PUBLIC HEARING NOTICE OHIO DEPARTMENT OF MEDICAID

DATE: 10/3/2022

TIME: 11:00 am EST

Teleconference Dial-in Phone Number: 1-613-721-2972

Teleconference Pin: pin 351732837#

Link to Microsoft Teams Meeting for Hearing: Click here to join the meeting

In-Person Location: 50 W. Town Street, Suite 400, Room A501, Columbus, Ohio

43215-3414

Pursuant to Chapter 119. and section 5164.02 of the Revised Code, the Director of the Ohio Department of Medicaid (ODM) gives notice of ODM's intent to consider the adoption of the rule identified below and of a public hearing thereon.

New proposed rule 5160-19-03, "Comprehensive maternal care (CMC) program" establishes requirements for ODM's new Comprehensive Maternal Care (CMC) program. This maternal and infant support program utilizes a comprehensive care coordination and service model that incorporates supportive services for expectant and postpartum mothers, particularly those with a high risk of adverse outcomes. This is a team-based care delivery model led by a CMC entity who is responsible for comprehensively managing the health needs of pregnant and postpartum individuals and ensuring that their infants are receiving appropriate pediatric care. This program is similar to the Ohio Comprehensive Primary Care (CPC) program in that the same federal authority will be sought for federal financial participation; however, it targets a different population of Medicaid covered individuals. Participation is voluntary for eligible Ohio Medicaid providers and for eligible Medicaid covered individuals.

This rule is being proposed for adoption to implement this program. This rule provides definitional information and identifies eligible entities and requirements for enrollment as a CMC entity. It describes the activity requirements that the CMC entity is responsible for conducting and the quality measures the CMC entity is responsible for meeting. This rule informs the CMC entity of penalties that may be enforced by ODM, and that the CMC entity may utilize reconsideration rights to challenge a decision of ODM concerning CMC program enrollment or eligibility. At the time of application, this rule indicates the CMC entity will attest that it will conduct certain activities throughout its participation. The CMC entity will attest that it will perform the activities identified in the rule and have at least one practitioner from the following categories on staff or contracted with the entity: a practitioner with prescribing authority, a registered nurse (RN) or licensed practical nurse (LPN), and a case manager. The CMC entity will also attest that it will demonstrate organizational commitment to integration of physical and behavioral health care, integrate services of community resources and other practitioners, conduct cultural competency activities, ensure appropriate actions are taken to protect the safety and confidentiality of attributed medicaid individuals, establish a patient and

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family advisory council (PFAC), participate in learning activities, review quarterly reports, implement and actively use an electronic health record (EHR), have the ability to submit prescriptions electronically, and have the ability to share, receive, and use electronic data from a variety of sources. This rule states the CMC entity will attest at time of enrollment and annually thereafter that it will conduct the following activity requirements for its attributed Medicaid individuals:

- Risk stratification
- Enhanced access
- Patient engagement
- Team-based care delivery
- Care management plan
- Patient experience
- Follow-up after hospital discharge
- Community Integration
- Population health management
- PRAF submission

This new rule states the participating CMC entity is responsible for passing clinical quality requirements which will be evaluated annually at the end of each performance period. The CMC practice is eligible to receive a per-member per-month (PMPM) payment and based on performance, may qualify for additional quality and health equity add-on payments.

The PMPM payment is prospective and will be calculated for each attributed Medicaid individual utilizing two risk tiers with varying PMPM payments. The quality add-on payment will be made after each performance year to CMC practices who meet quality add-on payment requirements.

ODM will hold the public hearing for this rule package via teleconference and in-person. All in-person attendees are required to follow Lazarus building COVID-19 safety protocols when inside the ODM office. ODM will not require masks for individuals entering the building. However, visitors are welcome to wear masks if that is their preference. All in-person attendees are required to follow Lazarus building COVID-19 safety protocols when inside the ODM office. ODM will not require masks for individuals entering the building. However, visitors are welcome to wear masks if that is their preference. Masks are encouraged if visitors are not up to date with vaccine and boosters, have an immune disorder, or chronic medical condition(s). ODM encourages social distancing in all areas of the office. 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 orto 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 rule is available, without charge, to any person at the address listed below. The rule is also available on the internet at http://www.registerofohio.state.oh.us/. Requests for a copy of the proposed rule or comments on the rule 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, and other applicable laws. To request an interpreter, written information in a language other than English or in other formats (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 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.