

Rule Summary and Fiscal Analysis

Part A - General Questions

Rule Number: 5160-19-01

Rule Type: Amendment

Rule Title/Tagline: Patient-centered medical homes (PCMH): eligible providers.

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?** No
 - A. **What is the rule's five year review date?** 10/17/2025
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
6. **Does the rule implement a federal law or rule in a manner that is more stringent or burdensome than the federal law or regulation requires?** No
 - A. **If so, what is the citation to the federal law or rule?** Not Applicable
7. **What are the reasons for proposing the rule?**

The rules contained in this package are being proposed for amendment to reflect changes to the CPC program for the upcoming 2023 program year.
8. **Summarize the rule's content, and if this is an amended rule, also summarize the rule's changes.**

5160-19-01 "Comprehensive primary care (CPC) program: Eligible providers," is being proposed for amendment to reflect changes for the upcoming 2023 program year. This rule provides definitional information, identifies eligible entities and requirements for enrollment as a CPC entity, and describes the activity, efficiency, and quality measures including the performance thresholds that must be met. It provides requirements for group practices who participate as a partnership and informs the CPC entity that it may utilize reconsideration rights to challenge a decision of ODM concerning CPC enrollment or eligibility.

Upon enrollment and on an annual basis, this rule requires that each participating CPC entity attest that it will meet the activity requirements set forth in the rule. The CPC entity must also pass a number of efficiency and clinical quality requirements on an annual basis to continue participation under this rule.

For CPC entities who choose to participate in the optional CPC for Kids program, they will be subject to additional requirements and be eligible for additional payments and bonuses under the CPC for Kids program. This rule defines the CPC for Kids program and sets forth the additional requirements participating CPC entities must meet to enroll under the CPC for Kids program.

This rule provides clinical quality requirements specific to the CPC for Kids program and the threshold of metrics that must be passed annually to continue participation in the CPC for Kids program.

This rule is being amended to update terminology from "PCMH" to "CPC entity" to align with the program name, modify the terminology used for clinical quality metrics to align with Healthcare Effectiveness Data and Information Set (HEDIS) measure definitions. The attribution exceptions have been expanded to also exempt recipients attributed to other population health alternative payment models administered by ODM.

9. **Does the rule incorporate material by reference? Yes**
10. **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 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 references to the Ohio Revised Code. This question is not applicable to any incorporation reference by the Ohio 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 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(A)(2)(d).

- 11. 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

- 12. 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

There will be no impact on revenues or expenditures. The adoption of this proposed rule will not have a fiscal impact for ODM.

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

The revisions made for CPC program year 2023 are minimal and are expected to have little adverse impact to the overall business community. Practices incur some costs through participation, however additional financial incentives are expected to offset any additional costs.

No new costs are expected for practices currently participating in the CPC and CPC for Kids programs. Practices newly enrolling in the Ohio CPC program may incur some costs to meet the requirements described in 5160-19-01. Costs will vary widely based on provider size, current level of staffing, and existing relationships with other providers and networks. Many costs are expected to be administrative and in time spent training existing staff, hiring additional staff, updating technology, providing attestations to ODM, and building relationships with other providers or networks.

The estimated cost for a CPC entity to complete activity requirements and meet clinical quality measures in the voluntary CPC program will vary widely. Many entities that choose to participate may already have the required practitioners on staff. Entities who also participate in the Ohio Comprehensive Maternal Care (CMC) program may incur fewer costs as they have already established many of the same activities also required under the CPC program. Practices who form a partnership to participate as a CPC entity may combine resources and share in any costs that are incurred. Entities who are already participating in value-based care models with ODM or other payers may experience fewer costs as they are likely already conducting many of the activities required in this rule. This is largely dependent on provider size, current baseline operations, and available resources. Most CPC entities are expected to have many of these costs already incorporated into their practice infrastructure, and the per-member per-month payments provided prospectively through the CPC program are expected to offset most or all of the costs of meeting program requirements.

Because the CPC for Kids program builds on the existing requirements of the CPC program, and the additional quality metrics being evaluated for CPC for Kids practices are typically already performed as part of the pediatric standard of care, no additional costs beyond those stated for all CPC practices are expected. CPC for Kids practices may choose to perform additional activities as described in 5160-19-02 to position themselves to be more likely to receive a bonus payment.

14. **Does the rule increase local government costs? (If yes, you must complete an RSFA Part B). Yes**
15. **Does the rule regulate environmental protection? (If yes, you must complete an RSFA Part C). No**
16. **If the rule imposes a regulation fee, explain how the fee directly relates to your agency's cost in regulating the individual or business.**

This rule does not impose a regulation fee.

III. Common Sense Initiative (CSI) Questions

17. **Was this rule filed with the Common Sense Initiative Office? Yes**
18. **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**

For any eligible primary care entity that voluntarily chooses to enroll in the Ohio CPC or Ohio CPC for Kids program, this rule requires the participating entity to be licensed with a primary care physician, advanced practice registered nurse, or physician assistant that has a specialty in primary care.

