, employment services, or any other allowable expenditures under section 903(d) of the Social Security Act. Limits the appropriation increase to the balance of federal funds remaining after benefits are paid and obligated administrative expenditures are taken into account.</p>	<p><b>Section: 309.50.20</b>                      Same as the Executive.</p>	<p><b>Section: 309.50.20</b>                      Same as the Executive.</p>	<p><b>Section: 309.50.20</b>                      Same as the Executive.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
135 DAS - 58 Collective Bargaining for Care Providers	R.C. 4113.81, 4113.82 - 4113.86	R.C. 107.19	R.C. 107.19, Sections 741.01 - 741.07
(1) No provision.	(1) Allows independent home care providers and independent child care providers to form and be represented by a representative organization for the purposes of collective bargaining and the reconciliation of grievances.	(1) No provision.	(1) Same as the House, but enacts the provisions below in uncodified law, rather than codified; stipulates that the provisions will remain in effect until the end of the current Governor's time in office as Governor.
(2) No provision.	(2) Defines "independent home care provider" as any person who either provides home services under a Medicaid waiver component or through a state Medicaid plan amendment, with certain exclusions; defines "independent child care provider" as a child care provider categorized under the child care law.	(2) No provision.	(2) Same as the House.
( 3) No provision.	(3) Specifies that a representative organization may become the exclusive representative of all of the providers in an appropriate bargaining unit via either an impartial election or by filing a request with the State Employment Relations Board (SERB); outlines procedures for both methods.	(3) No provision.	(3) Same as the House.
(4) No provision.	(4) Requires that, with regard to care providers, all matters pertaining to conditions of employment that are within the control of the state, as well as any modification to an existing collective bargaining agreement, be subject to collective bargaining.	(4) No provision.	(4) Same as the House.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
(5) No provision.	(5) Prohibits the collective bargaining rights provided in this provision from altering the unique relations between providers and recipients of care, particularly in the ability of a recipient of care to choose their provider and the ability of the state to take appropriate disciplinary action under state or federal law.	(5) No provision.	(5) Same as the House.
(6) No provision.	(6) Grants SERB the authority to investigate, hold hearings, make determinations, and issue complaints regarding unfair labor practices with regard to care providers.	(6) No provision.	(6) Same as the House.
(7) No provision.	(7) No provision.	(7) Prohibits the Governor from issuing executive orders that have been previously issued and that the Federal Trade Commission, Office of Policy Planning, Bureau of Economics, or Bureau of Competition has determined to be anti-competitive and in violation of anti-trust laws. Deems such executive orders invalid and unenforceable.	(7) Same as the Senate.
	<b>Fiscal effect: None, as the bill codifies existing practice as required in Executive Orders 2007 - 23s and 2008 - 02s.</b>	<b>Fiscal effect: None.</b>	<b>Fiscal effect: Same as the House.</b>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
136 AGE - 34 PASSPORT Home First Report	<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><b>Fiscal effect: The Departments may realize a minimal decrease in administrative costs.</b></p>	<p>R.C. 173.401</p> <p>Same as the House.</p> <p><b>Fiscal effect: Same as the House.</b></p>	<p>R.C. 173.401</p> <p>Same as the House.</p> <p><b>Fiscal effect: Same as the House.</b></p>
137 AGE - 33 Statewide Expansion of Choices Program	<p>R.C. 173.402</p> <p>Requires that the Choices Program be available statewide, subject to federal approval.</p>	<p>R.C. 173.403</p> <p>Same as the House, but codifies the provision in a different Revised Code section.</p>	<p>R.C. 173.403</p> <p>Same as the Senate.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
	<p><b>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.</b></p>	<p><b>Fiscal effect: Same as the House.</b></p>	<p><b>Fiscal effect: Same as the House.</b></p>

138 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.

R.C. 173.501, 173.50

Same as the Executive.

No provision.

R.C. 173.501, 173.50

Same as the Executive.

No provision.

R.C. 173.501, 173.50

Same as the Executive.

No provision.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p><b>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.</b></p>	<p><b>Fiscal effect: Same as the Executive, but there could be minimal savings as a result of the elimination of the report requirement.</b></p>	<p><b>Fiscal effect: Same as the House.</b></p>	<p><b>Fiscal effect: Same as the House.</b></p>
<p>139 AGE - 36 Consolidated Federal Medicaid Waiver</p>			
<p>No provision.</p>	<p>R.C. 5111.861, 173.40, 173.401, 173.402, 173.403, 5111.89, 5111.891, 5111.894, 5111.971</p> <p>Requires the ODJFS Director to seek federal approval to consolidate the Assisted Living Program, Choices Program, and PASSPORT Program into one Medicaid waiver.</p>	<p>R.C. 5111.861, 173.40, 173.401, 173.403, 173.404, 5111.89, 5111.891, 5111.894, 5111.971</p> <p>Same as the House.</p>	<p>R.C. 5111.861, 173.40, 173.401, 173.403, 173.404, 5111.89, 5111.891, 5111.894, 5111.971</p> <p>Same as the House.</p>
<p>No provision.</p>	<p>Requires those programs to be operated as separate Medicaid waivers until the state receives federal approval for the consolidated Medicaid waiver.</p> <p><b>Fiscal effect: Potential minimal decrease in administrative expenses due to the fact that ODA will not have to renew each waiver separately.</b></p>	<p>Same as the House, but codifies the provision regarding the Choices Program in a different Revised Code section.</p> <p><b>Fiscal effect: Same as the House.</b></p>	<p>Same as the Senate.</p> <p><b>Fiscal effect: Same as the House.</b></p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>140 AGE - 28 Home First Program</b>			
<p><b>Section: 209.20</b></p> <p>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:</p> <p>(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;</p> <p>(2) Authorize additional expenditures from FED Fund 3C40, PASSPORT, when receipts credited exceed appropriated amounts;</p> <p>(3) Authorize additional expenditures from FED Fund 3G50, Interagency Reimbursement, used by the Department of Job and Family Services, when receipts credited exceed appropriated amounts.</p> <p>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.</p>	<p><b>Section: 209.20</b></p> <p>Same as the Executive.</p>	<p><b>Section: 209.20</b></p> <p>Same as the Executive.</p>	<p><b>Section: 209.20</b></p> <p>Same as the Executive.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>141 AGE - 20 Transfer of Residential State Supplement Appropriations</b>			
<p><b>Section: 209.30</b></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><b>Section: 209.30</b></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>	<p><b>Section: 209.30</b></p> <p>Same as the House.</p>	<p><b>Section: 209.30</b></p> <p>Same as the House, but specifies that the Residential State Supplement Fund (Fund 5CH0), used by the Department of Mental Health, is for training for adult care facilities serving residents with mental illness.</p>
<b>142 AGE - 27 Transfer of Resident Protection Funds</b>			
<p><b>Section: 209.30</b></p> <p>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.</p>	<p><b>Section: 209.30</b></p> <p>Same as the Executive.</p>	<p><b>Section: 209.30</b></p> <p>Same as the Executive.</p>	<p><b>Section: 209.30</b></p> <p>Same as the Executive.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>143 AGE - 13 **PARTIALLY VETOED** Unified Long-Term Care Budget</b>			
Section: 209.40	Sections: 209.40, 173.43, 173.431 - 173.434	Sections: 209.40, 173.43, 173.431 - 173.434	Sections: 209.40, 173.43, 173.431 - 173.434
Creates the Unified Long-Term Care Budget Workgroup and requires the Workgroup to develop a unified long-term care budget.	Same as the Executive.	Same as the Executive, but adds representatives of managed care organizations [***VETOED: , with which ODJFS contracts for purposes of Medicaid managed care, ***] appointed by the Governor to the workgroup and requires the continuum of services that are to be facilitated by the budget to promote a consumer's independence and autonomy.	Same as the Senate.
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, but requires the ODJFS Director to work with the Directors of Aging and Budget and Management on the annual report.	Same as the House.	Same as the House.
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 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.	Same as the Executive.	Same as the Executive.	Same as the Executive.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
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 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.	Same as the House, but requires the Department or Department's designee to ensure that persons providing care management and authorization services are properly certified or licensed by the state.	Same as the Senate.
No provision.	Requires the Department of Aging to contract with each area agency on aging for assistance in the administration of the unified long-term care budget.	Same as the House.	Replaces the House provision with a provision that requires the Department to contract with each PASSPORT administrative agency for assistance in the administration of the unified long-term care budget.
<b>Fiscal effect: The Department could experience a minimal increase in administrative expenses.</b>	<b>Fiscal effect: Same as the Executive.</b>	<b>Fiscal effect: Same as the Executive.</b>	<b>Fiscal effect: Same as the Executive.</b>

Executive

As Passed by the House

As Passed by the Senate

As Enacted

144 ADA - 6 Medicaid Rates for Community Behavioral Health Services

No provision.

