

PUBLIC HEARING NOTICE
OHIO DEPARTMENT OF MEDICAID

DATE: May 15, 2017
TIME: 11:00 a.m.
LOCATION: Room A501, Lazarus Building
50 West Town Street, Columbus, OH 43215

Pursuant to sections 5164.02 and Chapter 119. of the Ohio Revised, the Director of the Ohio Department of Medicaid (Department) gives notice of the Department's intent to adopt, amend, or rescind the rules as identified below and of a public hearing thereon.

Rule 5160-2-01, entitled **Eligible providers**, is being proposed for rescission. This rule sets forth the policies to determine which hospitals may be enrolled in the Medicaid program as well as the age restrictions regarding who can be served in an Institution for Mental Diseases. The provisions of this rule are being incorporated into a new Ohio Administrative Code (OAC) rule 5160-2-01. This rule is being rescinded effective July 1, 2017.

Rule 5160-2-01, entitled **Eligible providers**, is being proposed for adoption. This rule sets forth the policies to determine which hospitals are eligible to participate in the Medicaid program, sets forth what services are allowed in an inpatient psychiatric hospital. This rule now establishes limitations on services rendered to recipients ages 21-64 who are enrolled in a Medicaid Managed Care Plan to receive inpatient psychiatric treatment in an Institution for Mental Diseases. This rule is effective July 1, 2017.

Rule 5160-2-05, entitled **Classification of hospitals**, is being proposed for adoption. This rule defines the methodology in which hospitals, paid under the "All Patient Refined-Diagnosis Related Group" (APR-DRG) inpatient prospective payment system, the "Enhanced Ambulatory Patient Grouping" (EAPG) outpatient prospective payment system or those hospitals excluded from the prospective payment systems, are classified into new mutually exclusive peer groups. This rule also defines what the payment peer groups for Ohio hospitals are and how they are paid. This rule now addresses the reclassification of hospitals among peer groups. This rule is effective for inpatient discharges and outpatient services on or after July 1, 2017.

Rule 5160-2-7.6, entitled **Capital costs**, is being proposed for rescission. This rule sets forth the calculation of capital payments to hospitals that are subject to the all patient refined diagnosis related groups (APR-DRG) prospective payment methodology. The provisions of this rule are being incorporated into a new Ohio Administrative Code (OAC) rule 5160-2-66. This rule is being rescinded effective July 1, 2017.

Rule 5160-2-66, entitled **Capital costs**, is being proposed for adoption. This rule sets forth the methodology for inpatient hospital capital reimbursement for those hospitals subject to the "All Patient Refined-Diagnosis Related Group" (APR-DRG) prospective payment system. This rule is being renumbered to be in alignment with the inpatient hospital policy rule number (OAC 516-02-65). This rule is replacing Ohio Administrative Code (OAC) 5160-2-07.6. This rule also updates data locations referenced in the existing rule. This rule is effective for dates of discharges on or after July 1, 2017.

A copy of the proposed rules are available, without charge, 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.

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 West 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 the 50 West Town Street address.