



THE OHIO DEPARTMENT OF MEDICAID

BUDGET SUBMISSION

FISCAL YEARS 2026 – 2027

SUBMITTED OCTOBER 21, 2024

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October 21, 2024

Director Kimberly Murnieks
Ohio Office of Budget and Management
30 E. Broad Street, 34th Floor
Columbus, Ohio 43215-3457

RE: Director's Letter SFY 2026-2027 Budget

Dear Director Murnieks:

GOVERNOR MIKE DEWINE'S PRIORITIES

Consistent with Governor Mike DeWine's vision, Ohio Medicaid helps to give more than 3 million adults and children the opportunity to live up to their God-given potential. With an emphasis on accessibility, innovative treatment for mental and behavioral health issues, and providing the best care to people of all ages, ODM helps set Ohioans up for success. ODM delivers healthcare access and related community support services through a network of more than 200,000 active providers to Medicaid members of all ages.

NEXT GENERATION OF CARE: FOCUS ON THE INDIVIDUAL

Shortly after taking office, Governor DeWine asked ODM to redesign the Medicaid healthcare system. With the benefit of significant community and stakeholder input, ODM worked with the General Assembly and developed a bold new vision for Ohio's program: one that focuses on the individual rather than the business of managed care. The Next Generation of Medicaid Managed Care represents the first significant change to Ohio's managed care program in 15 years.

Next Generation care focuses on population health and working collaboratively and collectively to improve quality. By focusing on healthy communities, families, and individuals, we are working to reverse healthcare disparities affecting Ohioans with disabilities, minority populations, and those living in rural communities or healthcare deserts.

Designed to foster healthier communities and reduce health inequities throughout the state, Ohio's Managed Care Entities (MCEs) listened to individuals and engaged community organizations, establishing a new annual community reinvestment program. The first year's grants, worth more than \$6.5 million, were awarded to 17 projects or organizations through the Medicaid Community Reinvestment initiative.

THE NEXT GENERATION: CARE TO IMPROVE BIRTH OUTCOMES AND PRIORITIZING CHILDREN'S HEALTH

Maternal, infant, and children's health initiatives continue to be a focus of the Administration and are aligned with ODM's population health innovations. The Comprehensive Maternal Care (CMC) Program

and Comprehensive Primary Care (CPC) Program both use value-based payment strategies to incentivize better health outcomes and facilitate better care and care coordination with partner maternal and primary care providers and practices. In program year 2024, CMC practices covered more than 35,000 pregnant mothers, and over 1.78 million Medicaid lives were touched by CPC practices—including approximately 945,000 kids. Other service improvements for pregnant women and newborns include 24/7 infant feeding support and pumps, Medicaid coverage for doulas, and access to support groups for expectant mothers to connect, share their journeys, and receive support and education.

OhioRISE represents a significant step forward in achieving the governor’s vision of ensuring every child has the opportunity to reach their full potential. The program, which serves more than 39,000 young people, emphasizes prevention, early intervention, and evidence-based practices for children and families. OhioRISE plays a key role in addressing the needs of youth who could be better served in their homes rather than in out-of-home care (e.g., a foster home or residential facility).

RETURN TO NORMAL ELIGIBILITY OPERATIONS

Following the end of the federal continuous coverage provision, Ohio Medicaid resumed annual enrollment and eligibility reviews in February 2023 with a commitment to ensuring every Ohioan who qualified for Medicaid remained covered. ODM implemented system innovations and enhancements that enabled the agency, in collaboration with Ohio county departments of jobs and family services, to review eligibility for more than 3.5 million people, reducing Medicaid members by 800,000. This review was conducted on time, without federal penalties, and Ohio achieved among the best metrics in the United States.

SFY 26-27 OUTLOOK

Ohio’s Medicaid plan for unwinding from the COVID-19 PHE resulted in a net caseload change of more than 460,000 Medicaid members. ODM has projected a slight increase in Medicaid enrollment in SFY26/27. This is consistent with national Medicaid forecasts. ODM will adjust the caseload forecast based on additional analysis and insights throughout the budget process. ODM continues the use of dashboards and other tools to closely monitor Medicaid application and renewal activities completed by CDJFSs ensuring that eligible Ohioans are able to receive the care they need.

SFY24/25 included significant rate increases. Maintaining these rate increases is an important priority to maintaining access to needed home and community-based services.

Outcomes Acceleration for Kids (OAK)

As announced during Governor DeWine’s 2024 State of the State address, the Outcomes Acceleration for Kids (OAK) learning collaborative is a first-of-its-kind partnership between ODM, Ohio’s children’s hospitals, and Ohio’s Managed Care Entities (MCEs) targeting four health domains: well-care visits, Asthma, behavioral health, and Sickle Cell Disease. The network has been established and will optimize care delivery in partner practices and organizations to improve child health across Ohio in the coming years.

Recovery, Substance Use, and Behavioral Health Services

Medicaid is the single largest payer for mental health services in the United States and is increasingly playing a larger role in the reimbursement of substance use disorder services. People with a behavioral health disorder also utilize significant amounts of other health care services. Providing coverage for these issues remains a priority of Governor DeWine and represents a need experienced disproportionately by Ohioans served by Medicaid. The 2023 Ohio Medicaid Assessment Survey (OMAS) showed that adults covered by Medicaid were more likely to have a mental health impairment (19.7%) than those uninsured (12.9%), covered by employer-sponsored insurance (2.6%), Medicare only (4.3%), or other insurance (6.4%).

To continue to support those with behavioral health conditions, ODM is working in partnership with the Ohio Department of Mental health and Addiction Services (OMHAS) to expand behavioral health services. This includes monitoring implementation of applied behavioral analysis (ABA), which is scheduled to be added as a state plan service for those with autism spectrum disorder in January 2025. Other specific areas of focus include the statewide expansion of Mobile Response and Stabilization Services (MRSS) and the expansion of peer recovery supports. Utilizing a novel approach to build capacity and foster provider participation, OMHAS and ODM are working to ensure anyone who needs these services in Ohio will have access to them.

CONCLUSION

In closing, the following three primary goals will guide ODM's actions in the months ahead:

1. Improving and expanding care for eligible Ohioans across all stages of life. This includes an intense focus on mental and behavioral health.
2. Streamlining eligibility processing and working with the CDJFSs to further improve processing of eligibility renewals and redeterminations, while working with MCOs and other stakeholders to transition individuals to other sources of health insurance coverage when possible; and
3. Implementing the full capacity of the Next Generation of managed care changes with a continued focus on person-centered care, including executing the Next Generation MyCare.

The coming biennium will be one of ODM's most transformative as the Next Generation of Managed Care evolves and improves. We are excited to realize the changes Medicaid can bring to Ohioans as we focus on person centered care, with collaborative and innovative approaches to improving quality, and meaningful engagement with communities. Thank you for your consideration of the ODM SFY26-27 budget.

Sincerely,



Maureen M. Corcoran, Director

AGENCY STAFFING TABLE

Agency: Medicaid

	Actual FY 2024	Estimate FY 2025	FY 2025 Ceiling	FY 2026 Request	FY 2027 Request	Count Change FY 2024-2027	% Change FY 2024-2027
Full-Time Permanent	683	768	730	848	891	208	30.5%
Part-Time Permanent	1	1	0	1	1	0	0.0%
Total	684	769	730	849	892	208	30.4%

Jobcode Description (for each position requested above the FY 2025 Ceiling)	Full-Time or Part-Time	Number of Positions Requested	Total FY 2026 Cost	Total FY 2027 Cost
Budget Analyst Supervisor	F	3	\$ 327,563	\$ 478,232
Customer Service Assistant	F	48	\$ 4,550,363	\$ 6,544,844
External Auditor	F	7	\$ 782,637	\$ 1,111,630
Financial Analyst	F	4	\$ 371,334	\$ 527,866
Health Services Policy Analyst	F	3	\$ 323,575	\$ 471,513
Health Services Policy Specialist	F	7	\$ 910,014	\$ 1,327,219
Health Services Policy Supervisor	F	4	\$ 651,151	\$ 909,787
Medicaid Health Systems Administrator	F	46	\$ 5,017,949	\$ 7,290,339
Medicaid Health Systems Specialist	F	18	\$ 2,212,234	\$ 3,189,165
Policy Staff	F	3	\$ 384,881	\$ 535,908
Program Administrator	F	2	\$ 184,580	\$ 258,672
Senior Budget Analyst	F	4	\$ 504,763	\$ 719,701
Software Development Specialist	F	12	\$ 1,539,377	\$ 2,201,619

Note

ODM is asking for positions consistent with those requested in HB 33 to support Next Generation Managed Care. ODM has had success hiring positions related to Next Generation Managed Care, but remains understaffed to meet the new operational need, which includes the Department taking on new responsibilities associated with Next Gen. implementation. Additionally, a large portion of Next Gen. hiring has been from internal staff thereby necessitating significant backfilling of positions. Hiring additional external staff to fill newly vacant positions and additional new positions is ongoing. HR has increased recruitment efforts to fill positions and ODM has made steady gains in total staffing. Vendors and comp-time/over-time continue to bridge the gap.

ODM continues to work with OBM on staffing plans and timelines as it relates to the budget and current ceiling.

BEA-0004 Executive Agency Budget Request - Summary

Agency: Department of Medicaid
Scenario: Bud A

BY BUDGET FUND GROUP	Actual			Estimated	Requested			
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	Variance FY 2026 - FY 2025	FY 2027	Variance FY 2027 - FY 2026
Holding Account	6,027,012	2,192,489	13,743,037	10,000,000	14,001,665	4,001,665	14,001,665	0
General Revenue	16,315,536,808	17,752,497,414	18,352,954,630	22,180,632,762	22,977,187,031	796,554,269	24,971,702,228	1,994,515,197
Dedicated Purpose	3,665,031,498	3,645,940,862	4,481,948,008	5,128,941,480	4,423,508,719	(705,432,761)	4,624,548,371	201,039,652
Federal	11,401,501,059	11,041,220,052	11,539,881,915	12,420,692,494	11,086,820,280	(1,333,872,213)	11,516,945,629	430,125,349
TOTAL	31,388,096,376	32,441,850,816	34,388,527,590	39,740,266,736	38,501,517,696	(1,238,749,040)	41,127,197,894	2,625,680,198

BY EXPENSE CATEGORY	Actual			Estimated	Requested			
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	Variance FY 2026 - FY 2025	FY 2027	Variance FY 2027 - FY 2026
500 Personal Services	84,853,741	91,304,054	106,176,413	134,229,993	152,171,084	17,941,091	169,968,250	17,797,167
510 Purchased Personal Services	307,918,369	335,709,853	425,501,599	444,325,208	403,017,837	(41,307,371)	393,038,553	(9,979,284)
520 Supplies and Maintenance	128,486,302	128,412,666	144,193,532	193,149,240	179,636,635	(13,512,605)	176,527,131	(3,109,505)
530 Equipment	1,134,791	1,132,461	1,221,863	772,989	1,204,942	431,953	1,305,298	100,356
550 Subsidies Shared Revenue	30,758,252,406	31,724,459,936	33,536,706,907	38,681,547,399	37,472,381,532	(1,209,165,866)	40,093,227,996	2,620,846,464
590 Judgments, Settlements & Bonds	50,000	685,139	70,000	275,000	276,000	1,000	276,000	0
595 Transfers and Non-Expense	107,400,768	160,146,706	174,657,276	285,966,907	292,829,665	6,862,758	292,854,665	25,000
TOTAL	31,388,096,376	32,441,850,816	34,388,527,590	39,740,266,736	38,501,517,696	(1,238,749,040)	41,127,197,894	2,625,680,198