Sections: 215.10, 215.20

Requires that \$115,919 in FY 2010 and \$230,464 in FY 2011 of GRF appropriation item 038401, Treatment Services, be provided to local boards to pay the nonfederal share of the 1/2% increase in the Medicaid reimbursement rate ceilings for Medicaid-covered community behavioral health services. (The provision that increases the provider rate is in the Department of Job and Family Services in Section 309.30.75 of the bill.)

No provision.

No provision.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>145 OBM - 12 Pay Reduction Strategies</b>			
<p>R.C. 124.152, 124.18, 124.19, 124.34, 124.392, 126.05, Section 741.10</p>	<p>R.C. 124.15, 124.152, 124.18, 124.181, 124.183, 124.27, 124.34, 124.382, 124.385, 124.386, 124.392, 126.05, Section 741.10</p>	<p>R.C. 124.15, 124.152, 124.18, 124.181, 124.183, 124.27, 124.34, 124.382, 124.385, 124.386, 124.392, 126.05, Section 741.10</p>	<p>R.C. 124.15, 124.152, 124.18, 124.181, 124.183, 124.27, 124.34, 124.382, 124.385, 124.386, 124.392, 126.05, Sections 271.10, 741.10, 812.20</p>
<p>(1) Reduces the compensation of certain full-time and permanent part-time state employees during the FY 2010-FY 2011 biennium by 4%, 4.5%, or 5%. Returns the pay for these employees to the FY 2009 level at the beginning of FY 2012.</p>	<p>(1) No provision.</p>	<p>(1) No provision.</p>	<p>(1) No provision.</p>
<p>(2) Authorizes the Governor to declare a fiscal emergency if the Governor ascertains that the available revenue and balances for any fund or across any funds will in all probability be less than appropriations for the year, and to issue such orders as are necessary to the Director of OBM to reduce expenditures, or to the Director of DAS to implement various personnel actions, including but not limited to furloughs.</p>	<p>(2) Same as the Executive, but changes the furloughs programs referenced in the executive budget to mandatory cost savings days.</p>	<p>(2) Same as the House.</p>	<p>(2) Same as the House.</p>
<p>(3) Requires the Director of DAS, in consultation with the Director of OBM, to establish mandatory or voluntary furlough programs for any employee paid by warrant of the Director of OBM as necessary to reduce state expenditures in the event of a fiscal emergency declared by the Governor. Specifies that (a) reductions in pay made as the result of a furlough are not modifications</p>	<p>(3) Replaces the executive provisions with provisions that (a) require, during each fiscal year of the biennium, that all full-time exempt employees participate in a total of 80 hours of mandatory cost savings through a loss of pay or holiday pay and that all part-time employees not receive holiday pay, (b) require participation in the cost savings program for all employees of the Secretary</p>	<p>(3) Same as the House.</p>	<p>(3) Same as the House, but authorizes the Secretary of State, Auditor of State, Treasurer of State, or Attorney General, after July 1, 2009, to decide to begin participation in the cost savings program for their employees for 80 hours or less.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p>or reductions in pay that an employee in the classified civil service can appeal to the State Personnel Board of Review and (b) an employee need not be in active pay status the day preceding a holiday to receive holiday pay, as current law requires, if the employee is furloughed on that day.</p>	<p>of State, Auditor of State, Treasurer of State, or Attorney General unless those officials choose to exempt the office's employees and notifies the Director of DAS in writing on or before July 1, 2009, and (c) authorize the Director of DAS, after June 30, 2011, to implement mandatory cost savings days for exempt employees if the Governor declares a fiscal emergency.</p>		
<p>(4) Authorizes the Governor, during the FY 2010-FY 2011 biennium, to impose a moratorium on the receipt of holiday pay on any holiday by employees paid by warrant of the Director of OBM, if the Governor declares a fiscal emergency. Provides that employees required to work on a holiday by their appointing authority be paid at their regular rate of pay. Exempts employees of the judicial and legislative branches and the Secretary of State, Auditor of State, Treasurer of State, and Attorney General from the moratorium on the receipt of holiday pay.</p>	<p>(4) Replaces the executive provisions with provisions that (a) require that part-time employees receive four hours of holiday pay, rather than on a pro-rated basis as required by current law (excepting FY2010 and FY2011, as provided under section 124.392), and (b) change certain conditions governing the payment of holiday pay for state employees that relate to whether the employee worked the day immediately before or after the holiday.</p>	<p>(4) Same as the House.</p>	<p>(4) Same as the House.</p>
<p>(5) Directs the Office of Collective Bargaining within DAS to negotiate with the respective state collective bargaining units various payroll reduction strategies through the collective bargaining process prior to July 1, 2009, including, but not limited to, reductions in pay for FY 2010 and FY 2011 and an increase in a state employee's share of dental, vision, and life insurance benefits during those fiscal years, to achieve savings of between \$170 million and \$200 million for</p>	<p>(5) Same as the Executive.</p>	<p>(5) Same as the Executive.</p>	<p>(5) Same as the Executive.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p>each fiscal year. Authorizes the Director of OBM to transfer cash from non-GRF funds to the GRF to carry out the provisions above.</p>			
(6) No provision.	<p>(6) Imposes moratoria, from December 2009 through December 2011, on the accrual of personal leave by employees paid by warrant of the Director of OBM and on the annual conversion of accrued but unused personal leave. Provides that the moratoria apply to employees of the Secretary of State, Auditor of State, Treasurer of State, or Attorney General unless those officials decide to exempt the office's employees and so notifies the Director of DAS in writing on or before July 1, 2009.</p>	<p>(6) Same as the House, but exempts Supreme Court, General Assembly, and Legislative Service Commission employees from the moratoria on the accrual and conversion of personal leave imposed during FY 2010-FY 2011 unless the appointing authorities of these employees choose to include them in the moratoria by July 1, 2009.</p>	<p>(6) Same as the Senate, but extends from July 1, 2009, to November 1, 2009, the deadline (a) by which the Secretary of State, Auditor of State, Treasurer of State, or Attorney General can exempt their employees from inclusion in the moratorium on the accrual and annual payment of personal leave and (b) by which the Supreme Court, General Assembly, and Legislative Service Commission can include their employees in this moratorium.</p>
(7) No provision.	<p>(7) Places a general moratorium on annual step advancements for state employees from June 21, 2009, through June 20, 2011, and provides that intermittent employees are not eligible for step advancements.</p>	(7) Same as the House.	(7) Same as the House.
(8) No provision.	<p>(8) Eliminates pay supplements and probationary periods for intermittent employees.</p>	(8) Same as the House.	<p>(8) Same as the House, but makes these provisions effective immediately.</p>
(9) No provision.	<p>(9) Requires that state employees be paid at the employee's regular rate of pay for any hours of compensatory time in excess of maximum amounts specified in existing law if the employee has not used the compensatory time within 365 days after it is granted, rather than within 180 days as provided by current law.</p>	(9) Same as the House.	(9) Same as the House.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
(10) No provision.	(10) Allows an employee paid by warrant of the Director of Budget and Management to use the employee's available compensatory leave balance to supplement disability leave payments.	(10) Same as the House.	(10) Same as the House.
(11) No provision.	(11) Grants in August 2011 to a state employee paid by warrant of the Director of Budget and Management a one-time pay supplement equivalent to 16 hours if the employee is a part-time employee, or equivalent to 32 hours or half the hours of personal leave hours the employee lost as a result of the moratoria on the annual credit and payment of personal leave in effect from December 2009 until December 2011, whichever is less, if the employee is a full-time employee; does not grant the pay supplement described above to employees of the Secretary of State, Auditor of State, Treasurer of State, or Attorney General unless these employees were subject to these moratoria and the elected officials noted above decide to participate in the pay supplement by July 1, 2009.	(11) Same as the House, but (a) provides that Supreme Court, General Assembly, and Legislative Service Commission employees do not receive a one-time pay supplement if they did not participate in the moratoria on the accrual and conversion of personal leave credit in FY 2010-FY 2011 and (b) changes the date by which appointing authorities having the option to participate in the one-time pay supplement must notify the Director of DAS of the decision to participate to June 1, 2011.	(11) Same as the Senate, but provides that the additional one-time pay supplement applies to firefighters and employees who accrue personal leave under a rule of the Director of Administrative Services.
(12) No provision.	(12) Grants in July 2011 to a state employee paid by warrant of the Director of Budget and Management a one-time credit of sick leave equal to 16 hours if the employee is a part-time employee, or the lesser of 32 hours or one-half of the personal leave hours the employee lost as a result of the moratoria on the crediting and annual payment of personal leave in effect from December 2009 until December 2011,	(12) Same as the House, but (a) provides that Supreme Court, General Assembly, and Legislative Service Commission employees do not receive additional sick leave credit if they did not participate in the moratoria on the accrual and conversion of personal leave credit in FY 2010-FY 2011 and (b) changes the date by which appointing authorities having the option to participate in the additional sick leave crediting must notify the	(12) Same as the Senate, but provides that the additional sick leave credit applies to employees who accrue personal leave under a rule of the Director of Administrative Services.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
(13) No provision.	<p>whichever is less, if the employee is a full-time employee; does not grant the sick leave credit described above to employees of the Secretary of State, Auditor of State, Treasurer of State, or Attorney General unless these employees were subject to the moratoria on the accrual and annual payment of personal leave in effect from December 2009 until December 2011 and the elected officials noted above decide to participate in the pay supplement by July 1, 2009.</p> <p>(13) No provision.</p>	<p>Director of DAS of the decision to participate to June 1, 2011.</p> <p>(13) Creates the Cost Savings Fund and allocates to the fund savings accrued through employee participation in the mandatory cost savings program and in mandatory cost savings days. Permits the fund to be used to pay employees who participated in the mandatory cost savings program or in cost savings days. Specifies that any investment earnings of the fund are to be credited to the fund.</p>	<p>(13) Same as the Senate, but (a) requires AGY Fund 8140 appropriation 995674, Cost Savings Days, to be used to pay employees who participated in a mandatory cost savings program, (b) authorizes the Director of OBM to transfer agency savings achieved from the programs to the GRF or any other fund as deemed necessary, make temporary transfers from the GRF to the Cost Savings Fund, and reimburse the GRF for such transfers, and (c) appropriates any additional amounts deemed necessary for these purposes by the Director of OBM.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p><b>Fiscal effect: Decrease in payroll expenditures. In order to achieve the savings described above, the executive budget proposes to reduce exempt employee compensation by up to 5% based on a graduated scale, and by comparable amounts or concessions from employees subject to collective bargaining agreements. According to OBM, employees earning \$125,000 or more would be subject to a 6% reduction. Additionally, the executive proposes to lower the amount of the dental, vision, and life insurance premiums paid by the state from 100% to 90%, to use furloughs when appropriate, and to increase the mandatory early retirement incentive trigger. All of these options may be used in varying degrees.</b></p>	<p><b>Fiscal effect: Same as the Executive, but, according to DAS estimates (which include both exempt and non-exempt employees), savings to the state during the FY 2010-FY 2011 biennium are expected to be approximately \$143.7 million from the cost savings days, approximately \$30 million per year from the freeze on step movement, and approximately \$18.1 million per year from the moratoria on personal leave accrual and conversion, for a total of approximately \$191.8 million in annual savings. In addition, there would be additional savings due to the elimination of pay supplements for intermittent employees. Increasing the period after which employees must be paid for unused compensatory time will likely reduce payments for state agencies for unused compensatory time, as employees will have a greater period of time in which to use compensatory time.</b></p> <p><b>Substantial one-time increase in FY 2012 to provide pay supplements to part-time and full-time employees. As of March 2009, there were 55,950 full-time and 1,640 part-time employees working for executive branch agencies, and 2,628 full-time and 120 part-time employees working for the Attorney General, Treasurer, Secretary of State, or Auditor of State. Likely increase in costs during</b></p>	<p><b>Fiscal effect: Same as the House.</b></p>	<p><b>Fiscal effect: Same as the House.</b></p>

