

FEDERAL MEDICAID NOTICE
OHIO DEPARTMENT OF MEDICAID

Pursuant to 42 CFR 447.205, the director of the Ohio Department of Medicaid (department) gives notice of the department's intent to change its methods and standards for Medicaid payment for transportation services by establishing a program for supplemental payments to eligible organizations.

The department proposes to establish a supplemental payment program for Qualified Ambulance Providers (QAPs). QAPs are operated by a government entity, hold a valid Medicaid provider agreement, and provide Emergency Medical Services (EMS) to Medicaid recipients.

The proposed change is being made to implement requirements in Ohio State legislation H.B. 33 enacted by the 135th General Assembly. Supplemental payments will support access to EMS by increasing reimbursement for eligible services.

The department will use utilization data from paid Medicaid claims to establish the supplemental payment amount. The payment ceiling will be the Medicare allowed amount published in the Medicare Part B Ambulance Fee Schedule (AFS). The state's share of the payments will be funded through Intergovernmental Transfers (IGTs). Reimbursement is subject to approval by the Centers for Medicare and Medicaid Services (CMS).

Implementation is expected to increase annual aggregate expenditures for transportation services by approximately \$4.5 million.

Any person may examine and obtain a copy of the changes, without charge, at the following locations:

Ohio Department of Medicaid, 50 West Town Street, Fourth Floor, Columbus, Ohio 43215;
Any county department of job and family services; or

On the internet at <http://www.registerofohio.state.oh.us> by searching Ohio Administrative Code Rule 5160-15-30.

Written comments regarding these changes may be sent to the Ohio Department of Medicaid, Attn.: Bureau of Health Plan Policy, 50 West Town Street, Fourth Floor, Columbus, Ohio 43215-3414 and may be reviewed at the same location. Comments may also be provided by e-mail at the following address: EMSSupplementalPaymentProgram@medicaid.ohio.gov. Comments must be received by June 30, 2025.

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Rights/ADA Coordinator at 614-995-9981/TTY 711, Fax 1-614-644-1434, or Email: ODM_EEO_EmployeeRelations@medicaid.ohio.gov. 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](#).