

## TABLE OF CONTENTS

5101:3-2-01	Eligible providers.
5101:3-2-02	General provisions: hospital services.
5101:3-2-03	Conditions and limitations.
5101:3-2-04	Coverage of hospital provided pharmaceutical, dental, vision care, medical supply and equipment, and ambulance or ambulance services.
5101:3-2-07.1	Hospital services subject to and excluded from DRG prospective payment.
5101:3-2-07.2	Classification of hospitals.
5101:3-2-07.3	Basic methodology for determining relative weights.
5101:3-2-07.4	Basic methodology for determining prospective payment rates.
5101:3-2-07.5	Disproportionate share adjustment.
5101:3-2-07.6	Capital costs.
5101:3-2-07.7	Medical education.
5101:3-2-07.8	Redetermination of prospective payment rates.
5101:3-2-07.9	Payment for outliers.
5101:3-2-07.11	Payment methodology.
5101:3-2-07.12	Appeals and reconsideration of departmental determinations regarding hospital inpatient and outpatient services.
5101:3-2-07.13	Utilization control.
5101:3-2-07.17	Provision of basic, medically necessary hospital-level services
5101:3-2-09	Payment policies for disproportional share and indigent care adjustments for hospital services.
5101:3-2-10	Payment policies for disproportionate share and indigent care adjustments for psychiatric hospitals.

TN No. 05-001 Approval Date: **SEP 27 2005**  
 Supersedes  
 TN No. 03-005 Effective Date: 04/01/2005

Table of Contents, continued

5101:3-2-22	Reasonable cost and cost-related reimbursement for hospital services.
5101-3-2-23	Cost reports.
5101-3-2-24	Audits.
5101-3-2-25	Coordination of benefits: hospital services.
5101:3-2-40	Pre-certification review.

TN: 12-002  
Supersedes:  
TN: 05-001

Approval Date JUN - 8 2012  
Effective Date: 02/01/2012