

**LEGAL NOTICE  
STATE OF OHIO  
DEPARTMENT OF JOB AND FAMILY SERVICES**

Pursuant to Section 5111.02 and Chapter 119 of the Ohio Revised Code and 42CFR 447.205, the Director of the Department of Job and Family Services gives notice of the department's intent to amend rules: 5101:3-1-60, 5101:3-2-21, 5101:3-4-02, 5101:3-4-06, 5101:3-4-12, 5101:3-4-13, and 5101:3-4-17 on an emergency and permanent basis and of a public hearing upon the permanent amendment.

Rule 5101:3-1-60 entitled Medicaid reimbursement contains the physician fee schedule. It is being amended on an emergency basis to be effective for dates of service on and after January 1, 2004 to add new codes, delete obsolete codes, and update the fee schedule for new codes and certain other codes necessitated by the American Medical Association in its 2004 Current Procedural Terminology (CPT) book. It is also being amended on an emergency basis to implement the 2004 Clinical Laboratory fee schedule. Some code changes are necessitated by the Health Insurance Portability and Accountability Act (HIPAA) to delete codes which are not HIPAA compliant and replace these deleted codes with HIPAA compliant codes. The Department estimates that there is no fiscal impact since the new codes are replacing deleted codes.

Rule 5101:3-1-60 is being amended on a permanent basis to incorporate changes made in the emergency filing . Other changes in this filing include listing codes that are valid HCPCS codes but are non-covered by the Department, adding ASC groups to codes to reflect the current level of ASC payment, and revising the prices of eight laboratory codes to match the revised 2004 Clinical Laboratory fee schedule. The Department estimates that there is no fiscal impact since the new codes are replacing deleted codes.

Rule 5101:3-2-21 entitled Policies for outpatient hospital services is being amended on an emergency basis to be effective on or about January 1, 2004, and proposed for permanent amendment to add new 2004 HCPCS codes and delete obsolete HCPCS codes. Additionally, the effective date for HIPAA related changes to outpatient hospital vision service codes is being extended from January 1, 2004 to April 1, 2004. Permanent changes also include the clarification of certain HIPAA compliant modifiers and clarification regarding the use of observation codes. The Department estimates that there is no fiscal impact resulting from these changes.

Rule 5101:3-4-02 entitled Scope of coverage outlines the coverage provisions for services provided under supervision by non-physician personnel in a physician's office. It is being amended on an emergency basis to be effective on or about January 1, 2004, and proposed for permanent amendment to incorporate changes necessitated by HB 95 to facilitate a psychologist's ability to work in a physician's office. The benefits of this provision will also be extended to non-physicians who have their own Medicaid provider type if they are employed by or under contract with a physician. The Department estimates that there is no fiscal impact resulting from these changes.

Rule 5101:3-4-06 entitled Physician visits outlines coverage provisions for all visit services. It is being amended on an emergency basis to be effective on or about January 1, 2004, and proposed for permanent amendment to incorporate coding changes instituted by the American Medical Association in its 2004 Current Procedural Terminology book. The Department estimates that there is no fiscal impact resulting from these changes.

Rule 5101:3-4-12 entitled Immunizations outlines coverage provisions for immunization services. It is being amended on an emergency basis to be effective on or about January 1, 2004, and proposed for permanent amendment to incorporate coding changes instituted by the American Medical Association in its 2004 Current Procedural Terminology book. The Department estimates that there is no fiscal impact resulting from these changes.

Rule 5101:3-4-13 entitled Therapeutic injections and prescribed drugs outlines coverage provisions for therapeutic injections and prescribed drugs. It is being amended on an emergency basis to be effective on or about January 1, 2004, and proposed for permanent amendment to incorporate coding changes instituted by the American Medical Association in its 2004 HCPCS book. The Department estimates that there is no fiscal impact resulting from these changes.

Rule 5101: 3-4-17 entitled Gastroenterology, otorhinolaryngology, endocrinology, neurology, and special dermatology services outlines coverage provisions for these services provided by physician providers of Medicaid services. It is being amended on an emergency basis to be effective on or about January 1, 2004, and proposed for permanent amendment to incorporate coding changes instituted by the American Medical Association in its 2004 Current Procedural Terminology book. The Department estimates that there is no fiscal impact resulting from these changes.

Copies of the emergency and the proposed permanent rules are available for review at <http://jfs.ohio.gov/ols/pubhearings/> in each County Department of Job & Family Services, and on the Internet in the Ohio Register at <http://www.registerofohio.state.oh.us> and are available without charge to any person at the address listed below.

A public hearing on the proposed permanent rules will be held on at 10:00 a.m. on February 17, 2004 in Room 1865, 30 East Broad Street, Columbus, Ohio. Either written or verbal testimony on the proposed rule will be taken at the public hearing. Additionally, written comments submitted or postmarked no later than February 17, 2004 will be treated as testimony.

Requests for copies of the emergency or proposed permanent rules or comments on them should be submitted by mail to 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 [legal@odjfs.state.oh.us](mailto:legal@odjfs.state.oh.us). Written comments may be reviewed at the department at the address listed above.