

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

DATE: September 23, 2005
TIME: 10:00 a.m.
LOCATION: Room 2925, 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 the adoption, amendment, or rescission of the rule or rules as identified below and of a public hearing thereon.

Rule 5101:3-1-09, entitled Medicaid co-payment program [except for consumers enrolled in Medicaid managed health care programs], is being proposed for adoption to establish a general Medicaid co-payment rule in response to Am. Sub. H.B. 66 and Section 5111.0112 of the Revised Code (RC) establishing Medicaid co-payments on dental, vision, non-emergency emergency department services and prescription medications. This rule sets forth general principles of the Medicaid co-payment program for dental, vision, non-emergency emergency department services and prescription medications, what consumers are affected by the co-payment program and what exclusions apply to the Medicaid co-payment program overall. The proposed rule also addresses provider and consumer responsibilities when the consumer is unable to pay the co-payment. This provision will also apply to consumers of Disability Medical Assistance (DMA). The department will propose separate amendments to rule 5101:3-23-01 of the Administrative Code in regards to DMA. The department estimates this will decrease expenditures for dental, vision, non-emergency emergency department services and prescription medications by \$9,946,685 on an annual aggregate basis. These decreased expenditures are reflected separately in the following rules, but should not be counted twice as decreased expenditures.

Rule 5101:3-2-21.1, entitled Consumer co-payments for non-emergency emergency department services, is being proposed for adoption to apply a \$3.00 co-payment to non-emergency emergency department services in accordance with Am. Sub HB 66 and section 5111.0112 of the RC. This rule sets forth a \$3.00 co-payment, per date of service, to non-emergency emergency department services for consumers twenty-one years of age and older. The department estimates this will decrease expenditures for outpatient hospital services by \$1,099,440 on an annual aggregate basis. The estimated impact of this rule is also reflected as a portion of (not an addition to) the total estimated impact of all the co-payment policy changes reflected in companion OAC rule 5101:3-1-09.

Rule 5101:3-5-01 entitled, Dental program: general provisions, is being amended to add terminology regarding the adoption of a modified dental benefit that is less in amount, scope and duration for consumers twenty-one years of age and older includes a co-payment for covered dental services. This proposal implements Section 206.66.44 of Am.

Sub. H.B. 66 and Section 5111.0112 of the RC. The rule is also being reorganized to clarify paragraph headings and dental services reimbursement. The rule title is being changed to, Dental program: general and co-payment provisions, to recognize the establishment of a three dollar consumer co-payment per date of encounter and claim for adult dental services. This provision will also apply to consumers of DMA. The department estimates this will decrease expenditures for dental services by \$695,418 on an annual aggregate basis. The estimated impact of this rule is also reflected as a portion of (not an addition to) the total estimated impact of all the co-payment policy changes reflected in companion OAC rule 5101:3-1-09.

Rule 5101:3-6-01, entitled Eligible vision care providers and vision co-payment provisions, is being proposed for adoption to implement provisions Am. Sub. H.B. 66 and Section 5111.0112 of the RC. It adds terminology regarding the addition of co-payment language for consumers twenty one years of age or older for designated vision exams and dispensing codes. This provision will also apply to consumers of DMA. The department estimates this will decrease expenditures for vision services by \$228,226 on an annual aggregate basis. The estimated impact of this rule is also reflected as a portion of (not an addition to) the total estimated impact of all the co-payment policy changes reflected in companion rule 5101:3-1-09.

Rule 5101:3-6-01, entitled Eligible vision care providers, is being proposed for rescission so it can be replaced with a new version of this rule and implement provisions of Am. Sub. H.B. 66 and Section 5111.0112 of the RC. This rule includes language regarding what vision care providers are eligible to participate as a Medicaid provider for vision services. It is being replaced by new rule 5101:3-6-01.

Rule 5101:3-9-09, entitled Consumer co-payments for certain medications [except for consumers who are members of a Medicaid managed health care program], is being proposed for amendment to add provisions for a co-payment on selected trade name drugs, and to reference other administrative code rules pertaining to co-payment and reimbursement policies. This rule sets forth the provisions for pharmacy co-payments for medications in the Ohio Medicaid program, including a three dollar co-payment for drugs requiring prior authorization and a two dollar co-payment for selected trade name drugs for consumers twenty-one years of age and older. Exclusions to the co-payment requirement are also included. The amendment adds a co-payment requirement for trade name drugs as required by Am. Sub. H.B. 66 and Section 5111.0112 of the RC. Other changes were made to reference other rules in the administrative code pertaining to co-payment and reimbursement policies. This provision will also apply to consumers of DMA. The department estimates this will decrease expenditures for prescription medications by \$7,923,601 on an annual aggregate basis. The estimated impact of this rule is also reflected as a portion of (not an addition to) the total estimated impact of all the co-payment policy changes reflected in companion OAC rule 5101:3-1-09.

A copy of the proposed rule(s) is available, without charge, to any person affected by the rule(s) at the address listed below and at the county departments of job and family services. The rule(s) is also available on the internet at

<http://www.registerofohio.state.oh.us/>. A public hearing on the proposed rule(s) 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 rule(s) or comments on the rule(s) 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 legal@odjfs.state.oh.us. Comments received may be reviewed at this address.