

**FEDERAL MEDICAID NOTICE AND PUBLIC HEARING NOTICE
OHIO DEPARTMENT OF MEDICAID**

DATE: November 18, 2013

TIME: 10 a.m.

LOCATION: Lobby Hearing Room, Rhodes State Office Tower
30 East Broad Street, Columbus, OH 43215

Pursuant to section 5164.02 and Chapter 119. of the Ohio Revised Code and 42 CFR 447.205, the director of the Ohio Department of Medicaid gives notice of the department's intent to consider the amendment, rescission, or adoption of the rules identified below and to hold a public hearing on these rules. The public hearing will be held at the date, time, and location listed at the top of this notice. Both written and oral testimony will be accepted at the public hearing, and written comments submitted or postmarked no later than the date of the public hearing will be treated as testimony.

A nursing facility (NF) that participates in Medicaid is paid a daily amount (a "per diem") for providing a defined package—or bundle—of goods and services to its Medicaid-eligible residents. Amended Substitute House Bill 59 (130th General Assembly) has removed three items from this bundle: (1) custom wheelchairs and major wheelchair repairs, (2) oxygen, and (3) transportation by ambulance or wheelchair van. Payment for these items and services is no longer included in the NF per diem. These services may now be furnished by eligible Medicaid providers on a fee-for-service basis.

The following rules are being amended accordingly.

Rule 5160-10-03, titled "Medicaid supply list," describes the coverage of medical/surgical supplies, durable medical equipment, and supplier services by the Ohio Medicaid program. The appendix to the rule indicates whether an item is covered for all places of service, is covered only when it is provided in someone's personal residence, or is not covered when it is provided in a NF. This rule is being rescinded and replaced by new rule 5160-10-03.

New rule 5160-10-03, titled "Medical supplies and the medicaid supply list," describes the coverage of medical/surgical supplies, durable medical equipment, and supplier services by the Ohio Medicaid program. The appendix to the rule indicates whether an item is covered for all places of service, is covered only when it is provided in someone's personal residence, or is not covered when it is provided in a NF. This rule replaces current rule 5160-10-03.

Changes: The body of the rule has been reorganized and streamlined, and unnecessary references have been removed. The nursing facility (NF) limitation on the coverage of oxygen and custom wheelchairs has been removed from appendix A. Form JFS 01913 (a certificate of medical necessity) is still referenced in the body of the rule, but it is no longer incorporated into the rule as appendix B. These changes take effect on December 31, 2013.

It is estimated that the adoption of this rule will have no effect on annual aggregate Medicaid expenditures.

Rule 5160-10-08, titled "Repair of medical equipment," sets forth coverage and payment provisions for the repair of medical equipment.

Changes: The exclusion of fee-for-service coverage of custom wheelchair repair for nursing facility (NF) residents has been removed. The required modifier for certain repairs has been changed from RP (replacement and repair) to RB (replacement of a part during a repair), and Healthcare Common Procedure Coding System (HCPCS) procedure code K0739 has been adopted to represent a labor component of durable medical equipment (DME) repairs for which no other specific procedure code exists. Form JFS 01904 (a certificate of medical necessity) is still referenced in the body of the rule, but it is no longer incorporated into the rule as an appendix. These changes take effect on December 31, 2013.

It is estimated that the changes to this rule will have no effect on annual aggregate Medicaid expenditures.

Rule 5160-10-13, titled "Oxygen: covered services and limitations in a private residence," sets forth coverage and payment provisions for oxygen provided in a person's home. This rule is being rescinded and replaced by new rule 5160-10-13.

Rule 5160-10-13.1, titled "Oxygen: covered services and limitations in an intermediate care facility for the mentally retarded (ICF-MR)," sets forth coverage and payment provisions for oxygen provided to residents of long-term care facilities. This rule is being rescinded and replaced by new rule 5160-10-13.

New rule 5160-10-13, titled "Oxygen services," sets forth coverage and payment provisions for oxygen. This rule replaces current rules 5160-10-13 and 5160-10-13.1.

Changes: The exclusion of fee-for-service coverage of oxygen for NF residents has been removed. Maximum fee amounts for oxygen services have been revised and are now listed in a new appendix to the rule instead of Appendix DD to rule 5160-1-60 of the Ohio Administrative Code. Rental of oxygen-delivery systems is now limited (capped); no additional payment is made after the thirty-sixth month of the useful life of a system. These changes take effect on December 31, 2013.

It is estimated that the changes in maximum fees and the capping of rental payments will result in a total decrease in annual aggregate Medicaid expenditures of approximately \$4.7 million.

Rule 5160-10-16, titled "Wheelchairs," sets forth coverage and payment provisions for wheelchairs.

Changes: The exclusion of fee-for-service coverage of custom wheelchairs for NF residents has been removed. The required modifier for certain repairs has been changed from RP to RB. References to ODJFS have been updated, and other minor corrections have been made to the text. These changes take effect on December 31, 2013.

It is estimated that the changes to this rule will have no effect on annual aggregate Medicaid expenditures.

Rule 5160-15-02.8, titled "Medical transportation services: eligible providers," sets forth the conditions under which businesses may be enrolled as providers of ambulance or wheelchair van (ambulette) services. It also specifies that for transportation services provided to residents of a NF, payment will no longer be made on a fee-for-service basis and that the provisions in Chapter

5160-15 of the Ohio Administrative Code (transportation rules governing ambulance and wheelchair van services) no longer apply.

Change: The exclusion of fee-for-service coverage of transportation services for NF residents has been removed. This change takes effect on January 1, 2014.

It is estimated that the changes to this rule will have no effect on annual aggregate Medicaid expenditures.

Any person affected by these rules may examine them and obtain a copy, without charge, at the following locations:

The Ohio Department of Job and Family Services, Office of Legal and Acquisition Services,
30 East Broad Street, 31st Floor, Columbus, Ohio,
Any county department of job and family services, or
On the internet at <http://www.registerofohio.state.oh.us/>.

Requests for a copy of the rule or comments on the rule should be submitted in any of the following ways:

By mail to the Ohio Department of Medicaid, c/o Ohio Department of Job and Family Services, Office of Legal and Acquisition Services, 30 East Broad Street, 31st Floor, Columbus, OH 43215-3414;
By fax to (614) 752-8298; or
By e-mail to rules@jfs.ohio.gov.

Comments received may be reviewed at the Ohio Department of Job and Family Services, Office of Legal and Acquisition Services, 30 East Broad Street, 31st Floor, Columbus, Ohio.