ACTION: Original

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Rule Summary and Fiscal Analysis (Part A)

Ohio Department of Medicaid

Agency Name

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<u>5160-22-01</u> <u>AMENDMENT</u>

Rule Number TYPE of rule filing

Rule Title/Tag Line <u>Ambulatory surgery center eligible providers.</u>

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? N_0
- 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**
- 6. State the reason(s) for proposing (i.e., why are you filing,) this rule:

This rule is being proposed for amendment as a result of Ohio's 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:

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Rule 5160-22-01 sets forth the standards for ambulatory surgery centers (ASCs) to become Medicaid providers and be reimbursed for services. In order to participate in the Medicaid program an ASC must have a valid agreement with the Centers for Medicare and Medicaid Services (CMS) to provide ASC services in the Medicare program; therefore the references to the Code of Federal Regulations are unnecessary and are being removed. A line was also added to reference Medicaid's ASC reimbursement rule.

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

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:

Not Applicable.

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:

Not Applicable.

12. Five Year Review (FYR) Date: 1/12/2015

(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

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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

Not Applicable

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

651-525

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:

In order to obtain a valid agreement with CMS to provide ASC services in the Medicare program there is an estimated \$3000-\$5000 fee for accreditation (Source: The American Association for Accreditation of Ambulatory Surgery Facilities). However, as long as a valid agreement with CMS is maintained, there is no additional net new adverse impact in order to become a Medicaid provider. There is no expected adverse impact on existing ASC providers as they already meet the requirements.

- 16. Does this rule have a fiscal effect on school districts, counties, townships, or municipal corporations? N_0
- 17. Does this rule deal with environmental protection or contain a component dealing with environmental protection as defined in R. C. 121.39? **No**

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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

In order for an ambulatory surgery center (ASC) to enroll in the Medicaid program it must have a valid agreement with CMS to provide ASC services in the Medicare program.

- 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