Executive

As Passed by the House

As Passed by the Senate

As Enacted

**FY 2012 to provide sick leave credit to the specified part-time and full-time employees.**

Executive

As Passed by the House

As Passed by the Senate

As Enacted

146 DEV - 49 Workforce Development

Section: 259.30.90

Requires the Director of Development and the Director of Job and Family Services to enter into one or more interagency agreements and take other actions to further the integration of a statewide workforce development strategy, implement recommendations and activities of the Workforce Policy Board, and expend moneys to support the Board's recommendations with respect to integration of employment functions.

Section: 259.30.90

Same as the Executive.

Section: 259.30.90

Same as the Executive.

Section: 259.30.90

Same as the Executive.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>Early Childhood</b>			
<b>147 EDU - 116 Early Childhood Advisory Council and Early Childhood Financing Workgroup</b>			
R.C. 3301.90, Section 265.70.20	R.C. 3301.90, Sections 265.70.20, 265.70.60	R.C. 3301.90, Section 265.70.20	R.C. 3301.90, Section 265.70.20
Creates the Early Childhood Advisory Council to serve as the federally mandated state advisory council on early childhood education and care, and advise the state regarding the creation and duties of the Center for Early Childhood Development in ODE.	Same as the Executive.	Same as the Executive, but also requires the Council to promote family-centered programs and services that acknowledge and support the social, emotional, cognitive, intellectual, and physical development of children and the vital role of families in ensuring the well-being and success of children.	Same as the Senate.
Directs the Early Childhood Advisory Council to establish an Early Childhood Financing Workgroup, to be chaired by the chairperson of the Early Childhood Advisory Council, to develop recommendations for a single financing system for early care and education programs. Requires the Council to submit its recommendations to the Governor by December 31, 2009.	Same as the Executive.	Same as the Executive.	Same as the Executive.
No provision.	Requires the Early Childhood Advisory Council to establish a Family Child Care Licensing Workgroup to develop recommendations that explore the implementation, costs, and timeline necessary for the creation of a statewide licensing system for family child care providers. Requires the Workgroup to submit its recommendations to the Governor and the General Assembly no later than	No provision.	No provision.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p><b>Fiscal effect: There are likely minimal administrative costs associated with the implementation and duties of both the Early Childhood Advisory Council and the Early Childhood Financing Workgroup.</b></p>	<p>December 31, 2009. <b>Fiscal effect: Same as the Executive, but adds administrative costs associated with the Family Child Care Licensing Workgroup.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>

148 EDU - 57 Center for Early Childhood Development

**Section: 265.70.10**

Directs the Superintendent of Public Instruction, in consultation with the Governor, to create the Center for Early Childhood Development, comprised of staff from ODE, the departments of Job and Family Services and Health, and any other state agency as determined necessary, to research and make recommendations regarding the transfer from various state agencies to ODE of the authority and responsibility to implement and coordinate early childhood programs and services for children, beginning with prenatal care until entry into kindergarten.

