

**As Introduced**

**134th General Assembly  
Regular Session  
2021-2022**

**S. B. No. 17**

**Senator Schaffer**

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**A BILL**

To amend sections 4501.27, 5101.33, 5101.54, 1  
5101.542, 5163.01, 5163.07, 5166.01, and 5166.37 2  
and to enact sections 4141.286, 4141.287, 3  
4141.351, 4141.60, 5101.331, 5101.545, 5101.546, 4  
5101.547, 5101.548, 5120.212, 5163.50, 5163.51, 5  
5163.52, and 5166.45 of the Revised Code 6  
regarding eligibility for the Supplemental 7  
Nutrition Assistance Program and Medicaid, work 8  
and education requirements for certain Medicaid 9  
recipients, requirements for Supplemental 10  
Nutrition Assistance Program electronic benefit 11  
transfer cards, and eligibility for and 12  
overpayments of unemployment compensation. 13

**BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:**

**Section 1.** That sections 4501.27, 5101.33, 5101.54 14  
5101.542, 5163.01, 5163.07, 5166.01, and 5166.37 be amended and 15  
sections 4141.286, 4141.287, 4141.351, 4141.60, 5101.331, 16  
5101.545, 5101.546, 5101.547, 5101.548, 5120.212, 5163.50, 17  
5163.51, 5163.52, and 5166.45 of the Revised Code be enacted to 18  
read as follows: 19

Sec. 4141.286. When determining whether an application for 20  
determination of benefit rights is valid or determining whether 21  
a first claim or additional claim for benefits allows a claimant 22  
to qualify for benefits, in addition to other information 23  
available, the director of job and family services shall do all 24  
of the following: 25

(A) Check the new hires directory maintained by the 26  
department of job and family services under section 3121.894 of 27  
the Revised Code for a new hire report applicable to the 28  
claimant; 29

(B) Check the information in the national directory of new 30  
hires that is made available to the director under section 453 31  
of the "Social Security Act," 42 U.S.C. 653, for the purpose of 32  
administering this chapter; 33

(C) Check the integrity data hub maintained by the 34  
national association of state workforce agencies or a similar 35  
database maintained by a successor organization. 36

Sec. 4141.287. The director of job and family services 37  
shall enter into a data matching agreement with the department 38  
of rehabilitation and correction. The agreement shall require 39  
the director of rehabilitation and correction to provide the 40  
director of job and family services with a searchable list, 41  
updated weekly, identifying all persons committed to the several 42  
institutions governed by the department of rehabilitation and 43  
correction. 44

In addition to other information available, the director 45  
of job and family services shall check the list provided under 46  
this section when determining whether an application for 47  
determination of benefit rights is valid or determining whether 48

a first claim or additional claim for benefits allows a claimant 49  
to qualify for benefits. 50

**Sec. 4141.351.** The director of job and family services 51  
shall develop a written policy regarding the recovery of 52  
unemployment benefit overpayments. In the policy, the director 53  
shall do all of the following: 54

(A) Prioritize the recovery of benefit overpayments that 55  
resulted from fraudulent misrepresentation; 56

(B) Require the recovery of benefit overpayments to the 57  
fullest extent permitted under state and federal law, regardless 58  
of whether the overpayment resulted from fraudulent 59  
misrepresentation or reasons other than fraudulent 60  
misrepresentation; 61

(C) Require a record to be made any time a benefit 62  
overpayment is not recovered because of an exception to recovery 63  
in state or federal law; 64

(D) Require the department to cooperate with the United 65  
States department of labor, or its successor department, to the 66  
greatest extent possible with respect to the detection, 67  
prevention, and recovery of overpayments resulting from 68  
fraudulent misrepresentation, including participating in all 69  
voluntary programs and agreements intended to reduce benefit 70  
fraud that are made available to the state. 71

**Sec. 4141.60.** (A) Beginning one year after the effective 72  
date of this section, and every year thereafter, the director of 73  
job and family services shall prepare a report that includes all 74  
of the following information with respect to the year covered by 75  
the report: 76

(1) The rate of consistency in performing the checks 77

|                                                                        |     |
|------------------------------------------------------------------------|-----|
| <u>required under sections 4141.286 and 4141.287 of the Revised</u>    | 78  |
| <u>Code;</u>                                                           | 79  |
| <u>(2) The types and amounts of improper benefit payments</u>          | 80  |
| <u>detected after they were made;</u>                                  | 81  |
| <u>(3) The types and amount of improper benefit payments</u>           | 82  |
| <u>prevented before they could be made;</u>                            | 83  |
| <u>(4) The total amount of money saved by recovering and</u>           | 84  |
| <u>preventing improper benefit payments;</u>                           | 85  |
| <u>(5) The efficacy of the unemployment fraud detection and</u>        | 86  |
| <u>prevention measures taken by the director;</u>                      | 87  |
| <u>(6) The number and amounts of overpayments that could not</u>       | 88  |
| <u>be recovered under state or federal law and the reason in state</u> | 89  |
| <u>or federal law prohibiting the recovery.</u>                        | 90  |
| <u>(B) The director shall submit the report required under</u>         | 91  |
| <u>division (A) of this section to the speaker of the house of</u>     | 92  |
| <u>representatives, senate president, and the members of the</u>       | 93  |
| <u>standing committees of the senate and the house of</u>              | 94  |
| <u>representatives to which legislation pertaining to this chapter</u> | 95  |
| <u>is customarily referred.</u>                                        | 96  |
| <b>Sec. 4501.27.</b> (A) Except as provided in division (B) of         | 97  |
| this section, on and after September 13, 1997, the registrar of        | 98  |
| motor vehicles, and any employee or contractor of the bureau of        | 99  |
| motor vehicles, shall not knowingly disclose or otherwise make         | 100 |
| available to any person or entity any personal information about       | 101 |
| an individual that the bureau obtained in connection with a            | 102 |
| motor vehicle record.                                                  | 103 |
| (B) (1) On and after September 13, 1997, the registrar, or             | 104 |
| an employee or contractor of the bureau of motor vehicles, shall       | 105 |

disclose personal information, other than sensitive personal 106  
information, about an individual that the bureau obtained in 107  
connection with a motor vehicle record, for use in connection 108  
with any of the following matters to carry out the purposes of 109  
any specified federal automobile-related act: 110

