

PUBLIC HEARING NOTICE
OHIO DEPARTMENT OF MEDICAID

DATE: May 17, 2021

TIME: 11:00 A.M.

Teleconference Dial-in Phone Number: 614-721-2972

Teleconference Pin: 638 783 573#

Link to Microsoft Teams Meeting for Hearing: [Click here to join the meeting](#)

Pursuant to Chapter 119. and section 5166.02 of the Revised Code, the Director of the Ohio Department of Medicaid (ODM) gives notice of ODM's intent to consider the adoption, amendment, or rescission of the rules identified below and of a public hearing thereon.

Rule 5160-31-03, entitled *Eligibility for enrollment in the PASSPORT HCBS waiver program*, describes the eligibility for enrollment process for individuals served under the PASSPORT waiver. This rule is being proposed for amendment pursuant to five-year rule review, and to update policy related to the administration of the PASSPORT Waiver program and the ongoing COVID-19 public health emergency. It is being amended to allow physicians, certified nurse practitioners and physician assistants to approve services in the person-centered services plan. It is being amended to allow verbal approval of the person-centered services plan for both initial and ongoing eligibility activities. This rule is also being amended to reflect that an individual will not be disenrolled from the waiver if disenrollment will result in losing eligibility for Ohio Medicaid, unless the individual requests disenrollment, moves out of state, or dies. U.S.C. effective dates are also being updated.

Rule 5160-33-03, entitled *Eligibility for the assisted living home and community-based services (HCBS) waiver program*, describes the enrollment and disenrollment processes for individuals served under the Assisted Living waiver. This rule is being proposed for amendment pursuant to five-year rule review, and to update policy related to the administration of the Assisted Living Waiver program and the ongoing COVID-19 public health emergency. It is being amended to reflect that an individual will not be disenrolled from the waiver if disenrollment will result in losing eligibility for Ohio Medicaid, unless the individual requests disenrollment, moves out of state, or dies.

Rule 5160-46-02, entitled *Ohio home care waiver program: eligibility and enrollment*, describes the enrollment and disenrollment processes for individuals served under the Ohio Home Care waiver. This rule is being proposed for amendment pursuant to five-year rule review, and to update policy related to the administration of the Ohio Home Care Waiver program and the ongoing COVID-19 public health emergency. It is being amended to reflect that an individual will not be disenrolled from the waiver if disenrollment will result in losing eligibility for Ohio Medicaid,

unless the individual requests disenrollment, moves out of state, or dies. U.S.C. effective dates are also being updated.

Pursuant to Sub. H.B. 404 (133rd General Assembly), amending Section 12 of Am. Sub. H. B. 197 (133rd General Assembly), ODM will hold the public hearing for this rule package via teleconference. The phone number and pin and the date and time for this hearing are listed at the top of this Notice. All interested parties are invited to participate in the public hearing. Oral and written testimony will be accepted for this hearing and will be given the same consideration. Those who want to give oral testimony are asked to send an email to Rules@Medicaid.Ohio.gov no later than one hour before the hearing to be added to the witness list. There will be a final call at the end of the hearing for those who wish to offer oral testimony but are not yet on the witness list.

Written comments submitted via fax, United States Postal Service, and email that are received or postmarked no later than the day of the hearing will be accepted as testimony and become part of the hearing record. All testimony will become public record; therefore, the Ohio Department of Medicaid asks that protected health information only be included if the information belongs to the person submitting the testimony or a person for which the submitter is a legal guardian. Written testimony sent via email is highly recommended, all testimony received via email will receive a confirmation of receipt.

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/>. 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 W. Town Street, Suite 400, Columbus, Ohio 43215-3414, by fax at (614) 995-1301, or by e-mail at Rules@Medicaid.Ohio.gov.