- 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**

Upon enrollment and on an annual basis, each CPC entity must attest that it will meet all activity requirements. All CPC entities must attest to meeting all ten activity requirements at the beginning of each program year, including CPC entities that are re-attesting to meeting activity requirements based on their current program year enrollment.

- 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**

Practices newly enrolling in the Ohio CPC program may incur some costs to meet the requirements described in this proposed rule. Costs will vary widely based on provider size, current level of staffing, and exiting relationships with other providers and networks. Many costs are expected to be administrative and in time spent training existing staff, hiring additional staff if needed, updating technology, providing attestations to ODM, and building relationships with other providers and networks.

Because the CPC for Kids program builds on the existing requirements of the CPC program, and the additional quality metrics being evaluated for CPC for Kids practices are typically already performed as part of the pediatric standard of care, no additional costs beyond those stated for all CPC practices are expected. CPC for Kids practices may choose to perform additional activities as described in 5160-19-02 to position themselves to be more likely to receive a bonus payment. Upon enrollment and on an annual basis, each CPC practice must attest that it will meet all activity requirements. All CPC practices must attest to meeting all ten activity requirements at the beginning of each program year, including CPC practices that are re-attesting to meeting activity requirements based on their current program year enrollment.

Upon enrollment and on an annual basis, each CPC entity must attest that it will meet all activity requirements. All CPC entities must attest to meeting all ten activity requirements at the beginning of each program year, including CPC entities that are re-attesting to meeting activity requirements based on their current program year enrollment. The act of reporting or attesting does not require monetary costs but will result in time spent to provide this information and operative as a CPC entity. CPC entity partnerships who meet criteria for CPC for Kids may opt-in to CPC for Kids at the partnership level by reporting this specific information at the time of application.

The estimated cost for a CPC entity to complete activity requirements and meet clinical quality measures in the voluntary CPC program will vary widely. Many entities that choose to participate may already have the required practitioners on staff. Entities who also participate in the Ohio Comprehensive Maternal Care (CMC) program may incur fewer costs as they have already established many of the same activities also required under the CPC program. Practices who form a partnership to participate as a CPC entity may combine resources and share in any costs that are incurred. Entities who are already participating in value-based care models with ODM or other payers may experience fewer costs as they are likely already conducting many of the activities required in this rule. This is largely dependent on provider size, current baseline operations, and available resources. Most CPC entities are expected to have many of these costs already incorporated into their practice infrastructure, and the per-member per-month payments provided prospectively through the CPC program are expected to offset most or all of the costs of meeting program requirements.

IV. Regulatory Restriction Requirements under S.B. 9. Note: This section only applies to agencies described in R.C. 121.95(A).

19. 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 to this rule?

Not Applicable

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

Not Applicable

- C. If you are not removing existing regulatory restrictions from this rule, please list the rule number(s) from which you are removing restrictions.**

Not Applicable

- D. Please justify the adoption of the new regulatory restriction(s).**

Not Applicable

Rule Summary and Fiscal Analysis

Part B - Local Governments Questions

1. Does the rule increase costs for:

A. Public School Districts	No
B. County Government	Yes
C. Township Government	Yes
D. City and Village Governments	Yes

2. Please estimate the total cost, in dollars, of compliance with the rule for the affected local government(s). If you cannot give a dollar cost, explain how the local government is financially impacted.

Practices newly enrolling in the Ohio CPC program may incur some costs to meet the requirements described in this proposed rule. Costs will vary widely based on provider size, current level of staffing, and exiting relationships with other providers and networks. Many costs are expected to be administrative and in time spent training existing staff, hiring additional staff if needed, updating technology, providing attestations to ODM, and building relationships with other providers and networks.

Because the CPC for Kids program builds on the existing requirements of the CPC program, and the additional quality metrics being evaluated for CPC for Kids practices are typically already performed as part of the pediatric standard of care, no additional costs beyond those stated for all CPC practices are expected. CPC for Kids practices may choose to perform additional activities as described in 5160-19-02 to position themselves to be more likely to receive a bonus payment. Upon enrollment and on an annual basis, each CPC practice must attest that it will meet all activity requirements. All CPC practices must attest to meeting all ten activity requirements at the beginning of each program year, including CPC practices that are re-attesting to meeting activity requirements based on their current program year enrollment.

Upon enrollment and on an annual basis, each CPC entity must attest that it will meet all activity requirements. All CPC entities must attest to meeting all ten activity requirements at the beginning of each program year, including CPC entities that are re-attesting to meeting activity requirements based on their current program year enrollment.