(a) Motor vehicle or driver safety and theft; 111

(b) Motor vehicle emissions; 112

(c) Motor vehicle product alterations, recalls, or 113  
advisories; 114

(d) Performance monitoring of motor vehicles and dealers 115  
by motor vehicle manufacturers; 116

(e) Removal of non-owner records from the original owner 117  
records of motor vehicle manufacturers. 118

(2) In addition to the disclosure required under division 119  
(B)(1) of this section, on and after September 13, 1997, the 120  
registrar, or an employee or contractor of the bureau of motor 121  
vehicles, may disclose personal information, other than 122  
sensitive personal information, about an individual that the 123  
bureau obtained in connection with a motor vehicle record, as 124  
follows: 125

(a) For the use of a government agency, including, but not 126  
limited to, a court or law enforcement agency, in carrying out 127  
its functions, or for the use of a private person or entity 128  
acting on behalf of an agency of this state, another state, the 129  
United States, or a political subdivision of this state or 130  
another state in carrying out its functions; 131

(b) For use in connection with matters regarding motor 132  
vehicle or driver safety and theft; motor vehicle emissions; 133

motor vehicle product alterations, recalls, or advisories; 134  
performance monitoring of motor vehicles, motor vehicle parts, 135  
and dealers; motor vehicle market research activities, 136  
including, but not limited to, survey research; and removal of 137  
non-owner records from the original owner records of motor 138  
vehicle manufacturers; 139

(c) For use in the normal course of business by a 140  
legitimate business or an agent, employee, or contractor of a 141  
legitimate business, but only for one of the following purposes: 142

(i) To verify the accuracy of personal information 143  
submitted to the business, agent, employee, or contractor by an 144  
individual; 145

(ii) If personal information submitted to the business, 146  
agent, employee, or contractor by an individual is incorrect or 147  
no longer is correct, to obtain the correct information, but 148  
only for the purpose of preventing fraud, by pursuing legal 149  
remedies against, or recovering on a debt or security interest 150  
against, the individual. 151

(d) For use in connection with a civil, criminal, 152  
administrative, or arbitral proceeding in a court or agency of 153  
this state, another state, the United States, or a political 154  
subdivision of this state or another state or before a self- 155  
regulatory body, including, but not limited to, use in 156  
connection with the service of process, investigation in 157  
anticipation of litigation, or the execution or enforcement of a 158  
judgment or order; 159

(e) Pursuant to an order of a court of this state, another 160  
state, the United States, or a political subdivision of this 161  
state or another state; 162

(f) For use in research activities or in producing 163  
statistical reports, provided the personal information is not 164  
published, redisclosed, or used to contact an individual; 165

(g) For use by an insurer, insurance support organization, 166  
or self-insured entity, or by an agent, employee, or contractor 167  
of that type of entity, in connection with any claims 168  
investigation activity, anti-fraud activity, rating, or 169  
underwriting; 170

(h) For use in providing notice to the owner of a towed, 171  
impounded, immobilized, or forfeited vehicle; 172

(i) For use by any licensed private investigative agency 173  
or licensed security service for any purpose permitted under 174  
division (B) (2) of this section; 175

(j) For use by an employer or by the agent or insurer of 176  
an employer to obtain or verify information relating to the 177  
holder of a commercial driver's license or permit that is 178  
required under the "Commercial Motor Vehicle Safety Act of 179  
1986," 100 Stat. 3207-170, 49 U.S.C. 2701, et seq., as now or 180  
hereafter amended; 181

(k) For use in connection with the operation of a private 182  
toll transportation facility; 183

(l) For any use not otherwise identified in division (B) 184  
(2) of this section that is in response to a request for 185  
individual motor vehicle records, if the individual whose 186  
personal information is requested completes and submits to the 187  
registrar or deputy registrar a form prescribed by the registrar 188  
by rule giving express consent to such disclosures. 189

(m) For bulk distribution for surveys, marketing, or 190  
solicitations, if the individual whose personal information is 191

requested completes and submits to the registrar or a deputy 192  
registrar a form prescribed by the registrar by rule giving 193  
express consent to such disclosures. 194

(n) For use by a person, state, or state agency that 195  
requests the information, if the person, state, or state agency 196  
demonstrates that it has obtained the written consent of the 197  
individual to whom the information pertains; 198

(o) For any other use specifically authorized by law that 199  
is related to the operation of a motor vehicle or to public 200  
safety. 201

(3) (a) Except as provided in division (B) (3) (b) of this 202  
section, the registrar, or an employee or contractor of the 203  
bureau of motor vehicles, may disclose sensitive personal 204  
information about an individual that the bureau obtained in 205  
connection with a motor vehicle record, only if either of the 206  
following conditions are satisfied: 207

(i) The individual whose personal information is requested 208  
completes and submits to the registrar or deputy registrar a 209  
form prescribed by the registrar by rule giving express consent 210  
to such disclosure; 211

(ii) The disclosure is for one or more of the purposes 212  
described in division (B) (2) (a), (d), (g), or (j) of this 213  
section. 214

(b) Division (B) (3) (a) of this section does not apply to 215  
the disclosure of sensitive personal information that is subject 216  
to section 4501.15 or 4507.53 of the Revised Code. 217

(4) Notwithstanding section 4507.53 of the Revised Code or 218  
any provision of this section, the registrar, or an employee or 219  
contractor of the bureau of motor vehicles, may disclose an 220

individual's photograph or digital image to the department of 221  
job and family services for purposes of section 5101.331 of the 222  
Revised Code. 223