Directs the Superintendent of Public Instruction to hire a Director for the Center.

Requires the Director of the Center for Early Childhood Development, in partnership with staff from ODE, to submit an implementation plan regarding coordination and

**Section: 265.70.10**

Same as the Executive.

Same as the Executive, except requires the Director to report to the Superintendent and to the Governor.

Same as the Executive, but requires the Director to consider advice from the Early Childhood Advisory Council when submitting the plan and changes the deadline for

**Section: 265.70.10**

Same as the Executive, but requires the Governor to partner with the Superintendent in the creation of the Center, rather than the Superintendent create the Center in consultation with the Governor.

Same as the House, but also requires the Governor to partner with the Superintendent in the hiring of a Director for the Center.

Same as the House, but also requires the Director to partner with staff of the departments of Job and Family Services and Health, and any other state agency as

**Section: 265.70.10**

Same as the Senate.

Same as the Senate.

Same as the Senate.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
implementation of early childhood education plans to the Superintendent and Governor not later than August 31, 2009.	submission of the plan to December 31, 2009.	determined necessary in the development of the implementation plan.	
Permits the Director of Budget and Management to seek Controlling Board approval to create new funds and non-GRF appropriation items, transfer cash between funds, and transfer appropriations within the same fund used by the same state agency to support the preparation of the implementation plan.	Same as the Executive.	Same as the Executive.	Same as the Executive.
No provision.	Requires the Governor to appoint a representative of local board of health to the Early Childhood Cabinet.	Same as the House.	Same as the House.
No provision.	No provision.	Requires the Center to promote family-centered programs and services that acknowledge and support the social, emotional, cognitive, intellectual, and physical development of children and the vital role of families in ensuring the well-being and success of children.	Same as the Senate.
<b>Fiscal effect: Increase in personnel cost for the Director of the Center for Early Childhood Development.</b>	<b>Fiscal effect: Same as the Executive.</b>	<b>Fiscal effect: Same as the Executive.</b>	<b>Fiscal effect: Same as the Executive.</b>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>149 EDU - 144 **VETOED** Early Learning Initiative</b>			
<p><b>Section: 309.40.60</b></p> <p>[**VETOED: Reauthorizes the Early Learning Initiative (ELI), jointly administered by ODE and the Department of Job and Family Services (ODJFS) to provide early learning services on a full-day and part-day basis to TANF-eligible children.</p> <p>Provides that an eligible child is a child (1) who is at least three years of age but not of compulsory school age or enrolled in kindergarten, (2) who is eligible for Title IV-A services, and (3) whose family income at the time of application does not exceed 200% of the federal poverty guidelines (FPG).</p> <p>Requires each county department of job and family services (CDJFS) to determine eligibility for Title IV-A services for children seeking to enroll in an early learning program within 15 days after the CDJFS receives a completed application.</p> <p>Requires families of eligible children whose income is more than 100% of the federal poverty guidelines (FPG) and equal to or less than 200% FPG to pay copayments for ELI services and exempts families whose income is equal to or less than 100% FPG from co-payment requirements.</p> <p>Specifies that once ODE selects an entity to be an early learning agency, ODJFS and</p>	<p><b>Section: 309.40.60</b></p> <p>Same as the Executive.</p>	<p><b>Section: 309.40.60</b></p> <p>Same as the Executive.</p>	<p><b>Section: 309.40.60</b></p> <p>Same as the Executive.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p>ODE must enter into a contract with that entity, and ODE must designate the number of eligible children that the entity may enroll and must notify ODJFS of the number.</p>			
<p>Outlines the terms of the contract between ODJFS, ODE, and the early learning agency, as well as the duties of each early learning agency. Specifies both separate duties for ODJFS and ODE to fulfill for ELI, and joint duties.</p>	Same as the Executive.	Same as the Executive.	Same as the Executive.
<p>Requires that ODJFS and ODE enter into an interagency agreement to claim expenditures for ELI to the state's TANF maintenance of effort requirement and develop reporting guidelines for these expenditures.</p>	Same as the Executive.	Same as the Executive.	Same as the Executive.
<p>Requires ODJFS and ODE to contract for up to 12,000 enrollment slots for eligible children each fiscal year.***]</p>	Same as the Executive.	Same as the Executive.	Same as the Executive.
<p>No provision.</p>	<p>[***VETOED: Requires early learning programs licensed by ODE under the Preschool Law to participate in the quality-rating program established under the Child Care Law.***]</p>	Same as the House.	Same as the House.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p><b>Fiscal effect:</b> The executive proposal recommends funding ELI services through GRF appropriation item 600535, Early Care and Education, in the ODJFS budget. Expenditures from this appropriation item will be used to help meet the state's TANF maintenance of effort. In FY 2008 and FY 2009 ELI was funded through an earmark from the TANF Block Grant.</p>	<p><b>Fiscal effect:</b> Same as the Executive, plus increased cost for ODJFS to include early learning programs in the quality rating program.</p>	<p><b>Fiscal effect:</b> Same as the House.</p>	<p><b>Fiscal effect:</b> Same as the House.</p>
<p>150 EDU - 213 Committee to Study Publicly Funded Child Care Services</p>			
<p>No provision.</p>	<p>No provision.</p>	<p><b>Section: 309.40.70</b> Creates a committee to study publicly funded child care services, including the Early Learning Initiative. Requires that the committee provide a report of its findings by June 30, 2010.</p>	<p><b>Section: 309.40.70</b> Same as the Senate.</p>
<p>No provision.</p>	<p>No provision.</p>	<p>Requires that ODE provide the committee with meeting space and clerical assistance.  <b>Fiscal effect:</b> Potential minimal increase in administrative costs for ODE to provide clerical assistance.</p>	<p>Same as the Senate.  <b>Fiscal effect:</b> Same as the Senate.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b><u>Appropriation Language</u></b>			
<b>151 EDU - 84 Foundation Funding</b>			
<p><b>Section: 265.30.40</b></p> <p>Provides the following concerning GRF appropriation item 200550, Foundation Funding:</p> <p>(1) Specifies that the appropriation includes \$75,000,000 in each fiscal year for the state education aid offset due to the change in public utility valuation as a result of Am. Sub. S.B. 3 and Am. Sub. S.B. 287, both of the 123rd G.A. Permits the Director of Budget and Management to increase or decrease the cash transfer from Fund 053, School District Property Tax Replacement-Utility, upon certification by ODE of the actual state aid offset.</p> <p>(2) Specifies that the appropriation in FY 2010 includes \$106,768,866 and in FY 2011 includes \$238,511,467 for the state education aid offset due to the changes in tangible personal property valuation as a result of Am. Sub. H.B. 66 of the 126th G.A. Permits the Director of Budget and Management to increase or decrease the cash transfer from Fund 047, School District Property Tax Replacement - Business, upon certification by ODE of the actual state aid offset.</p>	<p><b>Sections: 265.30.40, 265.50.55</b></p> <p>Same as the Executive, but makes the following changes:</p> <p>(1) Same as the Executive.</p> <p>(2) Same as the Executive, but decreases the amount specified to \$11,900,000 in FY 2010 and \$39,300,000 in FY 2011.</p>	<p><b>Sections: 265.30.40, 265.50.55</b></p> <p>Same as the Executive, but makes the following changes:</p> <p>(1) Same as the Executive, but increases the amount to \$90,000,000 in each fiscal year and specifies that the amount represents the offset for FY 2009.</p> <p>(2) Same as the Executive, but increases the amount to \$119,000,000 in each fiscal year and specifies that the amount represents the offset for FY 2009.</p>	<p><b>Sections: 265.30.40, 265.50.55</b></p> <p>Same as the Executive, but makes the following changes:</p> <p>(1) Same as the Executive, but increases the amount to \$92,300,000 in FY 2010 and \$92,700,000 in FY 2011 and specifies that the amount represents the greater of the offset for that fiscal year or for FY 2009 for school districts and represents the offset for FY 2009 for joint vocational school districts.</p> <p>(2) Same as the Executive, but increases the amount to \$127,700,000 in FY 2010 and \$126,600,000 in FY 2011 and specifies that the amount represents the greater of the offset for that fiscal year or for FY 2009 for school districts and represents the offset for FY 2009 for joint vocational school districts.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
(3) Earmarks up to \$425,000 in each fiscal year to help defray the cost of educating children who are placed in a private institution, school, or residential treatment center by the order of an Ohio court.	(3) Same as the Executive.	(3) Same as the Executive.	(3) Same as the Executive.
(4) Earmarks up to \$15,000,000 in each fiscal year to be reserved for payments to certain school districts with large changes in valuation. Permits the Controlling Board to increase the amount if requested.	(4) Same as the Executive.	(4) No provision.	(4) Same as the Executive.
(5) Earmarks up to \$10,000,000 in each fiscal year to provide additional state aid to school districts for the special education catastrophic cost supplement. Permits the Controlling Board to increase the amount if requested.	(5) Same as the Executive, but increases the earmark to \$18,000,000 in FY 2010 and \$15,000,000 in FY 2011.	(5) Same as the Executive.	(5) Same as the Executive.
(6) Earmarks up to \$2,000,000 in each fiscal year for Youth Services tuition payments.	(6) Same as the Executive.	(6) Same as the Executive.	(6) Same as the Executive.
(7) No provision.	(7) Earmarks up to \$8,100,000 in each fiscal year to fund gifted education units at educational service centers (ESCs).	(7) No provision. (This funding is provided in 200521, Gifted Pupil Program)	(7) Same as the House.
(8) Earmarks up to \$42,300,000 in each fiscal year to fund the state reimbursement of educational service centers (ESCs).	(8) Increases the earmark to \$47,000,000 in each fiscal year.	(8) Same as the House.	(8) Decreases the earmark to \$46,400,000 in each fiscal year.
(9) Requires that an amount be available in each fiscal year for transitional aid for school districts.	(9) Same as the Executive.	(9) No provision.	(9) Same as the Executive.
(10) Earmarks up to \$1,000,000 in each fiscal year for a program to pay for educational services for youth who have been assigned by a juvenile court or other authorized agency to a facility participating	(10) Same as the Executive.	(10) Same as the Executive.	(10) Same as the Executive.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
in the private treatment facility project.			
(11) Earmarks up to \$8,686,000 in FY 2010 and \$8,722,860 in FY 2011 to operate "the school choice program."	(11) Same as the Executive, but earmarks the funds for "school choice programs."	(11) Same as the House.	(11) Same as the House.
(12) Specifies that up to \$11,901,887 in each fiscal year of the foundation program funds credited to the Cleveland Municipal School District be used to operate the school choice program in that district. Further specifies that of that amount, up to \$1,000,000 in each fiscal year be used by the district to provide tutorial assistance. Requires that the use of funds for tutorial assistance be reported in the district's three-year continuous improvement plan.	(12) Same as the Executive.	(12) Same as the Executive.	(12) Same as the Executive.
(13) Earmarks \$263,184,858 in FY 2010 and \$268,185,371 in FY 2011 to fund joint vocational school districts (JVSDs).	(13) Same as the Executive, but does not specify an amount.	(13) Same as the House.	(13) Same as the House.
(14) No provision.	(14) Permits the Director of Budget and Management, at the request of the Superintendent of Public Instruction, to transfer appropriation between item 200550 and GRF appropriation item 200551, Foundation Funding - Federal Stimulus, including transferring appropriation between fiscal years. Requires the Director to report each transfer to the Controlling Board.	(14) Same as the House.	(14) Same as the House, but requires that the Director of Budget and Management seek Controlling Board approval to transfer appropriation.
(15) Specifies that GRF appropriation items 200455, Community Schools; 200502, Pupil Transportation; 200540, Special Education Enhancements; 200541, Special Education - Federal Stimulus; 200550, Foundation Funding; 200551, Foundation Funding -	(15) Same as the Executive, but removes GRF appropriation items 200541, Special Education - Federal Stimulus, and 200609, Poverty Funding - Federal Stimulus from the list of items that collectively fund state formula aid obligations.	(15) Same as the House, but removes 200455, Community Schools, and adds 200521, Gifted Pupil Program to the list of items that collectively fund state formula aid obligations.	(15) Same as the Senate, but removes 200521, Gifted Pupil Program, from the list of items that collectively fund state formula aid obligations.

