Hearing Date: 11/16/2018 Today's Date: 11/20/2018

Agency: The Ohio Department of Medicaid

Rule Number(s): 5160-1-

If no comments at the hearing, please check the box. ☐

List organizations or individuals giving or submitting testimony before, during or after the public hearing and indicate the rule number(s) in question.

1. A. Jonathan Stump, Buckeye State Sheriff's Association, Health Service Administrator Stark County Sherriff's Office
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Hearing Report and Summary

Consolidated Summary of Comments Received

Please review all comments received and complete a consolidated summary paragraph of the comments and indicate the rule number(s).

Jonathan Stump, representing the Buckeye State Sheriff's Association, from the Stark County Sheriff's Office, gave oral testimony in favor of rule 5160-1-32.1, Standard Authorization Form. The form will streamline a now complicated, disjointed process of obtaining important consent and necessary health information, specifically in regards to Substance Use Disorder for individuals served by the judicial system. A timely implementation of this form will greatly assist both the individual and those working to obtain crucial information.

Hearing Report and Summary

Incorporated Comments into Rule(s)

Indicate how comments received during the hearing process were incorporated into the rule(s). If no comments were incorporated, explain why not.

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