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State/Territory Name: Ohio

State Plan Amendment (SPA) #: 22-0035

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form
- 3) Approved SPA Page

January 27, 2023

Maureen M. Corcoran, Director
Ohio Department of Medicaid
P.O. Box 182709
50 West Town Street, Suite 400
Columbus, Ohio 43218

Re: Ohio State Plan Amendment (SPA) Transmittal Number 22-0035

Dear Ms. Corcoran:

We have reviewed the proposed amendment to add section 7.5.A-7 Rescissions to the State's Disaster Relief Policies for the COVID-19 National Emergency to Ohio's Medicaid state plan, as submitted under transmittal number (TN) 22-0035. This amendment proposes to rescind temporary policies, in section 7.5 Medicaid Disaster Relief for the National Emergency.

We conducted our review of your submittal according to the statutory requirements at section 1902(a) of the Social Security Act and implementing regulations. Section 7.5 of the Medicaid state plan provides temporary authority for these provisions and is intended to be in effect only for the duration of the COVID-19 public health emergency. Due to the temporary nature of this provision, Medicaid SPA TN 22-0035 is approved effective October 1, 2022.

Enclosed is a copy of the CMS-179 summary form and the approved state plan page.

Please contact Christine Davidson at (312) 886-3642 or by email at christine.davidson@cms.hhs.gov if you have any questions about this approval.

Sincerely,

Alissa M.
Deboy -S

Digitally signed by Alissa
M. Deboy -S
Date: 2023.01.27
07:33:30 -05'00'

Alissa Mooney DeBoy
On Behalf of Anne Marie Costello, Deputy Director
Center for Medicaid and CHIP Services

cc: Rebecca Jackson, ODM
Gregory Niehoff, ODM
Tiffany Williams, ODM
Marlana Thieler, CMCS

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER

2 2 — 0 3 5

2. STATE

OH

3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT

XIX XXI

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

October 1, 2022

5. FEDERAL STATUTE/REGULATION CITATION

Title XIX of the Social Security Act

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2023 \$ 0
b. FFY 2024 \$ 0

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Addendum 7.5.A-7 (new)

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)

9. SUBJECT OF AMENDMENT

Disaster Relief Rescissions: Resumption of Normal Limits on Home Health and Private-Duty Nursing

10. GOVERNOR'S REVIEW (Check One)

- GOVERNOR'S OFFICE REPORTED NO COMMENT
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

OTHER, AS SPECIFIED:
The State Medicaid Director is the Governor's designee

11. SIGNATURE OF STATE AGENCY OFFICIAL

[Redacted Signature]

12. TYPED NAME

MAUREEN M. CORCORAN

13. TITLE

STATE MEDICAID DIRECTOR

14. DATE SUBMITTED

November 14, 2022

15. RETURN TO

Tiffany Williams
Ohio Department of Medicaid
P.O. BOX 182709
Columbus, Ohio 43218

FOR CMS USE ONLY

16. DATE RECEIVED

November 14, 2022

17. DATE APPROVED

01/27/2023

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL

October 1, 2022

19. SIGNATURE OF APPROVING OFFICIAL

Alissa M. Deboy - Digitally signed by Alissa M. Deboy -S
S Date: 2023.01.27 07:33:49 -05'00'

20. TYPED NAME OF APPROVING OFFICIAL

Alissa Mooney DeBoy On Behalf of Anne Marie Costello

21. TITLE OF APPROVING OFFICIAL

Deputy Director, Center for Medicaid and CHIP Services

22. REMARKS

State/Territory: Ohio

7.5.A-7. Rescissions to the State's Disaster Relief Policies for the COVID-19 National Emergency

Effective October 1, 2022, the agency rescinds the election at D.2. of section 7.5 of the state plan (approved on May 22, 2020 in SPA OH-20-012) to suspend limits on private-duty nursing (PDN) post-hospital benefit as described in Attachment 3.1-A of the state plan, and on home health services per day and week as described in Attachment 3.1-A of the state plan, in order to provide alternatives to institutional settings. This rescission reinstates the process for individuals to request additional medically necessary services beyond the established soft limits identified in Attachment 3.1-A of the state plan.