**Executive**

**As Passed by the House**

**As Passed by the Senate**

**As Enacted**

Federal Stimulus; and 200609, Poverty Funding - Federal Stimulus, other than specific set-asides, are to fund state formula aid obligations. Provides that ODE seek Controlling Board approval to transfer funds among these items, or other GRF appropriation items in which there are excess appropriation, in order to meet these obligations.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>152 GOV - 1 Service Coordination Workgroup</b>			
<b>Section: 751.20</b>	<b>Section: 751.20</b>	<b>Section: 751.20</b>	<b>Section: 751.20</b>
(1) Creates the Service Coordination Workgroup to develop procedures for coordinating services provided to individuals under age 21 and their families by the following entities: the Offices of the Governor and Budget and Management; the Departments of Alcohol and Drug Addiction Services, Education, Health, Job and Family Services, Mental Health, Developmental Disabilities, and Youth Services; and the Family and Children First Cabinet Council.	(1) Same as the Executive.	(1) Same as the Executive.	(1) Same as the Executive.
(2) Requires the Workgroup, not later than July 31, 2009, to submit a report to the Governor with recommendations for implementing the procedures.	(2) Same as the Executive.	(2) Same as the Executive.	(2) Same as the Executive.
(3) Permits the Director of Budget and Management to seek Controlling Board approval to transfer cash and appropriations as necessary to implement the Workgroup's recommendations.	(3) Same as the Executive.	(3) No provision.	(3) No provision.
<b>Fiscal effect: Minimal administrative costs for the Governor's Office to produce the workgroup's report.</b>	<b>Fiscal effect: Same as the Executive.</b>	<b>Fiscal effect: Same as the Executive.</b>	<b>Fiscal effect: Same as the Executive.</b>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
153 DOH - 44 BCMH Drug Rebate Program			
		R.C. 3701.0212, 3701.021, 5111.081	
No provision.	No provision.	Allows the Director of Health to establish the Drug Rebate Program for Medically Handicapped Children (the BCMH Drug Rebate Program), requires the program to be substantially similar to the Medicaid Supplemental Drug Rebate Program, allows the Director of Health and the Director of Job and Family Services to cooperate in obtaining rebates for all drug products that are covered by both programs, and authorizes the Department of Job and Family Services to act as the administrative agent for collection of rebates for the BCMH Drug Rebate Program.	No provision.
No provision.	No provision.	Requires all rebates and funds received by the Program to be used for administration of the Program for Medically Handicapped Children (the BCMH Program).	No provision.
No provision.	No provision.	Requires the Director of Health to consult with drug manufacturers regarding the implementation of the BCMH Drug Rebate Program, if established.	No provision.

Executive

As Passed by the House

As Passed by the Senate

As Enacted

**Fiscal effect: The state could receive drug rebate revenue. ODH and the Department of Job and Family Services could experience an increase in administrative costs for the program, which will eventually be paid from moneys in the Drug Rebate for Medically Handicapped Children Fund once drug rebate revenue is received.**

154 DOH - 27 Nursing Facility Technical Assistance Program

**Section: 289.20**

Specifies that on July 1, 2009, or as soon as possible thereafter, the Director of Budget and Management, may transfer cash from SSR Fund 4E30, Resident Protection, used by the Department of Job and Family Services, to SSR Fund 5L10, Nursing Facility Technical Assistance Program, used by the Department of Health. Requires the transfer to be equal to \$698,595 in each fiscal year.

**Section: 289.20**

Same as the Executive.

