



## Ohio Revised Code

### Section 5167.09

Effective: September 30, 2025

Legislation: House Bill 96

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The department of medicaid shall include all of the following on the department's managed care financial dashboard:

(A) Actuarial metrics for annual and quarterly cost reports, delineated by the following categories:

(1) Adults for whom financial eligibility for the medicaid program is determined by utilizing the modified adjusted gross income standard and who are not members of the expansion eligibility group;

(2) Children for whom financial eligibility for the medicaid program is determined by utilizing the modified adjusted gross income standard;

(3) Individuals in the aged, blind, and disabled eligibility group who are twenty-one years of age or older;

(4) Individuals in the aged, blind, and disabled eligibility group who are twenty years of age or younger;

(5) Individuals who are members of the expansion eligibility group;

(6) Individuals who are members of the adoption and foster kids eligibility group;

(7) All other individuals eligible for medicaid benefits who are not included in another category described in division (A) of this section.

(B) Quarterly and annual composite per member per month category of service reports for each managed care organization providing services under the care management system, delineated into the following categories:



(1) Inpatient services;

(2) Outpatient facility services;

(3) Professional services;

(4) Radiology, pathology, and laboratory services;

(5) Pharmacy services;

(6) Behavioral health services;

(7) All other services.

(C) As used in this section, "expansion eligibility group" has the same meaning as in section 5163.01 of the Revised Code.

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