PUBLIC HEARING NOTICE OHIO DEPARTMENT OF MEDICAID

DATE: APRIL 25, 2022 TIME: 11:00 A.M.

TELECONFERENCE PHONE NUMBER: 614-721-2972

Teleconference PIN: 26263929#

ONLINE MEETING LINK (MICROSOFT TEAMS): CLICK HERE TO JOIN THE MEETING.

Pursuant to Chapter 119. and section 5164.02 of the Ohio Revised Code, the director of the Ohio Department of Medicaid (ODM) gives notice of ODM's intent to consider the amendment of the rule identified below and to hold a public hearing on this rule.

Rule 5160-15-14 of the Ohio Administrative Code (OAC), "Transportation: non-emergency services through a CDJFS: program integrity provisions," sets forth conditions under which a county department of job and family services (CDJFS) may enter into or hold a contract with a private transportation vendor (PTV) for the provision of transportation to Medicaid-eligible individuals. One such condition is that a criminal background check be successfully completed for each direct-service PTV employee or applicant.

As a result of recent legislation, specific requirements affecting non-emergency medical transportation (NEMT) have been incorporated into Title XIX of the Social Security Act (Medicaid). To bring rule 5160-15-14 in line with the amended Act, the Ohio Department of Medicaid (ODM) is adding two conditions:

- Each driver holding or applying for a position with the PTV must have a valid driver's license.
- For each driver holding or applying for a position with the PTV, a certified driving record history must be obtained from the Bureau of Motor Vehicles of the Ohio Department of Public Safety and provided to the CDJFS.

The reference to the exclusionary periods listed in OAC rule 5160-43-09 is replaced by a reference to the same information set forth in OAC rule 5160-1-17.8.

The rule requires a CDJFS to submit related documentation "in the format specified by ODM or its designee." A new form, the ODM 10280, "Attestation of Private Transportation Vendor Compliance," will be used for this purpose.

Pursuant to Section 3 of Sub. H.B. 51 (134th G.A.), ODM will hold the public hearing for this rule package via teleconference. The date and time for the public hearing are listed at the top of this Notice, as well as the teleconference phone number, PIN (access code), and link for teleconference attendance. All interested parties are invited to participate in the public hearing. Both oral and written testimony will be accepted for this hearing and will be given the same consideration. Persons who want to give oral testimony are asked to send a message by e-mail 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 persons who wish to offer oral testimony but do not yet appear on the witness list.

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Written comments submitted by e-mail, postal mail, or fax that are received or postmarked no later than the day of the hearing will be accepted as testimony and will become part of the hearing record. All testimony will become public record; therefore, ODM asks that protected health information (PHI) be excluded unless the information belongs to the person submitting the testimony or to a person for whom the submitter is a legal guardian. Written testimony sent by e-mail is highly recommended. All persons who submit testimony by e-mail will be sent a confirmation of receipt.

A copy of these rules is available to any person, without charge, at the following locations: Ohio Department of Medicaid, 50 West Town Street, Suite 400, Columbus, OH 43215 or On the internet at http://www.registerofohio.state.oh.us.

Requests for a copy of the rules, as well as testimony on the rules, may be submitted in any of the following ways:

By mail to the Rule Administrator, Office of Chief Legal Counsel, Ohio Department of Medicaid, 50 West Town Street, Suite 400, Columbus, OH 43215;

By fax to (614) 995-1301; or

By e-mail to rules@medicaid.ohio.gov.

The Ohio Department of Medicaid is committed to facilitating access, promoting inclusion, and providing reasonable accommodation in its services, activities, programs, and employment opportunities in accordance with the Americans with Disabilities Act (ADA), Title VI of the Civil Rights Act, and other applicable laws. To request an interpreter, written information in a language other than English or in a certain format (large print, audio, accessible electronic format, other format), or a reasonable accommodation because of a disability, please contact ODM's Civil Rights/ADA Coordinator at least three business days before the scheduled hearing.

Phone: 614-995-9981 Voice / 711 TTY

Fax: 614-644-1434

E-mail: ODM EEO EmployeeRelations@medicaid.ohio.gov

If you believe that ODM has failed to provide these services or has discriminated in another way, you can file a grievance with ODM's Civil Rights/ADA Coordinator, a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, or both. Further information about these processes and ODM's compliance with civil rights laws and other applicable laws is available on the ODM website at *Notice of Nondiscrimination*.