ACTION: Original

Rule Summary and Fiscal Analysis Part A - General Questions

Rule Number: 5160-8-05

Rule Type: Amendment

Rule Title/Tagline: Behavioral health services-other licensed professionals.

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? 4/30/2023
- 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?

This rule is being proposed for amendment to update ODM policy.

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

Rule 5160-8-05 entitled "Behavioral health services-other licensed professionals" sets forth general Medicaid policy regarding the provision of behavioral health services by specified providers. The rule states related definitions, provider requirements, and services the providers may render. Reimbursement policy is stated as well as provider billing limitations and service provision documentation requirements. The proposed

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revisions include an updated policy related to behavioral health services performed in an inpatient or outpatient hospital setting and clarify reimbursement provisions.

- 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 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 121.76(A)(3). 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.

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. 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.

\$0.00

Not Applicable

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

The requirement to enroll in the Medicaid program may result in the application of a Medicaid application fee as well as administrative activities for the provider's staff. There may also be administrative activities resulting from the requirement to enroll in the Medicare program.

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Quantifying any cost is difficult because of the significant variance of business design, number of service locations, agency workforce, client caseload, and business acumen among the 820 Medicaid enrolled providers of behavioral health services. However, if the provider is subject to a Medicaid application fee, the fee cost is \$586.

This rule does not apply a regulation fee.

For the proposed revisions to this rule, there are no costs 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? Yes
 - A. Does this rule require a license, permit, or any other prior authorization to engage in or operate a line of business? Yes
 - A practitioner must be enrolled in the Medicaid program as an eligible provider. Also, if eligible, the practitioner must also enroll 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