The estimated cost for a CPC entity to complete activity requirements and meet clinical quality measures in the voluntary CPC program will vary widely. Many entities that choose to participate may already have the required practitioners on staff. Entities who also participate in the Ohio Comprehensive Maternal Care (CMC) program may incur fewer costs as they have already established many of the same activities also required under the CPC program. Practices who form a partnership to participate as a CPC entity may combine resources and share in any costs that are incurred. Entities who are already participating in value-based care models with ODM or other payers may experience fewer costs as they are likely already conducting many of the activities required in this rule. This is largely dependent on provider size, current baseline operations, and available resources. Most CPC entities are expected to have many of these costs already incorporated into their practice infrastructure, and the per-member per-month payments provided prospectively through the CPC program are expected to offset most or all of the costs of meeting program requirements.

3. **Is this rule the result of a federal government requirement?** No
- A. **If yes, does this rule do more than the federal government requires?** *Not Applicable*
- B. **If yes, what are the costs, in dollars, to the local government for the regulation that exceeds the federal government requirement?**

Not Applicable

4. **Please provide an estimated cost of compliance for the proposed rule if it has an impact on the following:**

A. Personnel Costs

This proposed amendment will result in personnel costs and the administrative time spent performing enrollment and attestation activities. Practices newly enrolling in the Ohio CPC program may incur some costs to meet the requirements described in this proposed rule. Costs will vary widely based on provider size, current level of staffing, and exiting relationships with other providers and networks. Many costs are expected to be administrative and in time spent training existing staff, hiring additional staff if needed, updating technology, providing attestations to ODM, and building relationships with other providers and networks.

B. New Equipment or Other Capital Costs

Practices newly enrolling in the Ohio CPC program may incur some costs to meet the requirements described in this rule. Costs will vary widely based on

provider size, current level of staffing, and existing relationships with other providers and networks. Many costs are expected to be administrative and in time spent training existing staff, hiring additional staff, updating technology, providing attestations to ODM, and building relationships with other providers or networks.

C. Operating Costs

To be eligible for participation, an eligible practice must be enrolled as a CPC entity and have at least 150 attributed Medicaid individuals. To be eligible for participation in the CPC for Kids program, the CPC entity must enroll as a CPC for Kids practice and have at least 150 attributed Medicaid individuals under age 21 as determined through claims-only data. Practices newly enrolling as a CPC entity in the 2023 program year are expected to complete an application during the designated enrollment period. Existing CPC entities will re-attest for the next year if they desire to continue as a CPC and/or CPC for Kids entity by completing an enrollment application during the designated enrollment period.

Practices newly enrolling in the Ohio CPC program may incur some costs to meet the requirements described in this rule. Costs will vary widely based on provider size, current level of staffing, and existing relationships with other providers and networks. Many costs are expected to be administrative and in time spent training existing staff, hiring additional staff, updating technology, providing attestations to ODM, and building relationships with other providers or networks.

Upon enrollment and on an annual basis, each CPC entity must attest that it will meet all activity requirements. All CPC entities must attest to meeting all ten activity requirements at the beginning of each program year, including CPC entities that are re-attesting to meeting activity requirements based on their current program year enrollment.

The estimated cost for a CPC entity to complete activity requirements and meet clinical quality measures in the voluntary CPC program will vary widely. Many entities that choose to participate may already have the required practitioners on staff. Entities who also participate in the Ohio Comprehensive Maternal Care (CMC) program may incur fewer costs as they have already established many of the same activities also required under the CPC program. Practices who form a partnership to participate as a CPC entity may combine resources and share in any costs that are incurred. Entities who are already participating in value-based care models with ODM or other payers may experience fewer

costs as they are likely already conducting many of the activities required in this rule. This is largely dependent on provider size, current baseline operations, and available resources. Most CPC entities are expected to have many of these costs already incorporated into their practice infrastructure, and the per-member per-month payments provided prospectively through the CPC program are expected to offset most or all of the costs of meeting program requirements.

D. Any Indirect Central Service Costs

Practices newly enrolling as a CPC entity in the 2023 program year are expected to complete an application during the designated enrollment period. Existing CPC entities will re-attest for the next year if they desire to continue as a CPC and/or CPC for Kids entity by completing an enrollment application during the designated enrollment period. The act of reporting or attesting does not require monetary costs but will result in time spent to provide this information and operative as a CPC entity. CPC entity partnerships who meet criteria for CPC for Kids may opt-in to CPC for Kids at the partnership level by reporting this specific information at the time of application.

E. Other Costs

No other costs.

5. Please explain how the local government(s) will be able to pay for the increased costs associated with the rule.

Through participation in the Ohio CPC or Ohio CPC for Kids program, providers receive a prospective per-member per-month (PMPM) payment quarterly that helps in carrying out the required activities. Practices may also receive a total cost of care savings payment if certain quality and efficiency metrics are met.

6. What will be the impact on economic development, if any, as the result of this rule?

This rule is expected to have a positive impact on economic development. Participating entities would provide more efficient care, improve access for Medicaid enrolled individuals receiving care through a CPC entity, and improve overall delivery of health care services provided to Medicaid covered individuals. This will also support independent practices that meet the eligibility criteria to participate.