

Medicaid Transmittal Letter (MTL) No. 3334-16-09

DATE: June 24, 2016
TO: Eligible Non-Institutional Medicaid Providers
Chief Executive Officers, Managed Care Plans
Directors, County Departments of Job and Family Services
FROM: John B. McCarthy, Medicaid Director
SUBJECT: Relocation and Updating of Rule Concerning Services Not Covered by Medicaid

New rule 5160-1-61, "Non-covered services," sets forth a categorical list of services for which Medicaid makes no payment. The body of this rule, which replaces existing rule 5160-4-28, has been reorganized, streamlined, and updated. Several items no longer appear on the list:

- 'Services of a preventive nature except preventive medicine services listed in rule [5160]-4-34 of the Administrative Code' has been removed because preventive services have long been covered as evaluation and management services.
- 'Treatment of obesity, including but not limited to gastroplasty, gastric stapling, ileo-jejunal shunt, or other gastric restrictive procedures' has been removed because the surgical treatment of obesity can be covered with prior authorization.
- 'Services determined by another third-party payer or Medicare as not medically necessary' has been removed in response to guidance from the Centers for Medicare and Medicaid Services (CMS).
- Other items (e.g., paternity testing, patient convenience items) have been removed because they are addressed elsewhere in Medicaid rules.

New rule 5160-4-28, "Relocated provisions concerning non-covered services," is a placeholder rule that simply cites new rule 5160-1-61; it serves to ensure that existing references to rule 5160-4-28 remain functional until they can be updated.

Additional Information

Information about the services and programs of the Ohio Department of Medicaid (ODM) may be accessed through the main ODM web page, <http://www.medicaid.ohio.gov>.

Questions pertaining to this letter should be directed to the Ohio Department of Medicaid:

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