

Rule Summary and Fiscal Analysis

Part A - General Questions

Rule Number: 5160-1-32.1
Rule Type: New
Rule Title/Tagline: Standard authorization form.
Agency Name: Ohio Department of Medicaid
Division:
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I. Rule Summary

1. **Is this a five year rule review?** No
 - A. **What is the rule's five year review date?**
2. **Is this rule the result of recent legislation?** No
3. **What statute is this rule being promulgated under?** 119.03
4. **What statute(s) grant rule writing authority?** 5162.02, 5164.02, 3798.10
5. **What statute(s) does the rule implement or amplify?** 3798.10
6. **What are the reasons for proposing the rule?**

In 2012, Governor Kasich proposed and the Ohio General Assembly enacted legislation to harmonize state privacy law with federal law (RC 3798.02). Prior to the change, state law applied standards for information sharing that in some cases were inconsistent with federal privacy law, which created barriers to electronic health information exchange and care coordination. The new law also required Ohio Medicaid to develop a standard authorization form for the use and disclosure of protected health information (RC 3798.10). The purpose of the standard form is to improve care coordination for a patient across multiple providers by making it easier to share protected health information in a secure manner. The form is not required to be used, but a properly executed form must be accepted by any person or government entity in

Ohio. This rule allows for the universal use of the provided standardized authorization form found in Appendix A.

7. Summarize the rule's content, and if this is an amended rule, also summarize the rule's changes.

In accordance with section 3798.10 of the Revised Code, this rule codifies the newly developed standard authorization form for the use and disclosure of protected health information. The purpose of the standard form is to improve care coordination for a patient across multiple providers by making it easier to share protected health information in a secure manner. The form is not required to be used, but a properly executed form must be accepted by any person or government entity in Ohio within thirty days post effective date. ODM developed the standard authorization form as part of the broader statewide initiative to integrate physical and behavioral health care services within Medicaid managed care.

8. Does the rule incorporate material by reference? Yes

9. If the rule incorporates material by reference and the agency claims the material is exempt pursuant to R.C. 121.71 to 121.76, please explain the basis for the exemption and how an individual can find the referenced material.

This rule incorporates one or more dated references to the Code of Federal Regulations (CFR). This question is not applicable to any dated incorporation by reference to the CFR because such reference is exempt from compliance with RC 121.71 to 121.74 in accordance with RC 121.75(D).

10. If revising or re-filing the rule, please indicate the changes made in the revised or re-filed version of the rule.

Not Applicable

II. Fiscal Analysis

11. As a result of this proposed rule, please estimate the increase / decrease in revenues or expenditures affecting this agency, or the state generally, in the current biennium or future years. If the proposed rule is likely to have a different fiscal effect in future years, please describe the expected difference and operation.

This will have no impact on revenues or expenditures.

Not Applicable

12. What are the estimated costs of compliance for all persons and/or organizations directly affected by the rule?

There is no cost of compliance for any persons and/or organizations directly affected by this rule.

Providers currently receive a multitude of unique forms from different agencies requesting the release of provider information. This form has no different or specifically unique expectations that would challenge the capacities of provider information technology systems (IT) or health information exchanges (HIE). When developing the standard authorization form, The Ohio Department of Medicaid (ODM) had representation from Ohio Health Information Partnership to hear concerns and integrate suggestions from a HIE. Once adopted, ODM anticipates the advantage of saving the provider the step of requiring review by legal counsel to assure that minimum requirements for release are met. Additionally, providers may begin to see more uniformity in the forms received, thus saving time and costs for the providers.

13. Does the rule increase local government costs? (If yes, you must complete an RSFA Part B). No

14. Does the rule regulate environmental protection? (If yes, you must complete an RSFA Part C). No

III. Common Sense Initiative (CSI) Questions

15. Was this rule filed with the Common Sense Initiative Office? No

16. Does this rule have an adverse impact on business? No

A. Does this rule require a license, permit, or any other prior authorization to engage in or operate a line of business? No

B. Does this rule impose a criminal penalty, a civil penalty, or another sanction, or create a cause of action, for failure to comply with its terms? No

C. Does this rule require specific expenditures or the report of information as a condition of compliance? No