(C) On and after September 13, 1997, an authorized 224  
recipient of personal information about an individual that the 225  
bureau of motor vehicles obtained in connection with a motor 226  
vehicle record, other than a recipient under division (B) (2) (l) 227  
or (m) of this section, may resell or redisclose the personal 228  
information only for a use permitted under division (B) (1), (B) 229  
(2) (a) to (k), (B) (2) (n), or (B) (2) (o) of this section. On and 230  
after September 13, 1997, an authorized recipient of personal 231  
information about an individual under division (B) (2) (l) of this 232  
section may resell or redisclose the information for any 233  
purpose. On and after September 13, 1997, an authorized 234  
recipient of personal information under division (B) (2) (m) of 235  
this section may resell or redisclose the information as 236  
specified pursuant to that division. On and after September 13, 237  
1997, an authorized recipient of personal information about an 238  
individual under division (B) of this section, other than a 239  
recipient under division (B) (2) (l) of this section, that resells 240  
or rediscloses any personal information covered by this section 241  
must keep for a period of five years a record that identifies 242  
each person or entity that receives any of the personal 243  
information and the permitted purpose for which the information 244  
is to be used, and must make all such records available to the 245  
registrar of motor vehicles upon the registrar's request. 246

(D) The registrar may establish and carry out procedures 247  
under which the registrar or the registrar's agents, upon 248  
receipt of a request for personal information on or after 249  
September 13, 1997, that does not satisfy any of the criteria 250  
for disclosure of the information that are set forth in division 251

(B) (1) or (2) of this section, may notify the individual about 252  
whom the information was requested, by regular mail, that the 253  
request was made. Any procedures so adopted shall provide that, 254  
if the registrar or an agent of the registrar mails the notice 255  
to the individual, the registrar or agent shall include with the 256  
notice a copy of the request and conspicuously shall include in 257  
the notice a statement that the information will not be released 258  
unless the individual waives the individual's right to privacy 259  
regarding the information that is granted under this section. 260

(E) The registrar of motor vehicles may adopt any forms 261  
and rules, consistent with but no more restrictive than the 262  
requirements of Public Law No. 130-322, Title XXX, 18 U.S.C. 263  
2721-2725, that are necessary to carry out the registrar's 264  
duties under this section on and after September 13, 1997. 265

(F) As used in this section: 266

(1) "Motor vehicle record" means a record that pertains to 267  
a motor vehicle driver's or commercial driver's license or 268  
permit, a motor vehicle certificate of title, a motor vehicle 269  
registration or motor vehicle identification license plates, or 270  
an identification card issued by the bureau of motor vehicles. 271

(2) "Person" has the same meaning as in section 1.59 of 272  
the Revised Code and does not include this state, another state, 273  
or an agency of this state or another state. 274

(3) "Personal information" means information that 275  
identifies an individual, including, but not limited to, an 276  
individual's photograph or digital image, social security 277  
number, driver or driver's license identification number, name, 278  
telephone number, or medical or disability information, or an 279  
individual's address other than the five-digit zip code number. 280

"Personal information" does not include information pertaining 281  
to a vehicular accident, driving or traffic violation, or 282  
driver's status. 283

(4) "Specified federal automobile-related act" means the 284  
~~"automobile information disclosure act"~~ "Automobile Information 285  
Disclosure Act," 72 Stat. 325, 15 U.S.C. 1231-1233, the "Motor 286  
Vehicle Information and Cost Saving Act," 86 Stat. 947, 15 287  
U.S.C. 1901, et seq., the "National Traffic and Motor Vehicle 288  
Safety Act of 1966," 80 Stat. 718, 15 U.S.C. 1381, et seq., the 289  
"Anti-car Theft Act of 1992," 106 Stat. 3384, 15 U.S.C. 2021, et 290  
seq., and the "Clean Air Act," 69 Stat. 322, 42 U.S.C. 7401, et 291  
seq., all as now or hereafter amended. 292

(5) "Sensitive personal information" means an individual's 293  
photograph or digital image, social security number, or medical 294  
or disability information. 295

**Sec. 5101.33.** (A) As used in this section, "benefits" 296  
means any of the following: 297

(1) Cash assistance paid under Chapter 5107. of the 298  
Revised Code; 299

(2) Supplemental nutrition assistance program benefits 300  
provided under section 5101.54 of the Revised Code; 301

(3) Any other program administered by the department of 302  
job and family services under which assistance is provided or 303  
service rendered; 304

(4) Any other program, service, or assistance administered 305  
by a person or government entity that the department determines 306  
may be delivered through the medium of electronic benefit 307  
transfer. 308

(B) ~~The Subject to section 5101.331 of the Revised Code,~~ 309  
the department of job and family services may make any payment 310  
or delivery of benefits to eligible individuals through the 311  
medium of electronic benefit transfer by doing all of the 312  
following: 313

(1) Contracting with an agent to supply debit cards to the 314  
department of job and family services for use by such 315  
individuals in accessing their benefits and to credit such cards 316  
electronically with the amounts specified by the director of job 317  
and family services pursuant to law; 318

(2) Informing such individuals about the use of the 319  
electronic benefit transfer system and furnishing them with 320  
debit cards and information that will enable them to access 321  
their benefits through the system; 322

(3) Arranging with specific financial institutions or 323  
vendors, county departments of job and family services, or 324  
persons or government entities for individuals to have their 325  
cards credited electronically with the proper amounts at their 326  
facilities; 327

(4) Periodically preparing vouchers for the payment of 328  
such benefits by electronic benefit transfer; 329

(5) Satisfying any applicable requirements of federal and 330  
state law. 331

(C) The department may enter into a written agreement with 332  
any person or government entity to provide benefits administered 333  
by that person or entity through the medium of electronic 334  
benefit transfer. A written agreement may require the person or 335  
government entity to pay to the department either or both of the 336  
following: 337

(1) A charge that reimburses the department for all costs 338  
the department incurs in having the benefits administered by the 339  
person or entity provided through the electronic benefit 340  
transfer system; 341

(2) A fee for having the benefits provided through the 342  
electronic benefit transfer system. 343

(D) The department may designate which counties will 344  
participate in the medium of electronic benefit transfer, 345  
specify the date a designated county will begin participation, 346  
and specify which benefits will be provided through the medium 347  
of electronic benefit transfer in a designated county. 348

(E) The department may adopt rules in accordance with 349  
Chapter 119. of the Revised Code for the efficient 350  
administration of this section and section 5101.331 of the 351  
Revised Code. 352

**Sec. 5101.331.** (A) Except as otherwise provided in this 353  
section, each debit card used to access supplemental nutrition 354  
assistance program benefits shall include both of the following: 355

