

**MEMORANDUM**

TO: Tommi Potter, Ohio Department of Medicaid

FROM: Travis Butchello, Regulatory Policy Advocate

DATE: May 11, 2017

RE: **CSI Review – Provider-Administered Injections and Pharmaceuticals; Adding Existing Coverage for Provider Administered Skin Substitutes (OAC 5160-4-12 and 5160-4-35)**

On behalf of Lt. Governor Mary Taylor, and pursuant to the authority granted to the Common Sense Initiative (CSI) Office under Ohio Revised Code (ORC) section 107.54, the CSI Office has reviewed the abovementioned administrative rule package and associated Business Impact Analysis (BIA). This memo represents the CSI Office's comments to the Agency as provided for in ORC 107.54.

Analysis

This rule package consists of one amended and one rescinded rule proposed by the Ohio Department of Medicaid (ODM) under the statutory five-year rule review requirement. The rule package was submitted to the CSI Office on March 3, 2017 and the public comment period was held open through March 10, 2017. No comments were received during this time.

Amended rule 5160-4-12 sets forth coverage and payment provisions for injections and other pharmaceuticals. The amendment references a payment table or fee schedule which contains codes for all covered skin substitutes. Adding such provisions to the rule will direct readers to a single rule that combines all coverage and payment provisions for the aforementioned services. In addition, references to limited family planning benefits have been removed as required by House Bill 64 of the 131st General Assembly.

Ohio Administrative Code (OAC) 5160-4-35 sets forth coverage and payment provisions for the

application of skin substitute grafts performed by wound care specialists. Rescission of this rule will allow ODM to incorporate provisions from 5160-4-35 into 5160-4-12. ODM states in the BIA that the purpose of the rule is to establish coverage and payment policies for professional provider administered pharmaceuticals as authorized by ORC 5164.02.

ODM explained in the BIA that it reached out to numerous health and physician associations as part of its early stakeholder outreach process including the Ohio State Medical Association, Ohio Association of Advanced Practice Nurses (OAAPN), and the Ohio Association of Physician Assistants. During the discussions, the OAAPN requested adding more detail to 5160-4-12 to describe Medicaid payments for wound treatment services in both facility and non-facility settings. ODM responded by providing such detail and incorporated changes into the rule.. No public comments were received during the CSI public comment period.

The rules impact primarily physicians, advance practice nurses, and physician assistants. The nature of the impact lies primarily in the maintenance of required documentation in medical records. Specifically, the rule requires numerous additional entries into the patient record including reasons for selecting the treatment option, muscles affected, frequency of injections, and others. ODM notes in the BIA that the quantifiable impact to providers is the time needed for the input of information by administrative staff while cost of compliance will vary from practitioner to practitioner and will decrease with the use of technology. ODM emphasizes in the BIA that the intent of the rules justifies the adverse impact because detailed documentation and reporting requirements will be effective in preventing fraud, waste, and abuse, promote efficiency, and ultimately ensure program integrity.

Recommendation

For the reasons explained above, this office does not have any recommendations regarding this rule package.

Conclusion

Based on the above comments, the CSI Office concludes that the Ohio Department of Medicaid should proceed with the formal filing of this rule package with the Joint Committee on Agency Rule Review.