

Rule Summary and Fiscal Analysis

Part A - General Questions

Rule Number: 5160-28-06.1

Rule Type: New

Rule Title/Tagline: FQHC and RHC services: limits on a per-visit payment amount (PVPA) determined on the basis of a cost report for an FQHC PPS service.

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?
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. What are the reasons for proposing the rule?

The rule is being proposed as a result of five-year rule review.

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

This rule sets forth the method for determining a per-visit payment amount (PVPA) for an FQHC service on the basis of a cost report.

Existing rule 5160-28-06.1 is being rescinded and replaced with a new rule of the same number. The text of the rule is being reorganized and streamlined. On the whole, the intent remains the same.

The paragraphs regarding administrative and general overhead costs are combined.

Am. Sub. H. B. 166 (133rd G. A.) lists six terms that cause a rule to be deemed to contain regulatory restrictions: 'shall', 'shall not', 'must', 'may not', 'require', and 'prohibit'. All of these terms are being removed from this rule, and the passages in which they appear are recast.

In new rule 5160-28-06.1, ceiling is being redefined because the schedule currently referenced in rule to calculate the urban wage adjustment factor (UWAF) no longer exists.

8. **Does the rule incorporate material by reference?** No
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.**

Not Applicable

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.

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There is no fiscal impact on the Medicaid budget.

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

There is no cost of compliance associated with this rule.

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? No
17. Does this rule have an adverse impact on business? No
 - 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? No
 - 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? No

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