

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

DATE: February 16, 2012
TIME: 10:00 a.m.
LOCATION: 3110B, Rhodes State Office Tower
30 East Broad St., Columbus, Ohio 43215-3414

Pursuant to section 5111.02 and Chapter 119. of the Ohio Revised Code, and 42 CFR 447.205, the director of the Ohio Department of Job and Family Services gives notice of the Department's intent to consider for amendment the rule as identified below and of a public hearing thereon.

This rule is being amended to implement the new Healthcare Common Procedure Coding System (HCPCS) codes that are effective for dates of service on and after January 1, 2012, and to make other changes described further below.

HCPCS, which includes Current Procedural Terminology (CPT) codes, is a medical procedure coding system that is the national standard for reporting medical services for billing and claims payment purposes. This coding system is used by Medicare, state Medicaid programs, private health insurance plans, and managed care plans. The Centers for Medicare and Medicaid Services (CMS), in conjunction with the American Medical Association and other professional groups, update HCPCS on an annual basis. The Department must implement the HCPCS update for the Medicaid program to comply with the federal Health Insurance Portability and Accountability Act (HIPAA), which requires the use of a nationally standardized coding system (45 CFR 162.1000 and 45 CFR 162.1002).

Implementation of the annual HCPCS update by the Department requires Ohio Administrative Code (OAC) rule changes because HCPCS codes are included in OAC rules and/or their appendices that guide the Medicaid program. The following types of HCPCS code changes will be effective for dates of service on and after January 1, 2012: new codes added, obsolete codes deleted, and revised codes implemented; definitional changes; and associated reimbursement changes. New HCPCS codes correspond to services without existing codes or services with existing codes that have been simultaneously rendered obsolete. New HCPCS codes that correspond to services without prior existing codes require coverage and payment decisions that are reflected in the rules and/or their appendices. Revised HCPCS codes correspond to services that have a revised definition.

Rule 5101:3-2-21, entitled "Policies for outpatient hospital services," sets forth covered hospital outpatient services, including reimbursement. Changes include the addition of new HCPCS codes, deletion of obsolete HCPCS codes, and updates to the fee schedules for new 2012 HCPCS codes. Changes also include language updates for the radiology services code range and the deletion of surgical codes that are used only by professional

providers when billing. The Department estimates that there is no fiscal impact resulting from these changes.

A copy of the rule is available, without charge, to any person affected by the rule at the address listed below and at the county departments of job and family services. The rule is also available on the internet at <http://www.registerofohio.state.oh.us/>. A public hearing on the proposed rule 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 rule or comments on the rule should be submitted by mail to the Ohio Department of Job and Family Services, Office of Legal Services, 30 East Broad Street, 31st Floor, Columbus, Ohio 43215-3414, by fax at (614) 752-8298, or by e-mail at rules@jfs.ohio.gov. Comments received may be reviewed at this address.