September 28, 2021

Maureen M. Corcoran  
Director  
Ohio Department of Medicaid  
50 West Town Street, Suite 400  
Columbus, OH 43215

Dear Director Corcoran:

Please find below the Centers for Medicare & Medicaid Services’ (CMS) request for additional information regarding Ohio’s American Rescue Plan Act of 2021 (ARP) section 9817 initial spending plan and spending narrative submitted on July 12, 2021.

We have identified missing information which we will need to review before the initial spending plan and spending narrative can be approved. The State Medicaid Director Letter (SMDL) #21-003, section D, titled Required Reporting on Activities to Enhance, Expand, or Strengthen HCBS under the Medicaid Program provides a description of the information states should include in their initial spending plans and spending plan narratives.

**Additional Information Requested**

Please provide the following additional information to facilitate our review and approval process:

- **Estimate the anticipated expenditures for the activities the state intends to implement to enhance, expand, or strengthen HCBS under the state Medicaid program between April 1, 2021, and March 31, 2024.**

In the submission, your state included information on the activities that it intends to implement and the estimated total cost for the activities. However, the amount attributable to the increased FMAP for each activity or category for activity was not included. **Please update your spending plan to clearly indicate this information.**

In addition, it is unclear whether some of these activities would enhance, expand, or strengthen HCBS under the Medicaid program. CMS is requesting the following changes or clarifications to your state’s spending plan and narrative:

1. **Immediate Support for Providers**  
   - Indicate whether the support is targeted at providers delivering services that are listed in Appendix B of the SMDL or that could be listed in Appendix B (e.g., behavioral health services that are covered under another benefit but could be covered under the rehabilitative services benefit). If the support is not focused on
providers that are delivering services listed in Appendix B or that could be listed in Appendix B, explain how the activity enhances, expands, or strengthens HCBS under Medicaid.

- Indicate whether the support will be provided through temporary rate increases, one-time payments, or another mechanism and describe how the payments will be calculated.
- Describe the purpose and intent of the payments (e.g., incentive payments to recruit and retain workers, address COVID-19 related losses) and whether there will be any restrictions on the use of the funds (e.g., training, wage increases, hiring bonuses).

2. Improvements in Information Technology and Program Infrastructure

- Describe the specific improvements in information technology and program infrastructure that will be made and explain how the improvements will enhance, expand or strengthen HCBS under Medicaid.

3. Reimbursement and Expansion of Services

- Identify the services that will be added or expanded and indicate whether they are listed in Appendix B or could be listed in Appendix B of the SMDL. If this activity is not focused on the services listed in Appendix B or that could be listed in Appendix B, explain how the activity enhances, expands, or strengthens HCBS under Medicaid.
- Explain how provider reimbursement will be streamlined and simplified and whether the state will be increasing provider rates. In addition, indicate whether the streamlining and simplifying of reimbursement is targeted at providers delivering services that are listed in Appendix B of the SMDL or that could be listed in Appendix B. If this activity is not focused on the services listed in Appendix B or that could be listed in Appendix B, explain how the activity enhances, expands, or strengthens HCBS under Medicaid.
- Clearly indicate that this activity will not result in a reduction in provider payment rates compared to those in place as of April 1, 2021.

4. Strengthen the Workforce for Home and Community-Based Services

- Describe the “innovative approaches to address workforce issues in ways that are sustainable and will have long term positive impacts” that the state plans to implement.
- Indicate whether this activity is targeted at providers that are delivering services that are listed in Appendix B or that could be listed in Appendix B. If this activity is not focused on the services listed in Appendix B or that could be listed in Appendix B, explain how the activity enhances, expands, or strengthens HCBS under Medicaid.

5. Using Telehealth and Technology to Support Individuals in the Community

- Describe how the state intends to expand and sustain the use of telehealth, deem providers across systems, and allow for electronic signatures as part of this activity, as well as any other uses of funds under this activity. In addition, explain or define what is meant by “deeming providers across systems.”
- Indicate whether this activity is targeted at providers delivering services that are listed in Appendix B of the SMDL or that could be listed in Appendix B, or individuals who are receiving services that are listed in Appendix B or that could
be listed in Appendix B. If this activity is not focused on the services listed in Appendix B or that could be listed in Appendix B, explain how the activity enhances, expands, or strengthens HCBS under Medicaid.

○ Clearly indicate if your state intends to pay for ongoing internet connectivity as part of this activity. Please note that ongoing internet connectivity costs may be permissible uses of funds to expand, enhance or strengthen HCBS under section 9817 of ARP. However, states must demonstrate how ongoing internet connectivity would expand, enhance, or strengthen Medicaid HCBS. Further, approval of ongoing internet connectivity costs in ARP section 9817 spending plans and narratives does not authorize such activities for FFP.

6. Diversity, Equity and Inclusion Initiatives and Addressing Social Determinants of Health

○ Provide more detail to explain how the state intends to use ARP section 9817 funding for this activity, including whether the state intends to deliver additional services to address social determinants of health and how this activity will enhance, expand or strengthen the HCBS under Medicaid. If the state intends to deliver additional services, identify the specific services and confirm that the state does not intend to cover room and board (which CMS would not find to be a permissible use of funds).

○ Indicate whether this activity is focused on services that are listed in Appendix B of the SMDL or that could be listed in Appendix B, or individuals who are receiving services that are listed in Appendix B or that could be listed in Appendix B. If this activity is not focused on the services listed in Appendix B or that could be listed in Appendix B, explain how the activity enhances, expands, or strengthens HCBS under Medicaid.

7. Care Management and Quality Improvement

○ Provide more detail about the projects that the state intends to implement to “support the evolution of care coordination and integrated service delivery for dual eligible, older adults and Ohioans with disabilities, including models such as MyCare” and explain how this activity will enhance, expand, or support HCBS under Medicaid. In addition, define or explain what the MyCare model is.

8. Supports for Individuals Receiving Services and Informal Caregivers

○ Provide more detail about the “resources that will support individuals who receive services and the caregivers they rely on” that the state intends to implement, including how this proposal will support individuals who receive services and their caregivers, and explain how this activity will enhance, expand, or support HCBS under Medicaid.

**CMS will need additional information before it can determine whether any of those activities or uses of funds are approvable under ARP section 9817.** Please let us know if you would like to schedule a call to discuss the questions included in this letter.

**General Considerations**

As part of this request for additional information, CMS is noting the following:

- CMS expects your state to notify CMS as soon as possible if your state’s activities to expand, enhance, or strengthen HCBS under ARP section 9817:
- Are focused on services other than those listed in Appendix B or that could be listed in Appendix B (e.g., behavioral health services that are covered under another benefit but could be covered under the rehabilitative services benefit). If any activities are not directly related to the services listed in Appendix B or services that could be listed in Appendix B, please explain how those activities expand, enhance, or strengthen HCBS under Medicaid;
- Include room and board (which CMS would not find to be a permissible use of funds); and/or
- Include activities other than those listed in Appendices C and D.

*CMS will need additional information before it can determine whether any of those activities or uses of funds are approvable under ARP section 9817.*

As of today, CMS’s review is suspended until we receive your complete response. So that we may continue with the review process, please provide the requested information within 15 business days. We look forward to continuing to work with you to advance HCBS in Ohio. Please submit questions or concerns regarding this request for information to [HCBSincreasedFMAP@cms.hhs.gov](mailto:HCBSincreasedFMAP@cms.hhs.gov).

Sincerely,

Jennifer Bowdoin
Director, Division of Community Systems Transformation

cc: Travis Moore