

Hearing Date: 11/16/2020

Today's Date: 11/24/2020

Agency: Ohio Department of Medicaid

Rule Number(s): 5160-8-05, 5160-27-04, 5160-27-05, 5160-27-08, 5160-27-12

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

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

1. Ohio Counseling Association 5160-8-05

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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).

5160-8-05 A request was made that licensed professional clinical counselors receive the same reimbursement rate as that given to psychologists which is 100% of the Medicaid fee schedule.

## 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.

The comments were not incorporated in the rule as ODM is currently not making changes in its reimbursement rates for the providers referenced in the comments.