

**FEDERAL MEDICAID NOTICE AND PUBLIC HEARING NOTICE
OHIO DEPARTMENT OF MEDICAID**

DATE: February 17, 2015
TIME: 10:30 AM
LOCATION: Room A501, Lazarus Building
50 W. Town St., Columbus, Ohio 43215-3414

Pursuant to section 5162.03 and 5164.02 and Chapter 119. of the Ohio Revised Code, and 42 CFR 447.205 and section 1902(a)(13)(A) of the Social Security Act, the Director of the Department of Medicaid gives notice of the Department's intent to amend the rules 5160-2-01, 5160-2-02, 5160-2-03, 5160-2-04, and of a public hearing thereon.

Rule 5160-2-01, entitled "Eligible providers", is being proposed for amendment to comply with five-year rule review as specified within section 119.032 of the Ohio Revised Code. This rule sets forth the eligible providers of inpatient and outpatient hospital services. The proposed changes to the rule are updates to agency references, adding date references to Code of Federal Regulations references, and correcting grammatical errors. There are no policy changes to this rule.

Rule 5160-2-02, entitled "General provisions: hospital services", is being proposed for amendment to comply with five-year rule review as specified within section 119.032 of the Ohio Revised Code. This rule sets forth definitions used in Chapter 2 of the Ohio Administrative Code. The proposed changes to the rule are updates to references to the Ohio Administrative Code (OAC), removal of irrelevant definitions, and updating definitions to reflect current terminology, which includes redirecting the definition of "medical necessity" to OAC rule 5160-1-01. Appendix A to 5160-2-02 is also being updated to include new revenue codes and descriptions, and is being relocated to the Department's Hospital Billing Guidelines. There are no policy changes to this rule.

Rule 5160-2-03, entitled "Conditions and limitations", is being proposed for amendment to comply with five-year rule review as specified within section 119.032 of the Ohio Revised Code. This rule sets forth coverage conditions and limitations applicable to inpatient and outpatient hospital services. The proposed changes to the rule include updates to Ohio Administrative Code references, Ohio Revised Code references and agency references. The proposed changes also include the addition of language regarding explicit non-coverage of gender transformation, explicit coverage of surgical treatment of obesity through the prior authorization process, and clarification that private rooms are only reimbursed when the patient's condition requires isolation. In addition, the proposed changes include removal of language regarding television service as a patient convenience item, removal of the pre-certification requirement for dental procedures, removal of the benefit period provision, and removal of coverage conditions and limitations applicable to outpatient services only. Language regarding reimbursement of covered days was restructured to improve readability.

Rule 5160-2-04, entitled "Coverage of hospital provided pharmaceutical, dental, vision care, medical supply and equipment, and medically-related transportation services", is being proposed for amendment to comply with five-year rule review as specified within section 119.032 of the Ohio Revised Code. This rule sets forth coverage of pharmaceutical, dental, vision care, medical supply and equipment and transportation services provided by hospitals. The proposed changes to the rule are updates to Ohio Administrative Code (OAC) references and correcting grammatical errors. Language regarding inpatient coverage of medical supplies and equipment was restructured to improve readability, while language regarding outpatient coverage of medical supplies and equipment was directed to Chapter 5160-10 of the OAC. The proposed changes also include the addition of language regarding medically-related transportation services, and the removal of language around utilization review expectations regarding the justification of amounts billed by hospitals for take-home drugs, which is now located in OAC rule 5160-2-07.13. There are no policy changes to this rule.

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

A copy of the proposed rules is available, without charge, to any person affected by the rules at the address listed below. A public hearing on the proposed rules will be held at the date, time, and location listed at the top of this notice. Both written and 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 and testimony on the rules should be submitted by mail to the Ohio Department of Medicaid Rule Administrator, Office of Legal Counsel, 50 W. Town Street, Suite 400, Columbus, Ohio 43215-3414, by fax at (614) 752-3986, or by e-mail at rules@medicaid.ohio.gov. Testimony received may be reviewed at this address.