

**PUBLIC HEARING NOTICE
OHIO DEPARTMENT OF MEDICAID**

Date: October 6, 2025

Time: 11:00 a.m.

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

Teleconference Pin: 109003454#

Link to Microsoft Teams Meeting for Hearing: [Join the meeting now.](#)

In-Person Location:

Room A401, Lazarus Government Center
50 W. Town St., Ste 400
Columbus, OH 43215

Pursuant to Chapter 119. and section 5162.360 of the Revised Code, the Director of the Ohio Department of Medicaid (ODM) gives notice of ODM's intent to consider the adoption and amendment of rules identified below and of a public hearing thereon.

Amendment - 5160-35-01 Definitions for Chapter 5160-35 of the Administrative Code
5160-35-01 provides key definitions related to the MSP. The proposed rule amendments include additional key definitions related to the MSP.

The following definitions include proposed revisions:

- Eligible child
- Direct service
- Medicaid authorized prescriber
- Medically necessary
- Other costs
- Supervision
- Telehealth

The following definitions proposed additions:

- School services plan of care
- 504 plan
- Random Moment Time Study

Amendment - 5160-35-02 Qualifications to be a medicaid school program (MSP) provider.

5160-36-02 provides information about which types of providers school districts and community schools can employ or contract with to provide MSP services to eligible children. The proposed amendments allow for additional practitioners that school districts and community schools can employ or contract to provide MSP services to eligible students.

Amendment - 5160-35-05 Services authorized for medicaid coverage that can be provided by medicaid school program (MSP) providers.

5160-35-05 details the direct services school districts and community schools can provide to eligible students to receive Medicaid reimbursement. Additionally, this rule details the documentation of medical need necessary for school districts and community schools to provide in order to receive Medicaid reimbursement for services provided to eligible children. The proposed amendments include adding 504 plans and a universal form (also called a school services plan of care) as acceptable documentation of need for eligible

students. The proposed amendments also include additions to nursing services and behavioral health services school districts and community schools can provide to eligible students to receive Medicaid reimbursement.

Amendment – 5160-35-06 Other services, medical supplies and equipment authorized for medicaid coverage that can be provided by medicaid school program (MSP) providers.

5160-35-06 outlines the parameters of transportation and medical equipment by which school districts and community schools must follow to receive Medicaid reimbursement for allowable Medicaid School Program (MSP) services to eligible students. This rule is being amended to remove Targeted Case Management (TCM) to align with current policy practices. The rule is also being amended to include additional forms of documentation (504 plans and the school services plan of care detailed in 5160-35-05) allowable for Medicaid reimbursement for eligible students.

Adoption – 5160-35-07 Services that can be provided by MSP providers for students enrolled in Medicaid without a plan of care.

5160-35-07 is a new rule and proposes the inclusion of details on which services school districts and community schools can receive Medicaid reimbursement without a plan of care outlined in 5160-35-05.

ODM will hold the public hearing for this rule package via teleconference and in-person. ODM will not require masks for individuals attending in person. However, visitors are welcome to wear masks if that is their preference. The date and time for the public hearing are listed at the top of this Notice as well as the phone number, PIN (access code), and link for teleconference attendance, and location for in-person 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. Those attending in person can be added to the witness list at the hearing. There will be a final call at the end of the hearing for persons who wish to offer oral testimony but are not yet on the witness list.

Written comments submitted in-person, 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 which 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 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.

ODM is committed to providing access and inclusion and 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, Section 1557 of the Affordable Care Act, and other applicable laws. To request an interpreter, written information in a language other than English or in other formats (braille, large print, audio, accessible electronic formats, other formats), or a reasonable accommodation due to a disability, please contact ODM's Civil Rights/ADA Coordinator at 614-995-9981/TTY 711, Fax 1-614-644-1434, or Email: ODM_EEO_EmployeeRelations@medicaid.ohio.gov. Requests should be made at least three (3) business days prior to the scheduled hearing.

If you believe ODM has failed to provide these services or discriminated in another way, you can file a grievance with ODM's Civil Rights Coordinator or Section 1557 Coordinator and/or file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights. Further information on these processes and ODM's compliance with civil rights and other applicable laws can be found here: [Notice of Nondiscrimination](#).**