

Rule Summary and Fiscal Analysis

Part A - General Questions

Rule Number: 5160-43-04

Rule Type: Amendment

Rule Title/Tagline: Specialized recovery services program covered services and provider requirements.

Agency Name: Ohio Department of Medicaid

Division:

Address: 50 Town St 4th floor Columbus OH 43218-2709

Contact: Tommi Potter **Phone:** 614-752-3877

Email: tommi.potter@medicaid.ohio.gov

I. Rule Summary

1. **Is this a five year rule review?** Yes
 - A. **What is the rule's five year review date?** 7/23/2021
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, 5164.03
6. **What are the reasons for proposing the rule?**

The specialized recovery services program (SRSP) provides Medicaid eligibility and home and community-based services (HCBS) to adults diagnosed with a serious and persistent mental illness (SPMI) and/or diagnosed chronic conditions (DCC) who also meet the financial, clinical, needs and risk eligibility criteria specified in the 1915 (i) State Plan Amendment and in the rules set forth in Chapter 5160-43 of the Ohio Administrative Code (OAC). The rules in Chapter 5160-43 of the OAC were amended for five-year rule review and in alignment with the requested renewal of the State Plan Amendment.

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

OAC 5160-43-04, entitled "Specialized recovery services program covered services and provider requirements" describes the covered services available to individuals through the program and the requirements of providers to deliver services. Changes to the rule include revising the language describing Recovery Management activities in paragraph (D)(2) to align with State Plan Amendment language. Also, provisions were added in paragraph (D)(2) to allow increased flexibility in the way evaluations occur to include telephone or video conference in addition to face-to-face visits.

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.

This rule incorporates one or more references to the Revised Code. This question is not applicable to any incorporation by reference to the Revised Code because such reference is exempt from compliance with RC 121.71 to 121.74 pursuant to RC 121.75(A)(1)(a).

This rule incorporates one or more references to another rule or rules of the Administrative Code. This question is not applicable to any incorporation by reference to another Administrative Code rule because such reference is exempt from compliance with RC 121.71 to 121.74 pursuant to RC 121.75(A)(1)(d).

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

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).

This rule incorporates one or more dated references to an ODM form. Each cited ODM form is dated and is generally available to persons affected by this rule via the "Resources" and "Publications" links on the ODM web site (<http://medicaid.ohio.gov/>) in accordance with RC 121.75(E).

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 have no impact on revenues or expenditures.

0.00

Not Applicable

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

OAC 5160-43-04 requires providers of IPS-SE and PRS to be certified by OhioMHAS in accordance with ORC Section 5119.36 and to maintain a record for each individual served in a manner that protects the confidentiality of the record. Recovery Managers are responsible for evaluating eligibility for potential participants and coordinating program services or needed resources for the individual. The rule requires recovery managers to have training specific to the evaluation and management of the SRS populations. Recovery managers are also required to maintain a record for each individual served in a manner that protects confidentiality.

The cost of certification through OhioMHAS is based upon the budget of the agency that is applying for certification. The fee schedule showing the correlation between the agency's budget and the certification cost is located in OhioMHAS OAC rule 5122-25-08. A provider already certified by OhioMHAS, requesting to add an additional service(s) pays a fee based only upon their budget for the new service(s). When the agency has appropriate accreditation from The Joint Commission, Commission on Accreditation of Rehabilitation Facilities (CARF), or Council on Accreditation (COA) there is no certification fee owed to OhioMHAS.

Record retention is a requirement of all Medicaid providers and is not specific to the Specialized Recovery Services Program (SRSP). The cost of maintaining a record of services provided to the individual can vary depending on the size of the provider agency, the amount of services provided and the method of retention. During the process of gathering input from providers for the proposed rule amendments, providers informed ODM that they do not separately track record retention costs, but

the costs are included in their overall administrative costs. The estimated overhead cost per person served varied by agency but ranged from 15% to 20% which includes unrelated items such as supervision, record keeping, internet service, etc. One recovery management agency estimated that their cost is \$6,048 annually based on current enrollment levels. Administrative costs are incorporated into the Medicaid payment rate resulting in at least partial reimbursement for these costs.

The recovery management service is provided by ODM-contracted case management agencies and the training of the recovery management agency staff is a requirement within the scope of work and specifications of deliverables of the current contract. The training requirements set forth in these rules are consistent with professional standards, and are imposed for program integrity purposes. The estimated timeframes to complete the various trainings is between thirty and ninety minutes. Based on the Bureau of Labor Statistics data, the median salary of a recovery manager is between \$24.26/hour or \$50,470/year for a social worker and \$35.24/hour or \$73,300/year for a registered nurse (RN). Both recovery management agencies provided current average salary information for their recovery management staff and report average salaries as \$23.08-\$26.96/hour or \$48,000-\$56,076/year which is in line with the national median salary for social workers. Based on the information median salary data, the expected cost for a social worker to complete a training can be between \$12.13 and \$36.39 per training. The expected cost for an RN to complete the training can be between \$17.62 and \$52.86 per training. Recovery Managers are also required to be trained in the administration of the Adult Needs and Strengths Assessment (ANSA) through the Praed foundation and the cost of that training is \$12.00/hr; staff are paid their applicable hourly rate during training. The average time for completion of the training and certification for the ANSA is 4 hours.

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? Yes**
17. **Does this rule have an adverse impact on business? Yes**

- 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?** Yes

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- 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?** Yes

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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