BEA-0002 Operating Budget Request - Detail Agency Bud

Agency	Fund Group	Fund Code	ALI	Account	Actual			Estimate	Request	
					FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
MCD	DPF	4E30	651605 Resident Protection Fund	500 Personal Services	101,536	148,364	160,570	151,454	150,750	163,266
MCD	DPF	4E30	651605 Resident Protection Fund	550 Subsidies Shared Revenue	1,676,048	3,366,773	147,935	3,875,146	5,849,250	5,836,734
MCD	DPF	4E30	651605 Resident Protection Fund	595 Transfers and Non-Expense	392,742	258,742	0	1,000,000	1,000,000	1,000,000
MCD	DPF	5AN0	651686 Care Innovation and Community Improvement Program	550 Subsidies Shared Revenue	73,943,660	70,342,829	73,704,231	86,650,700	179,883,000	179,953,000
MCD	DPF	5DL0	651639 Medicaid Services-Recoveries	550 Subsidies Shared Revenue	552,388,069	614,800,000	897,045,455	1,170,300,100	900,000,000	780,000,000
MCD	DPF	5DL0	651639 Medicaid Services-Recoveries	590 Judgments, Settlements & Bonds	0	0	1,821	17,700	18,000	18,000
MCD	DPF	5DL0	651639 Medicaid Services-Recoveries	595 Transfers and Non-Expense	85,489	199,594	151,457	0	0	0
MCD	DPF	5DL0	651685 Medicaid Recoveries-Program Support	500 Personal Services	589,482	538,523	522,237	0	0	0
MCD	DPF	5DL0	651685 Medicaid Recoveries-Program Support	510 Purchased Personal Services	30,444,138	38,071,686	48,388,486	42,459,796	58,370,179	57,514,471
MCD	DPF	5DL0	651685 Medicaid Recoveries-Program Support	520 Supplies and Maintenance	11,959,161	12,006,740	14,789,815	33,345,155	21,658,610	24,343,090
MCD	DPF	5DL0	651685 Medicaid Recoveries-Program Support	530 Equipment	174,943	499,098	492,522	365,300	575,572	624,452
MCD	DPF	5DL0	651685 Medicaid Recoveries-Program Support	550 Subsidies Shared Revenue	4,463,980	3,515,357	5,375,347	8,705,149	8,331,358	8,181,358
MCD	DPF	5DL0	651685 Medicaid Recoveries-Program Support	590 Judgments, Settlements & Bonds	0	0	0	125,000	125,000	225,000
MCD	DPF	5DL0	651685 Medicaid Recoveries-Program Support	595 Transfers and Non-Expense	556,495	0	469,492	500,000	500,000	500,000
MCD	DPF	5DL0	651690 Multi-system Youth Custody Relinquishment	550 Subsidies Shared Revenue	19,769,955	23,900,288	32,038,500	27,562,500	20,000,000	20,000,000
MCD	DPF	5DL0	651690 Multi-system Youth Custody Relinquishment	595 Transfers and Non-Expense	0	0	23,925	0	0	0
MCD	DPF	5FX0	651638 Medicaid Services-Payment Withholding	595 Transfers and Non-Expense	7,150,122	4,777,490	4,679,496	12,000,000	12,000,000	12,000,000
MCD	DPF	5GF0	651656 Medicaid Services Hospital Franchise Fee	550 Subsidies Shared Revenue	1,261,497,903	1,342,166,523	1,631,449,120	1,723,365,065	1,719,298,000	2,033,672,000
MCD	DPF	5GF0	651656 Medicaid Services Hospital Franchise Fee	595 Transfers and Non-Expense	0	595,940	0	0	0	0
MCD	DPF	5HC8	651698 MCD Home and Community Services	510 Purchased Personal Services	0	0	573,941	14,507,790	0	0
MCD	DPF	5HC8	651698 MCD Home and Community Services	520 Supplies and Maintenance	0	0	197,866	750,000	0	0
MCD	DPF	5HC8	651698 MCD Home and Community Services	550 Subsidies Shared Revenue	80,026,234	(333,487)	60,426,696	87,611,675	0	0
MCD	DPF	5R20	651608 Medicaid Services-Long Term	550 Subsidies Shared Revenue	413,750,000	374,500,000	414,000,000	414,000,000	450,000,000	450,000,000
MCD	DPF	5R20	651608 Medicaid Services-Long Term	595 Transfers and Non-Expense	843,493	(5,775)	121,521	1,000,000	1,000,000	1,000,000
MCD	DPF	5TN0	651684 Medicaid Services-HIC Fee	550 Subsidies Shared Revenue	991,000,000	951,000,000	1,063,227,826	1,138,441,200	880,000,000	880,000,000
MCD	DPF	5XY0	651694 Improvements for Priority Populations	550 Subsidies Shared Revenue	6,678,047	2,372,467	7,499,581	10,500,000	0	0
MCD	DPF	5XY0	651694 Improvements for Priority Populations	595 Transfers and Non-Expense	595,940	(595,940)	0	0	0	0
MCD	DPF	6510	651649 Medicaid Services-Hospital Care Assurance Program	550 Subsidies Shared Revenue	206,944,061	203,042,255	226,460,168	351,707,750	164,749,000	169,517,000
MCD	DPF	6510	651649 Medicaid Services-Hospital Care Assurance Program	595 Transfers and Non-Expense	0	773,395	0	0	0	0
DPF Total					3,665,031,498	3,645,940,862	4,481,948,008	5,128,941,480	4,423,508,719	4,624,548,371
MCD	FED	3ER0	651603 Medicaid and Health Transformation Technology	500 Personal Services	258,704	160,053	29,401	0	0	0
MCD	FED	3ER0	651603 Medicaid and Health Transformation Technology	510 Purchased Personal Services	2,080,247	793,235	140,199	0	0	0
MCD	FED	3ER0	651603 Medicaid and Health Transformation Technology	520 Supplies and Maintenance	74,005	9	0	0	0	0
MCD	FED	3ER0	651603 Medicaid and Health Transformation Technology	550 Subsidies Shared Revenue	2,139,822	0	0	795,500	0	0
MCD	FED	3ER0	651603 Medicaid and Health Transformation Technology	595 Transfers and Non-Expense	97,260	0	0	0	0	0
MCD	FED	3F00	651623 Medicaid Services-Federal	550 Subsidies Shared Revenue	10,701,970,892	10,496,572,837	10,847,993,644	11,524,011,912	10,314,859,000	10,743,309,000
MCD	FED	3F00	651623 Medicaid Services-Federal	590 Judgments, Settlements & Bonds	0	0	3,179	32,300	33,000	33,000
MCD	FED	3F00	651623 Medicaid Services-Federal	595 Transfers and Non-Expense	119,399	357,905	266,105	0	0	0
MCD	FED	3F00	651624 Medicaid Program Support-Federal	500 Personal Services	48,697,368	51,876,222	59,555,615	76,520,305	86,670,423	96,769,193
MCD	FED	3F00	651624 Medicaid Program Support-Federal	510 Purchased Personal Services	191,923,345	205,766,674	214,217,005	222,004,850	221,730,916	215,365,441
MCD	FED	3F00	651624 Medicaid Program Support-Federal	520 Supplies and Maintenance	86,848,559	85,840,146	95,624,554	127,133,817	122,271,213	119,868,811
MCD	FED	3F00	651624 Medicaid Program Support-Federal	530 Equipment	946,491	620,868	631,768	396,578	618,143	669,619
MCD	FED	3F00	651624 Medicaid Program Support-Federal	550 Subsidies Shared Revenue	45,468,320	48,896,455	56,907,029	69,578,036	71,934,586	72,277,566

BEA-0002 Operating Budget Request - Detail Agency Bud

Agency	Fund Group	Fund Code	ALI	Account	Actual			Estimate	Request	
					FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
MCD	FED	3F00	651624 Medicaid Program Support-Federal	590 Judgments, Settlements & Bonds	0	0	32,500	50,000	50,000	0
MCD	FED	3F00	651624 Medicaid Program Support-Federal	595 Transfers and Non-Expense	432,451	424,198	591,129	650,000	650,000	650,000
MCD	FED	3FA0	651680 Health Care Grants-Federal	550 Subsidies Shared Revenue	0	0	0	3,000,000	7,000,000	7,000,000
MCD	FED	3G50	651655 Medicaid Intragency Pass Through	595 Transfers and Non-Expense	90,268,567	150,727,445	154,000,056	258,149,000	261,003,000	261,003,000
MCD	FED	3HC8	651699 MCD Home and Community Based Services - Federal	510 Purchased Personal Services	0	0	569,420	9,507,790	0	0
MCD	FED	3HC8	651699 MCD Home and Community Based Services - Federal	520 Supplies and Maintenance	0	0	197,867	750,000	0	0
MCD	FED	3HC8	651699 MCD Home and Community Based Services - Federal	550 Subsidies Shared Revenue	230,175,629	(815,995)	109,122,443	128,112,405	0	0
				FED Total	11,401,501,059	11,041,220,052	11,539,881,915	12,420,692,494	11,086,820,280	11,516,945,629
MCD	GRF	GRF	651425 Medicaid Program Support-State	500 Personal Services	35,206,652	38,580,892	45,908,589	57,558,234	65,349,911	73,035,791
MCD	GRF	GRF	651425 Medicaid Program Support-State	510 Purchased Personal Services	54,945,989	44,573,010	68,576,952	62,009,236	50,916,742	48,158,641
MCD	GRF	GRF	651425 Medicaid Program Support-State	520 Supplies and Maintenance	29,604,577	30,565,771	33,383,430	31,170,268	35,706,812	32,315,229
MCD	GRF	GRF	651425 Medicaid Program Support-State	530 Equipment	13,356	12,496	97,573	11,111	11,227	11,227
MCD	GRF	GRF	651425 Medicaid Program Support-State	550 Subsidies Shared Revenue	27,331,809	23,200,883	25,506,043	24,911,006	24,118,339	24,118,339
MCD	GRF	GRF	651425 Medicaid Program Support-State	590 Judgments, Settlements & Bonds	50,000	0	32,500	50,000	50,000	0
MCD	GRF	GRF	651425 Medicaid Program Support-State	595 Transfers and Non-Expense	167,489	167,489	366,350	317,907	325,000	350,000
MCD	GRF	GRF	651426 Positive Education Program Connections	550 Subsidies Shared Revenue	2,500,000	0	0	0	0	0
MCD	GRF	GRF	651525 Medicaid Health Care Services	510 Purchased Personal Services	28,524,650	46,505,248	93,035,595	93,835,746	72,000,000	72,000,000
MCD	GRF	GRF	651525 Medicaid Health Care Services	550 Subsidies Shared Revenue	15,681,307,871	17,093,614,951	17,412,609,154	21,183,781,254	21,981,842,000	23,910,239,000
MCD	GRF	GRF	651525 Medicaid Health Care Services	590 Judgments, Settlements & Bonds	0	685,139	0	0	0	0
MCD	GRF	GRF	651525 Medicaid Health Care Services	595 Transfers and Non-Expense	664,309	273,734	244,707	2,350,000	2,350,000	2,350,000
MCD	GRF	GRF	651526 Medicare Part D	550 Subsidies Shared Revenue	453,970,105	473,067,801	673,193,735	724,638,000	744,517,000	809,124,000
MCD	GRF	GRF	651529 Brigid's Path Pilot	550 Subsidies Shared Revenue	1,000,000	1,000,000	0	0	0	0
MCD	GRF	GRF	651533 Food Farmacy Pilot Project	550 Subsidies Shared Revenue	250,000	250,000	0	0	0	0
				GRF Total	16,315,536,808	17,752,497,414	18,352,954,630	22,180,632,762	22,977,187,031	24,971,702,228
MCD	HLD	R055	651644 Refunds and Reconciliation	595 Transfers and Non-Expense	6,027,012	2,192,489	13,743,037	10,000,000	14,001,665	14,001,665
				HLD Total	6,027,012	2,192,489	13,743,037	10,000,000	14,001,665	14,001,665
				MCD Total	31,388,096,376	32,441,850,816	34,388,527,590	39,740,266,736	38,501,517,696	41,127,197,894

ALI Q&A for 651425 Medicaid Program Support-State

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

This GRF line item is used to fund ODM's operating expenses which includes the state share GRF for payroll, purchased personal services, conference fees, maintenance, and equipment, etc. The associated federal match is appropriated in line item 651624, Medicaid Program Support – Federal.

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

This ALI provides the state share GRF for payroll, purchased personal services, conference fees, maintenance, and equipment for the Ohio Department of Medicaid.

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

Yes, this line item funds the administrative costs for PASSPORT Administrative Agencies (PAA). Funds are advanced and settled monthly. Federal grants that require state share funding are paid from line item 651425. The federal match is paid from line item 651624.

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

This request represents a minute increase over FY 2025 levels. ODM's contractual operating budgets have been kept flat in this FY 2026-2027 submission.

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

ODM has operationalized new administrative activities that have come from the managed care plans including provider credentialing and pharmacy benefit management that were onboarded in the SFY24-25 biennium. This SFY26-27 request includes continuing operations of this new work.

ALI Q&A for 651426 Positive Education Program Connections

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

N/A

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

N/A

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

N/A

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

N/A

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

N/A

ALI Q&A for 651525 Medicaid Health Care Services

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

This GRF line item is used to reimburse healthcare providers for covered services and to make managed care capitation payments. The federal earnings on the payments made from this line item are deposited as revenue into the GRF. Spending within this line item generally can be placed into one of several major service categories: managed care plans, nursing facilities (NFs), hospital services, behavioral health, aging waivers, prescription drugs, physician services, Home Care waivers, and all other care.

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

A number of factors are impacting projected Medicaid expenditures. Overall Medicaid caseload is projected to remain relatively flat from SFY25, but the caseload for the most expensive populations (dually eligible, and aged, blind, or disabled) is projected to increase. Pharmacy costs, inflation, managed care trend rates, labor force participation, the aging Ohio population, and potential increased accessibility for services after rate increases are all factors putting upward pressure on 651525.

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

Changes to this ALI impact spending in other areas of ODM. These are: 651639 - Medicaid Revenue & Collections; 651623 - Health Care Federal; 651608-Medicaid Nursing Facilities; 651684-Medicaid Services - HIC Fee; 651686-Care Innovation and Community Improvement Program; 651656-Medicaid Hospital. These line items are used to reduce expenses in ALI 651525.

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

Per member per month growth is a major factor in the 651525 increases. As the Joint Medicaid Oversight Committee (JMOC) actuary CBIZ Optumas noted, “the average annual growth for Medicaid and CHIP for the SFY 2025 to SFY 2027 period is 5.4%”. This means even with relative stability in caseload, Medicaid costs are expected to increase.

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

None.

ALI Q&A for 651526 Medicare Part D

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

This GRF line item is used for the phased-down state contribution, known as the clawback payment. The clawback is a monthly payment made by each state to the federal Medicare program. The amount of each state's payment roughly reflects the expenditures of its own funds that the state would have made if it continued to pay for outpatient prescription drugs through Medicaid on behalf of dual-eligibles (individuals eligible for both Medicare and Medicaid). Requirements are contained in the federal Medicare Prescription Drug, Improvement, and Modernization Act (MMA) of 2003.

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

This line item exists to partially reimburse the federal government for Medicare Part D premium payments for Medicaid-eligible individuals. Payments in the Part D program are retrospective and paid by monthly invoice from CMS. The budget request for this program is the amount required to fund the projected cost of these invoices during the biennium.

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

H.B. 33 allows the Director of Budget and Management to transfer the state share of appropriations between GRF line item 651525 and this item. This language is requested in the SFY26-27 biennium.

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

This change is due to the projections of future premiums and, due to Ohio's aging population, increases to the dually eligible Medicaid/Medicare caseload. Medicare Part D rates are set by the federal government based on pharmacy trends and FMAP rates.

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

N.A.

ALI Q&A for 651529 Brigid's Path Pilot

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

N/A

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

N/A

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

N/A

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

N/A

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

N/A

ALI Q&A for 651533 Food Farmacy Pilot Project

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

N/A

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

N/A

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

N/A

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

N/A

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

N/A

Fund Question and Answer for 4E30 Residents Protection

1. Explain the legal authority of this fund, including the Ohio Revised Code chapter, the section of temporary (uncodified) law, and/or the Controlling Board action number and approval date.

