

**AMMENDED PUBLIC HEARING NOTICE  
OHIO DEPARTMENT OF MEDICAID**

**DATE:** May 15, 2017  
**TIME:** 11:00AM  
**LOCATION:** Lazarus Building, Room A501  
50 W. Town St., Columbus, Ohio 43215-3414

Pursuant to section 5164.02 and Chapter 119. of the Ohio Revised Code, 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.

The original public hearing notice was issued on April 14, 2017 to inform the public of the department's intent to update the outpatient hospital reimbursement methodology for hospitals subject to the enhanced ambulatory patient groups system and prospective payment. Following the publication of the notice, the department amended language in Ohio Administrative Code (OAC) rule 5160-2-75 to change the title of paragraph (D) to "Computation of case mix adjusted average cost per case (base rate)". Paragraphs (D)(1) through (D)(6) were updated to reflect the computation for each Ohio peer group base rate and the peer group bases rate for non-Ohio peer groups. Additionally, the title of paragraph (G)(1)(e) was changed to "Vaccines for children (VFC). Paragraph (G)(1)(e) was further updated to clarify the language related to VFC. Lastly, paragraph (G)(1)(c)(ii)(c) was updated to exclude HCPCS J-code J0714. These changes will clarify the policies of this rule and the methodologies to determine payment.

OAC rule 5160-2-21, entitled Outpatient hospital reimbursement, is being proposed for rescission. This rule sets forth the Medicaid outpatient hospital reimbursement methodology for hospitals subject to prospective payment. This rule is being rescinded effective July 1, 2017 and replaced with new rule 5160-2-75.

OAC rule 5160-2-75, entitled Outpatient hospital reimbursement, is being proposed for adoption to replace existing rule 5160-2-21. This rule will set forth the Medicaid outpatient hospital reimbursement methodology for hospitals subject to the enhanced ambulatory patient groups system and prospective payment. This rule will describe the methodology used to reimburse hospitals for outpatient services under the EAPG during an interim period, including data sources, risk corridors, and establishing relative weights and base rates. This rule also sets forth the reimbursement methodology used for outpatient hospital services paid outside of EAPG during an interim period. Items that may be paid outside of EAPG include dental services, observation services, durable medical equipment, independently billed services and vaccines for children. This rule expands the behavioral health and substance use disorder services that are currently available in an outpatient hospital setting. The Department is adopting this rule to update policy regarding outpatient hospital reimbursement effective July 1, 2017.

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

<http://www.registerofohio.state.oh.us/>. 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.

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](mailto:Rules@Medicaid.Ohio.gov). Testimony received may be reviewed at this address.