**Section: 289.20**

Same as the Executive, but specifies that up to \$698,595 in each fiscal year, rather than \$698,595 in each fiscal year may be transferred.

**Section: 289.20**

Same as the Senate.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p>155 INS - 16 <b>**PARTIALLY VETOED**</b> Health Care Coverage and Quality Council</p>			
<p>R.C. 3923.90, 3923.91</p>	<p>R.C. 3923.90, 3923.91</p>	<p>R.C. 3923.90, 3923.91, Section 307.20</p>	<p>R.C. 3923.91, 5111.141, 5111.142, and 5111.165</p>
<p>(1) Creates a 26-member Health Care Coverage and Quality Council to advise the Governor, General Assembly, public and private entities, and consumers on strategies to expand affordable health insurance coverage to more individuals and improve the cost and quality of Ohio's health care system. Enumerates the criteria for selecting those Council members. Specifies that members be reimbursed for mileage and other necessary expenses only. Requires the Council to issue a report on or before December 31 of each year. Exempts the Council from the current sunset requirement.</p>	<p>(1) Same as the Executive, but revises the membership of the Council by (a) substituting the Director of Health for the Director of the Office of Healthy Ohio in the Department of Health, (b) including two additional members selected according to specified criteria, (c) removing one member appointed by the Governor, and (d) adding an unspecified number of other members appointed by the Superintendent of Insurance. Makes changes to certain duties that the Council is required to perform. Permits, rather than requires, reimbursement of necessary expenses for members.</p>	<p>(1) Same as the House, but does not permit Council members to be reimbursed for mileage and necessary expenses and requires the Council to hold its first meeting by September 1, 2009.</p>	<p>(1) Same as the Senate.</p>
<p>(2) Requires advice and consent of the Senate for members appointed by the Governor.</p>	<p>(2) No provision.</p>	<p>(2) Same as the Executive.</p>	<p>(2) Same as the Executive.</p>
<p>(3) No provision.</p>	<p>(3) No provision.</p>	<p>[***VETOED: (3) Requires the Council to evaluate and recommend strategies pursuant to the Ohio Medicaid Administrative Study Council's recommendations to establish an initiative conducted by clinicians in the Office of Ohio Health Plans within the Department of Job and Family Services (JFS) regarding disease prevention and management and Medicaid claims. Requires the Council to</p>	<p>(3) Same as the Senate, but adds a requirement that the Health Care Coverage and Quality Council study alternative care management options for Medicaid recipients not required to participate in the Medicaid care management system.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p><b>Fiscal effect: Increases the Department of Insurance's administrative costs related to the Health Care Coverage and Quality Council. The 26 members of the Council are not to be compensated for their services, but will be reimbursed for mileage and other necessary expenses. The executive proposal includes \$479,575 each fiscal year in a new line item, 820609, State Coverage Initiative Administration, in order to cover administrative costs of the Council. The new line item is funded by the Department of Insurance Operating Fund (SSR Fund 5540).</b></p>	<p><b>Fiscal effect: Same as the Executive, but may increase the reimbursement expenses if the Superintendent appoints more than one member. Allows for a reduction in the increase in administrative costs, due to provision making reimbursement of necessary expenses permissive. If there is any such increase, it would likely be minimal.</b></p>	<p>submit a report of its findings and recommendations to the Governor, Senate President, and Speaker of the House by not later than June 30, 2010.***]</p> <p><b>Fiscal effect: Reduces the increase in administrative costs from the Executive proposal, due to removal of provision for payment of necessary expenses for Council members.</b></p>	<p><b>Fiscal effect: Same as the Senate.</b></p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>156 INS - 25 **VETOED** Prompt Payment Policy Workgroup</b>			
No provision.	<p><b>Section: 751.30</b></p> <p>[***VETOED: Creates the Prompt Payment Policy Workgroup to research and make policy recommendations by February 1, 2010, concerning prompt payment policy for Ohio's Medicaid program. Members of the Workgroup are to serve without compensation, except to the extent that serving on the Workgroup is considered part of the members' regular employment duties.***]</p>	No provision.	<p><b>Section: 751.30</b></p> <p>Same as the House.</p>
<b>157 INS - 24 Health Insurance Coverage of Autism Spectrum Disorders</b>			
(1) No provision.	<p><b>Sections: 307.10, R.C. 1739.05, 1751.68, 3923.84, and Section 271.10</b></p> <p>(1) Earmarks up to \$20,000 in FY 2010 of SSR Fund 5540 appropriation item 820606, Operating Expenses, to be used by the Department of Insurance for a study related to autism spectrum disorder coverage, and requires the study to be completed by January 31, 2010.</p>	(1) No provision.	(1) No provision.
(2) No provision.	<p>(2) Requires the Director of Budget and Management, in FY 2010, to transfer \$20,000 cash from the General Revenue Fund to Fund 5540.</p>	(2) No provision.	(2) No provision.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
(3) No provision.	(3) Prohibits health insurers from excluding coverage for specified autism services for individuals diagnosed with an autism spectrum disorder but allows insurers to impose a yearly maximum of \$36,000 on coverage of those services. Allows an insurer to opt out of the required coverage if the insurer can show that the incurred claims for those coverages caused the insurer's costs to increase by more than 1% and that the increase could reasonably justify an increase of more than 1% in the annual premiums or rates charged by the insurer for health insurance coverage. Exempts this provision from the existing law requirement that the Superintendent of Insurance review all new health benefit mandates before a mandate may take effect.	(3) No provision.	(3) No provision.
(4) No provision.	(4) Requires the Director of Mental Retardation and Developmental Disabilities to convene a committee on the coverage of autism spectrum disorders to investigate and recommend additional treatments or therapies for autism spectrum disorders to be covered by health insurers.	(4) No provision.	(4) No provision.
(5) No provision.	(5) Delays the applicability of the requirements to plans that are issued or renewed six months after the bill's effective date.	(5) No provision.	(5) No provision.
(6) No provision.	(6) Requires the Director of Budget and Management to transfer \$1.62 million from the GRF to the State Employee Health Benefit Fund (Fund 8080) on June 30, 2010, or as soon as possible thereafter.	(6) No provision.	(6) No provision.

Executive

As Passed by the House

As Passed by the Senate

As Enacted

Fiscal effect: The provision to mandate coverage for screening, diagnosis, and treatment of an autism spectrum disorder may potentially increase the costs to Medicaid in the tens of millions of dollars per year. The federal government would likely reimburse approximately 60% of any increase in Medicaid spending if federal rules allow the federal matching rate to apply.

It would increase costs to the state's health benefit plan for employees and their dependents by approximately \$1.62 million in FY 2011, assuming such coverage applies to approximately 45 children under age 6 per year. The GRF would pay the cost of coverage for approximately half the individuals, with various state funds providing the rest. It would also increase costs, potentially in the millions per year, to counties, municipalities, townships, and school districts statewide of providing such coverage in their health benefits to employees and their dependents.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
158 DMH - 17 Care Coordination Information			
	R.C. 121.375	R.C. 121.375	R.C. 121.375
No provision.	Permits a care coordination agency to provide certain information to the Ohio Family and Children First Cabinet Council regarding care coordination for at-risk individuals and permits the Council to use the information to help improve care coordination for at-risk individuals throughout the state.	Same as the House, but permits the Cabinet Council to give incentives to encourage care coordination agencies to provide the information.	Same as the Senate.
No provision.	Creates statutory definitions of the terms "at-risk individual" and "care coordination agency."	Replaces the House provision with a provision that requires the Cabinet Council to adopt rules defining the terms "at-risk individual" and "care coordination agency."	Same as the House.
	<b>Fiscal effect: None.</b>	<b>Fiscal effect: Minimal increase in administrative costs for the Cabinet Council to promulgate rules and potential increase in costs to provide incentives to care coordination agencies.</b>	<b>Fiscal effect: Same as the House.</b>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
159 DMH - 16 Regional Care Coordination Hubs			
	<b>Sections: 335.10, 335.40.15</b>		
No provision.	Earmarks \$130,000 in each fiscal year of GRF appropriation item 335405, Family & Children First, to each of the regional care coordination hubs to be used to (1) help care coordination agencies, (2) collect certain information from care coordination agencies, and (3) compile the information and provide it to the hubs' governing boards and the Ohio Family and Children First Cabinet Council.	No provision.	No provision.
No provision.	Earmarks \$124,000 in each fiscal year of GRF appropriation item 335405, Family & Children First, to the Ohio Family and Children First Cabinet Council to be used to provide support services to the regional care coordination hubs, receive the information the regional care coordination hubs provide to the Council, and use the information to help improve care coordination services throughout the state.	No provision.	No provision.

