

PUBLIC HEARING NOTICE STATE OF OHIO OHIO DEPARTMENT OF MEDICAID COLUMBUS, OHIO

DATE:	August 18, 2016
TIME:	11:00am
LOCATION:	Room A501, Lazarus Building
	50 W. Town St., Columbus, Ohio 43215

Pursuant to section 5164.02 and Chapter 119 of the Ohio Revised Code, the Director of the Ohio Department of Medicaid (ODM) gives notice of ODM's intent to adopt the rules identified below and of a public hearing thereon.

The following Patient Centered Medical Home (PCMH) rules implement a component of the State Innovation Model (SIM) grant, the development of which is a joint collaboration between the Ohio Department of Medicaid (ODM) and the Governor's Office of Health Transformation (OHT). The PCMH program emphasizes primary care and encourages providers to deliver medical services more efficiently and economically to achieve better health outcomes for the more than 3 million Ohioans covered by Medicaid.

Ohio Administrative Code rule 5160-1-71, <u>Patient centered medical homes (PCMH)</u>: <u>Eligible providers</u>, is being proposed for adoption because the Ohio Department of Medicaid is updating policy relating to the administration of the Medicaid program by implementing a program to improve health outcomes and efficiency. This rule sets forth the eligibility requirements primary care practices must meet in order to enroll as a PCMH. PCMH is a team-based care delivery model led by a primary care provider who comprehensively manages a patient's health needs with an emphasis on health care value and quality.

Ohio Administrative Code rule 5160-1-72, <u>Patient centered medical homes (PCMH):</u> <u>Payments</u>, is being proposed for adoption because the Ohio Department of Medicaid is updating policy relating to the administration of the Medicaid program by implementing a program to improve health outcomes and efficiency. This rule describes payment types available for primary care practices enrolled as a PCMH. This includes the "PCMH per-member per-month payment" and the "PCMH shared savings payment" if certain

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quality metrics and financial outcomes are met. These payments were created to support practices for activities described in Administrative Code rule 5160-1-71.

In addition to seeking general comments regarding this proposed change, ODM is seeking comments and input from beneficiaries, providers, and other affected stakeholders regarding how the proposed changes discussed in this notice may affect beneficiaries' access to care. The comments and input should be submitted, along with any other comments, to the address below.

A public hearing on the proposed rule 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.

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>.

Requests for a copy of the proposed rule and testimony on the rule should be submitted by mail to the Ohio Department of Medicaid Rule Administrator, Office of Chief Legal Counsel, 50 W. Town Street, Suite 400, 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.

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