

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

DATE: November 16, 2015
TIME: 11:00 AM
LOCATION: Room A501, Lazarus Government Center
50 West Town Street, Columbus, OH 43215

Pursuant to section 5164.02, Chapter 119. of the Ohio Revised Code, and 42 CFR 447.205, the director of the Ohio Department of Medicaid gives notice of the Department's intent to consider the amendment, and adoption of the rule identified below and to hold a public hearing on this rule.

Rule 5160-1-60, "Medicaid Reimbursement" sets forth payment policies for services furnished by many professional, non-institutional providers. The appendix to this rule is being proposed for amendment to incorporate a budget provision of Am. Sub. H.B. 64 of the 131st General Assembly, and to update policies related to the administration of the Medicaid program.

Specifically, Medicaid payments are being increased for primary care services, including office and preventative visits, vaccine administrations, and ophthalmological medical examination and evaluation services.

Other amendments to the appendix to this rule include incorporating 2015 Current Procedural Terminology (CPT) and Healthcare Common Procedure Coding System (HCPCS) coding changes. New 2015 codes are added, obsolete codes are marked as discontinued, and Medicaid maximum payment amounts are established for new codes. These codes were published on a separate table and were effective 01/01/2015. Medicaid maximum payment amounts for gastroenterology, newborn care services, pediatric and neonatal critical care services, and molecular pathology procedures are increased in response to comments made by stakeholders. Pursuant to section 5164.70 of the Ohio Revised Code and paragraph (F) of current rule 5160-1-60, the maximum payment amounts for certain advanced imaging procedures and other professional procedures are reduced so that they do not exceed the corresponding maximum Medicare allowed amounts. Several durable medical equipment (DME) procedures will no longer require prior authorization in accordance with the revised DME OAC rule 5160-10-03 and 5160-10-20 currently under consideration. Therefore Medicaid maximum payment amounts are being established for the majority of these procedures.

No change is being made in the rule body itself. These changes take effect for dates of service on or after 01/01/2016.

The Department estimates that the amendment to the appendix to this rule will increase expenditures by \$41.6 million on an annual aggregate basis.

The public hearing will be held at the date, time, and location listed at the top of this notice. Both written and oral testimony will be accepted at the public hearing, and written comments submitted or postmarked no later than the date of the public hearing will be treated as testimony.

Any person affected by these rules may examine them and obtain a copy, without charge, at the following locations:

Ohio Department of Medicaid, Office of Legal Counsel, 50 West Town Street, Suite 400,
Columbus, Ohio 43215;

Any county department of job and family services; or

On the internet at <http://www.registerofohio.state.oh.us>.

Testimony on the proposed rules may also be reviewed at the Ohio Department of Medicaid, 50 West Town Street, Suite 400, Columbus, Ohio 43215.

Requests for a copy of the proposed rules or a copy of testimony on the rules should be submitted in any of the following ways:

By mail to the Rule Administrator, Office of Chief Legal Counsel, Ohio Department of
Medicaid, 50 West Town Street, Suite 400, Columbus, OH 43215;

By fax to (614) 752-3986; or

By e-mail to rules@medicaid.ohio.gov.