

**PUBLIC HEARING NOTICE
OHIO DEPARTMENT OF MEDICAID**

DATE: September 10th, 2018
TIME: 11:00 AM
LOCATION: Lobby Hearing Room, Rhodes State Office Tower
30 E Broad St., Columbus, Ohio 43215

Pursuant to section 5164.02, section 5164.31, and Chapter 119. of the Ohio Revised Code, the director of the Ohio Department of Medicaid (ODM) gives notice of the Department's intent to consider the rescission, adoption or amendment of the rules as identified below and of a public hearing thereon.

To be rescinded.

Rule 5160-1-17.8, entitled "Provider screening and application fee" sets forth the background screening requirements for potential Medicaid providers based on level of risk as determined by the Centers for Medicare and Medicaid Services (CMS). The rule is being proposed for rescission and replaced with a new rule with the same number and name. The reason for the rescission is to comply with a rule filing requirement that a rule undergoing revisions in more than fifty percent of its content be rescinded and replaced with a new rule.

This rule sets forth exemptions to the application fee. This rule describes the screening requirements by risk level, how application fees must be submitted to ODM, exemptions from fee payment, and circumstances under which ODM may or may not waive the application fee. This rule provides, by reference to rule 5160-45-11, exclusionary offenses and exclusionary time periods from participation in the Medicaid program. It provides exceptions and circumstances for those who have a conviction of, or a plea of guilty to an exclusionary offense to enroll as an Ohio Medicaid provider.

Additionally, this rule allows ODM to conduct additional screenings as determined necessary and informs providers of their hearing rights pursuant to Chapter 119. of the Revised Code.

It clarifies that providers who have paid an application fee to Medicare or another state Medicaid agency may be exempt from the application fees set forth in the rule but are not exempt from the screening requirements set forth in the rule. It includes that the application fee will not be refunded if ODM or its designee identifies circumstances under which refunding the application fee is not warranted.

The rule states that enrolled providers with multiple service locations must notify ODM of changes to locations or any new locations within thirty days of the change in order for the appropriate screening to be conducted based on risk level.

For limited risk providers, this rule includes additional databases ODM will check against when conducting provider screenings. This includes the Office of the Inspector General (OIG), Health and Human Services (HHS) or Medicare exclusion database (MED), System for Awards Management (SAM), list of providers terminated by other state Medicaid programs, nurse aid registry maintained by the Ohio Department of Health (ODH), and the abuser registry maintained by the Ohio Department of Developmental Disabilities (DODD). For high risk providers, this rule includes that each person with a five per cent or greater ownership or control interest must submit to a fingerprint-based background check in addition to the criminal background check.

To be adopted as new.

Rule 5160-1-17.8, entitled "Provider screening and application fee" sets forth the background screening requirements for potential Medicaid providers based on level of risk as determined by the Centers for Medicare and Medicaid Services (CMS). The proposed permanent filing of this rule replaces the emergency filed rule that had the same number and name and which is being rescinded.

The language in the proposed new rule incorporates the language found in the rule to be rescinded. This rule is different from the rescinded rule described above in that it lists the exclusionary offenses in rule rather than reference to rule 5160-45-11. This was done to emphasize the application of this rule language to all applicable Medicaid providers. Also an appendix is added that lists various provider types and their respective screening levels. This was added to clearly state the screening risk level for each Medicaid provider type.

A copy of the proposed rules is available, without charge, to any person 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. Written testimony 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 Chief Legal Counsel, 50 W. Town St., 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.