

5101:3-13-01.5 **Fee-for-service ambulatory health care clinics (AHCCs):
family planning clinics.**

Requirements outlined in rule 5101:3-13-01 of the Administrative Code apply to all fee-for-service AHCCs.

(A) Definitions.

- (1) "Family planning," ~~in accordance with rule 5101:3-4-07 of the Administrative Code, is the means, in accordance with rule 5101:3-21-02 of the Administrative Code, of enabling individuals of childbearing age, including minors who can be considered to be sexually active, to determine freely the number and spacing of their children~~preventing or delaying pregnancy.
- (2) "Family planning clinics" are ambulatory health care clinics (AHCCs) whose primary function is to provide family planning services.
- (3) "Family planning services" ~~are defined~~means, in accordance with rule 5101:3-4-075101:3-21-02 of the Administrative Code, pregnancy prevention/contraceptive management services.
- (4) "Qualified family planning provider (QFPP)" ~~means any public or nonprofit health care provider that complies with federal guidelines/standards and receives funding for family planning services either under Title X of the Public Health Services Act or from the Ohio department of health~~this defined in accordance with rule 5101:3-26-01 of the Administrative Code.

(B) Any organization applying to be a medicaid fee-for-service ambulatory health care family planning clinic provider on and after January 1, 2008 must:

- (1) Meet the criteria for fee-for-service AHCC providers in accordance with paragraph (C) of rule 5101:3-13-01 of the Administrative Code; and
- (2) Meet one or more of the following qualifications:
 - (a) Affiliation with the planned parenthood federation of America (PPFA);
 - (b) Receive a grant award for the provision of family planning services under Title X of the Public Health Services Act; or
 - (c) Receive a grant award through the Ohio department of health for family planning services under the child and family health services program; and/or

- (d) Receive a grant award through the Ohio department of health's women's health services, in accordance with rule 3701-68-01 of the Administrative Code.
- (C) Covered services are family planning services, including medical, consultative, and educational services as specified in accordance with rule ~~5101:3-4-075~~5101:3-21-02 of the Administrative Code.
- (D) Coverage limitations set forth in Chapter 5101:3-26 of the Administrative Code apply to AHCCs. ~~Medicaid managed care plan members are permitted to self refer to any qualified family planning provider (QFPP). In accordance with Chapter 5101:3-26 of the Administrative Code, medicaid managed care plans are responsible for payment of claims for family planning services delivered by non-contracting QFPPs at the lesser of one hundred per cent of the Ohio medicaid program fee for service reimbursement rate or billed charges in effect for the date of service.~~

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Certification

Date

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