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>160 DMH - 18 Medicaid Rates for Community Behavioral Health Services</b>			
No provision.	<p><b>Sections: 335.10, 335.40.30</b></p> <p>Requires that \$669,912 in FY 2010 and \$1,261,286 in FY 2011 of GRF appropriation item 335505, Local Mental Health Systems of Care, be provided to local boards to pay the nonfederal share of the 1/2% increase in the Medicaid reimbursement rate ceilings for Medicaid-covered community behavioral health services. (The provision that increases the provider rate is in the Department of Job and Family Services in Section 309.30.75 of the bill.)</p>	No provision.	No provision.
<b>161 DMH - 4 Advisory Group Regarding Medicaid-Covered Community Behavioral Health Services</b>			
<p><b>Section: 729.10</b></p> <p>Creates the Medicaid Elevation Advisory Group.</p> <p>Provides for the following to serve on the Group: (1) the ODMH and ODADAS Directors or their designees, (2) representatives of ADAMHS boards, (3) representatives of providers of community behavioral health services, (4) consumers of community behavioral health services and advocates of consumers, and (5) certain state policy makers.</p>	<p><b>Section: 751.10</b></p> <p>Same as the Executive, but renames the Group the Medicaid Community Behavioral Health Elevation and Administration Advisory Group.</p> <p>Same as the Executive, but (1) adds the ODJFS Director or the Director's designee to the Group and (2) permits various organizations to nominate individuals to serve on the Group.</p>	<p><b>Section: 751.10</b></p> <p>Same as the Executive, but renames the Group the Medicaid Community Behavioral Health Administration Advisory Group.</p> <p>Same as the House.</p>	<p>No provision.</p> <p>No provision.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p>Requires the Group to study the issue of transferring the responsibility for paying providers of Medicaid-covered community behavioral health services and related management responsibilities to ODMH and ODADAS from ADAMHS boards.</p>	<p>Replaces the Executive provision with a provision that requires the Group to study the statewide administration and management of Medicaid-covered community behavioral health services.</p>	<p>Same as the House, but removes the requirement that the administration and management being studied be statewide.</p>	<p>No provision.</p>
<p>Requires the Group to issue a report regarding its study not later than June 30, 2010, and requires the report to include (1) a fiscal analysis of the impact that transferring payment responsibility and related management responsibilities would have on ODMH, ODADAS, and the ADAMHS boards, (2) recommendations for increasing efficiencies, and (3) recommendations for system changes needed to transfer payment responsibility to ODMH and ODADAS.</p>	<p>Same as the Executive, but requires the report to include instead (1) a plan for the statewide administration and management of Medicaid-covered community behavioral health services, (2) a fiscal analysis of the impact any changes to the system of paying providers and related management functions would have on ODMH, ODADAS, and the ADAMHS boards, (3) recommendations for increasing efficiencies, and (4) recommendations for system changes needed to implement the statewide administration and management of the Medicaid-covered community behavioral health services.</p>	<p>Same as the House, but (1) removes the requirement that the administration and management be uniform and statewide, (2) requires the fiscal analysis to be of the impact that changing the entity responsible for paying providers would have on ODMH, ODADAS, and the ADAMHS boards, and (3) requires the recommendations regarding system changes be for system changes needed for the effective administration and management of Medicaid-covered community behavioral health services.</p>	<p>No provision.</p>
<p>Requires ODMH and ODADAS to assume responsibility for paying providers of Medicaid-covered community behavioral health services and related management responsibilities not later than July 1, 2011, but provides that the Departments' assumption of the payment and related management responsibilities is subject to any necessary changes in state law, including changes related to funding.</p>	<p>Replaces the Executive provision with a provision that requires ODMH and ODADAS to implement, under ODJFS's supervision, changes to the administration and management of Medicaid-covered community behavioral health services (including changes to the system of paying providers) not later than July 1, 2011, but provides that the implementation of the changes is subject to enactment or adoption of any necessary changes in state law, including changes related to funding.</p>	<p>Replaces the House provision with a provision that permits ODMH and ODADAS to implement, under ODJFS's supervision, the Group's recommendations, but provides that implementation of the recommendations is subject to changes in any conflicting state law, including changes related to funding.</p>	<p>No provision.</p>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<p><b>Fiscal effect: Minimal increase in ODMH's and ODADAS' costs to produce the required report. May cause minimal increase in ODMH's and ODADAS' costs to reimburse members for travel expenses.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	<p><b>Fiscal effect: Same as the Executive.</b></p>	
<p>162 DMH - 19 Community Behavioral Health Services Study</p>			
<p>No provision.</p>	<p><b>Section: 751.13</b>                      Requires the Mental Health Director, ODADAS Director, and ODJFS Director to convene a group to develop recommendations regarding the amount, duration, and scope of publicly funded community behavioral health services that should be available through Ohio's community behavioral health system.   <b>Fiscal effect: Minimal increase for the participating agencies to produce the required report.</b></p>	<p><b>Section: 751.13</b>                      Same as the House.           <b>Fiscal effect: Same as the House.</b></p>	<p><b>Section: 751.13</b>                      Same as the House.           <b>Fiscal effect: Same as the House.</b></p>

Executive

As Passed by the House

As Passed by the Senate

As Enacted

163 DMR - 3 ODODD and ODJFS Administration and Oversight Funds

R.C. 5123.0412

Permits ODODD and the Department of Job and Family Services to use money in their respective administration and oversight funds for Medicaid administrative costs in general rather than just the administrative and oversight costs of Medicaid case management services and ODODD administered home and community-based Medicaid waiver services.

**Fiscal effect: Broadens the use of the dollars in the funds.**

R.C. 5123.0412

Same as the Executive.

**Fiscal effect: Same as the Executive.**

R.C. 5123.0412

Same as the Executive.

**Fiscal effect: Same as the Executive.**

R.C. 5123.0412

Same as the Executive.

**Fiscal effect: Same as the Executive.**

Executive	As Passed by the House	As Passed by the Senate	As Enacted
164 DMR - 26 County DD Board Levy Failure	<p>R.C. 5123.0413, 5123.049, 5126.0512, 5126.19</p>	<p>R.C. 5123.0413, 5123.049, 5126.0512, 5126.19</p>	<p>R.C. 5123.0413, 5123.049, 5126.0512, 5126.19</p>
No provision.	<p>Eliminates a requirement that ODODD adopt rules establishing a method of paying for extraordinary costs and ensure the availability of adequate funds in the event a county property tax levy for services for individuals with MR/DD fails and requires instead that ODODD adopt rules to establish, in the event such a levy fails, methods of (1) paying for home and community-based services and (2) reducing the number of individuals a county DD board would otherwise be required to ensure are enrolled in home and community-based services.</p>	Same as the House.	Same as the House.
No provision.	<p>Abolishes the State MR/DD Risk Fund and the State Insurance Against MR/DD Risk Fund.</p> <p><b>Fiscal effect: Minimal administrative costs associated with the development of rules and potential savings to county DD boards in waiver costs if the number of individuals required to be enrolled is reduced.</b></p>	Same as the House.	Same as the House.
		<b>Fiscal effect: Same as the House.</b>	<b>Fiscal effect: Same as the House.</b>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
<b>165 DMR - 29 Nursing Home Seeking Residential Facility License</b>			
No provision.	No provision.	<p><b>R.C. 5123.193, 5111.21, 5111.211, 5123.19</b></p> <p>Establishes conditions under which a nursing home seeking licensure as residential facility for up to 25 persons with mental retardation or a developmental disability is not required to obtain approval of a development plan.</p>	<p><b>R.C. 5123.193, 5111.21, 5111.211, 5123.19</b></p> <p>Same as the Senate.</p>
No provision.	No provision.	<p>Provides that an ICF/MR is not required to have received approval of a development plan to be eligible for Medicaid payments if, under this provision of the bill, the ICF/MR obtained licensure as a residential facility without having to obtain approval of a development plan.</p>	Same as the Senate.
No provision.	No provision.	<p>Provides that ODODD is not responsible for the state share of a Medicaid claim for ICF/MR services even though the ICF/MR receives initial certification as an ICF/MR after June 1, 2003, if the ICF/MR, pursuant to this provision of the bill, obtained licensure as a residential facility without having to obtain approval of a development plan.</p>	Same as the Senate.
		<b>Fiscal effect: Potential savings to ODODD.</b>	<b>Fiscal effect: Same as the Senate.</b>

