

Rule Summary and Fiscal Analysis

Part A - General Questions

Rule Number: 5160-13-02

Rule Type: New

Rule Title/Tagline: Dialysis services rendered by a dialysis center.

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? 5164.02
5. What statute(s) does the rule implement or amplify? 5162.03, 5164.02, 5164.70
6. What are the reasons for proposing the rule?

Pursuant to section 106.03 of the Ohio Revised Code, a systematic review has been made of rule 5160-13-02. As a result, it is being rescinded and replaced with new rule 5160-13-02.

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

Rule 5160-13-02 sets forth coverage, payment, and limitations pertaining to dialysis services furnished by dialysis centers. In addition to streamlined organization and clarified phrasing, rule changes include:

*Coverage of dialysis services for acute kidney injury (AKI) is added.

*Coverage of "Method II" dialysis (revenue center codes 825, 835, 845, and 855) is discontinued.

*Revenue center codes 829, 839, 849, and 859 formerly represented a combination of dialysis self-care training and dialysis treatment. They now represent dialysis self-care training alone; dialysis treatment is reported separately on a claim.

*The per-visit payment amount (PVPA) for a dialysis treatment service includes all applicable related services, tests, equipment, supplies, and incidental instruction that are designated by Medicare as "subject to consolidated billing." Payment amounts for treatment have been increased to include erythropoiesis-stimulating agents (ESAs) and calcimimetic pharmaceuticals, which were previously paid separately.

*The PVPA for a covered service is stated as a fixed number rather than a formula. PVPAs are listed in a new appendix to the rule.

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. 121.75, please explain the basis for the exemption and how an individual can find the referenced material.**

Not Applicable

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. **Please estimate the increase / decrease in the agency's revenues or expenditures in the current biennium due to this rule.**

This will decrease expenditures.

\$156,500

Coverage and payment policy has been simplified and generally follows Medicare. The per-visit payment amount for a covered service is stated as a fixed number rather than a formula. The per-visit payment amount for a dialysis treatment service includes all applicable related services, tests, equipment, supplies, and incidental instruction that are designated by Medicare as "subject to consolidated billing." Payment amounts for treatment have been increased to include erythropoiesis-stimulating agents (ESAs) and calcimimetic pharmaceuticals, which were previously paid separately.

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

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

15. If the rule imposes a regulation fee, explain how the fee directly relates to your agency's cost in regulating the individual or business.

Not Applicable

III. Common Sense Initiative (CSI) Questions

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

17. 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

D. Is it likely that the rule will directly reduce the revenue or increase the expenses of the lines of business of which it will apply or applies? No

IV. Regulatory Restrictions (This section only applies to agencies indicated in R.C. 121.95 (A))

18. Are you adding a new or removing an existing regulatory restriction as defined in R.C. 121.95? No

A. How many new regulatory restrictions do you propose adding?

Not Applicable

B. How many existing regulatory restrictions do you propose removing?

Not Applicable