

**PUBLIC HEARING NOTICE  
OHIO DEPARTMENT OF MEDICAID**

DATE: SEPTEMBER 16, 2024  
TIME: 11:00 A.M.  
TELECONFERENCE PHONE NUMBER: 614-721-2972  
TELECONFERENCE PIN: 683157100#  
ONLINE MEETING LINK (MICROSOFT TEAMS): [JOIN THE MEETING NOW](#)  
IN-PERSON LOCATION: ROOM A501, LAZARUS GOVERNMENT CENTER  
50 WEST TOWN STREET  
COLUMBUS, OH 43215

Pursuant to Chapter 119. and section 5164.02 of the Ohio Revised Code, the director of the Ohio Department of Medicaid (ODM) gives notice of ODM's intent to consider the amendment of the rule identified below and to hold a public hearing on this rule.

Rule 5160-10-13 of the Ohio Administrative Code, "DMEPOS: oxygen," sets forth coverage and payment policies for oxygen under the durable medical equipment, prostheses, orthoses, and supplies (DMEPOS) benefit. Pursuant to section 106.03 of the Ohio Revised Code, "Agency Review of Existing Rules," the Ohio Department of Medicaid (ODM) has conducted a systematic review of this rule. As a result of this review, a number of changes will be made to the rule, mostly for the purpose of clarification.

- A new term, 'group III criteria', is introduced to designate indicators of the medical necessity of oxygen that do not fall within group I or group II. Examples of such indicators include cluster headaches and illnesses for which a public health emergency has been declared.
- The associated certificate of medical necessity (CMN), form ODM 01909, has been updated.
- Phrasing has been revised to clarify that grouping criteria apply to health conditions rather than to individuals.
- Dates or lengths of certain time periods have been revised.
- The phrase 'sleep study' has been corrected to 'respiratory study'.
- The exclusion of payment for both a stationary oxygen concentrator and a portable oxygen concentrator has been removed.
- The appendix to the rule is being rescinded because the information it presents has already been incorporated into the appendix to rule 5160-10-01 of the Ohio Administrative Code.

ODM will hold the public hearing for this rule package via teleconference and in person. ODM will not require protective masks for individuals attending in person. However, visitors are welcome to wear masks if they prefer to do so.

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), 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](mailto: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 hearing for persons who wish to offer oral testimony but do not yet appear on the witness list.

Written comments submitted 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 or to a person for whom 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 this rule is available to any person, without charge, at the following locations:

Ohio Department of Medicaid, 50 West Town Street, Suite 400, Columbus, OH 43215 or

On the internet at <http://www.registerofohio.state.oh.us>.

Requests for a copy of the rule, as well as testimony on the rule, may be submitted in any of the following ways:

By mail to the Rule Administrator, Office of Chief Legal Counsel, Ohio Department of Medicaid, 50 West Town Street, Suite 400, Columbus, OH 43215;

By fax to (614) 995-1301; or

By e-mail to [rules@medicaid.ohio.gov](mailto:rules@medicaid.ohio.gov).

The Ohio Department of Medicaid is committed to facilitating access, promoting inclusion, and providing 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 a certain format (large print, audio, accessible electronic format, other format), or a reasonable accommodation because of a disability, please contact ODM's Civil Rights/ADA Coordinator at least three business days before the scheduled hearing.

Phone: 614-995-9981 Voice / 711 TTY

Fax: 614-644-1434

E-mail: [ODM\\_EEO\\_EmployeeRelations@medicaid.ohio.gov](mailto:ODM_EEO_EmployeeRelations@medicaid.ohio.gov)

If you believe that ODM has failed to provide these services or has discriminated in another way, you can file a grievance with ODM's Civil Rights/ADA Coordinator, a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, or both.

Further information about these processes and ODM's compliance with civil rights laws and other applicable laws is available on the ODM website at [\*Notice of Nondiscrimination\*](#).