



## Ohio Administrative Code

### Rule 5160-2-77 Consumer co-payments for non-emergency emergency department services.

Effective: July 1, 2021

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(A) This rule establishes a consumer co-payment for non-emergency emergency department services as authorized by section 5162.20 of the Revised Code.

(B) For purposes of this rule, the following definitions apply.

(1) "Emergency medical condition" means a medical condition manifesting itself by acute symptoms of sufficient severity (including severe pain) such that a prudent lay person, as defined in paragraph (B)(2) of this rule, could reasonably expect the absence of immediate medical attention to result in any of the following: placing the health of the individual (or, with respect to a pregnant woman, the health of her unborn child) in serious jeopardy; serious impairment to bodily functions; or serious dysfunction of any bodily organ or part.

(2) "Prudent lay person" means a person with an average knowledge of health and medicine to determine, within reason, that emergency services are necessary.

(3) "Non-emergency emergency department service" means an emergency department service that does not meet the definition of emergency medical condition, as defined in paragraph (B)(1) of this rule.

(C) Application of co-payment.

For dates of service on or after the effective date of this rule, medicaid consumers will pay a co-payment equal to three dollars for non-emergency emergency department services, as defined in paragraph (B)(3) of this rule, except as excluded in paragraphs (D) and (E) of this rule.

(D) Exclusions and additional limitations to the co-payment requirement for non-emergency care provided in an emergency department are in accordance with rule 5160-1-09 of the Administrative Code, except as provided in paragraph (E) of this rule.



(E) A hospital may take action to collect a co-payment as provided in section 5162.20 of the Revised Code.

(F) Reimbursement for services subject to the co-payment for non-emergency emergency department services.

The department will reimburse the emergency department claim the allowable medicaid payment, in accordance with rule 5160-2-75 of the Administrative Code, minus the applicable co-payment as described in paragraph (C) of this rule and any third party resources available to the patient, in accordance with rule 5160-2-25 of the Administrative Code.