(1) On the front of the card, a color photograph of at 356  
least one adult member of the household for which the debit card 357  
is issued; 358

(2) On the back of the card, a telephone number that can 359  
be called to report suspected fraud under the supplemental 360  
nutrition assistance program and the address of a web site where 361  
suspected fraud can be reported. 362

(B) Not later than one year after the effective date of 363  
this section, the department of job and family services, in 364  
consultation with the bureau of motor vehicles and the food and 365  
nutrition services of the United States department of 366

agriculture, shall develop a strategy for issuing debit cards 367  
that meet the requirements of division (A) of this section. 368

(C) Subject to division (D) of this section, both of the 369  
following apply: 370

(1) All new debit cards issued on or after the date that 371  
is six months after the date the department develops the 372  
strategy under division (B) of this section shall meet the 373  
requirements of division (A) of this section. 374

(2) Not later than twelve months after the date the 375  
department develops the strategy under division (B) of this 376  
section, each debit card issued before the date that is six 377  
months after the date the department develops the strategy under 378  
division (B) of this section shall be replaced with a debit card 379  
that meets the requirements of division (A) of this section if 380  
the household for which the debit card was issued continues to 381  
participate in the supplemental nutrition assistance program. 382

(D) The requirement of division (A)(1) of this section 383  
does not apply to a debit card issued for a household to which 384  
either of the following applies: 385

(1) The household does not include any adult members. 386

(2) Each of the adult members of the household is sixty 387  
years of age or older; is blind, disabled, or a victim of 388  
domestic violence; or has religious objections to being 389  
photographed. 390

(E) An adult who meets any of the exemption criteria 391  
specified in division (D)(2) of this section may volunteer to 392  
have a color photograph of the adult included on the front of 393  
the debit card of the adult's household. 394

**Sec. 5101.54.** (A) The director of job and family services 395  
shall administer the supplemental nutrition assistance program 396  
in accordance with the Food and Nutrition Act of 2008 (7 U.S.C. 397  
2011 et seq.). The department of job and family services may: 398

(1) Prepare and submit to the secretary of the United 399  
States department of agriculture a plan for the administration 400  
of the supplemental nutrition assistance program; 401

(2) Prescribe forms for applications, certificates, 402  
reports, records, and accounts of county departments of job and 403  
family services, and other matters; 404

(3) Require such reports and information from each county 405  
department of job and family services as may be necessary and 406  
advisable; 407

(4) Administer and expend any sums appropriated by the 408  
general assembly for the purposes of the supplemental nutrition 409  
assistance program and all sums paid to the state by the United 410  
States as authorized by the Food and Nutrition Act of 2008; 411

(5) Conduct such investigations as are necessary; 412

(6) Enter into interagency agreements and cooperate with 413  
investigations conducted by the department of public safety, 414  
including providing information for investigative purposes, 415  
exchanging property and records, passing through federal 416  
financial participation, modifying any agreements with the 417  
United States department of agriculture, providing for the 418  
supply, security, and accounting of supplemental nutrition 419  
assistance program benefits for investigative purposes, and 420  
meeting any other requirements necessary for the detection and 421  
deterrence of illegal activities in the supplemental nutrition 422  
assistance program; 423

(7) Adopt rules in accordance with Chapter 119. of the 424  
Revised Code governing employment and training requirements of 425  
recipients of supplemental nutrition assistance program 426  
benefits, including rules specifying which recipients are 427  
subject to the requirements and establishing sanctions for 428  
failure to satisfy the requirements. The rules shall be 429  
consistent with sections 5101.545 to 5101.548 of the Revised 430  
Code. The rules shall be consistent with 7 U.S.C. 2015, 431  
including its work and employment and training requirements, 432  
and, to the extent practicable, shall provide for the recipients 433  
to participate in work activities, developmental activities, and 434  
alternative work activities described in sections 5107.40 to 435  
5107.69 of the Revised Code that are comparable to programs 436  
authorized by 7 U.S.C. 2015(d) (4). The rules may reference rules 437  
adopted under section 5107.05 of the Revised Code governing work 438  
activities, developmental activities, and alternative work 439  
activities described in sections 5107.40 to 5107.69 of the 440  
Revised Code. 441

(8) ~~Adopt~~ Subject to sections 5101.545 to 5101.548 of the 442  
Revised Code, rules in accordance with section 111.15 of the 443  
Revised Code that are consistent with the Food and Nutrition Act 444  
of 2008, the regulations adopted thereunder, and this section 445  
governing the following: 446

(a) Eligibility requirements for the supplemental 447  
nutrition assistance program; 448

(b) Sanctions for failure to comply with eligibility 449  
requirements; 450

(c) Allotment of supplemental nutrition assistance program 451  
benefits; 452

(d) To the extent permitted under federal statutes and 453  
regulations, a system under which some or all recipients of 454  
supplemental nutrition assistance program benefits subject to 455  
employment and training requirements established by rules 456  
adopted under division (A) (7) of this section receive the 457  
benefits after satisfying the requirements; 458

(e) Administration of the program by county departments of 459  
job and family services; 460

(f) Other requirements necessary for the efficient 461  
administration of the program. 462

~~(9) Submit a plan to the United States secretary of 463  
agriculture for the department of job and family services to 464  
operate a simplified supplemental nutrition assistance program 465  
pursuant to 7 U.S.C. 2035 under which requirements governing the 466  
Ohio works first program established under Chapter 5107. of the 467  
Revised Code also govern the supplemental nutrition assistance 468  
program in the case of households receiving supplemental 469  
nutrition assistance program benefits and participating in Ohio 470  
works first. 471~~

(B) A household that is entitled to receive supplemental 472  
nutrition assistance program benefits and that is determined to 473  
be in immediate need of nutrition assistance shall receive 474  
certification of eligibility for program benefits, pending 475  
verification, within twenty-four hours, or, if mitigating 476  
circumstances occur, within seventy-two hours, after 477  
application, if: 478

(1) The results of the application interview indicate that 479  
the household will be eligible upon full verification; 480

