

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICAID AND MEDICAID SERVICES	1. TRANSMITTAL NUMBER: <i>02-023 03-004</i>	2. STATE OHIO
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID), Elimination of Waste, Fraud, and Abuse	
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE Immediately upon CMS approval Retroactive to June 1999 <i>2/11/03</i>	

5. TYPE OF PLAN MATERIAL (Check One):

NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS NEW PLAN AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION: Sections 1902(a)(64), 1902(a)(4)(C), 1902(a)(4)(D), and 1902(a)(23) of the Social Security Act P.L. 105-33 and Balanced Budget Act (BBA) of 1997 Section 4724.	7. FEDERAL BUDGET IMPACT: a. FFY 1999 \$-0- b. FFY 2000 \$-0-
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8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Pages 36a, 41, and 77	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Pages 41 and 77
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10. SUBJECT OF AMENDMENT: New waste, fraud and abuse provisions of the Balanced Budget Act (BBA) of 1997 amending Section 1902 of the Social Security Act (P.L. 105-33):
1) Section 1902(a)(64) of the Social Security Act / BBA 97 sec. 4724(f): **Consumer Hotline protocols and consumer information (attached) address this provision**
2) Section 1902(a)(4)(C) and 1902(a)(4)(D) of the Social Security Act / BBA 97 sec. 4724(c): **OAC 5101-9-52 (attached) addresses this provision, under statutory authority of Revised Code Sections 102.01, 102.03, and 102.04.**
3) Section 1902(a)(23) of the Social Security Act / BBA 97 sec. 4724(d): **OAC rule 5101:3-1-17.6(C) (attached) addresses this provision**

11. GOVERNOR'S REVIEW (Check One):

<input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT	<input checked="" type="checkbox"/> OTHER, AS SPECIFIED: The Governor's Office has delegated review to the ODJFS Director.
<input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	
<input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	

12. SIGNATURE OF STATE AGENCY OFFICIAL: <i>Tom Hayes</i>	16. RETURN TO: Becky Jackson ODJFS/BHPP 30 East Broad Street 27 th Floor Columbus, OH 43215
13. TYPED NAME: Tom Hayes	
14. TITLE: Director, ODJFS	
15. DATE SUBMITTED: <i>2/11/03</i> <i>pls</i>	

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17. DATE RECEIVED:	18. DATE APPROVED: <i>3/25/03</i>
PLAN APPROVED - ONE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL: <i>February 11, 2003</i>	20. SIGNATURE OF REGIONAL OFFICIAL: <i>Alc Freund, acting</i>
21. TYPED NAME: Cheryl A. Harris	22. TITLE: Associate Regional Administrator Division of Medicaid and Children's Health

23. REMARKS:

RECEIVED
FEB 17 2003
DMCH - IL/IN/OH

36a

New: HCFA-PM-99-3 (CMSO)
JUNE 1999

State: OHIO

Citation
Section 1902(a)(64) of
the Social Security Act
P.L. 105-33

4.5a Medicaid Agency Fraud Detection and Investigation
Program

The Medicaid agency has established a mechanism to receive reports from beneficiaries and others and compile data concerning alleged instances of waste, fraud, and abuse relating to the operation of this title.

TN No. 03-004 (2)
Supersedes 02-023 Approval Date _____ Effective Date JUNE 1999 retroactive
TN No. NEW

Revision: HCFA-PM-99-3 (CMSO)
JUNE 1999

State: OHIO

Citation

42 CFR 431.51
AT-78-90
46 FR 48524
48 FR 23212
1902 (a) (23)
of the Act
P.L. 100-93
(section 8(f))
P.L. 100-203
(Section 4113)

4.10 Free Choice of Providers

Section 1902(a)(23)
of the Social Security Act,
P.L. 105-33

- (a) Except as provided in paragraph (b), the Medicaid agency assures that an individual eligible under the plan may obtain Medicaid services from any institution, agency, pharmacy, person, or organization that is qualified to perform the services, including an organization that provides these services or arranges for their availability on a prepayment basis.
- (b) Paragraph (a) does not apply to services furnished to an individual--
- (1) Under an exception allowed under 42 CFR 431.54, subject to the limitations in paragraph (c), or
 - (2) Under a waiver approved under 42 CFR 431.55, subject to the limitations in paragraph (c), or
 - (3) By an individual or entity excluded from participation in accordance with section 1902(p) of the Act, or
 - (4) By individuals or entities who have been convicted of a felony under Federal or State law and for which the State determines that the offense is inconsistent with the best interests of the individual eligible to obtain Medicaid services.
- (c) Enrollment of an individual eligible for medical assistance in a primary care case management system described in section 1915(b)(1), a health maintenance organization, or a similar entity shall not restrict the choice of the qualified person from whom the individual may receive emergency services or services under section 1905(a)(4)(c).

TN No. 03-004 (dg)

Supersedes 02-023 Approval Date _____ Effective Date JUNE 1999 retroactive

TN No. 84-14

Revision: HCFA-PM-99-3 (CMSO)
JUNE 1999

State: OHIO

Citation

1902(a)(4)(C) of the
Social Security Act
P.L. 105-33

4.29

Conflict of Interest Provisions

The Medicaid agency meets the requirements of section 1902(a)(4)(C) of the Act concerning the prohibition against acts, with respect to any activity under the plan, that is prohibited by section 207 or 208 of title 18, United States Code.

1902(a)(4)(D) of the
Social Security Act
P.L. 105-33

The Medicaid agency meets the requirements of section 1902(a)(4)(D) of the Act concerning the safeguards against conflicts of interest that are at least as stringent as the safeguards that apply under section 27 of the Office of Federal Procurement Policy Act (41 U.S.C. 423).

TN No. 05-004 (2)

Supersedes 02-023

Approval Date _____

Effective Date JUNE 1999 retroactive

TN No. N/A