

**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 St., Columbus, Ohio 43215

Pursuant to sections 5111.02 and 5111.063 and Chapter 119. of the Ohio Revised Code, the director of the Ohio Department of Job and Family Services gives notice of the department's intent to consider the adoption and amendment of rules as identified below and of a public hearing thereon.

Rule 5101:3-1-17, entitled "Eligible Providers," is being proposed for amendment to implement provisions of ORC 5111.063, adopted under Am. Sub. H.B. 153, 129th General Assembly, and section 6401 of the Patient Protection and Affordable Care Act, relating to the provider screening and application fee of the Medicaid program. The rule sets forth the general requirements to be a Medicaid provider and the different entity types of Medicaid providers. Changes to this rule include a change of the title to remove the exemptions of ICFs-MR and Medicaid managed care plans. The exemption for Medicaid managed care plans was incorporated in to the text of the rule while the exemption of Intermediate Care Facilities for the Mentally Retarded (ICFs-MR) was removed. The exemption for ICFs-MR was replaced with a change to paragraph (D)(1)(B) that states ICFs-MR are not required to have an National Provider Identifier to be an eligible Medicaid provider. Paragraph (A)(3) was added to require providers to complete the requirements for the provider screening and application fee in rule 5101:3-1-17.8 of the Administrative Code in order to be an eligible Medicaid provider.

Rule 5101:3-1-17.8, entitled "Provider Screening and Application Fee," is being proposed for adoption to implement provisions of ORC 5111.063, adopted under Am. Sub. H.B. 153, 129th General Assembly, and section 6401 of the Patient Protection and Affordable Care Act, relating to the provider screening and application fee requirements of the Medicaid program. This rule sets forth the requirement that providers meet certain provider screening requirements and pay an associated application fee. The rule defines three provider screening levels (limited, moderate, and high) and establishes the screening level for each provider type. The rule also specifies which providers must also pay an application fee when submitting an enrollment application. Additionally, the rule sets forth the amount of the application fee as determined by the Centers for Medicare and Medicaid Services.

Copies of the proposed rules are available, without charge, to any person affected by the rule(s) 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).