Executive	As Passed by the House	As Passed by the Senate	As Enacted
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166 DMR - 2 MR/DD Personnel Providing Specified Health Care Services

**R.C. 5123.42**

Provides that in a community living arrangement certified MR/DD personnel who are not health professionals may be authorized to provide certain health-care services to not more than five, rather than four, individuals with mental retardation or a developmental disability.

No provision.

No provision.

No provision.

**Fiscal effect: Potential savings to ODODD.**

167 DMR - 1 Number of Persons Living Together in Supported Living

**R.C. 5126.01**

Provides that under the Supported Living Program an individual with mental retardation or a developmental disability may reside in a residence of the individual's choice with up to four, rather than up to three, other individuals with mental retardation or a developmental disability who are not the individual's relatives.

No provision.

No provision.

No provision.

**Fiscal effect: Potential savings to ODODD.**

Executive	As Passed by the House	As Passed by the Senate	As Enacted
168 DMR - 25 County DD Board Business and Medicaid Services Managers	<p>R.C. 5126.054</p> <p>No provision.</p> <p>Revises the conditions by which a county DD board may satisfy a requirement to have a business manager and Medicaid services manager.</p> <p><b>Fiscal effect: Potential savings to county DD boards by allowing county boards to share business and Medicaid service managers.</b></p>	<p>R.C. 5126.054</p> <p>Same as the House.</p> <p><b>Fiscal effect: Same as the House.</b></p>	<p>R.C. 5126.054</p> <p>Same as the House.</p> <p><b>Fiscal effect: Same as the House.</b></p>
169 DMR - 24 Summary Page for Individual Service Plans	<p>R.C. 5126.055</p> <p>No provision.</p> <p>Requires a county DD board to include with each individualized service plan a summary page, agreed to by the board, provider, and individual, clearly outlining the amount, duration, and scope of services to be provided under the plan.</p> <p><b>Fiscal effect: Minimal.</b></p>	<p>R.C. 5126.055</p> <p>Same as the House.</p> <p><b>Fiscal effect: Same as the House.</b></p>	<p>R.C. 5126.055</p> <p>Same as the House.</p> <p><b>Fiscal effect: Same as the House.</b></p>

Executive

As Passed by the House

As Passed by the Senate

As Enacted

170 DMR - 8 Fiscal Plan for Home and Community-Based Services

Section: 337.30.40

Requires the Director of ODODD to submit a plan to the Director of Job and Family Services not later than December 31, 2009, with recommendations for actions to be taken addressing the fiscal sustainability of home and community-based services provided under Medicaid waiver programs ODODD administers.

Fiscal effect: Minimal.

Section: 337.30.40

Same as the Executive, but specifies that any recommendations on modifying the methodology used in establishing provider payment rates may address (1) wages and benefits of persons who provide direct care and (2) training and supervision of those persons.

Fiscal effect: Same as the Executive.

Section: 337.30.40

Same as the House.

Fiscal effect: Same as the Executive.

Section: 337.30.40

Same as the House.

Fiscal effect: Same as the Executive.

Executive

As Passed by the House

As Passed by the Senate

As Enacted

Sales and Use Taxes

171 TAX - 23 Sales Taxation of Medicaid-Provided Health Care Services

R.C. 5739.01, 5739.03, 5739.033, 5739.051

Subjects to sales and use tax health care services provided or arranged by a Medicaid health insuring corporation for Medicaid enrollees residing in Ohio. Eliminates the tax on those services if federal authorities determine that subjecting those services to taxation constitutes an impermissible "health-care related tax," the imposition of which results in a reduction in federal financial assistance for Medicaid services.

**Fiscal effect: The executive proposal estimates that this provision will increase revenue to the GRF by \$138.0 million in FY 2010 and by \$214.0 million in FY 2011; under the current distribution of the share of sales and use tax revenues to local government funds, the Local Government Fund and the Public Library Fund would gain \$8.6 million in FY 2010 and \$13.4 million in FY 2011. Revenues to local governments under permissive local and transit authorities sales taxes may be up to \$31.5 million in FY 2010 and \$48.9 million in FY 2011.**

R.C. 5739.01, 5739.03, 5739.033, 5739.051

Same as the Executive, but makes technical changes.

**Fiscal effect: Same as the Executive.**

R.C. 5739.01, 5739.03, 5739.033, 5739.051

Same as the House, but changes from September 1, 2009, to October 1, 2009, the date on which the services become taxable.

**Fiscal effect: Same as the Executive.**

R.C. 5739.01, 5739.03, 5739.033, 5739.051

Same as the Senate.

**Fiscal effect: Same as the Executive.**

Executive

As Passed by the House

As Passed by the Senate

As Enacted

Other Taxation Provisions

172 TAX - 22 Domestic and Foreign Insurance Taxes - Medicaid Managed Care

R.C. 5725.18, 5725.25, 5729.03

Includes Medicaid premiums received by domestic insurance companies (i.e., companies headquartered in Ohio) within the tax base of the domestic insurance tax; if the company is headquartered in another state, includes such premiums in the foreign insurance tax base.

**Fiscal effect: The executive proposal estimates this provision will increase revenue to the GRF by \$25.1 million in FY 2010 and by \$39.1 million in FY 2011.**

R.C. 5725.18, 5725.25, 5729.03

Same as the Executive.

**Fiscal effect: Same as the Executive.**

R.C. 5725.18, 5725.25, 5729.03

Same as the Executive.

**Fiscal effect: Same as the Executive.**

R.C. 5725.18, 5725.25, 5729.03

Same as the Executive, but delays expansions of the tax bases until October 1, 2009.

**Fiscal effect: Same as the Executive, but with a smaller revenue gain in FY 2010.**

Executive	As Passed by the House	As Passed by the Senate	As Enacted
173 DOT - 43 Appropriations - Federal Stimulus	<b>Sections: 327.10, Section 521.30</b>	<b>Sections: 327.10, Section 521.30</b>	<b>Sections: 327.10, Section 521.30</b>
No provision.	Reappropriates the unexpended, unencumbered portions of the appropriation items made in Sections 303.10, 305.10, 307.10, 309.10, 311.10, 313.10, 315.10, 317.10, 319.10, 321.10 and 325.10 of this act at the end of FY 2009 to FY 2010 for the same purposes.	Same as the House.	Same as the House, but adds a reference to Section 325.05 to account for a federal stimulus line item added for the Department of Public Safety.
No provision.	Requires that federal stimulus moneys, to the extent possible, be used in a way that encourages the purchase of supplies and services from Ohio companies and stimulates Ohio job growth and retention.	Same as the House, but requires that, to the extent permitted by federal law, federal stimulus moneys be used in accordance with preferences for goods and services under the Buy Ohio and Buy American programs in Ohio law.	Same as the Senate.