The legal authority for this is found in ORC 5162.66.

2. Explain all major sources of revenue deposited into this fund and the assumptions used in developing revenue estimates. If this fund receives grants, please fill out the grants table.

The revenue sources to this fund are civil monetary penalties collected from facilities in which the Ohio Department of Health finds deficiencies (indicated in ORC 5165.60- 5165.89). CMS-imposed penalties against non-compliance of Health Home Agencies pursuant to 42 CFR 488.845 are deposited to this fund.

3. Identify and explain patterns in revenue flow in this fund (e.g., all revenue received in May and June due to seasonal nature of renewals; revenues received evenly throughout the fiscal year, etc.).

Revenue to the fund in FY 26/27 is projected based on historical trends.

4. What is the target ending cash balance for this fund, as either a percentage of revenue or months of expenditures? What is the rationale for this target?

The cash balance in the fund at the end of FY 26/27 is projected to be \$13 million. The cash balance is determined using estimated revenue, and projects over the biennium. To utilize the revenue deposited to this fund, projects have to be short-term in nature, fall within strict federal guidelines, and approved by CMS.

5. If there are any "transfers-in" or "transfers-out" shown on the Fund Activity Summary for this fund, explain the source or recipient and the legal authority for each transfer.

None.

ALI Q&A for 651605 Resident Protection Fund

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

This line item pays the costs of relocating residents to other facilities, maintaining or operating a facility pending correction of deficiencies or closure, and reimbursing residents for the loss of money managed by the facility. It is also used for projects approved by CMS to benefit nursing home residents.

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

Expenditures support CMS-approved projects that benefit nursing home residents, as well as improving wellness and health outcomes, and prioritize personalized care experiences. This ALI does not serve as a pass-through to other state or local entities.

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

N/A

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

This request represents an increase in funding for SFY26-27. This allows the spending of accumulated cash balances gained from reduced activity during COVID related NF restrictions. Increased prospective CMS approved projects over the requesting biennium are expected.

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

N/A

Fund Question and Answer for 4K10 ICF MR Bed Assessments.

1. Explain the legal authority of this fund, including the Ohio Revised Code chapter, the section of temporary (uncodified) law, and/or the Controlling Board action number and approval date.

The legal authority for this fund is ORC 5168.68.

2. Explain all major sources of revenue deposited into this fund and the assumptions used in developing revenue estimates. If this fund receives grants, please fill out the grants table.

All installment payments and penalties paid by an ICF/IID under sections 5168.63 and 5168.65 of the Revised Code shall be deposited into the fund. No major sources of revenue grants.

3. Identify and explain patterns in revenue flow in this fund (e.g., all revenue received in May and June due to seasonal nature of renewals; revenues received evenly throughout the fiscal year, etc.).

Providers are billed, and most of the revenue is collected in the following month.

4. What is the target ending cash balance for this fund, as either a percentage of revenue or months of expenditures? What is the rationale for this target?

As soon as possible after receipt, the amount of the money that is in the fund is transferred to DODD. The target balance is usually minimal at end of each fiscal year.

5. If there are any "transfers-in" or "transfers-out" shown on the Fund Activity Summary for this fund, explain the source or recipient and the legal authority for each transfer.

Yes, as stated in ORC 5168.68, the revenue received quarterly is transferred to DODD.

Fund Question and Answer for 5AN0 Care Innovation and Community Improvement Program

1. Explain the legal authority of this fund, including the Ohio Revised Code chapter, the section of temporary (uncodified) law, and/or the Controlling Board action number and approval date.

The legal authority for this fund is found in 333.320 of H.B. 49 of the 132nd General Assembly.

2. Explain all major sources of revenue deposited into this fund and the assumptions used in developing revenue estimates. If this fund receives grants, please fill out the grants table.

Revenue received to this fund is from participating providers via intergovernmental transfers.

3. Identify and explain patterns in revenue flow in this fund (e.g., all revenue received in May and June due to seasonal nature of renewals; revenues received evenly throughout the fiscal year, etc.).

Revenue is received periodically throughout the year.

4. What is the target ending cash balance for this fund, as either a percentage of revenue or months of expenditures? What is the rationale for this target?

Shortly after assessment revenue is received, it is disbursed to providers or through capitation payments. Cash balance is maintained to support these plans. Ending cash balance for ongoing operations for each FY is between \$10-\$21 million to allow for planned payments in the following quarter.

5. If there are any "transfers-in" or "transfers-out" shown on the Fund Activity Summary for this fund, explain the source or recipient and the legal authority for each transfer.

None.

ALI Q&A for 651686 Care Innovation and Community Improvement Program

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

In SFY26/27, this line item requests funding for various state directed payments approved by the Centers for Medicare and Medicaid Services (CMS). Under each approved payment program, the participating entity receives supplemental payments under the Medicaid program for physician and other professional services that are covered by Medicaid. However, the participating entity is responsible for the state share of the service costs.

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

In combination with ALI 651623, spending is driven by participating hospital agencies.

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

N/A

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

In SFY 26/27 this line item is acquiring state directed payments supported by inter-governmental transfers from other ALI's that are sustaining reductions. In addition to the current CICIP program that has been paid by this line-item, state directed programs funded in line items 651694 and 651639 are being consolidated here. This results in an increase request for the biennium over SFY25.

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

N/A

Fund Question and Answer for 5DL0 Support and Recoveries

1. Explain the legal authority of this fund, including the Ohio Revised Code chapter, the section of temporary (uncodified) law, and/or the Controlling Board action number and approval date.

The legal authority for this fund is found in ORC 5162.52.

2. Explain all major sources of revenue deposited into this fund and the assumptions used in developing revenue estimates. If this fund receives grants, please fill out the grants table.

The major revenue streams for this fund are prescription drug rebates, earned reimbursement related to institutions for mental diseases disproportionate share (IMD/DSH), third-party liability, hospital settlements, and other recoveries.

3. Identify and explain patterns in revenue flow in this fund (e.g., all revenue received in May and June due to seasonal nature of renewals; revenues received evenly throughout the fiscal year, etc.).

The bulk of drug rebate revenue is received in the second month of each quarter. IMD/DSH revenue is received once annually. Other revenue sources are received intermittently during the fiscal year.

4. What is the target ending cash balance for this fund, as either a percentage of revenue or months of expenditures? What is the rationale for this target?

In SFY 26/27 target cash balance is \$41 million at the end of the biennium to allow for planned payments in the following quarter.

5. If there are any "transfers-in" or "transfers-out" shown on the Fund Activity Summary for this fund, explain the source or recipient and the legal authority for each transfer.

Section 333.80 of Am. Sub. HB 33 of the 135th assembly required a transfer from this fund to the Department of Mental Health and Addiction Services to support the Centers of Excellence. This language is being continued in the FY 26/27 agency submission. An additional \$1 million is being added to this transfer to cover the contract to measure fidelity reviews for Assertive Community Treatment (ACT). ODM has had this contract for many years, and it is appropriate to centralize this contract in MHAS.

ALI Q&A for 651639 Medicaid Services-Recoveries

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

This line item provides offsets to Medicaid GRF spending in ALI 651525.

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

Revenue deposits to the fund such as prescription drug rebates, earned reimbursement related to institutions for mental diseases disproportionate share (IMD/DSH), third-party liability, hospital settlements, and other recoveries and cash balances in the Medicaid Recoveries and Support fund (5DL0) drive spending in this line item.

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

In FY 26/27 ODM in partnership with Mental Health and Addiction Services proposes to transfer \$2.2 million from this fund in support of the Centers of Excellence. An additional \$1 million is being added to this transfer to cover the contract to measure fidelity reviews for Assertive Community Treatment (ACT). ODM has had this contract for many years, and it is appropriate to centralize this contract in MHAS.

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

Due to a reduction in expected rebate collections, GRF offsets in this line item are significantly lower than SFY 2025 levels. The lower rebate collections are due, in large part, to increased 340B Program participation among providers. This is causing a significantly higher amount of claims exclusions which is why we are seeing a lower percentage of rebate collections, and GRF offsets.

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

None.

ALI Q&A for 651685 Medicaid Recoveries-Program Support

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

The purpose of the appropriation line item is used to pay for state share of costs associated with the administration of Medicaid.

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

Operational and/or one-time build activities that support managed care procurement, the Ohio Medicaid Enterprise System (OMES) provider network management module, centralized credentialing, single pharmacy benefit manager, fiscal intermediary, Ohio's Medicaid Technical Assistance & Policy Program (MedTAPP), and state share of ongoing operational costs for children's initiatives are supported by this line item.

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

Federal grants that require state share funding are paid from line item 651685. The federal match is paid from line item 651624.

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

This request represents a 5% increase over SFY 2025 levels. The increase includes one-time and ongoing operational costs related to OMES and their associated contractual increases, and increased costs required by CMS to conduct external quality review activities.

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

ODM has operationalized new administrative activities that have come from the managed care plans including provider credentialing and pharmacy benefit management that were onboarded in the SFY24-25 biennium. This SFY26-27 request includes continuing operations of this new work.

ALI Q&A for 651690 Multi-system Youth Custody Relinquishment

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

This line item is used to fund programs that prevent custody relinquishment of multisystem children and youth and to obtain services consistent with the multisystem youth action plan developed by the Ohio Family and Children First Council.

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

Funds are distributed to county Family and Children First Councils (FCFCs), CMEs, and contractors in accordance with section 121.37 of the Revised Code. Counties apply for funding to get needed services for specific children at risk of custody relinquishment.

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

NA

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

SFY26-27 is in line with historical funding levels and represents a decreased request due to sister agency participation.

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

NA

Fund Question and Answer for 5FX0 Medicaid Payment Withholding

1. Explain the legal authority of this fund, including the Ohio Revised Code chapter, the section of temporary (uncodified) law, and/or the Controlling Board action number and approval date.

The legal authority to this fund is Controlling Board # JFS0100065 on December 15, 2008.

2. Explain all major sources of revenue deposited into this fund and the assumptions used in developing revenue estimates. If this fund receives grants, please fill out the grants table.

Revenue deposited into this fund consists of withholdings related to final payment amounts for nursing facilities that have a change of operator (CHOP). Medicaid provider payments are withheld per Ohio Revised Code 5165.521. This section of revised code requires the Ohio Department of Medicaid to withhold funds payable to facilities that change provider ownership. The funds are withheld until a final resolution is reached between ODM and the provider. The fund receives no grant revenue.

3. Identify and explain patterns in revenue flow in this fund (e.g., all revenue received in May and June due to seasonal nature of renewals; revenues received evenly throughout the fiscal year, etc.).

There is no specific pattern to deposits into this fund as deposits are contingent upon change of operator (CHOP) activity.

4. What is the target ending cash balance for this fund, as either a percentage of revenue or months of expenditures? What is the rationale for this target?

The cash balance fluctuates according to obligations (withheld payments) to Medicaid providers pending final disposition. We estimate annual ending balance of approximately \$5 million based on historical activity.

5. If there are any "transfers-in" or "transfers-out" shown on the Fund Activity Summary for this fund, explain the source or recipient and the legal authority for each transfer.

None.

ALI Q&A for 651638 Medicaid Services-Payment Withholding

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

This line item is used to release payments that are withheld from providers that change ownership and to transfer the withheld funds to the appropriate fund used by ODM at final resolution. The funds are withheld and temporarily deposited into the Exiting Operator Fund (Fund 5FX0) until all potential amounts due to ODM or the provider reach final resolution.

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

This is a program integrity tool to ensure funding for facilities that are changing ownership pay all existing debt to the state.

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

N/A

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

N/A

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

N/A

Fund Question and Answer for 5GF0 Medicaid-Hospital

1. Explain the legal authority of this fund, including the Ohio Revised Code chapter, the section of temporary (uncodified) law, and/or the Controlling Board action number and approval date.

The legal authority for this fund is found in ORC 5168.25.

2. Explain all major sources of revenue deposited into this fund and the assumptions used in developing revenue estimates. If this fund receives grants, please fill out the grants table.

Revenue received into this fund is from hospital assessments as authorized by Ohio Revised Code Section 5168.21. An additional fee was assessed to support Section 333.45 of the Am. Sub. H.B. 110 (FY22/23 Biennial Budget). This is included in the request for FY26/FY27.

3. Identify and explain patterns in revenue flow in this fund (e.g., all revenue received in May and June due to seasonal nature of renewals; revenues received evenly throughout the fiscal year, etc.).

The hospital payment schedule is developed in consultation with the Ohio Hospital Association as codified in ORC 5168.23. Historically the program has run in four installments.

4. What is the target ending cash balance for this fund, as either a percentage of revenue or months of expenditures? What is the rationale for this target?

In SFY 26/27 target cash balance is \$22 million at the end of the biennium to allow for planned payments in the following quarter.

5. If there are any "transfers-in" or "transfers-out" shown on the Fund Activity Summary for this fund, explain the source or recipient and the legal authority for each transfer.

None.

ALI Q&A for 651656 Medicaid Services Hospital Franchise Fee

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

This line item provides offsets to Medicaid GRF spending. The federal match for expenditures from this line item is made from line item 651623, Medicaid Services - Federal. This line item also pays for the Hospital Additional Program (HAP), that directs payments to in-state hospitals that render in-patient and out-patient services to Medicaid enrolled beneficiaries.

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

Spending from this line item is dependent on the hospital franchise fee.

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

This line item impacts ALI 651525 from GRF offsets and ALI 651623 that pays the state share for the HAP program.

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

This funding request represents a decrease over SFY25 due to less GRF offsets in SFY26 and an increase in GRF offsets in SFY27.

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

N/A

Fund Question and Answer for 5HC8 ARPA Home and Community Based Services

1. Explain the legal authority of this fund, including the Ohio Revised Code chapter, the section of temporary (uncodified) law, and/or the Controlling Board action number and approval date.

The authority for this fund is found in Section 220.10 of Am. Sub. H.B 169 of the 134th General Assembly.

