

**Rule Summary and Fiscal Analysis (Part A)****Department of Mental Health**

Agency Name

Division

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**5122-29-03**

Rule Number

**NEW**

TYPE of rule filing

Rule Title/Tag Line

**Behavioral health counseling and therapy service.****RULE SUMMARY**

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: **5119.22, 5119.61(A), 5119.611(C)**

5. Statute(s) the rule, as filed, amplifies or implements: **5119.22, 5119.61(A), 5119.611(C)**

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

We are filing this rule in order to expand the capacity of the state's mental health system to provide coverage of critically short behavioral health counseling and therapy services to persons living in areas of scarcity via technology (i.e., telemedicine). Expansion, as outlined in this rule, will increase access to mental health services without compromising the quality of these services.

We are also filing this rule in order to include marriage and family therapists to the rule's list of service providers and/or supervisors.

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:

Providers may provide behavioral health counseling and therapy services via real-time interactive videoconferencing subsequent to an initial in-person visit with a client. There must be at least one additional in-person session annually, or more often if all parties agree.

If utilizing real-time interactive videoconferencing, providers must assure that the equipment used has sufficient speed and resolution to assure quality and must further assure the security of the connection to provide for confidential communication.

Rule adds marriage and family therapists to the list of providers/supervisors of the service.

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:

Removed previously appended public hearing notice as this rule already received a public hearing on 10/4/04.

12. 119.032 Rule Review Date:

(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.

Not Applicable

Not Applicable

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

Not Applicable

15. Provide a summary of the estimated cost of compliance with the rule to all directly affected persons. When appropriate, please include the source for your information/estimated costs, e.g. industry, CFR, internal/agency:

The use of videoconferencing as a method of service delivery is OPTIONAL. Therefore, there is NO cost of compliance to providers who choose not to utilize this method. Providers who voluntarily choose to use videoconferencing as a method of service delivery will incur some small costs, but national experience indicates that the equipment costs are offset by savings in staffing. The "Arizona Telemedicine" bulletin, Summer 2004, indicates that Arizona has saved about \$106,000 by reducing the travel time of its psychiatrists. It also indicates that Arizona has saved \$2,600,000 in offset costs for telemedicine from the federal

government. While Ohio may not be able to achieve such savings, we should realize savings to the community mental health boards and agencies as a result of reduced travel time for psychiatrists. We should also achieve savings through the reduction of the use of inpatient care as a result of expanded utilization of quality outpatient care. Kentucky has made telemedicine available in its mental health system for approximately two years and reports an increase in total costs of about \$15,000 annually. With regard to the addition of marriage and family therapists as professionals able to provide and/or supervise the service, there should be no additional cost of compliance for provider agencies wishing to employ them. The addition of these therapists to the list of providers/supervisors merely gives agencies a wider array of qualified professional from which to choose for the delivery of existing services.

16. Does this rule have a fiscal effect on school districts, counties, townships, or municipal corporations? **Yes**

You must complete Part B of the Rule Summary and Fiscal Analysis in order to comply with Am. Sub. S.B. 33 of the 120th General Assembly.

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

**Rule Summary and Fiscal Analysis (Part B)**

1. Does the Proposed rule have a fiscal effect on any of the following?

(a) School Districts	(b) Counties	(c) Townships	(d) Municipal Corporations
No	Yes	No	No

2. Please provide an estimate in dollars of the cost of compliance with the proposed rule for school districts, counties, townships, or municipal corporations. If you are unable to provide an estimate in dollars, please provide a written explanation of why it is not possible to provide such an estimate.

The cost of compliance by county mental health boards with regard to this rule is unknown at this time. The use of videoconferencing by mental health service providers is an OPTIONAL method of providing an existing service, and we are unable at this time to determine with any precision how many providers may choose to utilize this option.

3. If the proposed rule is the result of a federal requirement, does the proposed rule exceed the scope and intent of the federal requirement? **No**

4. If the proposed rule exceeds the minimum necessary federal requirement, please provide an estimate of, and justification for, the excess costs that exceed the cost of the federal requirement. In particular, please provide an estimate of the excess costs that exceed the cost of the federal requirement for (a) school districts, (b) counties, (c) townships, and (d) municipal corporations.

*Not Applicable.*

5. Please provide a comprehensive cost estimate for the proposed rule that includes the procedure and method used for calculating the cost of compliance. This comprehensive cost estimate should identify all of the major cost categories including, but not limited to, (a) personnel costs, (b) new equipment or other capital costs, (c) operating costs, and (d) any indirect central service costs.

The use of videoconferencing as a method of service delivery is OPTIONAL. Therefore, there is NO cost of compliance to service providers who choose not to utilize this method. Providers who voluntarily choose to use videoconferencing as a method of service delivery will incur some small costs, but national experience

indicates that the equipment costs are offset by savings in staffing, e.g., reduction in the travel time of psychiatrists. Additionally, use of videoconferencing should ultimately result in increased utilization of quality outpatient care, thus reducing the amount of more costly inpatient care that is being utilized.

(a) Personnel Costs

See above

(b) New Equipment or Other Capital Costs

See above

(c) Operating Costs

See above

(d) Any Indirect Central Service Costs

See above

(e) Other Costs

See above

6. Please provide a written explanation of the agency's and the local government's ability to pay for the new requirements imposed by the proposed rule.

As indicated above, the use of videoconferencing is an OPTIONAL method of providing an already existing service. Agencies will need to determine on an individual basis if the cost of utilizing this option makes financial sense.

7. Please provide a statement on the proposed rule's impact on economic development.

N/A