(2) Information sufficient to confirm the statements in 481

the application has been obtained from at least one additional 482  
source, not a member of the applicant's household. Such 483  
information shall be recorded in the case file and shall 484  
include: 485

(a) The name of the person who provided the name of the 486  
information source; 487

(b) The name and address of the information source; 488

(c) A summary of the information obtained. 489

The period of temporary eligibility shall not exceed one 490  
month from the date of certification of temporary eligibility. 491  
If eligibility is established by full verification, benefits 492  
shall continue without interruption as long as eligibility 493  
continues. 494

There is no limit on the number of times a household may 495  
receive expedited certification of eligibility under this 496  
division as long as before each expedited certification all of 497  
the information identified in division (F)(1) of this section 498  
was verified for the household at the last expedited 499  
certification or the household's eligibility was certified under 500  
normal processing standards since the last expedited 501  
certification. 502

At the time of application, the county department of job 503  
and family services shall provide to a household described in 504  
this division a list of community assistance programs that 505  
provide emergency food. 506

(C) Before certifying supplemental nutrition assistance 507  
program benefits, the department shall verify the eligibility of 508  
each household in accordance with division (F) of this section. 509  
All applications shall be approved or denied through full 510

verification within thirty days from receipt of the application 511  
by the county department of job and family services. 512

(D) Nothing in this section shall be construed to prohibit 513  
the certification of households that qualify under federal 514  
regulations to receive supplemental nutrition assistance program 515  
benefits without charge under the Food and Nutrition Act of 516  
2008. 517

(E) Any person who applies for the supplemental nutrition 518  
assistance program shall receive a voter registration 519  
application under section 3503.10 of the Revised Code. 520

(F) (1) In order to verify household eligibility as 521  
required by federal regulations and this section, the department 522  
shall, except as provided in division (F) (2) of this section, 523  
verify at least the following information before certifying 524  
supplemental nutrition assistance program benefits: 525

(a) Household composition; 526

(b) Identity; 527

(c) Citizenship and alien eligibility status; 528

(d) Social security numbers; 529

(e) State residency status; 530

(f) Disability status; 531

(g) Gross nonexempt income; 532

(h) Utility expenses; 533

(i) Medical expenses; 534

(j) Enrollment status in other state-administered public 535  
assistance programs within and outside this state; 536

(k) Any available information related to potential 537  
identity fraud or identity theft. 538

(2) A household's eligibility for supplemental nutrition 539  
assistance program benefits may be certified before all of the 540  
information identified in division (F)(1) of this section is 541  
verified if the household's certification is being expedited 542  
under division (B) of this section. 543

(3) On at least a quarterly basis and consistent with 544  
federal regulations, as information is received by a county 545  
department of job and family services, the county department 546  
shall review and act on information identified in division (F) 547  
(1) of this section that indicates a change in circumstances 548  
that may affect eligibility, to the extent such information is 549  
available to the department. 550

(4) Consistent with federal regulations, as part of the 551  
application for public assistance and before certifying benefits 552  
under the supplemental nutrition assistance program, the 553  
department shall require an applicant, or a person acting on the 554  
applicant's behalf, to verify the identity of the members of the 555  
applicant household. 556

(5)(a) The department shall sign a memorandum of 557  
understanding with any department, agency, or division as needed 558  
to obtain the information identified in division (F)(1) of this 559  
section. 560

(b) The department may contract with one or more 561  
independent vendors to provide the information identified in 562  
division (F)(1) of this section. 563

(c) Nothing in this section prevents the department or a 564  
county department of job and family services from receiving or 565

reviewing additional information related to eligibility not 566  
identified in this section or from contracting with one or more 567  
independent vendors to provide additional information not 568  
identified in this section. 569

(6) The department shall ~~explore joining~~ join a multistate 570  
cooperative, such as the national accuracy clearinghouse, to 571  
identify individuals enrolled in public assistance programs 572  
outside of this state. 573

(G) If the department receives information concerning a 574  
household certified to receive supplemental nutrition assistance 575  
program benefits that indicates a change in circumstances that 576  
may affect eligibility, the department shall take action in 577  
accordance with federal regulations, including verifying unclear 578  
information, providing prior written notice of a change or 579  
adverse action, and notifying the household of the right to a 580  
fair hearing. 581

(H) In the case of suspected fraud, the department shall 582  
refer the case for an administrative disqualification hearing or 583  
to the county prosecutor of the county in which the applicant or 584  
recipient resides for investigation, or both. 585

(I) The department shall adopt rules in accordance with 586  
Chapter 119. of the Revised Code to implement divisions (F) to 587  
(H) of this section. 588

(J) Except as prohibited by federal law, the department 589  
may assign any of the duties described in this section to any 590  
county department of job and family services. 591

**Sec. 5101.542.** Immediately following a county department 592  
of job and family services' certification that a household 593  
determined under division (B) of section 5101.54 of the Revised 594

Code to be in immediate need of nutrition assistance is eligible 595  
for the supplemental nutrition assistance program, the 596  
department of job and family services shall provide for the 597  
household to be sent by regular United States mail an electronic 598  
benefit transfer card containing the amount of benefits the 599  
household is eligible to receive under the program. The card 600  
shall be sent to the member of the household in whose name 601  
application for the supplemental nutrition assistance program 602  
was made or that member's authorized representative. Section 603  
5101.331 of the Revised Code applies to the card. 604

Sec. 5101.545. To the maximum extent permitted by federal 605  
law, the department of job and family services shall require a 606  
household receiving supplemental nutrition assistance program 607  
benefits to report, not later than ten days after the change 608  
becomes known to the household, the changes in circumstances 609  
enumerated for certified change reporting households under 7 610  
C.F.R. 273.12(a)(1). The department shall not exercise the 611  
option under 7 C.F.R. 273.12(a)(5) and (6) to establish a system 612  
of quarterly or simplified reporting in lieu of the change 613  
reporting requirements specified under 7 C.F.R. 273.12(a)(1). 614

Sec. 5101.546. (A) As used in this section, "categorically 615  
eligible household" means a household that is categorically 616  
eligible for supplemental nutrition assistance program benefits 617  
under 7 C.F.R. 273.2(j)(2) or (j)(4). 618

