Hearing Summary Report Hearing Report and Summary

Hearing Date: 8/13/2020 Today's Date: 8/17/2020

Agency: Ohio Department of Medicaid

Rule Number(s): 5160-3-58

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.
- 3. Click here to enter text.
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- **16.** Click here to enter text.

HSR p(187026) d: (763070) print date: 11/13/2025 5:34 AM

Hearing Report and Summary

Consolidated Summary of Comments Received

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

Click here to enter text.			

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.

Click here to enter text.			