



Ohio Revised Code

Section 5164.31 Funding for implementing the provider screening requirements.

Effective: September 29, 2017

Legislation: House Bill 49 - 132nd General Assembly

(A) For the purpose of raising funds necessary to pay the expenses of implementing the provider screening requirements of subpart E of 42 C.F.R. Part 455 and except as provided in division (B) of this section, the department of medicaid shall collect an application fee from a medicaid provider before doing any of the following:

- (1) Entering into a provider agreement with a medicaid provider that seeks initial enrollment as a provider;
- (2) Entering into a provider agreement with a former medicaid provider that seeks re-enrollment as a provider;
- (3) Revalidating a medicaid provider's continued enrollment as a provider.

(B) The department is not to collect an application fee from a medicaid provider that is exempt from paying the fee under 42 C.F.R. 455.460(a).

(C) The application fees shall be deposited into the health care/medicaid support and recoveries fund created under section 5162.52 of the Revised Code. Application fees are nonrefundable when collected in accordance with 42 C.F.R. 455.460(a).

(D) The medicaid director shall adopt rules under section 5164.02 of the Revised Code as necessary to implement this section, including a rule establishing the amount of the application fee to be collected under this section. The amount of the application fee shall not be set at an amount that is more than necessary to pay for the expenses of implementing the provider screening requirements.
