

**PUBLIC HEARING NOTICE**  
**OHIO DEPARTMENT OF JOB AND FAMILY SERVICES**

**DATE:** November 18, 2011

**TIME:** 10:00 a.m.

**LOCATION:** Room 2925, Rhodes State Office Tower  
30 East Broad Street, Columbus, Ohio 43215

Pursuant to Sections 5111.02, 5111.085, 5111.16, and 5111.17 and Chapter 119. of the Ohio Revised Code (ORC), the director of the Ohio Department of Job and Family Services (ODJFS) gives notice of the department's intent to consider the adoption, amendment, or rescission of the rules identified below and of a public hearing thereon.

The rules identified below are being proposed for adoption, amendment, or rescission to set forth the requirements for the Coordinated Services Program (CSP) in accordance with Amended Substitute House Bill 93 (129<sup>th</sup> General Assembly). The CSP will replace two existing programs, the Primary Alternative Care and Treatment (PACT) program, which applies to consumers who are not enrolled in managed care, and the Controlled Substances and Member Management (CSSM) program, which currently applies to managed care consumers. CSP requires Medicaid consumers whose use of Medicaid services demonstrates a pattern of receiving services at a frequency or in an amount that exceeds medical necessity to obtain certain services from only one pharmacy or only one primary provider of physician services.

Rule 5101:3-20-01, entitled PACT Program: Definitions, is being proposed for rescission to implement provisions of ORC 5111.085, adopted under Am. Sub. H.B. 93, 129th G.A., relating to the administration of the Coordinated Services Program. This rule sets forth definitions relating to the Patient Alternative Care and Treatment Program, which is obsolete. This rule is being replaced by new rule 5101:3-20-01.

Rule 5101:3-20-01, entitled Coordinated Services Program, is being proposed for adoption to implement provisions of ORC 5111.085, adopted under Am. Sub. H.B. 93, 129th G.A., relating to the administration of the Coordinated Services Program. This rule sets forth the operations and policies of the Coordinated Services Program (CSP), which will require some Medicaid consumers to obtain certain Medicaid services from designated providers or designated pharmacies. A consumer may be enrolled in the CSP if he or she received Medicaid services at a frequency or in an amount that exceeded medical necessity. The CSP will replace two existing programs, the Primary Alternative Care and Treatment Program, which applied to Medicaid fee for service consumers, and the Controlled Substances and Member Management Program, which applied to consumers enrolled in Medicaid managed care plans. Individuals enrolled in CSP may be enrolled in fee-for-service Medicaid or in a Medicaid managed care plan. It replaces rescinded rules 5101:3-20-01, 5101:3-20-02 and 5101:3-20-03.

Rule 5101:3-20-02, entitled PACT Program: Operational Components, is being proposed for rescission to implement provisions of ORC 5111.085, adopted under Am. Sub. H.B. 93, 129th G.A., relating to the administration of the Coordinated Services Program. This rule sets forth the operational components of the Primary Care and Alternative Treatment Program, which is obsolete. This rule is being replaced by new rule 5101:3-20-01.

Rule 5101:3-20-03, entitled PACT Program: Provider Participation, is being proposed for rescission to implement provisions of ORC 5111.085, adopted under Am. Sub. H.B. 93, 129th G.A., relating to the administration of the Coordinated Services Program. This rule is being replaced by new rule 5101:3-20-01. This rule sets forth the policies governing a designated provider and/or pharmacy in the Physician Alternative Care and Treatment Program, which is obsolete.

Rule 5101:3-26-01, entitled Managed health care programs: definitions, is being proposed for amendment to implement the provisions of ORC 5111.179, adopted under Am. Sub. H.B. 93, 129th G.A., relating to the administration of the Coordinated Services Program. This rule sets forth the definitions for terms used for Medicaid managed health care programs. One of the changes to the rule removes the definition of the Controlled Substances and Member Management program and replaces it with the Coordinated Services Program (CSP) definition. Additionally, the rule updates the definition for the Ohio Department of Developmental Disabilities.

Rule 5101:3-26-03.1, entitled Managed health care programs: care coordination is being proposed for amendment to implement the provisions of ORC 5111.179, adopted under Am. Sub. H.B. 93, 129th G.A., relating to the administration of the Coordinated Services Program. This rule sets forth care coordination requirements for Medicaid managed care plans (MCPs) and primary care providers. The changes to the rule add language requiring MCPs to implement the Coordinated Services Program (CSP) and provide clarification regarding state hearing rights for MCP members. The changes to the rule also clarify language regarding care coordination with designated providers.

Rule 5101:3-26-08.2, entitled Managed health care programs: member services, is being proposed for amendment to implement the provisions of ORC 5111.179, adopted under Am. Sub. H.B. 93, 129th G.A., relating to the administration of the Coordinated Services Program. This rule sets forth requirements for Medicaid managed care plans to provide services for their members. Changes to the rule include the deletion of a reference to the Controlled Substances and Member Management (CSMM) program, which is being replaced with a reference to the Coordinated Services Program (CSP). Additionally there are two changes to the rule to update cross-references, and the correction of a citation to a federal regulation.

Rule 5101:3-26-08.4, entitled Managed health care programs: MCP grievance system, is being proposed for amendment to implement the provisions of ORC 5111.179, adopted under Am. Sub. H.B. 93, 129th G.A., relating to the administration of the Coordinated Services Program. This rule sets forth requirements for grievances and appeals of actions taken by Medicaid managed care plans that affect consumers. The changes to the rule delete language regarding the Controlled Substances and Member Management (CSMM) program and substitute references to the Coordinated Services Program (CSP). Additionally, the rule updates references to forms.

Rule 5101:3-26-08.5, entitled Managed health care programs: responsibilities for state hearings, is being proposed for amendment to implement the provisions of ORC 5111.179, adopted under Am. Sub. H.B. 93, 129th G.A., relating to the administration of the Coordinated Services Program. This rule sets forth responsibilities that Medicaid managed care plans (MCPs) have in the state hearing process. The changes to the rule replace the reference to the Controlled Substances and Member Management (CSMM) program with the Coordinated Services Program (CSP).

A copy of the proposed rules is available, without charge, to any person affected by the rules, at the address listed below. The rules are also available on the internet at <http://www.registerofohio.state.oh.us/>. A public hearing on the proposed rules will be held at the date, time, and location listed at the top of this notice. Either written or oral testimony will be taken at the public hearing. Additionally, written comments submitted or postmarked no later than the date of the public hearing will be treated as testimony.

Requests for a copy of the proposed rules, or comments on the rules, should be submitted by mail to the Ohio Department of Job and Family Services, Office of Legal and Acquisition Services, 30 East Broad Street, 31<sup>st</sup> Floor, Columbus, Ohio 43215-3414, by fax at (614) 752-8298, or by e-mail at [rules@jfs.ohio.gov](mailto:rules@jfs.ohio.gov).