

PUBLIC HEARING NOTICE
OHIO DEPARTMENT OF MEDICAID

DATE: May 18, 2015

TIME: 11:00 AM

LOCATION: Room A501, Lazarus Building 50 W. Town Street
Columbus, Ohio 43215

Pursuant to Section 5167.02 and Chapter 119. of the Ohio Revised Code (ORC), the director of the Ohio Department of Medicaid gives notice of the office's intent to consider the amendment or rescission of the rules identified below and of a public hearing thereon.

Rule 5160-26-02.1, entitled Managed health care programs: termination of membership is being proposed for rescission and adoption due to five year rule review. The rule sets forth reasons for membership termination from a Medicaid managed care plan (MCP) and the processes to be used when a member is terminated from a plan. The rule is being rescinded and adopted as a new rule 5160-26-02.1. which reorganizes the text of the rescinded rule to achieve greater clarity. Other amendments to this rule clarify that this rule does not apply to MyCare Ohio plans, and update legal citations and cross-references. The substance of the rescinded and adopted rules remains the same.

Rule 5160-26-03 entitled Managed health care programs: covered services, is being proposed for amendment to update policy relating to the administration of the Medicaid program. The rule sets forth the covered services that Medicaid MCPs are required to provide to their members. Changes to the rule clarify language describing the obligations of MCPs regarding the payment of emergency services provided by hospitals pursuant to state law in ORC 5167.10. Another amendment clarifies that the department's approval is required for any disenrollment requests for nursing facility admissions beyond a stay of two consecutive months. Additional amendments for this rule indicate that specific coverage provisions for MyCare Ohio plans are described in Chapter 5160-58 of the Administrative Code, remove the exclusion of habilitation pursuant to Ohio's January 1, 2014 approved Medicaid State Plan and update cross-references and legal citations.

Rule 5160-26-05, entitled Managed health care programs: provider panel and subcontracting requirements is being proposed for amendment due to five year rule review. The rule sets forth Medicaid MCP provider panel and subcontracting requirements. Changes to the rule clarify and update subcontracting requirements for MCP subcontractors. Other amendments update the obligations of MCPs regarding provider qualifications and the notification of providers. Additional amendments to the rule update legal citations and cross-references.

Rule 5160-26-05.1, entitled Managed health care programs: provider services, is being proposed for amendment due to five year rule review. The rule sets forth the

requirements for information that MCPs must make available to providers and interested parties. Changes to the rule update a cross-reference and clarify that Medicaid MCPs must disseminate their practice guidelines to all affected providers and upon request to members and pending members.

Rule 5160-26-10, entitled Managed health care programs: sanctions and provider agreement actions, is being proposed for rescission and adoption due to five year rule review. The rule sets forth the sanctions and provider agreement actions for Medicaid MCPs. The rule is being rescinded and adopted as a new rule 5160-26-10. Changes to the rule add fines and sanctions to the list of sanctions that may be imposed on MCPs by ODM. Other amendments clarify the circumstances when MCPs can appeal actions under Chapter 119. of the Revised Code. Additionally, legal citations and cross-references are updated.

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. Both written and oral testimony will be taken at the public hearing. Written testimony 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 Ohio Department of Medicaid Rule Administrator, Office of Legal Counsel, 50 W. Town Street, Fourth Floor, 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.