1	128HB1-HC2119.docx/emr
2 3 4	Sub. H.B. 1 LSC 128 0516-4 HC-2119
5	moved to amend as follows:
6	In line 83498, strike through "The" and insert "In the case
7	of a provider described in division (D)(12) of this section,
8	the"
9	In line 83499, after the period insert "In the case of a
10	provider described in division (D)(13) of this section, the
11	notice shall be sent by certified mail."
12	The motion was agreed to.
13	SYNOPSIS
14	Notice of Medicaid Provider Agreement Termination
15	R.C. 5111.06
16 17 18 19 20	If a Medicaid provider fails to provide to the Department of Job and Family Services the National Provider Identifier assigned to the provider, permits the Department to deny, terminate, or not renew a provider agreement by sending notice to the provider by certified mail (rather than regular mail).