(B) Unless required by federal law, the gross income 619  
limits for an eligible household under the supplemental 620  
nutrition assistance program shall not exceed the standards 621  
specified in section (5)(c) of the "Food and Nutrition Act of 622  
2008," 7 U.S.C. 2014(c). 623

(C) Unless required by federal law, a household shall not 624

be a categorically eligible household if any members receive or 625  
are authorized to receive any noncash, in-kind, or other similar 626  
benefit. 627

**Sec. 5101.547.** The department of job and family services 628  
shall implement the options authorized under 7 C.F.R. 273.11(o) 629  
and (p), under which certain individuals, as a condition of 630  
eligibility for supplemental nutrition assistance program 631  
benefits, must cooperate with the department regarding 632  
establishing paternity and establishing, modifying, and 633  
enforcing a child support order. 634

**Sec. 5101.548.** (A) The department of job and family 635  
services shall compile a written report addressing the 636  
implementation and enforcement of the supplemental nutrition 637  
assistance program, including all of the following information 638  
about the program: 639

(1) The number of households investigated for fraud or 640  
intentional program violations; 641

(2) The total number of those cases referred to the 642  
attorney general for prosecution; 643

(3) Any improper program payments or expenditures and 644  
total monies recovered from those payments or expenditures; 645

(4) Aggregate data concerning improper program payments 646  
and ineligible recipients, reported as a percentage of those 647  
cases investigated and reviewed; 648

(6) The aggregate amount of funds expended by Ohio 649  
recipients through electronic benefit card transactions in each 650  
state other than Ohio. 651

(B) Beginning one year after the effective date of this 652

section, the department shall submit the report quarterly to the 653  
speaker of the house of representatives, the senate president, 654  
and the members of the standing legislative committees having 655  
jurisdiction over the supplemental nutrition assistance program. 656  
The department shall submit the report in accordance with 657  
section 101.68 of the Revised Code. 658

**Sec. 5120.212.** Notwithstanding division (A) of section 659  
5120.21 of the Revised Code, the department of rehabilitation 660  
and correction shall share the records described in that 661  
division with the director of job and family services to the 662  
extent necessary to effectuate the data matching agreement 663  
required under section 4141.287 of the Revised Code. 664

**Sec. 5163.01.** As used in this chapter: 665

~~"Caretaker relative" has the same meaning as in 42 C.F.R.~~ 666  
~~435.4 as that regulation is amended effective January 1, 2014.~~ 667

~~"Expansion eligibility group" means the medicaid-~~ 668  
~~eligibility group described in section 1902(a)(10)(A)(i)(VIII)-~~ 669  
~~of the "Social Security Act," 42 U.S.C. 1396a(a)(10)(A)(i)-~~ 670  
~~(VIII)-.~~ 671

"Federal financial participation" has the same meaning as 672  
in section 5160.01 of the Revised Code. 673

"Federal poverty line" has the same meaning as in section 674  
5162.01 of the Revised Code. 675

"Healthy start component" has the same meaning as in 676  
section 5162.01 of the Revised Code. 677

"Home and community-based services medicaid waiver 678  
component" has the same meaning as in section 5166.01 of the 679  
Revised Code. 680

"Intermediate care facility for individuals with  
intellectual disabilities" and "ICF/IID" have the same meanings  
as in section 5124.01 of the Revised Code.

"Mandatory eligibility groups" means the groups of  
individuals that must be covered by the medicaid state plan as a  
condition of the state receiving federal financial participation  
for the medicaid program.

"Medicaid buy-in for workers with disabilities program"  
means the component of the medicaid program established under  
sections 5163.09 to 5163.098 of the Revised Code.

"Medicaid services" has the same meaning as in section  
5164.01 of the Revised Code.

"Medicaid waiver component" has the same meaning as in  
section 5166.01 of the Revised Code.

"Nursing facility" and "nursing facility services" have  
the same meanings as in section 5165.01 of the Revised Code.

"Optional eligibility groups" means the groups of  
individuals who may be covered by the medicaid state plan or a  
federal medicaid waiver and for whom the medicaid program  
receives federal financial participation.

"Other medicaid-funded long-term care services" has the  
meaning specified in rules adopted under section 5163.02 of the  
Revised Code.

"Parents and other caretaker relatives eligibility group"  
means the medicaid eligibility group that 42 C.F.R. 435.110  
requires the medicaid program to cover.

"Supplemental security income program" means the program  
established by Title XVI of the "Social Security Act," 42 U.S.C.

1381 et seq.

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**Sec. 5163.07.** The medicaid director shall implement the  
option authorized by section 1931(b)(2)(C) of the "Social  
Security Act," ~~section 1931(b)(2)(C),~~ 42 U.S.C. 1396u-1(b)(2)  
(C), to set the income eligibility threshold at ninety per cent  
of the federal poverty line for the parents and other caretaker  
relatives ~~who are covered by the medicaid program under that~~  
~~section of the "Social Security Act~~ eligibility group."

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**Sec. 5163.50.** (A) The medicaid director shall enter into  
the following data matching agreements:

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(1) Agreements with the director of the state lottery  
commission and executive director of the Ohio casino control  
commission, where the director and executive director provide  
the medicaid director with a searchable list identifying all  
individuals with substantial lottery or gambling winnings. The  
director shall check the list at least monthly to determine if  
the information affects any medicaid recipient's eligibility.

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(2) An agreement with the director of health, under which  
the director of health is required to provide the medicaid  
director with a searchable list identifying new and updated  
vital statistics records, including death records. The medicaid  
director shall check the list at least monthly for vital  
statistics records involving medicaid recipients that may affect  
a recipient's eligibility.

