PUBLIC HEARING NOTICE OHIO DEPARTMENT OF MEDICAID

DATE:	May 16, 2016
TIME:	11:00 a.m.
LOCATION:	Room A501 Lazarus Building
	50 W. Town St., Columbus, ŎH 43215

Pursuant to section 5165.02 and Chapter 119. of the Ohio Revised Code, the director of the Ohio Department of Medicaid 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.

Proposed for Adoption

Rule 5160-3-58, entitled "<u>Nursing facilities (NFs): quality indicators and per medicaid day</u> <u>quality payment rate</u>" sets forth provisions regarding the Ohio Department of Medicaid's quality program for nursing facilities. This new rule is being proposed for adoption. The rule describes how the Ohio Department of Medicaid determines the per Medicaid day quality payment rate based on the number of quality points a nursing facility earns for meeting five quality indicators specified in the rule. The rule contains sections that describe the measurement period used to calculate the per Medicaid day quality payment rate, quality indicator criteria, a statement that ODM shall establish the methodology used to calculate the per Medicaid day quality payment rate for religious non-medical health care institutions (RNHCIs), reasons for which quality points shall not be awarded, the methodology for calculation of the per Medicaid day quality payment rate, and appeals.

A copy of the proposed rule is available, without charge, to any person affected by the rule at the address listed below. The rule is also available on the internet at <u>http://www.registerofohio.state.oh.us/</u>. A public hearing on the proposed rule 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 or comments on the rule should be submitted by mail to the Ohio Department of Medicaid, Office of Legal Counsel, 50 W. Town Street, 4th Floor, Columbus, Ohio 43215-3414, by fax at (614) 995-1301, or by e-mail at Rules@Medicaid.Ohio.gov. Testimony received may be reviewed at this address.