

Hearing Date: 2/16/2021 Today's Date: 2/26/2021

Agency: Ohio Department of Medicaid

Rule Number(s): 5160-5-01 (to be amended)

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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. David Owsiany, Ohio Dental Association 5160-5-01 (Amended)
2. Shannon Sweeney, RDH, Ohio Dental Hygientist's Association 5160-5-01 (Amended)
3. Randy Runyon, Ohio Association of Community Health Centers 5160-5-01 (Amended)
4. Susan Lawson, Oral Health Ohio 5160-5-01 (Amended)
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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).

Stakeholders expressed overall support for the rule and proposed amendment of dental services rule 5160-5-01 and have been involved in its development throughout 2020. Coverage of interim therapeutic restorations (ITR) was the most supported and commented upon topic. ODHA questioned the allowed frequency of ITR and impact on access to treatment services. ODHA requested monitoring of appropriate utilization of this service and commented that telehealth/teledentistry services would improve access to dental services. (Telehealth/teledentistry services are addressed in OAC 5160-1-18). Other stakeholders felt the ITR coverage encouraged access for special populations. ODA and OHO expressed support of the rule. OACHC requested ODM consider expansion of additional services and age limits for dental sealants.

## 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.

Several suggestions have already been incorporated in this rule filing such as coverage of ceramic crowns for posterior teeth and ITR coverage. Additional comments must be reviewed for clinical appropriateness and fiscal impact to be considered in a future rule package.