Rule Summary and Fiscal Analysis (Part A)

Department Of Job And Family Services Agency Name

Division Of Medical Assistance Division

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5101:3-1-60 Rule Number

AMENDMENT TYPE of rule filing

Rule Title/Tag Line

Medicaid reimbursement.

<u>RULE SUMMARY</u>

1. Is the rule being filed consistent with the requirements of the RC 119.032 review? No

2. Are you proposing this rule as a result of recent legislation? No

3. Statute prescribing the procedure in accordance with the agency is required to adopt the rule: **119.03**

4. Statute(s) authorizing agency to adopt the rule: **5111.02**

5. Statute(s) the rule, as filed, amplifies or implements: **5111.02**

6. State the reason(s) for proposing (i.e., why are you filing,) this rule:

To make codes for reimbursement consistent with all related coverage rules currently in effect.

7. If the rule is an AMENDMENT, then summarize the changes and the content of the proposed rule; If the rule type is RESCISSION, NEW or NO CHANGE, then summarize the content of the rule:

The rule addresses reimbursement codes for Medicaid covered hearing aid codes. Changes address hearing aid coverage and revert back to current coverage for conventional hearing aids only. In addition, prices for seven DME codes are being added to make this rule consistent with codes listed in rule 5101:3-10-20 and a "+" sign has been added to certain DME codes to denote how the Department will handle the prior authorization of DME codes.

8. If the rule incorporates a text or other material by reference and the agency claims the incorporation by reference is exempt from compliance with sections 121.71 to 121.74 of the Revised Code because the text or other material is **generally available** to persons who reasonably can be expected to be affected by the rule, provide an explanation of how the text or other material is generally available to those persons:

This response left blank because filer specified online that the rule does not incorporate a text or other material by reference.

9. If the rule incorporates a text or other material by reference, and it was **infeasible** for the agency to file the text or other material electronically, provide an explanation of why filing the text or other material electronically was infeasible:

This response left blank because filer specified online that the rule does not incorporate a text or other material by reference.

10. If the rule is being **rescinded** and incorporates a text or other material by reference, and it was **infeasible** for the agency to file the text or other material, provide an explanation of why filing the text or other material was infeasible:

Not Applicable.

11. If **revising** or **refiling** this rule, identify changes made from the previously filed version of this rule; if none, please state so:

To add new HCPCS codes issued by the American Medical Association that are effective in January 2005. These new codes are underlined in the appendix to 5101:3-1-60 with the exception of the codes that were underlined in the original filing (7 DME codes and selected hearing aid codes) that are not part of the HCPCS new 2005 code project. The codes included in the original filing were: A4353 (page 232), A6154 (page 237), E0144 (page 259), E0159(page 259), E0247 (page 261), E0248 (page 267), E1340 (page 267), V5030-V5080 (page 347), V5130-V5140 (page 347), V5170-V5180 (page 347), V5210-V5241 (page 348), V5246-V5247 (page 348), V5252-V5253 (page 348), V5256-V5257 (page 348), V5260-V5261 (page 348). Codes deleted in the 2005 HCPCS update have been marked as non-covered (NC).

In addition, 20 DME codes were added or changed. These codes are underlined in the appendix. Reimbursement for A4222 (page 231) was changed to accommodate a change in the code definition to include cassettes. Cassettes had previously been billed using a local level code which was deleted on September 30, 2004. Reimbursements for A4245, A4247, and A4250 (page 231) were changed to reflect the change in units. 16 codes were added to coverage to replace local level codes and items that had been previously billed under miscellaneous codes: A6011 (page 237), A6441-A6447 (page 239), A6450-A6451 (page 239), E0301-E0304 (page 261), E0482 (page 262).

Codes deleted in the 2005 HCPCS update that required prior authorization are noted with a "++" in the "PA APPR" column of the appendix to denote how the Department wil handle the prior authorization of deleted DME codes.

12. 119.032 Rule Review Date: 4/1/2009

(If the rule is not exempt and you answered NO to question No. 1, provide the scheduled review date. If you answered YES to No. 1, the review date for this rule is the filing date.)

NOTE: If the rule is not exempt at the time of final filing, two dates are required: the current review date plus a date not to exceed 5 years from the effective date for Amended rules or a date not to exceed 5 years from the review date for No Change rules.

FISCAL ANALYSIS

13. Estimate the total amount by which *this proposed rule* would **increase / decrease** either **revenues / expenditures** for the agency during the current biennium (in dollars): Explain the net impact of the proposed changes to the budget of your agency/department.

This will have no impact on revenues or expenditures.

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Not Applicable.

14. Identify the appropriation (by line item etc.) that authorizes each expenditure necessitated by the proposed rule:

600-525

15. Provide a summary of the estimated cost of compliance with the rule to all

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directly affected persons. When appropriate, please include the source for your information/estimated costs, e.g. industry, CFR, internal/agency:

In this refiling, providers will be able to bill the new 2005 HCPCS codes and must modify their billing systems to use the new codes. These changes are necessary for all payors, not just Medicaid.

16. Does this rule have a fiscal effect on school districts, counties, townships, or municipal corporations? No

17. Does this rule deal with environmental protection or contain a component dealing with environmental protection as defined in R. C. 121.39? No