



Hospital Handbook Transmittal Letter (HHTL) 3352-22-06

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**TO: All Hospital Providers
Directors, County Departments of Job and Family Services**

FROM: Maureen M. Corcoran, Director

**SUBJECT: Provisions of Basic, Medically Necessary Hospital-Level Services as part of
the Hospital Care Assurance Program (HCAP)**

Summary

This Hospital Handbook Transmittal Letter (HHTL) provides information regarding changes to the Ohio Administrative Code (OAC) rules that govern the provision of basic, medically necessary hospital-level services as part of the Hospital Care Assurance Program (HCAP).

OAC rule 5160-2-07.17, entitled “Provision of basic, medically necessary hospital-level services,” has been rescinded and replaced with rule 5160-2-17 with the same name. Details of the amendments to the new rule are noted below. The effective date of these changes is July 28, 2022.

New rule 5160-2-17 sets forth the provisions for hospitals to provide care under HCAP as required by section 5168.14 of the Ohio Revised Code (ORC). ORC 5168.14 requires each hospital that receives payment under HCAP to provide basic, medically necessary hospital-level services without charge to state residents who are not recipients of the Medicaid program and whose income is at or below the federal poverty line. Rule 5160-2-17 sets forth the eligibility determination, billing, notice, documentation, and reporting requirements necessary to operate HCAP.

In rescinding 5160-2-07.17 and replacing it with 5160-2-17, the following changes were made:

- Now allow all hospitals within the same hospital system to use a single approved application for a patient, provided that all other eligibility requirements are still being maintained;
- Now allow hospitals to offer applications that are completed and signed electronically;
- Updated the website reference to the HHS current poverty guideline;
- Removed references to the discontinued Disability Assistance (DA) program;
- Now allow the department’s disproportionate share of hospital auditor to receive and review hospital records that document compliance;
- Removed regulatory restrictions as defined in R.C. 121.95.

Access to Rules and Related Material

Stakeholders who want to receive notification when ODM original or final files a rule package may visit JCARR's RuleWatch at www.rulewatchohio.gov where an account can be created to be notified of rule actions by rule number or department.

Stakeholders can subscribe to receive notification when a clearance or BIA is posted for public comment on the Ohio Business Gateway here:

<http://business.ohio.gov/reform/enotify/subscription.aspx>

The main web page of the ODM includes links to valuable information about its services and programs; the address is <http://medicaid.ohio.gov/>.

To access ODM Fee Schedule and Rates, go to medicaid.ohio.gov > Providers > Fee Schedule and Rates > Click "I Agree":

Additional Information

Questions pertaining to this letter should be addressed to:

hospital_policy@medicaid.ohio.gov

or

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