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(3) An agreement with the director of job and family  
services, under which the director is required to provide the  
medicaid director with a searchable list of information about  
medicaid recipients that indicates a change in circumstance that  
may impact the recipient's eligibility, including both of the

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following: 738

(a) On a quarterly basis, information about a medicaid 739  
recipient's change in employment or wages. The medicaid director 740  
shall review the information at least quarterly. 741

(b) On a monthly basis, information about potential 742  
changes in residency for a medicaid recipient, as identified by 743  
out-of-state electronic benefit transfer transactions. The 744  
medicaid director shall review the information at least monthly. 745

(C) The agreements required by division (A) of this 746  
section shall describe the manner in which each agency is to 747  
report the information to the department of medicaid. 748

Sec. 5163.51. Unless required by federal law or 749  
regulations, the department of medicaid shall not do any of the 750  
following related to administration of the medicaid program and 751  
medicaid eligibility: 752

(A) Conduct post-enrollment verification of income or 753  
nonincome-related eligibility instead of verifying income and 754  
nonincome-related eligibility before enrollment; 755

(B) Designate itself as a qualified health entity for the 756  
purpose of making presumptive eligibility determinations or for 757  
any purpose not expressly authorized by the Revised Code; 758

(C) Accept self-attestation of income or receipt of other 759  
health insurance coverage; 760

(D) Request approval from the United States centers for 761  
medicare and medicaid services to not exercise both of the 762  
following requirements: 763

(1) To periodically check any available income-related 764  
data sources to verify eligibility; 765

(2) To comply with the public notice requirements related 766  
to proposed changes to the medicaid state plan, as required 767  
under 42 C.F.R. 447.205, 42 C.F.R. 447.57, and 42 C.F.R. 768  
440.386. 769

Sec. 5163.52. If the department of medicaid receives 770  
federal funding for the medicaid program that is contingent on a 771  
temporary maintenance of effort restriction or that otherwise 772  
limits the department's ability to disenroll ineligible medicaid 773  
recipients, such as the requirements under Section 6008 of the 774  
"Families First Coronavirus Response Act," Pub. L. No. 116-127, 775  
the department shall do both of the following: 776

(A) Continue to conduct eligibility redeterminations under 777  
the medicaid program and act on those redeterminations to the 778  
fullest extent permitted under federal law and regulations. 779

(B) Within sixty days of the expiration of the restriction 780  
or limitation, complete an audit in which the department does 781  
all of the following: 782

(1) Completes and acts on eligibility redeterminations for 783  
all medicaid recipients for whom a redetermination has not been 784  
conducted in the past twelve months; 785

(2) Requests approval from the United States centers for 786  
medicare and medicaid services to conduct and act on eligibility 787  
redeterminations on all medicaid recipients who were enrolled 788  
for three or more months during the period of restriction or 789  
limitation; the department shall, within sixty days of any such 790  
approval, conduct and act on the redeterminations; 791

(3) Carries out an additional check of all information 792  
available to the department from agreements under section 793  
5163.50 of the Revised Code to verify the eligibility of all 794

|                                                                          |     |
|--------------------------------------------------------------------------|-----|
| <u>medicaid recipients, and acts on the check;</u>                       | 795 |
| <u>(4) Submits a report summarizing the results of the audit</u>         | 796 |
| <u>to the speaker of the house of representatives and senate</u>         | 797 |
| <u>president in accordance with section 101.68 of the Revised Code.</u>  | 798 |
| <b>Sec. 5166.01.</b> As used in this chapter:                            | 799 |
| "209(b) option" means the option described in section                    | 800 |
| 1902(f) of the "Social Security Act," 42 U.S.C. 1396a(f), under          | 801 |
| which the medicaid program's eligibility requirements for aged,          | 802 |
| blind, and disabled individuals are more restrictive than the            | 803 |
| eligibility requirements for the supplemental security income            | 804 |
| program.                                                                 | 805 |
| "Administrative agency" means, with respect to a home and                | 806 |
| community-based services medicaid waiver component, the                  | 807 |
| department of medicaid or, if a state agency or political                | 808 |
| subdivision contracts with the department under section 5162.35          | 809 |
| of the Revised Code to administer the component, that state              | 810 |
| agency or political subdivision.                                         | 811 |
| "Care management system" has the same meaning as in                      | 812 |
| section 5167.01 of the Revised Code.                                     | 813 |
| "Dual eligible individual" has the same meaning as in                    | 814 |
| section 5160.01 of the Revised Code.                                     | 815 |
| "Enrollee" has the same meaning as in section 5167.01 of                 | 816 |
| the Revised Code.                                                        | 817 |
| "Expansion eligibility group" <del>has the same meaning as in</del>      | 818 |
| <del>section 5163.01 of the Revised Code</del> <u>means the medicaid</u> | 819 |
| <u>eligibility group described in section 1902(a)(10)(A)(i)(VIII)</u>    | 820 |
| <u>of the "Social Security Act," 42 U.S.C. 1396a(a)(10)(A)(i)</u>        | 821 |
| <u>(VIII).</u>                                                           | 822 |

"Federal poverty line" has the same meaning as in section 823  
5162.01 of the Revised Code. 824

"Home and community-based services medicaid waiver 825  
component" means a medicaid waiver component under which home 826  
and community-based services are provided as an alternative to 827  
hospital services, nursing facility services, or ICF/IID 828  
services. 829

"Hospital" has the same meaning as in section 3727.01 of 830  
the Revised Code. 831

"Hospital long-term care unit" has the same meaning as in 832  
section 5168.40 of the Revised Code. 833

"ICDS participant" has the same meaning as in section 834  
5164.01 of the Revised Code. 835

"ICF/IID" and "ICF/IID services" have the same meanings as 836  
in section 5124.01 of the Revised Code. 837

"Integrated care delivery system" and "ICDS" have the same 838  
meanings as in section 5164.01 of the Revised Code. 839

"Level of care determination" means a determination of 840  
whether an individual needs the level of care provided by a 841  
hospital, nursing facility, or ICF/IID and whether the 842  
individual, if determined to need that level of care, would 843  
receive hospital services, nursing facility services, or ICF/IID 844  
services if not for a home and community-based services medicaid 845  
waiver component. 846

"Medicaid buy-in for workers with disabilities program" 847  
has the same meaning as in section 5163.01 of the Revised Code. 848

"Medicaid MCO plan" has the same meaning as in section 849  
5167.01 of the Revised Code. 850

"Medicaid provider" has the same meaning as in section 851  
5164.01 of the Revised Code. 852

"Medicaid services" has the same meaning as in section 853  
5164.01 of the Revised Code. 854

