



Ohio Revised Code

Section 5165.23 Critical access incentive payments to qualified facilities.

Effective: July 4, 2023

Legislation: House Bill 33

(A) Each state fiscal year, the department of medicaid shall determine the critical access incentive payment for each nursing facility that qualifies as a critical access nursing facility. To qualify as a critical access nursing facility for a state fiscal year, a nursing facility must meet all of the following requirements:

(1) The nursing facility must be located in an area that, on December 31, 2011, was designated an empowerment zone under the "Internal Revenue Code of 1986," section 1391, 26 U.S.C. 1391.

(2) The nursing facility must have an occupancy rate of at least eighty-five per cent as of the last day of the calendar year immediately preceding the state fiscal year.

(3) The nursing facility must have a medicaid utilization rate of at least sixty-five per cent as of the last day of the calendar year immediately preceding the state fiscal year.

(B) A critical access nursing facility's critical access incentive payment for a state fiscal year shall equal five per cent of the portion of the nursing facility's total per medicaid day payment rate for the state fiscal year that is the sum of the rates identified in divisions (A)(1) to (4) of section 5165.15 of the Revised Code.

(C) Each state fiscal year, the department shall determine the low occupancy deduction for each nursing facility that qualifies as a low occupancy nursing facility. To qualify as a low occupancy nursing facility for a state fiscal year, a nursing facility must have an occupancy rate lower than sixty-five per cent. For purposes of this division, the department shall utilize a nursing facility's occupancy rate for the licensed beds reported on the facility's cost report for the calendar year preceding the fiscal year for which the rate is determined, or if the facility is not required to be licensed, the facility's occupancy rate for its certified beds. If the facility surrenders licensed or certified beds before the first day of July of the calendar year in which the fiscal year begins, the department shall calculate a nursing facility's occupancy rate by dividing the inpatient days reported



on the facility's cost report for the calendar year preceding the fiscal year for which the rate is determined by the product of the number of days in the calendar year and the facility's number of licensed, or if applicable, certified beds on the first day of July of the calendar year in which the fiscal year begins.

A low occupancy nursing facility's low occupancy deduction for a state fiscal year shall equal five per cent of the nursing facility's total per medicaid day payment rate for the state fiscal year identified in division (D) of section 5165.15 of the Revised Code, for the state fiscal year.

This division does not apply to any of the following:

- (1) A nursing facility where the beds are owned by a county and the facility is operated by a person other than the county;
- (2) A nursing facility that opened during the calendar year preceding the fiscal year for which the rate is determined or the preceding fiscal year;
- (3) A nursing facility that underwent a renovation during the calendar year preceding the fiscal year for which the rate is determined if both of the following apply:
 - (a) The renovation involved a capital expenditure of one hundred fifty thousand dollars or more, excluding expenditures for equipment;
 - (b) The renovation included one or more rooms housing beds that are part of the nursing facility's licensed capacity and that were taken out of service for at least thirty days while the rooms were being renovated.