2. Explain all major sources of revenue deposited into this fund and the assumptions used in developing revenue estimates. If this fund receives grants, please fill out the grants table.

The source of revenue to the fund is the enhanced FMAP (+10%) for certain home-and-community-based services under section 9817 of the American Rescue Plan Act of 2021. This enhanced FMAP was available April 1, 2021, to March 30 2022.

3. Identify and explain patterns in revenue flow in this fund (e.g., all revenue received in May and June due to seasonal nature of renewals; revenues received evenly throughout the fiscal year, etc.).

Revenue to the fund was one time and is not expected to continue in FY 26-27.

4. What is the target ending cash balance for this fund, as either a percentage of revenue or months of expenditures? What is the rationale for this target?

The target ending cash balance is \$0.00 as of June 30, 2025. All funds received through the enhanced FFP because of the American Rescue Plan Act must be disbursed by this date.

5. If there are any "transfers-in" or "transfers-out" shown on the Fund Activity Summary for this fund, explain the source or recipient and the legal authority for each transfer.

None.

ALI Q&A for 651698 MCD Home and Community Services

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

Am. Sub. H.B. No. 169 appropriated expenditures in ALI 651698 - MCD Home and Community Based Services. Expenditures shall be used in accordance with Section 9817 of the "American Rescue Plan Act of 2021," Pub. L. No. 117-2, and shall comply with the Department of Medicaid's Medicaid state plan approved by the United States CMS and any associated CMS guidance, reporting requirements, and certifications.

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

No appropriation is being requested in SFY 26/27.

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

N/A

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

N/A

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

N/A

Fund Question and Answer for 5R20 Nursing Home Franchise Prmt Fee

1. Explain the legal authority of this fund, including the Ohio Revised Code chapter, the section of temporary (uncodified) law, and/or the Controlling Board action number and approval date.

The legal authority for this fund is found in ORC 5168.54.

2. Explain all major sources of revenue deposited into this fund and the assumptions used in developing revenue estimates. If this fund receives grants, please fill out the grants table.

The primary source of revenue for this fund is the nursing facilities franchise fee. The fund receives no grant revenue.

3. Identify and explain patterns in revenue flow in this fund (e.g., all revenue received in May and June due to seasonal nature of renewals; revenues received evenly throughout the fiscal year, etc.).

The nursing facility franchise fee is calculated at the beginning of the state fiscal year and billed on a federal fiscal year basis. Amounts are due from the facilities not later than forty-five days after the last day of each October, December, March, and June per ORC 5168.47. Most of the revenue is collected and available as cash in the fund the month following these dates after accounting for processing time.

4. What is the target ending cash balance for this fund, as either a percentage of revenue or months of expenditures? What is the rationale for this target?

The cash balance varies depending on quarterly receipts and disbursements. Cash balances increase during the months the fees are due. Year-end balances should be approximately \$22 million. Accounts payables close out mid-month; therefore, much of the revenue received in June is not available to spend.

5. If there are any "transfers-in" or "transfers-out" shown on the Fund Activity Summary for this fund, explain the source or recipient and the legal authority for each transfer.

Section 333.350 of Am. Sub. HB 33 of the 135th assembly required a transfer from this fund to the Department of Aging to support the Ombudsman Support Fund and a second transfer to the Department of Health to support the Quality, Monitoring, and Inspection Fund. This language will be continued in the FY 26/27 agency submission with a transfer of \$9.3 million and \$5 million to the Department of Aging and the Department of Health, respectively in each fiscal year. Section 333.90 of Am. Sub. HB 33 required a transfer of \$1 million from 5DL0 (Health Care/Medicaid Support and Recoveries Fund) to the Department of Aging for the Ombudsman program. In FY 26/27 ODM is consolidating this transfer in this fund.

ALI Q&A for 651608 Medicaid Services-Long Term

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

The line item is authorized to make Medicaid payments to providers of nursing facility services and providers of home- and-community-based services. Currently, the line item is used to offset state share of these expenses in ALI 651525.

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

Utilization of this ALI is contingent on the revenue generated by the nursing home franchise fee.

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

N/A

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

The increase request is due to an increase in GRF offsets in the requesting biennium.

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

N/A

Fund Question and Answer for 5TN0 HEALTH INSURING CORPORATION CLASS FRANCHISE FEE

1. Explain the legal authority of this fund, including the Ohio Revised Code chapter, the section of temporary (uncodified) law, and/or the Controlling Board action number and approval date.

The legal authority for the fund is Ohio Revised Code Section 5168.85 and the fee is authorized by Ohio Rev Code Section 5168.76. The fund was created in the FY18/19 biennial budget. (Am. Sub. H. B. 49).

2. Explain all major sources of revenue deposited into this fund and the assumptions used in developing revenue estimates. If this fund receives grants, please fill out the grants table.

Revenue deposited into this fund is from a franchise fee on all health insuring corporation (HICs) plans. The tax rate ranges from \$26-\$56 per Medicaid member month and \$1-\$2 per non-Medicaid member month. The fund receives no grant revenue.

3. Identify and explain patterns in revenue flow in this fund (e.g., all revenue received in May and June due to seasonal nature of renewals; revenues received evenly throughout the fiscal year, etc.).

Revenue is received on a monthly basis and will vary based on plan enrollment.

4. What is the target ending cash balance for this fund, as either a percentage of revenue or months of expenditures? What is the rationale for this target?

In SFY 26/27 target cash balance at the end of the biennium is \$70 million which represents roughly one month of revenue.

5. If there are any "transfers-in" or "transfers-out" shown on the Fund Activity Summary for this fund, explain the source or recipient and the legal authority for each transfer.

None.

ALI Q&A for 651684 Medicaid Services-HIC Fee

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

This line item is used to reimburse health care providers for covered services to Medicaid recipients. The federal match for expenditures from this line item is made from line item 651623, Medicaid Services – Federal.

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

This line item is dependent on the amount of franchise fee collected by the managed care plans. The revenue generated is dependent on the enrollment in managed care which is lower than the last biennium due to the conclusion of the end of continuous eligibility under the public health emergency.

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

There is a federal match for this line item paid via line item 651623.

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

The reduction in request is due to a decrease in GRF offsets in the requesting biennium.

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

N/A

Fund Question and Answer for 5XY0 Hospital Directed Payment Program Fund

1. Explain the legal authority of this fund, including the Ohio Revised Code chapter, the section of temporary (uncodified) law, and/or the Controlling Board action number and approval date.

The authority for this fund is found in Sections 333.175 of H.B. 110 of the 134th G.A.

2. Explain all major sources of revenue deposited into this fund and the assumptions used in developing revenue estimates. If this fund receives grants, please fill out the grants table.

In SFY 26/27 ODM is requesting this fund be abolished.

3. Identify and explain patterns in revenue flow in this fund (e.g., all revenue received in May and June due to seasonal nature of renewals; revenues received evenly throughout the fiscal year, etc.).

N/A

4. What is the target ending cash balance for this fund, as either a percentage of revenue or months of expenditures? What is the rationale for this target?

N/A

5. If there are any "transfers-in" or "transfers-out" shown on the Fund Activity Summary for this fund, explain the source or recipient and the legal authority for each transfer.

ODM is requesting this fund be abolished in SFY 26/27, and any remaining cash balance be transferred to fund 5AN0 (State Directed Payment Fund).

ALI Q&A for 651694 Improvements for Priority Populations

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

As per Section 333.170 of Am. Sub. H.B. No. 33 of the 135th G.A this line item Ohio Invests in Improvements for Priority Populations receiving inpatient and outpatient hospital Medicaid Care Management Services in state university owned hospitals with less than 300 inpatient beds.

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

No Appropriation is being requested in the SFY 26/27 budget request; program payments are being consolidated in ALI 651686 State Directed Payments.

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

N/A

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

N/A

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

N/A

Fund Question and Answer for 6510 Hospital Care Assurance Program

1. Explain the legal authority of this fund, including the Ohio Revised Code chapter, the section of temporary (uncodified) law, and/or the Controlling Board action number and approval date.

The legal authority for this fund is found in ORC 5168.11.

2. Explain all major sources of revenue deposited into this fund and the assumptions used in developing revenue estimates. If this fund receives grants, please fill out the grants table.

The only source of revenue for this fund is Hospital Care Assurance Program (HCAP) assessments from Ohio hospitals. The fund receives no grant revenue.

3. Identify and explain patterns in revenue flow in this fund (e.g., all revenue received in May and June due to seasonal nature of renewals; revenues received evenly throughout the fiscal year, etc.).

The program usually runs during the first quarter of the state fiscal year and before the end of the federal fiscal year in September. Revisions to federal allotments may alter the schedule. Assessments are due 10 working days after deadline established in rule ORC 5162.09.

4. What is the target ending cash balance for this fund, as either a percentage of revenue or months of expenditures? What is the rationale for this target?

Shortly after assessment revenue is received, it is disbursed to hospitals using the HCAP program formula. The ending cash balance each fiscal year is minimal in proportion to the annual revenues deposited into the fund.

5. If there are any "transfers-in" or "transfers-out" shown on the Fund Activity Summary for this fund, explain the source or recipient and the legal authority for each transfer.

The submission requires that \$2.5 million of the HCAP assessment is deposited to the credit of the Health Care/Medicaid Support and Recoveries Fund (Fund 5DL0). This is a continuation of the language in Section 333.70 of Am. Sub. H. B. No. 33, the FY24-FY25 budget bill.

ALI Q&A for 651649 Medicaid Services-Hospital Care Assurance Program

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

This line item funds the Hospital Care Assurance Program (HCAP), which provides subsidy payments to hospitals that provide uncompensated, or charity, care to certain low-income and uninsured individuals.

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

Disproportionate share hospital (DSH) payments and institution for mental disease (IMD) allotments drive the expenditures in this line item. The federal match for this program is paid via line item 651623.

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

N/A

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

This request represents a decrease from SFY25. The funding request is lower due to federal law associated with the Affordable Care Act, where reductions are anticipated if ACA is implemented.

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

N/A

Fund Question and Answer for 3ER0 Health Information Technology

1. Explain the legal authority of this fund, including the Ohio Revised Code chapter, the section of temporary (uncodified) law, and/or the Controlling Board action number and approval date.

Legal authority for this is found in Controlling Board request JFS0100132 in FY 2011.

2. Explain all major sources of revenue deposited into this fund and the assumptions used in developing revenue estimates. If this fund receives grants, please fill out the grants table.

The grant to this fund is the Medicaid Electronic Health Records Incentive as created by the American Recovery and Reinvestment Act of 2009 (Public Law 111-5) Section 4201. The Grant has ended, and the Agency is not expecting to receive any grant money to come to the fund in FY26/27. ODM is requesting this fund be abolished in the requesting biennium.

3. Identify and explain patterns in revenue flow in this fund (e.g., all revenue received in May and June due to seasonal nature of renewals; revenues received evenly throughout the fiscal year, etc.).

N/A

4. What is the target ending cash balance for this fund, as either a percentage of revenue or months of expenditures? What is the rationale for this target?

N/A

5. If there are any "transfers-in" or "transfers-out" shown on the Fund Activity Summary for this fund, explain the source or recipient and the legal authority for each transfer.

N/A

ALI Q&A for 651603 Medicaid and Health Transformation Technology

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

This line item is used for provider electronic health record (EHR) incentives and administrative costs related to the Health Information Technology (HIT) grant.

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

The grant associated with this line item has ended, and no appropriation is being requested in FY26/27.

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

N/A

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

N/A

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

N/A

Fund Question and Answer for 3F00 Health Care Federal Fund

1. Explain the legal authority of this fund, including the Ohio Revised Code chapter, the section of temporary (uncodified) law, and/or the Controlling Board action number and approval date.

Legal authority for this fund is defined in ORC 5162.50.

2. Explain all major sources of revenue deposited into this fund and the assumptions used in developing revenue estimates. If this fund receives grants, please fill out the grants table.

This is the Ohio Department of Medicaid's main federal non-GRF fund. The federal share of service and administrative expenditures not attributable to the GRF or Medicaid sister agency pass through are deposited to this fund. The federal revenue source to this fund is from the Medicaid Title XIX, Money Follows the Person and Children's Health Insurance Program Title XXI grants.

Additionally, the federal share of all Medicaid-related revenues, collections, and recoveries are deposited to this fund, except as otherwise provided by statute or as authorized by controlling board.

The federal share of rebates paid by drug manufacturers to the Department of Medicaid including the federal share of all supplemental drug rebates is also deposited to this fund.

3. Identify and explain patterns in revenue flow in this fund (e.g., all revenue received in May and June due to seasonal nature of renewals; revenues received evenly throughout the fiscal year, etc.).

Federal funds are drawn and deposited as spending occurs in line items associated to this fund. Therefore, revenue estimates follow spending patterns of line items associated with the fund.

4. What is the target ending cash balance for this fund, as either a percentage of revenue or months of expenditures? What is the rationale for this target?

In accordance with the Department of Treasury, regulations 31 CFR Part 205, implementing the Cash Management Improvement Act, cash balances are kept to a three-day maximum to ensure that the timing between receipt of funds and expenditures is minimized.

5. If there are any "transfers-in" or "transfers-out" shown on the Fund Activity Summary for this fund, explain the source or recipient and the legal authority for each transfer.

None.

