Hearing Summary Report Hearing Report and Summary

Hearing Date: 5/17/2019 Today's Date: 5/30/2019

Agency: Ohio Department of Medicaid

Rule Number(s): 5160-44-12, 5160-44-14, 5160-44-26, 5160-46-04, 5160-46-06, 5160-58-04

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. Click here to enter text.
- 2. Click here to enter text.
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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).	

Click here to enter text.			

Hearing Report and Summary

Incorporated	Comments	into Rule	(s)
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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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