"Medicaid waiver component" means a component of the 855  
medicaid program authorized by a waiver granted by the United 856  
States department of health and human services under section 857  
1115 or 1915 of the "Social Security Act," ~~section 1115 or 1915,~~ 858  
42 U.S.C. 1315 or 1396n. "Medicaid waiver component" does not 859  
include the care management system. 860

"Medically fragile child" means an individual who is under 861  
eighteen years of age, has intensive health care needs, and is 862  
considered blind or disabled under section 1614(a) (2) or (3) of 863  
the "Social Security Act," 42 U.S.C. 1382c(a) (2) or (3). 864

"Nursing facility" and "nursing facility services" have 865  
the same meanings as in section 5165.01 of the Revised Code. 866

"Ohio home care waiver program" means the home and 867  
community-based services medicaid waiver component that is known 868  
as Ohio home care and was created pursuant to section 5166.11 of 869  
the Revised Code. 870

"Parents and other caretaker relatives eligibility group" 871  
has the same meaning as in section 5163.01 of the Revised Code. 872

"Provider agreement" has the same meaning as in section 873  
5164.01 of the Revised Code. 874

"Residential treatment facility" means a residential 875  
facility licensed by the department of mental health and 876  
addiction services under section 5119.34 of the Revised Code, or 877  
an institution certified by the department of job and family 878

services under section 5103.03 of the Revised Code, that serves 879  
children and either has more than sixteen beds or is part of a 880  
campus of multiple facilities or institutions that, combined, 881  
have a total of more than sixteen beds. 882

"Skilled nursing facility" has the same meaning as in 883  
section 5165.01 of the Revised Code. 884

"Unified long-term services and support medicaid waiver 885  
component" means the medicaid waiver component authorized by 886  
section 5166.14 of the Revised Code. 887

**Sec. 5166.37.** (A) The medicaid director shall establish a 888  
medicaid waiver component under which an individual eligible for 889  
medicaid on the basis of being included in the expansion 890  
eligibility group ~~or the parents and other caretaker relatives~~ 891  
eligibility group must satisfy at least one of the following 892  
requirements to be able to enroll in medicaid as part of ~~the~~ 893  
~~expansion eligibility group either of those groups unless exempt~~ 894  
under division (B) of this section: 895

~~(A) Be at least fifty five years of age;~~ 896

~~(B) (1) Be employed at least twenty hours per week,~~ 897  
averaged monthly; 898

~~(C) (2) Be enrolled in ~~school~~ an accredited institution of~~ 899  
higher education or an occupational training program; 900

~~(D) Be .~~ 901

(B) Division (A) of this section does not apply to an 902  
individual to whom any of the following apply: 903

(1) The individual is at least sixty-five years of age. 904

(2) The individual is participating in an alcohol and drug 905

addiction treatment program† 906

~~(E) Have~~. 907

(3) The individual is medically certified as physically or 908  
mentally unfit for employment because of an intensive physical 909  
health care ~~needs~~ need or serious mental illness. 910

(4) The individual personally provides care for either or 911  
both of the following: 912

(a) A child who is under one year of age; 913

(b) A child who has a medical condition or disability that 914  
the medicaid director determines is serious enough to warrant an 915  
exemption under this division. 916

**Sec. 5166.45.** (A) The medicaid director shall establish 917  
waiver components to do all of the following: 918

(1) Notwithstanding 42 U.S.C. 1396w-3(b)(1)(B), permit the 919  
department, or an agency authorized by an agreement entered into 920  
under division (B) of section 5160.30 of the Revised Code, to 921  
independently verify a medical assistance recipient's 922  
eligibility for a medical assistance program before accepting an 923  
eligibility determination for the recipient made by a health 924  
benefit exchange established by the state government of Ohio or 925  
an exchange established by the United States secretary of health 926  
and human services in accordance with the "Patient Protection 927  
and Affordable Care Act," 42 U.S.C. 18041; 928

(2) Prohibit the following adults from being eligible for 929  
or re-enrolling in the program for a period of six months if the 930  
individual fails to report any change in circumstance that 931  
affects the recipient's eligibility for the medicaid program: 932

(a) An adult eligible for medicaid on the basis of being 933

included in the category identified by the department of 934  
medicaid as covered families and children; 935

(b) An adult eligible for medicaid on the basis of being 936  
included in the expansion eligibility group described in section 937  
1902(a)(1)(A)(i)(VIII) of the "Social Security Act," 42 U.S.C. 938  
1396(a)(1)(A)(i)(VIII); 939

(3) Not exercise the requirement of 42 U.S.C. 940  
1396a(a)47(B) that authorizes a hospital to determine if an 941  
individual is eligible for the medicaid program during a 942  
presumptive eligibility period. 943

(4) Determine a medicaid recipient's eligibility once 944  
every six months, instead of once every twelve months as 945  
required by 42 C.F.R. 435.916(a). 946

(5) Not exercise the requirements of 42 C.F.R. 435.916(a) 947  
to redetermine a recipient's eligibility based on information 948  
available to the department without requiring information from 949  
the recipient and to provide the recipient with a prepopulated 950  
renewal form. 951

(B) The department shall report to the speaker of the 952  
house of representatives, the senate president, and the members 953  
of the joint medicaid oversight committee receipt of approval by 954  
the United States centers for medicare and medicaid services of 955  
a waiver submitted under this section. 956

**Section 2.** That existing sections 4501.27, 5101.33, 957  
5101.54 5101.542, 5163.01, 5163.07, 5166.01, and 5166.37 of the 958  
Revised Code are hereby repealed. 959

**Section 3.** Not later than 90 days after the effective date 960  
of this section, the Department of Medicaid shall submit to the 961  
Centers for Medicare and Medicaid Services the waiver requests 962

required under section 5166.45 of the Revised Code. 963

**Section 4.** Sections 1, 2, 3, and 4 of this act take effect 964  
on January 1, 2022. Any sections necessitating approval of a 965  
Medicaid program state plan amendment or Medicaid program waiver 966  
before implementation shall not be implemented until the 967  
approval of the amendment or waiver, or January 1, 2022, 968  
whichever is later. 969