GRANTS TABLE

Fund Name:	Health Care Federal Fund - 3F00
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Grant Name	Money Follows the Person Rebalancing Demonstration	Medical Assistance Program Admin	Medical Assistance Program Services	Children's Health Insurance Program Admin	Children's Health Insurance Program Services
Assistance Listing Number (if applicable)	93.791	93.778	93.778	93.767	93.767
In this fund, which line items are associated with the grant?	651624 and 651525	651624	651623	651624	651623
ALI(s) providing match or maintenance of effort	651425 and 651525	651425/651685	651639/651656 651608/651684 651694/651649	651425/651685	651639/651656 651608/651684 651694/651649
Match Rate or Maintenance of Effort (MOE) Amount	FMAP + half of state share earned and deposited in SDLO; administration related costs are paid at 50% or 100% FFP.	50%/75%/90%	64.00%	74.80%	74.80%
How is funding allocated to the agency and then granted to the sub-recipients?	This is a demonstration grant and States are allocated funds based on projects at hand. The agency contracts with providers to deliver money follows the person services to long-term care recipients.	The agency is awarded funds quarterly based on their estimates of funds needed to provide medical assistance to the needy. Awards are made quarterly on a federal fiscal year basis. Sub-recipients are funded via contract agreement.	Agency is awarded funds quarterly based on the estimate of funds needed to provide medical assistance to the needy. Awards are made quarterly on a federal fiscal year basis. Sub-recipients are funded via contract agreement.	Allocated to states by block grant. Any sub-recipients funding is granted via contract or grant agreement.	Allocated by federal formula to the state. Any sub-recipients funding is granted via contract or grant agreement.
Is funding continuous or one-time?	Funding continues through calendar year 2027, with the ability to spend until 2031.	Continuous	Continuous	Continuous	Continuous
For each grant (only grants over \$1 M for cabinet agencies), does the agency expect the grant award to decrease, stay the same, or increase in the future? Please explain.	The projects under this grant will be funded as requested.	Grant is funded at a level requested based on state expenditures.	Grant is funded at level requested based on state expenditures.	State can spend up to block grant amount. We do not yet have the block grant amount for FY26/27. We can expect the CHIP block grant to increase with enrollment during FY26/27.	State can spend up to block grant amount. We do not yet have the block grant amount for FY26/27. We can expect the CHIP block grant to increase with enrollment during FY26/27.

ALI Q&A for 651623 Medicaid Services-Federal

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

The purpose of this appropriation line item is to fund the federal share of Medicaid services.

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

Major activities in this line item include the federal share of nursing facility, hospital, prescription drug expenditures, and general Medicaid services.

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

ALI 651623 is the Medicaid Services Federal Match for line items: 651686 – State Directed Payments; 651649 - Medicaid Services - HCAP; 651608 - Medicaid Services - Long Term; 651639 - Medicaid Services - Recoveries; 651656 - MEDICAID – Services - HOSPITAL FF; 651684 - Medicaid Services-HIC Fee; GRF line item 651525 - Medicaid Health Care Services.

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

Funding request represents a decrease over SFY25 due to less utilization of dedicated purpose funds in SFY26 and SFY27.

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

N/A

ALI Q&A for 651624 Medicaid Program Support-Federal

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

This line item provides for the federal share of Medicaid administrative expenses while the state share of these expenditures is provided mostly from GRF line item 651425 Medicaid Program Support – State, and 651685 Medicaid Recoveries-Program Support.

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

This line item represents the federal share of all administrative costs for the Department of Medicaid.

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

Yes, the federal share of administrative Costs for Medicaid School Program, Aging Passport Agencies, Department of Rehabilitation and Corrections, Auditor of State, and Attorney General are funded from this line item.

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

This request represents a minute increase over FY 2025 levels. ODM's contractual operating budgets have been kept flat in this FY 2026-2027 submission.

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

ODM has operationalized new administrative activities that have come from the managed care plans including provider credentialing and pharmacy benefit management that were onboarded in the SFY24-25 biennium. This SFY26-27 request includes continuing operations of this new work.

Fund Question and Answer for 3FA0 Ohp Health Care Grants

1. Explain the legal authority of this fund, including the Ohio Revised Code chapter, the section of temporary (uncodified) law, and/or the Controlling Board action number and approval date.

Legal authority for this fund is Controlling Board action in FY 2011.

2. Explain all major sources of revenue deposited into this fund and the assumptions used in developing revenue estimates. If this fund receives grants, please fill out the grants table.

At this time, there are no grants being received to this fund.

3. Identify and explain patterns in revenue flow in this fund (e.g., all revenue received in May and June due to seasonal nature of renewals; revenues received evenly throughout the fiscal year, etc.).

Revenue follows individual grant timetables.

4. What is the target ending cash balance for this fund, as either a percentage of revenue or months of expenditures? What is the rationale for this target?

There is no target ending cash balance for this fund, as no grants are being received.

5. If there are any "transfers-in" or "transfers-out" shown on the Fund Activity Summary for this fund, explain the source or recipient and the legal authority for each transfer.

None.

ALI Q&A for 651680 Health Care Grants-Federal

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

This ALI is used to expense federal grants received by ODM not pertinent to Medicaid (Title XIX), State Children's Health Insurance Program (SCHIP/Title XXI), or Money Follows the Person Grant (MFP).

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

Costs are driven by the individual federal grants this fund serves.

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

N/A

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

This request represents an increased placeholder in SFY 26/27 over SFY 25 levels.

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

N/A

Fund Question and Answer for 3G50 Interagency Reimbursement

1. Explain the legal authority of this fund, including the Ohio Revised Code chapter, the section of temporary (uncodified) law, and/or the Controlling Board action number and approval date.

In accordance with 42 CFR 431.10, the Ohio Department of Medicaid is the single state agency responsible for the administration of the Ohio Medicaid program; this fund is used primarily for the distribution of federal Medicaid funds to other state agencies.

2. Explain all major sources of revenue deposited into this fund and the assumptions used in developing revenue estimates. If this fund receives grants, please fill out the grants table.

Federal grants received to this fund are from State Survey and Certification, Medical Assistance, and Children's Health Program. These federal grants are drawn to support payments to Medicaid sister agencies that participate in administering Medicaid activities. The federal share of collections from audits and refunds from these sister agencies are also deposited into the fund. Department of Medicaid is the single state agency responsible for the administration of the Ohio Medicaid program. This fund is used primarily for the distribution of federal Medicaid funds to other state sister Medicaid agencies.

3. Identify and explain patterns in revenue flow in this fund (e.g., all revenue received in May and June due to seasonal nature of renewals; revenues received evenly throughout the fiscal year, etc.).

Federal funds are drawn and deposited as spending occurs in line items associated to this fund. Therefore, revenue estimates follow spending patterns of fund associated line item.

4. What is the target ending cash balance for this fund, as either a percentage of revenue or months of expenditures? What is the rationale for this target?

In accordance with the Department of Treasury Regulation 31 CFR Part 205, ODM implements the Cash Management Improvement Act, which limits cash balances to a three-day maximum to ensure that the timing between receipt of funds and expenditures is minimized.

5. If there are any "transfers-in" or "transfers-out" shown on the Fund Activity Summary for this fund, explain the source or recipient and the legal authority for each transfer.

None.

GRANTS TABLE

Fund Name:	Interagency Reimbursement - 3G50
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Grant Name	Survey and Certification	Medical Assistance Program Admin--Service	Children's Health Insurance Program Admin--Service
Assistance Listing Number (if applicable)	93.777	93.778	93.767
In this fund, which line items are associated with the grant?	651655	651655	651655
ALI(s) providing match or maintenance of effort	N/A	N/A	N/A
Match Rate or Maintenance of Effort (MOE) Amount	N/A	Varies	25 - 20%
How is funding allocated to the agency and then granted to the sub-recipients?	Department of Health is provided a quarterly award based on an approved annual budget under Title XVIII, IMPACT Act, and quarterly formula grants under Title XIX. As single state agency for Medicaid in Ohio, ODM receives this grant as pass-through for the Department of Health that administers this grant.	Agency is awarded funds quarterly based on their estimates of funds needed to provide medical assistance to the needy. Awards are made quarterly on a fiscal year basis. Sub-recipient funds are granted via contract agreement.	Allocated by federal formula to the state. Any sub-recipients funding is granted via contract or grant agreement.
Is funding continuous or one-time?	Continuous	Continuous	Continuous
For each grant (only grants over \$1 M for cabinet agencies), does the agency expect the grant award to decrease, stay the same, or increase in the future? Please explain.	Grant is funded at level requested based on state expenditures.	Grant is funded at level requested based on state expenditures.	State can spend up to block grant amount. We do not yet have the block grant amount for FY26/27. We can expect the CHIP block grant to increase with enrollment during FY26/27.

ALI Q&A for 651655 Medicaid Intragency Pass Through

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

This line item is used to disburse federal reimbursement to other agencies for Medicaid expenditures they have made. The departments of Aging, Developmental Disabilities, Education, Health, Children and Youth, and Mental Health and Addiction Services assist ODM in administering certain Medicaid programs/services and receive federal reimbursements for services provided and related administration.

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

Costs are driven by sister Medicaid agency expenditures. Sister Medicaid agencies may be reimbursed through ISTVs and/or cost report settlements.

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

This line item is used to disburse federal reimbursement to other agencies for their Medicaid-related expenditures. The departments of Aging, Developmental Disabilities, Education, Health, and Mental Health and Addiction Services. These agencies in collaboration with ODM assist in administering certain Medicaid programs/services and receive federal reimbursements for doing so.

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

This request represents an increase over SFY25 levels. Interagency federal passthroughs are expected to increase due to demands from sister agencies.

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

N/A

Fund Question and Answer for 3HC8 ARPA Home and Community Based Services - Federal

1. Explain the legal authority of this fund, including the Ohio Revised Code chapter, the section of temporary (uncodified) law, and/or the Controlling Board action number and approval date.

The legal authority for this fund is found in Section 220.10 of Am. Sub H.B. 169 of the 134th GA.

2. Explain all major sources of revenue deposited into this fund and the assumptions used in developing revenue estimates. If this fund receives grants, please fill out the grants table.

The source of revenue to the fund is the enhanced FMAP (+10%) for certain home-and-community-based services under section 9817 of the American Rescue Plan Act of 2021. This enhanced FMAP was available April 1, 2021, to March 30 2022.

3. Identify and explain patterns in revenue flow in this fund (e.g., all revenue received in May and June due to seasonal nature of renewals; revenues received evenly throughout the fiscal year, etc.).

Revenue to the fund was one time and is not expected to continue in FY 26-27.

4. What is the target ending cash balance for this fund, as either a percentage of revenue or months of expenditures? What is the rationale for this target?

The target ending cash balance is \$0.00 as of June 30, 2025. All funds received through the enhanced FFP because of the American Rescue Plan Act must be disbursed by this date.

5. If there are any "transfers-in" or "transfers-out" shown on the Fund Activity Summary for this fund, explain the source or recipient and the legal authority for each transfer.

None.

ALI Q&A for 651699 MCD Home and Community Based Services - Federal

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

Am. Sub. H.B. No. 169 appropriated expenditures in ALI 651699 - MCD Home and Community Based Services - Federal. Expenditures shall be used in accordance with Section 9817 of the "American Rescue Plan Act of 2021," Pub. L. No. 117-2, and shall comply with the Department of Medicaid's Medicaid state plan approved by the United States Centers for Medicare and Medicaid Services (CMS) and any associated CMS guidance, reporting requirements, and certifications.

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

No appropriation is being requested in SFY 26/27.

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

N/A

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

N/A

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

N/A

Fund Question and Answer for R055 Refunds and Reconciliation

1. Explain the legal authority of this fund, including the Ohio Revised Code chapter, the section of temporary (uncodified) law, and/or the Controlling Board action number and approval date.

This fund was created in Am. Sub H.B. 59 Section 323.10.

2. Explain all major sources of revenue deposited into this fund and the assumptions used in developing revenue estimates. If this fund receives grants, please fill out the grants table.

Revenue deposited into this fund is from checks received by the agency whose disposition cannot be determined at the time of receipt.

3. Identify and explain patterns in revenue flow in this fund (e.g., all revenue received in May and June due to seasonal nature of renewals; revenues received evenly throughout the fiscal year, etc.).

Revenue deposited into this fund has no discernible pattern.

4. What is the target ending cash balance for this fund, as either a percentage of revenue or months of expenditures? What is the rationale for this target?

Since this is a temporary holding account, any cash balance is held until the distribution can be made to the appropriate fund. Cash balance should be minimal.

5. If there are any "transfers-in" or "transfers-out" shown on the Fund Activity Summary for this fund, explain the source or recipient and the legal authority for each transfer.

No

ALI Q&A for 651644 Refunds and Reconciliation

1. Provide a brief overview of the ALI, including the purpose, populations served and/or regulated, and services and/or activities that are provided.

This line item allows refunds to be made once disposition of checks held in this account are known. The fund associated with this line item is a holding account for checks the departments receives whose disposition is unknown at time of receipt.

2. What drives the cost supported by this ALI (e.g., trends in demographics, caseloads, changes in federal/state regulations)? If this ALI serves as a passthrough to other state or local entities, not including central service charges, also describe the distribution methodology.

Since this ALI/Fund acts only as a holding account for deposits, costs are not passed to other agencies or ALIs.

3. Do changes to this ALI impact spending in other areas of this agency or another agency excluding lines related to Medicaid (65xxxx)? If yes, identify the ALI(s) and describe the relationship (e.g., federal/state matches, Memorandum(s) of Understanding, or other financial partnerships between agencies).

No

4. If the request represents an increase or decrease from FY 2025 levels, please explain what is driving the difference.

There is an increase request due to anticipated usage of the fund.

5. Provide any additional information concerning this ALI not included above that will serve to assist OBM in the analysis of this request.

