

Proposed Structure for the Unified Long-Term Care Budget – Phase One

Statutory Framework for the Unified Budget

Section 213.30 of Am. Sub. H.B. 119 supports the concept of a unified long-term care budget by creating new funding lines as follows:

Department of Aging	490-423
Department of Job and Family Services	600-435
Department of Mental Retardation and Developmental Disabilities	322-406
Department of Mental Health	335-411

The Office of Budget and Management is given authority to transfer funds and appropriations currently appropriated to pay for Medicaid services **to** any of the four lines that have been created. Further, OBM may also transfer funds **between** these four new lines. All transfers into or between the funds require controlling board approval.

Creation of the Unified Budget

The Office of Budget and Management, with controlling board approval, can transfer funds from each agency's "legacy line" (i.e., those that currently fund long-term services and supports) to any of the four new lines, based on consumer demand and utilization patterns. The following list of "legacy" funds and appropriations are meant to be illustrative only, since the Unified Long-Term Care Budget Workgroup continues to discuss the full scope of services that should be considered "long-term care."

- GRF Funding from 600-525 Health Care/Medicaid in the ODJFS budget that pays for such long-term services and supports as nursing facility care, Ohio Home Care and Transitions waivers, and long-term services and supports accessed through the state Medicaid plan.
- Funding from the GRF lines in the ODA budget that support the PASSPORT and Choices waivers.
- Funding from the GRF line in the ODA budget that comprise the funding for the assisted living waiver would also be transferred.
- Funding from the GRF line in ODA's budget that support the PACE program.

Am. Sub. H.B. 119 categorizes the new funding lines created as "state" revenue which is why only GRF funds are included in this list. This is a pragmatic approach given that special revenue funds that support long-term services and supports are typically controlled by other statutes (e.g., franchise fee revenues, off-track betting)

Distribution of funding from 600-435 based on consumer need and demand

Funding would be distributed between lines based on the service needs of consumers. . OBM, advised by The Executive Medicaid Management Administration (EMMA) has the responsibility to determine the amounts that should be transferred between GRF lines.

Updated forecasts would be performed quarterly, consistent with the desires of the controlling board (which must approve disbursements from 600-435) and current OBM practice. These “forecasts” would be based on actual experience, but would also be predictive of current trends in both utilization and service delivery.