

**PUBLIC HEARING NOTICE
OFFICE OF MEDICAL ASSISTANCE
OHIO DEPARTMENT OF JOB AND FAMILY SERVICES**

DATE: May 22, 2013

TIME: 10:00 a.m.

LOCATION: Room 3110B, Rhodes State Office Tower, 30 East Broad St., Columbus, Ohio 43215

Pursuant to Sections 5111.01, 5111.0112, 5111.02, 5111.16, 5111.162, and 5111.17, and Chapter 119. of the Ohio Revised Code (ORC), the director of the Office of Medical Assistance gives notice of the office's intent to consider the amendment of the rules identified below and of a public hearing thereon.

The rules identified below are being amended in order to comply with five year rule review requirements, update and clarify provisions for Medicaid managed care plans (MCPs) and change the department's name from the "Ohio Department of Job and Family Services (ODJFS)" to the "Ohio Department of Medicaid (ODM)" in anticipation of the new department being established on July 1, 2013.

Rule 5101:3-26-01, entitled Managed health care programs: definitions, is being proposed for amendment. This rule sets forth definitions related to the Medicaid managed care program and MCPs. Proposed changes to the rule update the definitions of care plan, HealthChek and MCEC (managed care enrollment center), add a reference for the new "Ohio Department of Mental Health and Addiction Services" being established on July 1, 2013; and delete references to the "Ohio Department of Mental Health" and "Ohio Department of Alcohol and Drug Addiction Services."

Rule 5101:3-26-02, entitled Managed health care programs: eligibility, membership, and automatic renewal of membership, is being proposed for amendment. This rule sets forth the eligibility and membership provisions for MCPs. Proposed changes to the rule affect language to identify the groups eligible for Medicaid MCP enrollment, remove the option delaying the effective date of MCP coverage for persons hospitalized on their effective date of coverage, delete the requirement that an assistance group must always be enrolled in the same MCP, and update the prohibitions against discrimination.

Rule 5101:3-26-02.1, entitled Managed health care programs: termination of membership, is being proposed for amendment. This rule sets forth membership termination provisions for MCP members. Proposed changes to the rule add language clarifying when members with nursing facility stays will be disenrolled from the MCP.

Rule 5101:3-26-03, entitled Managed health care programs: covered services, is being proposed for amendment. This rule sets forth the covered services that Medicaid MCPs are required to provide to Medicaid managed care members. This rule is being amended

to comply with five year rule review requirements. Proposed changes to the rule clarify and update the requirements surrounding the medical necessity criteria and the coverage of nursing facility short-term rehabilitative stays for managed care members. The rule amendments also reference the new “Ohio Department of Mental Health and Addiction Services” being established on July 1, 2013.

Rule 5101:3-26-05.1, entitled Managed health care programs: provider services, is being proposed for amendment. This rule sets forth MCP responsibilities to subcontracting providers. This rule is being amended to comply with five year rule review requirements.

Rule 5101:3-26-06, entitled Managed health care programs: program integrity – fraud and abuse, audits, reporting and record retention, is being proposed for amendment. This rule sets forth provisions for Medicaid MCP program integrity, including specific requirements on MCPs to guard against fraud and abuse, audits, the submission of reports, and record retention. Proposed changes to the rule add language to increase the length of time for record retention and require MCPs to provide readily available access to electronic records.

Rule 5101:3-26-08.3, entitled Managed health care programs: member rights, is being proposed for amendment. This rule sets forth the members’ rights requirements for MCPs. This rule is being amended to comply with five year rule review requirements.

Rule 5101:3-26-11, entitled Managed health care programs: managed care plan non-contracting providers, is being proposed for amendment. This rule sets forth requirements for Medicaid MCP non-contracting providers. This rule is being amended to comply with five year rule review requirements.

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 Office of Medical Assistance, c/o Ohio Department of Job and Family Services, Office of Legal and Acquisition 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 upon request.