

Rule Summary and Fiscal Analysis (Part A)**Ohio Department of Medicaid**

Agency Name

Division

Tommi Potter

Contact

50 Town St 4th floor Columbus OH 43218-2709

Agency Mailing Address (Plus Zip)

614-752-3877

Phone

Fax

tommi.potter@medicaid.ohio.gov

Email

5160-12-02.3

Rule Number

AMENDMENT

TYPE of rule filing

Rule Title/Tag Line

Private duty nursing: procedures for service authorization.**RULE SUMMARY**

1. Is the rule being filed for five year review (FYR)? **Yes**
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: **5164.02**
5. Statute(s) the rule, as filed, amplifies or implements: **5162.03, 5164.02, 5164.70, and 5166.02**
6. State the reason(s) for proposing (i.e., why are you filing,) this rule:

This rule is being amended as a result of a five year rule review.
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:

OAC 5160-12-02.3, entitled "Private duty nursing: procedures for service

authorization" sets forth procedures for receiving PDN service authorization from the Ohio Department of Medicaid or its designee. Amendments proposed to this rule include:

- Paragraph (A) was conjoined with subparagraphs (A)(1) with (A)(2) to reduce redundancy.
- Requirements directed specifically for the Ohio Department of Job and Family Services are being removed or changed to the Ohio Department of Medicaid (ODM).
- Form references were modified to reflect new revision dates and naming system [i.e., JFS 02374 (rev 09/2006) was changed to ODM 02374 "Private Duty Nursing (PDN) Services Request" (rev. 3/2015)].
- References to "face-to-face" were changed to "in-person" to ensure consistency throughout the rule and with other rule references.
- Various OAC references were updated due to the creation of the Ohio Department of Medicaid by Am. Sub. HB 59 of the 130th General Assembly.
- The term "consumer" is being changed to "individual" throughout the rule.
- References to "institutional" level of care are being edited to include "nursing facility-based" level of care.
- References to "authorized representative" are being removed to comply with 5160:1-1-50.1 of the Administrative Code.
- Names of state departments were updated from the Ohio Department of Job and Family Services (ODJFS) to the Ohio Department of Medicaid (ODM), and the Ohio Department of Mental Retardation and Developmental Disabilities (ODMRDD) to the Ohio Department of Developmental Disabilities (DODD).
- Paragraph F is being removed as the provision is no longer required by ODM.
- All references to ODM's "designated case management agency (CMA)" are being changed throughout the rule to ODM's "designee" to maintain consistency with other departmental rules.

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. If applicable, indicate each specific paragraph of the rule that has been modified:

The revision date for the ODM 2374 was changed from rev. 7/2014 to rev. 3/2015 in paragraph (B)(1).

12. Five Year Review (FYR) Date: **4/14/2015**

(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.

\$0.00

Amendments as proposed to this rule will not impact ODM's projected budget during the current biennium.

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:

OAC 5160-12-02.3 requires private duty nursing providers to allocate time to secure the Ohio Department of Medicaid authorization as a condition of compliance, prior to the start of private duty nursing services. Costs attributed to the process of securing signatures and completing the ODM 07137 form may be incurred at a minimum of 1 hr. of administrative time and .25 hours of nursing time to complete and process the certification of medical necessity once forwarded by the treating physician. As many as 14 staffing hours may be accumulated when intake coordinators, administrator, assistant, clinical managers, billing manager, staffing coordinator, office nurse, and transitional care coordinators are taken under consideration.

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**

S.B. 2 (129th General Assembly) Questions

18. Has this rule been filed with the Common Sense Initiative Office pursuant to R.C. 121.82? **Yes**

19. Specific to this rule, answer the following:

A.) Does this rule require a license, permit, or any other prior authorization to engage in or operate a line of business? **Yes**

The rule requires authorization be secured from ODM prior to the start of Private

Duty Nursing services.

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? **Yes**

PDN providers must submit a referral for PDN authorization to ODM using the JFS 02374, "Private Duty Nursing (PDN) Services Request" and any additional supporting documentation requested.