



Department of Medicaid

John R. Kasich, Governor

John B. McCarthy, Director

TO: MyCare Ohio Plans

FROM: Elbony N. McIntyre
Bureau of Managed Care

SUBJECT: Notice of Action (NOA) by Benefit Type – Dual Benefits Members

DATE: May 14, 2014

As discussed in the MyCare Ohio Plan Appeals Training held on April 25, 2014, there are three types of NOA's that must be issued to a Dual Benefits member for Authorization and Appeal decisions that result in denial, suspension, reduction or termination of a service. Those three NOA's include: the CMS Notice of Denial of Medical Coverage (NDMC), to be issued for Medicare only benefit denials; the OH Integrated Denial Notice, to be issued for hybrid Medicare/Medicaid denials; and the Medicaid Only NOA, to be issued for Medicaid only benefit denials. The table below identifies Medicare Only, Hybrid and Medicaid Only services and the NOA that should be issued based on the benefit type.

ICDS Medicare/Medicaid Benefits	NOA Type
Physician Services	Medicare
Out-Patient Hospital or Ambulatory Surgery Center Services --outpatient clinic/surgery	Medicare
Laboratory, X-Ray and Imaging	Medicare
Chiropractic	Medicare
Podiatry	Medicare
Cardiac and Pulmonary Rehab Services	Medicare
Prosthetics	Medicare
Diabetes Self-Management/Training	Medicare
Preventive Services	Medicare
Renal Dialysis Services	Medicare
Part B Prescription Drugs	Medicare
Inpatient Mental Health (including Freestanding and State Operated Hospitals)	Medicare NOA unless days exhausted, then Hybrid
Prescription Drugs	Medicare or Medicaid by drug type
Inpatient Hospital	Medicare, unless days exhausted then Hybrid
Skilled Nursing Facility	Hybrid
Home Health	Hybrid
Ambulance	Hybrid
DME and Supplies including Diabetic Supplies	Hybrid

ICDS Medicare/Medicaid Benefits	NOA Type
Behavioral Health Assessment (Physician and Non-Physician for MH Only)	Hybrid
Behavioral Health Counseling and Therapy (Individual and Group) including Independent Psychologist	Hybrid
Crisis Intervention (24-hour availability)	Hybrid
Partial Hospitalization	Hybrid
Outpatient Substance Abuse Services	Hybrid
Medical Nutritional Therapy	Hybrid
Family Planning Services and Supplies	Hybrid
Pharmacological Management	Hybrid (during BH transition only, then Medicare after)
Outpatient Rehabilitation Services (OT,PT,ST)	Hybrid (Medicaid pays after Medicare visit limits)
Vision Care	Hybrid (post-cataract glasses are Medicare)
Ambulette	Medicaid
Dental	Medicaid
Private Duty Nursing	Medicaid
Community Psychiatric Support Treatment (Individual and Group)	Medicaid
Ambulatory Detox	Medicaid
Intensive Outpatient	Medicaid
Med-Somatic	Medicaid
Methadone Administration	Medicaid
Laboratory Urinalysis for AOD	Medicaid
Hospice	Medicaid (for NF room and board only)
Waiver Services- all types	Medicaid

Please note that this table may require updates as the MyCare Ohio program progresses; the Ohio Department of Medicaid will evaluate and re-issue the table as necessary based on plans' experience. If you have specific questions about a particular benefit, or identify a benefit (s) that should be included in the table, please let us know.

If you have any questions regarding this memo, please contact your Contract Administrator.

Thank you.

cc: Christi Pepe
Contract Administrators