## Rule Summary and Fiscal Analysis Part A - General Questions

**Rule Number:** 5160-1-71

Rule Type: Rescission

**Rule Title/Tagline:** Patient-centered medical homes (PCMH): eligible providers.

**Agency Name:** Ohio Department of Medicaid

**Division:** 

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## I. Rule Summary

- 1. Is this a five year rule review? Yes
  - A. What is the rule's five year review date? 7/17/2018
- 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? 5164.02
- 5. What statute(s) does the rule implement or amplify? 5164.02
- 6. What are the reasons for proposing the rule?

This rule is being proposed for rescission and will be replaced with a new rule to reflect proposed changes for the 2019 Comprehensive Primary Care (CPC) program year. This rule is being proposed for rescission because more than 50% of the text was replaced. It will be replaced with a new proposed rule of the same title

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

This rule implements the Ohio Department of Medicaid's Comprehensive Primary Care Program (CPC) under the State Innovation Model (SIM) grant, the development

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of which is a joint collaboration between the Ohio Department of Medicaid (ODM) and the Governor's Office of Health Transformation (OHT). The CPC program utilizes a Patient Centered Medical Home (PCMH) model to emphasize primary care and encourage providers to deliver medical services more efficiently and economically to achieve better health outcomes for the more than 3 million Ohioans covered by Medicaid. This is a team-based care delivery model led by a primary care practitioner who comprehensively manages the health needs of individuals.

This rule sets forth the eligibility requirements that primary care practices must meet in order to enroll under the Ohio CPC program. It provides definitional information, identifies eligible entities and requirements for enrollment as a PCMH, and describes the activity, efficiency, and quality measures including the performance thresholds that must be met. To be eligible for participation and payment, practices must meet one of the following requirements: have participated in the 2017 program year, have at least five thousand attributed Medicaid individuals and PCMH accreditation from a national accrediting body, be a participating Comprehensive Primary Care Plus (CPC+) practice with at least 500 attributed Medicaid individuals, or have at least 500 attributed Medicaid individuals and accreditation under National Committee for Quality Assurance (NCQA) III or NCQA PCMH standards.

Upon enrollment and on an annual basis, this rule requires that each participating PCMH attest that it will meet the activity requirements set forth in the rule. The PCMH must also pass a number of efficiency and clinical quality requirements on an annual basis to continue participation under this rule. This rule allows practices who participated in initial program year 2017 to continue participation as a PCMH.

- 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 references to another rule or rules of the Ohio Administrative Code. This question is not applicable to any incorporation by reference to another OAC rule because such reference is exempt from compliance with RC 121.71 to 121.74 pursuant to RC 121.76(A)(3).

This rule incorporates one or more references to the Ohio Revised Code. This question is not applicable to any incorporation by reference to the Ohio Revised Code because such reference is exempt from compliance with RC 121.71 to 121.74 pursuant to RC 121.76(A)(1).

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

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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.

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The rescission of this rule have no fiscal impact.

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

The rescission of this rule entails no cost of compliance.

- 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? Yes
- 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? Yes

For any eligible primary care practice that voluntarily chooses to enroll in the Ohio CPC program, this rule requires the participating entity to be licensed to practice as a primary care physician, advanced practice registered nurse, or physician assistant that has a specialty in primary care.

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

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Not applicable.

C. Does this rule require specific expenditures or the report of information as a condition of compliance? Yes

A practice that participates in the Ohio CPC program will be required to attest that specific requirements are met.