N/A

BEA-0003 Fund Activity Summary for Operating Budget Request

4E30 Residents Protection
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Beginning Cash Balance	12,024,073	11,281,117	12,234,708	17,114,358	17,183,758	15,279,757
4500 RECOVERIES AND REIMBURSEMENTS	1,427,369	4,727,469	4,892,434	5,096,000	5,096,000	5,096,000
Total Receipts Net of Accounts Receivable	1,427,369	4,727,469	4,892,434	5,096,000	5,096,000	5,096,000
885500 OPER TRANSFER IN-OTHER	0	0	295,721	0	0	0
Total Transfers In	0	0	295,721	0	0	0
Net Receipts	1,427,369	4,727,469	5,188,155	5,096,000	5,096,000	5,096,000
Total Resources Available	13,451,442	16,008,586	17,422,863	22,210,358	22,279,758	20,375,757
500 Personal Services	101,536	148,364	160,570	151,454	150,750	163,266
550 Subsidies Shared Revenue	1,676,048	3,366,773	147,935	3,875,146	5,849,250	5,836,734
595 Transfers and Non-Expense	392,742	258,742	0	1,000,000	1,000,000	1,000,000
Total Disbursements	2,170,325	3,773,878	308,505	5,026,600	7,000,000	7,000,000
Total Transfers Out	0	0	0	0	0	0
Total Use of Funds	2,170,325	3,773,878	308,505	5,026,600	7,000,000	7,000,000
Net Cash Balance	11,281,117	12,234,708	17,114,358	17,183,758	15,279,757	13,375,757

Calculated Data Item	Item Calculation
Total Receipts Net of Accounts Receivable	Actuals Revenue less change in Accounts Receivable
Total Resources Available	Beginning Cash Balance + Total Receipts + Transfers In
Total Disbursements	Sum of Expenses
Total Use of Funds	Total Disbursements + Transfers Out

BEA-0003 Fund Activity Summary for Operating Budget Request

4E30 Residents Protection
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Net Cash Balance	Total Resources Available - Total Use of Funds					

BEA-0003 Fund Activity Summary for Operating Budget Request

4K10 ICF MR Bed Assessments.
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Beginning Cash Balance	1,390,281	0	1,393,317	1,387,966	1,387,966	1,387,966
4200 BUSINESS LICENSES & FEES	0	2	0	0	0	0
4700 ISTVS	4,310,926	7,073,663	5,532,848	4,966,889	4,967,000	4,967,000
1027 102700 INTERFUND RECEIVABLE	0	0	0	0	0	0
Total Receipts Net of Accounts Receivable	4,310,926	7,073,665	5,532,848	4,966,889	4,967,000	4,967,000
Total Transfers In	0	0	0	0	0	0
Net Receipts	4,310,926	7,073,665	5,532,848	4,966,889	4,967,000	4,967,000
Total Resources Available	5,701,206	7,073,665	6,926,165	6,354,855	6,354,966	6,354,966
Total Disbursements	0	0	0	0	0	0
887500 OPER TRANSFER OUT-OTHER	5,701,206	5,680,348	5,538,199	4,966,889	4,967,000	4,967,000
Total Transfers Out	5,701,206	5,680,348	5,538,199	4,966,889	4,967,000	4,967,000
Total Use of Funds	5,701,206	5,680,348	5,538,199	4,966,889	4,967,000	4,967,000
Net Cash Balance	0	1,393,317	1,387,966	1,387,966	1,387,966	1,387,966

Calculated Data Item	Item Calculation
Total Receipts Net of Accounts Receivable	Actuals Revenue less change in Accounts Receivable
Total Resources Available	Beginning Cash Balance + Total Receipts + Transfers In
Total Disbursements	Sum of Expenses
Total Use of Funds	Total Disbursements + Transfers Out
Net Cash Balance	Total Resources Available - Total Use of Funds

BEA-0003 Fund Activity Summary for Operating Budget Request

5AN0 Care Innovation and Community Improvement Program
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Beginning Cash Balance	21,216,220	17,407,921	12,776,484	3,279,702	129,002	10,746,002
4500 RECOVERIES AND REIMBURSEMENTS	68,890,119	65,711,395	64,207,447	83,500,000	190,500,000	190,500,000
1029 102900 ACCOUNTS RECEIVABLE	0	2	(2)	0	0	0
Total Receipts Net of Accounts Receivable	68,890,119	65,711,392	64,207,449	83,500,000	190,500,000	190,500,000
885500 OPER TRANSFER IN-OTHER	1,245,241	0	0	0	0	0
Total Transfers In	1,245,241	0	0	0	0	0
Net Receipts	70,135,360	65,711,392	64,207,449	83,500,000	190,500,000	190,500,000
Total Resources Available	91,351,580	83,119,313	76,983,933	86,779,702	190,629,002	201,246,002
550 Subsidies Shared Revenue	73,943,660	70,342,829	73,704,231	86,650,700	179,883,000	179,953,000
Total Disbursements	73,943,660	70,342,829	73,704,231	86,650,700	179,883,000	179,953,000
Total Transfers Out	0	0	0	0	0	0
Total Use of Funds	73,943,660	70,342,829	73,704,231	86,650,700	179,883,000	179,953,000
Net Cash Balance	17,407,921	12,776,484	3,279,702	129,002	10,746,002	21,293,002

Calculated Data Item	Item Calculation
Total Receipts Net of Accounts Receivable	Actuals Revenue less change in Accounts Receivable
Total Resources Available	Beginning Cash Balance + Total Receipts + Transfers In
Total Disbursements	Sum of Expenses
Total Use of Funds	Total Disbursements + Transfers Out
Net Cash Balance	Total Resources Available - Total Use of Funds

BEA-0003 Fund Activity Summary for Operating Budget Request

5DLO Support and Recoveries
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Beginning Cash Balance	273,245,459	372,169,427	479,116,681	167,090,025	214,848,737	51,071,019
4200 BUSINESS LICENSES & FEES	2,500,040	2,500,463	2,500,089	0	0	0
4400 FEDERAL GRANTS	63,138,345	60,684,372	77,185,885	60,427,636	44,414,000	45,721,000
4500 RECOVERIES AND REIMBURSEMENTS	658,910,672	740,481,740	616,328,407	1,271,411,776	802,087,000	836,647,000
4700 ISTVS	153,887	2,000,900	11,429,285	0	0	0
1027 102700 INTERFUND RECEIVABLE	(561,473)	0	0	0	0	0
1029 102900 ACCOUNTS RECEIVABLE	3,908,737	3,188,935	9,282,703	0	0	0
Total Receipts Net of Accounts Receivable	721,355,680	802,478,539	698,160,961	1,331,839,412	846,501,000	882,368,000
885500 OPER TRANSFER IN-OTHER	0	0	0	2,500,000	2,500,000	2,500,000
88550 TRANSFERS IN - OTHER (I)	0	0	0	0	0	0
Total Transfers In	0	0	0	2,500,000	2,500,000	2,500,000
Net Receipts	721,355,680	802,478,539	698,160,961	1,334,339,412	849,001,000	884,868,000
Total Resources Available	994,601,139	1,174,647,966	1,177,277,642	1,501,429,437	1,063,849,737	935,939,019
500 Personal Services	589,482	538,523	522,237	0	0	0
510 Purchased Personal Services	30,444,138	38,071,686	48,388,486	42,459,796	58,370,179	57,514,471
520 Supplies and Maintenance	11,959,161	12,006,740	14,789,815	33,345,155	21,658,610	24,343,090
530 Equipment	174,943	499,098	492,522	365,300	575,572	624,452
550 Subsidies Shared Revenue	576,622,004	642,215,645	934,459,301	1,206,567,749	928,331,358	808,181,358
590 Judgments, Settlements & Bonds	0	0	1,821	142,700	143,000	243,000
595 Transfers and Non-Expense	641,984	199,594	644,873	500,000	500,000	500,000
Total Disbursements	620,431,712	693,531,285	999,299,057	1,283,380,700	1,009,578,719	891,406,371

BEA-0003 Fund Activity Summary for Operating Budget Request

5DLO Support and Recoveries
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
887500 OPER TRANSFER OUT-OTHER	2,000,000	2,000,000	10,888,560	3,200,000	3,200,000	3,200,000
Total Transfers Out	2,000,000	2,000,000	10,888,560	3,200,000	3,200,000	3,200,000
Total Use of Funds	622,431,712	695,531,285	1,010,187,617	1,286,580,700	1,012,778,719	894,606,371
Net Cash Balance	372,169,427	479,116,681	167,090,025	214,848,737	51,071,019	41,332,648

Calculated Data Item	Item Calculation
Total Receipts Net of Accounts Receivable	Actuals Revenue less change in Accounts Receivable
Total Resources Available	Beginning Cash Balance + Total Receipts + Transfers In
Total Disbursements	Sum of Expenses
Total Use of Funds	Total Disbursements + Transfers Out
Net Cash Balance	Total Resources Available - Total Use of Funds

BEA-0003 Fund Activity Summary for Operating Budget Request

5FX0 Medicaid Payment Withholding
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Beginning Cash Balance	2,711,997	7,703,045	6,114,393	5,511,523	5,511,523	5,511,523
4500 RECOVERIES AND REIMBURSEMENTS	12,139,223	3,188,839	4,076,626	12,000,000	12,000,000	12,000,000
4700 ISTVS	1,947	0	0	0	0	0
1027 102700 INTERFUND RECEIVABLE	0	0	0	0	0	0
Total Receipts Net of Accounts Receivable	12,141,170	3,188,839	4,076,626	12,000,000	12,000,000	12,000,000
Total Transfers In	0	0	0	0	0	0
Net Receipts	12,141,170	3,188,839	4,076,626	12,000,000	12,000,000	12,000,000
Total Resources Available	14,853,167	10,891,883	10,191,019	17,511,523	17,511,523	17,511,523
595 Transfers and Non-Expense	7,150,122	4,777,490	4,679,496	12,000,000	12,000,000	12,000,000
Total Disbursements	7,150,122	4,777,490	4,679,496	12,000,000	12,000,000	12,000,000
Total Transfers Out	0	0	0	0	0	0
Total Use of Funds	7,150,122	4,777,490	4,679,496	12,000,000	12,000,000	12,000,000
Net Cash Balance	7,703,045	6,114,393	5,511,523	5,511,523	5,511,523	5,511,523

Calculated Data Item	Item Calculation
Total Receipts Net of Accounts Receivable	Actuals Revenue less change in Accounts Receivable
Total Resources Available	Beginning Cash Balance + Total Receipts + Transfers In
Total Disbursements	Sum of Expenses
Total Use of Funds	Total Disbursements + Transfers Out
Net Cash Balance	Total Resources Available - Total Use of Funds

BEA-0003 Fund Activity Summary for Operating Budget Request

5GF0 Medicaid-Hospital
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Beginning Cash Balance	197,408,304	308,443,763	382,640,698	287,379,687	228,840,466	256,754,466
4200 BUSINESS LICENSES & FEES	1,371,089,239	1,415,667,453	1,520,616,890	1,664,825,844	1,747,212,000	1,799,446,000
4700 ISTVS	1,638,071	8,301,817	21,002,919	0	0	0
1029 102900 ACCOUNTS RECEIVABLE	193,948	7,009,873	5,431,700	0	0	0
Total Receipts Net of Accounts Receivable	1,372,533,362	1,416,959,398	1,536,188,109	1,664,825,844	1,747,212,000	1,799,446,000
Total Transfers In	0	0	0	0	0	0
Net Receipts	1,372,533,362	1,416,959,398	1,536,188,109	1,664,825,844	1,747,212,000	1,799,446,000
Total Resources Available	1,569,941,666	1,725,403,161	1,918,828,808	1,952,205,531	1,976,052,466	2,056,200,466
550 Subsidies Shared Revenue	1,261,497,903	1,342,166,523	1,631,449,120	1,723,365,065	1,719,298,000	2,033,672,000
595 Transfers and Non-Expense	0	595,940	0	0	0	0
Total Disbursements	1,261,497,903	1,342,762,463	1,631,449,120	1,723,365,065	1,719,298,000	2,033,672,000
Total Transfers Out	0	0	0	0	0	0
Total Use of Funds	1,261,497,903	1,342,762,463	1,631,449,120	1,723,365,065	1,719,298,000	2,033,672,000
Net Cash Balance	308,443,763	382,640,698	287,379,687	228,840,466	256,754,466	22,528,466

Calculated Data Item	Item Calculation
Total Receipts Net of Accounts Receivable	Actuals Revenue less change in Accounts Receivable
Total Resources Available	Beginning Cash Balance + Total Receipts + Transfers In
Total Disbursements	Sum of Expenses
Total Use of Funds	Total Disbursements + Transfers Out

BEA-0003 Fund Activity Summary for Operating Budget Request

5GF0 Medicaid-Hospital
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Net Cash Balance	Total Resources Available - Total Use of Funds					

BEA-0003 Fund Activity Summary for Operating Budget Request

5HC8 ARPA Home and Community Based Services
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Beginning Cash Balance	0	478,312,647	478,707,040	300,737,576	19,572,213	19,572,213
4400 FEDERAL GRANTS	620,281,203	0	(168,268)	0	0	0
4500 RECOVERIES AND REIMBURSEMENTS	0	49,229	2,989	0	0	0
4700 ISTVS	0	0	16,175,772	0	0	0
Total Receipts Net of Accounts Receivable	620,281,203	49,229	16,010,493	0	0	0
Total Transfers In	0	0	0	0	0	0
Net Receipts	620,281,203	49,229	16,010,493	0	0	0
Total Resources Available	620,281,203	478,361,876	494,717,533	300,737,576	19,572,213	19,572,213
500 Personal Services	0	0	591,111	876,382	0	0
510 Purchased Personal Services	0	0	4,036,943	21,798,162	0	0
520 Supplies and Maintenance	0	0	222,693	4,155,787	0	0
530 Equipment	0	0	0	1,129,770	0	0
550 Subsidies Shared Revenue	141,968,556	(345,164)	172,953,437	202,007,687	0	0
Total Disbursements	141,968,556	(345,164)	177,804,184	229,967,788	0	0
887500 OPER TRANSFER OUT-OTHER	0	0	16,175,772	51,197,575	0	0
Total Transfers Out	0	0	16,175,772	51,197,575	0	0
Total Use of Funds	141,968,556	(345,164)	193,979,956	281,165,363	0	0
Net Cash Balance	478,312,647	478,707,040	300,737,576	19,572,213	19,572,213	19,572,213

