

AUTHENTICATED, OHIO LEGISLATIVE SERVICE COMMISSION DOCUMENT #247277

Ohio Administrative Code Rule 5160-2-30 Hospital franchise fee program. Effective: December 15, 2019

This rule sets forth the assessment rate for thehospital franchise fee program implemented under sections 5168.20 to 5168.28 of the Revised Code.

(A) Definitions

For purposes of the hospital franchise fee program only, "total facility costs" are as defined in section 5168.20 of the Revised Code, and also exclude a hospital's costs associated with providing care to recipients of the medicare program as shown on the cost-reporting data used for purposes of determining the hospital's assessment under section 5168.21 of the Revised Code.

(B) Assessment

(1) For the program year that ends in calendar year 2020, the amount of each hospital's franchise fee assessment shall be three and one thousand nine hundred sixty-five ten-thousandths per cent of the hospital's total facility costs as defined in paragraph (A) of this rule.

(2) For the program year that ends in calendar year 2021, the amount of each hospital's franchise fee assessment shall be three and thirty-five hundredths per cent of the hospital's total facility costs as defined in paragraph (A) of this rule.

(3) For the program year that ends in calendar year 2022, and for each program year thereafter, the amount of each hospital's franchise fee assessment shall be three and thirty-seven hundredths per cent of the hospital's total facility costs as defined in paragraph (A) of this rule.

(4) The department may establish a rate higher or lower than the rates described in paragraphs (B)(1) to (B)(3) of this rule based on the franchise fee assessment needed to operate the current program year.



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(C) Hospitals not enrolled as medicaid providers

(1) Hospitals, as defined in section 5168.20 of the Revised Code, that are not enrolled in the medicaid program shall, upon request, submit to the department an electronic copy of the hospital's medicare cost report (CMS 2552-10) or audited financial statements for the period described in section 5168.21 of the Revised Code.

(2) Hospitals not enrolled as medicaid providers shall be assessed a hospital franchise fee as described in paragraph (B) of this rule.

(3) Each hospital that is not enrolled as a medicaid provider shall pay the assessment according to a schedule established by the department at the time the department mails its written notice of the final determination of the hospital's assessment.