

**PUBLIC HEARING NOTICE
OHIO DEPARTMENT OF MEDICAID**

DATE: November 17, 2017
TIME: 11:00 AM
LOCATION: Rhodes State Office Tower, Lobby Hearing Room
30 East Broad Street
Columbus, Ohio 43215

Pursuant to section 5167.02 and Chapter 119. of the Revised Code, the director of the Ohio Department of Medicaid (ODM) gives notice of the Department's intent to consider the amendment, rescission, or adoption of the rules identified below and of a public hearing thereon.

5160-58-01.1 “MyCare Ohio plans: application of general managed care rules” sets forth the requirements for the MyCare Ohio program to follow the Medicaid managed care program rules outlined in OAC Chapter 5160-26. This rule is being proposed for amendment to update policy related to the administration of the Medicaid managed care program. Paragraph (B)(2) was removed to align with the prior authorization updates in OAC rule 5160-26-03.1 and to comply with ORC 5160.34 (SB 129) requirements. Paragraphs (B)(1) and (B)(3) were removed to reduce duplication of paragraph (C)(5). Paragraph (B)(4) was merged with paragraph (B). Paragraph (B)(5) was removed to align with changes made to OAC rule 5160-26-03.1. General edits were made for grammar and formatting.

5160-58-02.1 “MyCare Ohio plans: termination of enrollment” sets forth the reasons why a MyCare Ohio Plan member may be terminated from enrollment in the plan and the process for termination. The rule is being proposed for amendment in compliance with five year rule review and to update policy related to the administration of the Medicaid managed care program. Paragraph (A)(4) updates the developmental disabilities level of care and terminology regarding intermediate care facilities for individuals with developmental disabilities. In paragraph (C)(4), for members receiving long-term services and supports, the grounds for just cause for terminating or changing plan enrollment were updated in accordance with 42 C.F.R. 438.56. General edits were made for grammar and formatting.

5160-58-03 “MyCare Ohio plans: covered services” sets forth the services which must be covered by MyCare Ohio Plans (MCOPs) and addresses any exclusions or limitations for those services. It is being proposed for amendment in compliance with five year review and to update policy related to the administration of the Medicaid managed care program. In paragraph (A), the amendment clarified that MCOPs must cover Ohio Medicaid covered services. The Healthchek language was updated and notification requirements were removed to reduce duplication of the MCOP provider agreement. Paragraph (A)(3) updated the prior authorization language to restrict MCOPs from imposing pre-identified limitations on services. Medical necessity language in paragraph (B)(1) was updated to be member specific. In paragraph (E)(7), the amendment added a requirement that the MCOP must reimburse for emergency services until the member is stabilized and can be safely discharged. Paragraph (I) was moved to paragraph (H)(7). Language was added in paragraph (H)(8) to address payment for a member’s stay in an institution for mental disease (IMD) when the member is no longer eligible for enrollment in an MCOP. General edits were made for grammar and formatting.

A copy of each of the proposed rules is available at the address listed below and without charge, to any person affected by the rules and at the county department of job and family services. The proposed 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. Written and/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 rules or comments on the rules should be submitted by mail to the Ohio Department of Medicaid, Office of Legal Counsel, 50 West Town Street, 4th Floor, Columbus, Ohio 43218, by fax at (614) 995-1301, or by e-mail at rules@medicaid.ohio.gov. Comments received may be reviewed upon request.