Calculated Data Item

Item Calculation

BEA-0003 Fund Activity Summary for Operating Budget Request

5HC8 ARPA Home and Community Based Services
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Total Receipts Net of Accounts Receivable	Actuals Revenue less change in Accounts Receivable					
Total Resources Available	Beginning Cash Balance + Total Receipts + Transfers In					
Total Disbursements	Sum of Expenses					
Total Use of Funds	Total Disbursements + Transfers Out					
Net Cash Balance	Total Resources Available - Total Use of Funds					

BEA-0003 Fund Activity Summary for Operating Budget Request

5R20 Nursing Home Franchise Prmt Fee
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Beginning Cash Balance	9,647,261	6,676,342	9,180,522	27,777,176	50,577,176	36,377,176
4140 OTHER TAXES	1,242,456	937,231	774,644	900,000	900,000	900,000
4200 BUSINESS LICENSES & FEES	419,812,497	411,260,683	432,213,637	450,000,000	450,000,000	450,000,000
4700 ISTVS	1,714,317	3,341,553	1,174,395	1,200,000	1,200,000	1,200,000
1027 102700 INTERFUND RECEIVABLE	0	0	0	0	0	0
1029 102900 ACCOUNTS RECEIVABLE	11,146,695	38,541,061	(5,855,499)	0	0	0
Total Receipts Net of Accounts Receivable	411,622,575	376,998,405	440,018,175	452,100,000	452,100,000	452,100,000
Total Transfers In	0	0	0	0	0	0
Net Receipts	411,622,575	376,998,405	440,018,175	452,100,000	452,100,000	452,100,000
Total Resources Available	421,269,836	383,674,747	449,198,697	479,877,176	502,677,176	488,477,176
550 Subsidies Shared Revenue	413,750,000	374,500,000	414,000,000	414,000,000	450,000,000	450,000,000
595 Transfers and Non-Expense	843,493	(5,775)	121,521	1,000,000	1,000,000	1,000,000
Total Disbursements	414,593,493	374,494,225	414,121,521	415,000,000	451,000,000	451,000,000
887500 OPER TRANSFER OUT-OTHER	0	0	7,300,000	14,300,000	15,300,000	15,300,000
Total Transfers Out	0	0	7,300,000	14,300,000	15,300,000	15,300,000
Total Use of Funds	414,593,493	374,494,225	421,421,521	429,300,000	466,300,000	466,300,000
Net Cash Balance	6,676,342	9,180,522	27,777,176	50,577,176	36,377,176	22,177,176

Calculated Data Item	Item Calculation
Total Receipts Net of Accounts Receivable	Actuals Revenue less change in Accounts Receivable

BEA-0003 Fund Activity Summary for Operating Budget Request

5R20 Nursing Home Franchise Prmt Fee
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Total Resources Available	Beginning Cash Balance + Total Receipts + Transfers In					
Total Disbursements	Sum of Expenses					
Total Use of Funds	Total Disbursements + Transfers Out					
Net Cash Balance	Total Resources Available - Total Use of Funds					

BEA-0003 Fund Activity Summary for Operating Budget Request

STNO HEALTH INSURING CORPORATION CLASS FRANCHISE FEE
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Beginning Cash Balance	249,531,250	248,062,481	354,835,050	270,644,878	47,295,668	64,505,668
4200 BUSINESS LICENSES & FEES	989,531,231	1,057,772,569	979,037,654	915,091,990	897,210,000	885,444,000
Total Receipts Net of Accounts Receivable	989,531,231	1,057,772,569	979,037,654	915,091,990	897,210,000	885,444,000
Total Transfers In	0	0	0	0	0	0
Net Receipts	989,531,231	1,057,772,569	979,037,654	915,091,990	897,210,000	885,444,000
Total Resources Available	1,239,062,481	1,305,835,050	1,333,872,704	1,185,736,868	944,505,668	949,949,668
550 Subsidies Shared Revenue	991,000,000	951,000,000	1,063,227,826	1,138,441,200	880,000,000	880,000,000
Total Disbursements	991,000,000	951,000,000	1,063,227,826	1,138,441,200	880,000,000	880,000,000
Total Transfers Out	0	0	0	0	0	0
Total Use of Funds	991,000,000	951,000,000	1,063,227,826	1,138,441,200	880,000,000	880,000,000
Net Cash Balance	248,062,481	354,835,050	270,644,878	47,295,668	64,505,668	69,949,668

Calculated Data Item	Item Calculation
Total Receipts Net of Accounts Receivable	Actuals Revenue less change in Accounts Receivable
Total Resources Available	Beginning Cash Balance + Total Receipts + Transfers In
Total Disbursements	Sum of Expenses
Total Use of Funds	Total Disbursements + Transfers Out
Net Cash Balance	Total Resources Available - Total Use of Funds

BEA-0003 Fund Activity Summary for Operating Budget Request

5XY0 Hospital Directed Payment Program Fund
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Beginning Cash Balance	0	0	5,154,169	4,997,641	0	0
4200 BUSINESS LICENSES & FEES	7,273,987	6,930,697	7,343,053	5,502,359	0	0
1029 102900 ACCOUNTS RECEIVABLE	0	0	0	0	0	0
Total Receipts Net of Accounts Receivable	7,273,987	6,930,697	7,343,053	5,502,359	0	0
Total Transfers In	0	0	0	0	0	0
Net Receipts	7,273,987	6,930,697	7,343,053	5,502,359	0	0
Total Resources Available	7,273,987	6,930,697	12,497,222	10,500,000	0	0
550 Subsidies Shared Revenue	6,678,047	2,372,467	7,499,581	10,500,000	0	0
595 Transfers and Non-Expense	595,940	(595,940)	0	0	0	0
Total Disbursements	7,273,987	1,776,528	7,499,581	10,500,000	0	0
Total Transfers Out	0	0	0	0	0	0
Total Use of Funds	7,273,987	1,776,528	7,499,581	10,500,000	0	0
Net Cash Balance	0	5,154,169	4,997,641	0	0	0

Calculated Data Item	Item Calculation
Total Receipts Net of Accounts Receivable	Actuals Revenue less change in Accounts Receivable
Total Resources Available	Beginning Cash Balance + Total Receipts + Transfers In
Total Disbursements	Sum of Expenses
Total Use of Funds	Total Disbursements + Transfers Out
Net Cash Balance	Total Resources Available - Total Use of Funds

BEA-0003 Fund Activity Summary for Operating Budget Request

6510 Hospital Care Assurance Program
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Beginning Cash Balance	975,833	1,017,176	1,158,912	1,375,644	1,167,894	3,918,894
4200 BUSINESS LICENSES & FEES	206,953,094	203,833,304	246,040,333	354,000,000	170,000,000	170,000,000
4400 FEDERAL GRANTS	0	0	0	0	0	0
4700 ISTVS	33,955	132,558	165,842	0	0	0
1029 102900 ACCOUNTS RECEIVABLE	1,645	8,477	19,529,275	0	0	0
Total Receipts Net of Accounts Receivable	206,985,404	203,957,386	226,676,900	354,000,000	170,000,000	170,000,000
Total Transfers In	0	0	0	0	0	0
Net Receipts	206,985,404	203,957,386	226,676,900	354,000,000	170,000,000	170,000,000
Total Resources Available	207,961,238	204,974,562	227,835,812	355,375,644	171,167,894	173,918,894
550 Subsidies Shared Revenue	206,944,061	203,042,255	226,460,168	351,707,750	164,749,000	169,517,000
595 Transfers and Non-Expense	0	773,395	0	0	0	0
Total Disbursements	206,944,061	203,815,650	226,460,168	351,707,750	164,749,000	169,517,000
887500 OPER TRANSFER OUT-OTHER	0	0	0	2,500,000	2,500,000	2,500,000
Total Transfers Out	0	0	0	2,500,000	2,500,000	2,500,000
Total Use of Funds	206,944,061	203,815,650	226,460,168	354,207,750	167,249,000	172,017,000
Net Cash Balance	1,017,176	1,158,912	1,375,644	1,167,894	3,918,894	1,901,894

Calculated Data Item	Item Calculation
Total Receipts Net of Accounts Receivable	Actuals Revenue less change in Accounts Receivable
Total Resources Available	Beginning Cash Balance + Total Receipts + Transfers In

BEA-0003 Fund Activity Summary for Operating Budget Request

6510 Hospital Care Assurance Program
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Total Disbursements	Sum of Expenses					
Total Use of Funds	Total Disbursements + Transfers Out					
Net Cash Balance	Total Resources Available - Total Use of Funds					

BEA-0003 Fund Activity Summary for Operating Budget Request

3ER0 Health Information Technology
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Beginning Cash Balance	63,363	45,515	45,515	0	0	0
4400 FEDERAL GRANTS	4,629,143	953,297	124,086	795,500	0	0
4700 ISTVS	84	871	1,114	0	0	0
Total Receipts Net of Accounts Receivable	4,629,226	954,168	125,200	795,500	0	0
885500 OPER TRANSFER IN-OTHER	3,047	0	0	0	0	0
Total Transfers In	3,047	0	0	0	0	0
Net Receipts	4,632,274	954,168	125,200	795,500	0	0
Total Resources Available	4,695,636	999,682	170,715	795,500	0	0
500 Personal Services	258,704	160,053	29,401	0	0	0
510 Purchased Personal Services	2,080,247	793,235	140,199	0	0	0
520 Supplies and Maintenance	74,005	9	0	0	0	0
550 Subsidies Shared Revenue	2,139,822	0	0	795,500	0	0
595 Transfers and Non-Expense	97,260	0	0	0	0	0
Total Disbursements	4,650,038	953,297	169,601	795,500	0	0
887500 OPER TRANSFER OUT-OTHER	84	871	1,114	0	0	0
Total Transfers Out	84	871	1,114	0	0	0
Total Use of Funds	4,650,122	954,168	170,715	795,500	0	0
Net Cash Balance	45,515	45,515	0	0	0	0

Calculated Data Item	Item Calculation
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BEA-0003 Fund Activity Summary for Operating Budget Request

3ER0 Health Information Technology
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Total Receipts Net of Accounts Receivable	Actuals Revenue less change in Accounts Receivable					
Total Resources Available	Beginning Cash Balance + Total Receipts + Transfers In					
Total Disbursements	Sum of Expenses					
Total Use of Funds	Total Disbursements + Transfers Out					
Net Cash Balance	Total Resources Available - Total Use of Funds					

BEA-0003 Fund Activity Summary for Operating Budget Request

3F00 Health Care Federal Fund
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Beginning Cash Balance	13,259,047	15,882,275	27,036,798	231,005,659	10,000,002	10,000,722
4200 BUSINESS LICENSES & FEES	0	1,334,268	33,036,006	0	0	0
4400 FEDERAL GRANTS	8,977,808,438	8,494,659,675	9,637,283,641	8,752,195,261	8,721,145,000	9,051,272,000
4440 FEDERAL REVENUE STIMULUS	21,827,185	(19,532,182)	(6,313,215)	0	0	0
4500 RECOVERIES AND REIMBURSEMENTS	2,084,131,249	2,432,928,499	1,861,656,799	3,047,176,880	2,097,673,000	2,197,671,000
4700 ISTVS	377,146	1,586,286	1,722,456	0	0	0
1027 102700 INTERFUND RECEIVABLE	0	0	0	0	0	0
1029 102900 ACCOUNTS RECEIVABLE	5,136,267	7,899,512	45,872,109	0	0	0
Total Receipts Net of Accounts Receivable	11,079,007,751	10,903,077,034	11,481,513,578	11,799,372,141	10,818,818,000	11,248,943,000
885500 OPER TRANSFER IN-OTHER	360,907	0	0	0	0	0
Total Transfers In	360,907	0	0	0	0	0
Net Receipts	11,079,368,658	10,903,077,034	11,481,513,578	11,799,372,141	10,818,818,000	11,248,943,000
Total Resources Available	11,092,627,706	10,918,959,309	11,508,550,376	12,030,377,800	10,828,818,002	11,258,943,722
500 Personal Services	48,697,368	51,876,222	59,555,615	76,520,305	86,670,423	96,769,193
510 Purchased Personal Services	191,923,345	205,766,674	214,217,005	222,004,850	221,730,916	215,365,441
520 Supplies and Maintenance	86,848,559	85,840,146	95,624,554	127,133,817	122,271,213	119,868,811
530 Equipment	946,491	620,868	631,768	396,578	618,143	669,619
550 Subsidies Shared Revenue	10,747,439,212	10,545,469,292	10,904,900,673	11,593,589,948	10,386,793,586	10,815,586,566
590 Judgments, Settlements & Bonds	0	0	35,679	82,300	83,000	33,000
595 Transfers and Non-Expense	551,849	782,103	857,234	650,000	650,000	650,000
Total Disbursements	11,076,406,824	10,890,355,305	11,275,822,529	12,020,377,798	10,818,817,280	11,248,942,629

BEA-0003 Fund Activity Summary for Operating Budget Request

3F00 Health Care Federal Fund

Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
887500 OPER TRANSFER OUT-OTHER	338,606	1,567,206	1,722,189	0	0	0
Total Transfers Out	338,606	1,567,206	1,722,189	0	0	0
Total Use of Funds	11,076,745,431	10,891,922,511	11,277,544,717	12,020,377,798	10,818,817,280	11,248,942,629
Net Cash Balance	15,882,275	27,036,799	231,005,659	10,000,002	10,000,722	10,001,092

Calculated Data Item	Item Calculation
Total Receipts Net of Accounts Receivable	Actuals Revenue less change in Accounts Receivable
Total Resources Available	Beginning Cash Balance + Total Receipts + Transfers In
Total Disbursements	Sum of Expenses
Total Use of Funds	Total Disbursements + Transfers Out
Net Cash Balance	Total Resources Available - Total Use of Funds

