

**PUBLIC HEARING NOTICE  
OHIO DEPARTMENT OF MEDICAID**

**DATE:** 9/17/2018  
**TIME:** 11:00 AM  
**LOCATION:** Room A501, Lazarus Building  
50 W. Town St., Columbus, Ohio 43215

Pursuant to section 5168.02 and 5168.06 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 recind rule 5160-2-08.1 and of a public hearing thereon.

**Rule 5160-2-08.1** entitled Assessment rates sets forth the assessment rate for the Hospital Care Assurance Program (HCAP). Each year the assessment rates are re-determined based upon the submitted cost reports, the number of hospitals and stakeholder input. This rule is being amended to establish the assessment rates for the current HCAP program year. Hospitals will be assessed 1.5% of a hospital's adjusted total facility costs up to \$216,372,500 and 1% for any amount in excess of \$216,372,500. The sum of the two products will be each hospital's assessment amount for the current program year. This rule is also being amended to include the provision to allow the department to establish a lower rate based on the assessment necessary to maximize the disproportionate share allotment for the current program year. This rule is also being amended to account for changes in the federal disproportionate share allotment. For past program years in which the federal disproportionate share allotment has increased, the department will notify each hospital by rate letter of the additional assessment to be paid by the hospital for the past program year to collect the state share necessary to expend the additional allotment. The adjusted assessment rate will be calculated in the same manner as the original assessment rate applicable to the past program year. The assessment collected will then be matched with federal funds and distributed to hospitals based upon the distribution model for the applicable past program year. For past program years in which the federal disproportionate share allotment has decreased, the department shall recalculate the distribution for that program year and notify hospitals of the amount to be recouped. Of the total amount recouped, the portion that was federally funded shall be returned to CMS. The portion of the recoupment that is state funds shall be applied toward the required assessment for the next future program year. The department will notify hospitals by letter of any adjustments. Finally, the proposed rule will be further amended to remove the general opening paragraph related to applicable program years and replace it with definitions of program year, current program year and past program year for improved clarity.

A copy of the proposed rule is available, without charge, to any person 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.