BEA-0003 Fund Activity Summary for Operating Budget Request

3FA0 Ohp Health Care Grants
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Beginning Cash Balance	212,281	212,281	212,281	212,281	212,281	212,281
4400 FEDERAL GRANTS	0	0	0	3,000,000	7,000,000	7,000,000
Total Receipts Net of Accounts Receivable	0	0	0	3,000,000	7,000,000	7,000,000
Total Transfers In	0	0	0	0	0	0
Net Receipts	0	0	0	3,000,000	7,000,000	7,000,000
Total Resources Available	212,281	212,281	212,281	3,212,281	7,212,281	7,212,281
550 Subsidies Shared Revenue	0	0	0	3,000,000	7,000,000	7,000,000
Total Disbursements	0	0	0	3,000,000	7,000,000	7,000,000
Total Transfers Out	0	0	0	0	0	0
Total Use of Funds	0	0	0	3,000,000	7,000,000	7,000,000
Net Cash Balance	212,281	212,281	212,281	212,281	212,281	212,281

Calculated Data Item	Item Calculation
Total Receipts Net of Accounts Receivable	Actuals Revenue less change in Accounts Receivable
Total Resources Available	Beginning Cash Balance + Total Receipts + Transfers In
Total Disbursements	Sum of Expenses
Total Use of Funds	Total Disbursements + Transfers Out
Net Cash Balance	Total Resources Available - Total Use of Funds

BEA-0003 Fund Activity Summary for Operating Budget Request

3G50 Interagency Reimbursement
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Beginning Cash Balance	16,408	209,568	16,408	1,606,868	1	1
4400 FEDERAL GRANTS	90,461,728	149,569,384	155,553,953	256,542,133	261,003,000	261,003,000
4440 FEDERAL REVENUE STIMULUS	0	0	230	0	0	0
4700 ISTVS	(9,874)	943,677	26,726	0	0	0
1027 102700 INTERFUND RECEIVABLE	0	0	0	0	0	0
Total Receipts Net of Accounts Receivable	90,451,854	150,513,060	155,580,909	256,542,133	261,003,000	261,003,000
Total Transfers In	0	0	0	0	0	0
Net Receipts	90,451,854	150,513,060	155,580,909	256,542,133	261,003,000	261,003,000
Total Resources Available	90,468,262	150,722,629	155,597,317	258,149,001	261,003,001	261,003,001
595 Transfers and Non-Expense	90,268,567	150,727,445	154,000,056	258,149,000	261,003,000	261,003,000
Total Disbursements	90,268,567	150,727,445	154,000,056	258,149,000	261,003,000	261,003,000
887500 OPER TRANSFER OUT-OTHER	(9,874)	(21,224)	(9,607)	0	0	0
Total Transfers Out	(9,874)	(21,224)	(9,607)	0	0	0
Total Use of Funds	90,258,694	150,706,221	153,990,449	258,149,000	261,003,000	261,003,000
Net Cash Balance	209,568	16,408	1,606,868	1	1	1

Calculated Data Item	Item Calculation
Total Receipts Net of Accounts Receivable	Actuals Revenue less change in Accounts Receivable
Total Resources Available	Beginning Cash Balance + Total Receipts + Transfers In
Total Disbursements	Sum of Expenses

BEA-0003 Fund Activity Summary for Operating Budget Request

3G50 Interagency Reimbursement
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Total Use of Funds	Total Disbursements + Transfers Out					
Net Cash Balance	Total Resources Available - Total Use of Funds					

BEA-0003 Fund Activity Summary for Operating Budget Request

3HC8 ARPA Home and Community Based Services - Federal
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Beginning Cash Balance	0	982,314	1,010,065	177,409	0	0
4400 FEDERAL GRANTS	362,351,928	(885,666)	221,811,838	257,779,620	0	0
4440 FEDERAL REVENUE STIMULUS	15,423,701	(78,032)	(906)	0	0	0
4500 RECOVERIES AND REIMBURSEMENTS	0	147,814	16,286	0	0	0
4700 ISTVS	0	0	33,922	0	0	0
Total Receipts Net of Accounts Receivable	377,775,629	(815,884)	221,861,139	257,779,620	0	0
Total Transfers In	0	0	0	0	0	0
Net Receipts	377,775,629	(815,884)	221,861,139	257,779,620	0	0
Total Resources Available	377,775,629	166,430	222,871,204	257,957,030	0	0
500 Personal Services	0	0	178,589	370,163	0	0
510 Purchased Personal Services	0	0	677,195	13,291,395	0	0
520 Supplies and Maintenance	0	0	244,766	4,145,787	0	0
530 Equipment	0	0	23,480	100,000	0	0
550 Subsidies Shared Revenue	376,793,315	(843,635)	221,535,843	240,049,684	0	0
Total Disbursements	376,793,315	(843,635)	222,659,873	257,957,029	0	0
887500 OPER TRANSFER OUT-OTHER	0	0	33,922	0	0	0
Total Transfers Out	0	0	33,922	0	0	0
Total Use of Funds	376,793,315	(843,635)	222,693,794	257,957,029	0	0
Net Cash Balance	982,314	1,010,065	177,409	0	0	0

BEA-0003 Fund Activity Summary for Operating Budget Request

3HC8 ARPA Home and Community Based Services - Federal
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Calculated Data Item	Item Calculation					
Total Receipts Net of Accounts Receivable	Actuals Revenue less change in Accounts Receivable					
Total Resources Available	Beginning Cash Balance + Total Receipts + Transfers In					
Total Disbursements	Sum of Expenses					
Total Use of Funds	Total Disbursements + Transfers Out					
Net Cash Balance	Total Resources Available - Total Use of Funds					

BEA-0003 Fund Activity Summary for Operating Budget Request

R055 Refunds and Reconciliation
Agency Bud, Bud A

Account Description	Actual			Estimate	Request	
	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027
Beginning Cash Balance	176,498,121	300,178,097	1,900,344	12,371,702	12,371,702	8,370,037
4100 SALES TAXES	129,719,315	(296,085,264)	24,214,396	10,000,000	10,000,000	10,000,000
4500 RECOVERIES AND REIMBURSEMENTS	(12,327)	0	0	0	0	0
Total Receipts Net of Accounts Receivable	129,706,988	(296,085,264)	24,214,396	10,000,000	10,000,000	10,000,000
Total Transfers In	0	0	0	0	0	0
Net Receipts	129,706,988	(296,085,264)	24,214,396	10,000,000	10,000,000	10,000,000
Total Resources Available	306,205,109	4,092,832	26,114,739	22,371,702	22,371,702	18,370,037
595 Transfers and Non-Expense	6,027,012	2,192,489	13,743,037	10,000,000	14,001,665	14,001,665
Total Disbursements	6,027,012	2,192,489	13,743,037	10,000,000	14,001,665	14,001,665
Total Transfers Out	0	0	0	0	0	0
Total Use of Funds	6,027,012	2,192,489	13,743,037	10,000,000	14,001,665	14,001,665
Net Cash Balance	300,178,097	1,900,344	12,371,702	12,371,702	8,370,037	4,368,372

Calculated Data Item	Item Calculation
Total Receipts Net of Accounts Receivable	Actuals Revenue less change in Accounts Receivable
Total Resources Available	Beginning Cash Balance + Total Receipts + Transfers In
Total Disbursements	Sum of Expenses
Total Use of Funds	Total Disbursements + Transfers Out
Net Cash Balance	Total Resources Available - Total Use of Funds

Customer Standards Survey for Department of Medicaid

1. Has your agency developed and adopted customer service standards? Please write “Yes” or “No.”

Yes

2. If the response to question 1 is “Yes,” please (a) Identify the standards below or attach a list; (b) State when these standards were adopted; and (c) Describe how success of implementation of the standards is monitored.

The Ohio Department of Medicaid (ODM) serves several diverse constituent populations. The department utilizes two separate hotlines to service consumers and providers on an as-needed, up-the minute basis.

The Medicaid Consumer Hotline is administered through a contract with Automated Health Systems. The Hotline is available to answer the questions and facilitate managed care enrollment of the 3 million individuals on Medicaid.

Throughout 2023, the Hotline has received an average of 233,397 calls per month. In order to effectively serve the consumer population, certain standards have been put into place that must be met. The following page illustrates these standards.

3. If the response to question 1 is “No,” please use the space below to detail why no standards have been adopted and any plans that the agency may have with respect to developing standards in the future.

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Table 1· Call Center Service Level Agreements (SLA)

Metric	Description	Required Standard	Frequency
Queue Time or Average Speed of Answer	Time measured from the time the consumer enters the IVR queue to the time the agent is on the phone.	90% of calls answered within 60 seconds	Weekly and Monthly
Abandonment Rate	Percentage of times a call was dropped by the consumer {e.g., due to hold time}.	5%	Weekly and Monthly
Blockage Rate	Percentage of calls offered that are not allowed into the system (e.g., busy signal).	<1%	Weekly and Monthly
First-Call Resolution	The customer is not transferred and there is no follow-up work to complete the customer's inquiry.	70%	Weekly and Monthly
Self-Service Rate	Percentage of self-service (IVR and website) customers able to complete their transaction or transaction request without live agent assistance.	80%	Weekly and Monthly
Response Rate	Percentage of non-real time contacts (e.g., non-business hours voicemail and emails) responded to or attempted within 24 hours or the next business day.	100%	Weekly and Monthly
Response Rate of Constituent Inquires	Percentage of constituent Inquiries responded to or attempted in 48 hours or the next business day.	100%	Monthly
Time to Resolve	The total time between when a request from a customer is made until it is completed (e.g., just cause).	72 Hours	Monthly

**Fee Change Schedule
FY 2026 - FY 2027
Department of Medicaid**

	Fee Proposal 01	Fee Proposal 02	Fee Proposal 03
Fee Name	Hospital Care Assurance Program (HCAP)	Hospital Franchise Fee (HFF)	NF Franchise Fee
Statutory Authority	5168.06	5168.21	5168.41
Frequency of Collection	2 Installments	4 Installments	Quarterly
Fund(s) Receiving Revenue	6510	5GF0	5R20
Line Item(s) Supported	651649	651656	651608
Current Fee Amount	0.76693060%	4.519822% of total facility costs	\$16.47 / \$9.96 per bed, tiered
FY 2025 Fee Revenue	\$270,988,394	\$1,664,825,841	\$487,312,395
Proposed Fee Amount	FY 2026: 0.3095362% FY 2027: 0.2997052%	4.582207% in SFY 2026 and 4.537688% in SFY 27	\$16.50 and \$9.96 per bed
Proposed Change From Current Fee Amount	FY 2026: (\$128,935,619) FY 2027: \$2,043,980	FY 2026: \$86,406,854 FY 2027: \$51,399,708	\$44,214,242
Estimated FY 2026 Revenue	\$141,549,967	\$1,747,211,257	\$487,312,395
Estimated FY 2027 Revenue	\$142,052,775	\$1,799,445,730	\$487,312,395
Date of Last Change	Annually	Annually	Annually
Fee Notes	Currently set to sunset Oct 2025. Payment schedule set annually by rule. Proposed budget language to make permanent in statute.	Payment schedule statutory, unless changed in rule.	-

MAJOR INFORMATION TECHNOLOGY PROJECT WORKSHEET

IT Project Name	Interoperability	Pregnancy Risk Assessment Form - PRAF	Snowflake
Fund	3F00/5DL0	3F00/5DL0	3F00/5DL0
ALI	651624/651685	651624/651685	651624/651685
Actual FY 2024 Cost	\$ -	\$ -	\$ -
Estimated FY 2025 Cost	\$ 2,000,000	\$ 6,000,000	\$ 4,000,000
Requested FY 2026 Cost	\$ 7,000,000	\$ 2,000,000	\$ 3,000,000
Requested FY 2027 Cost	\$ 7,000,000	\$ 2,000,000	\$ 3,000,000
What does this IT system do?	The system will allow members and providers API access to their prior authorization, provider directory, and claims records.	Ohio's Pregnancy Risk Assessment Form (PRAF) allows providers of prenatal services to notify Medicaid, Medicaid contracted managed care plans, the Ohio Department of Health, and SACWIS of a woman's pregnancy and related needs. This notification allows maintenance of eligibility during pregnancy and postpartum, as well as connection to services like transportation, WIC, and Home Visiting. The PRAF is also the entry point for the Comprehensive Maternity Care (CMC) Program.	Snowflake is a cloud-based data platform that offers a single platform for data storage, processing, and analysis. Snowflake operates a platform that provides data storage via cloud computing and allows for data analysis and simultaneous access of data sets with minimal latency. Snowflake is optimized for processing and transforming a large volume of data. The ODM EDW team will use the platform to process our OMES module, OB, and EVV data, and other data to store, transform, and process the Enterprise Data warehouse data marts.
Why is this project needed?	Federal statute	This system will address barriers in healthcare operations and services for improved birth outcomes and reduction in maternal mortality and morbidity in our state in alignment with our governor's identified priorities.	The ODM EDW team will use the platform to process our OMES module, OB, and EVV data, and other data to store, transform, and process the Enterprise Data warehouse data marts. The implementation of Snowflake will allow the state's IOP data platform to operate more efficiently for all other state agencies. This project was requested by the Ohio Department of Administrative Services' IOP data team.
How were the FY 2026-2027 project cost estimated?	Costs were estimated as pre-work with the Fiscal Intermediary vendor prior to the project being started.	The project cost estimate is based on past vendor implemented projects with similar project size.	Based on the ODM EDW data volume, computation and consumption process for OMES, OB and EVV data.
Where is the agency in the investment life cycle? Is there an RFP for this project?	There is no RFP. This system will be implemented as part of OMES Fiscal Intermediary.	We are in the Planning stage, no RFP yet, and we may utilize DBITS instead of RFP for procurement.	No RFP for this project. DAS has MCSA for AWS and Snowflake. ODM EDW Team will use this emerging technology to process our Enterprise Data Warehouse data efficiently and timely manner to maintain our SLA.
Is this a new or replacement system?	This is a new functionality as part of an existing OMES module - Fiscal Intermediary.	This project is a replacement system with enhanced functionalities, extended scope and data interchange.	This is an enhancement and rebuild of our ODM Enterprise Data Warehouse to process the heavy volume OMES module data for our internal analytical team and data sharing with downstream subscribers.