#### **ACTION:** Revised

# Rule Summary and Fiscal Analysis Part A - General Questions

**Rule Number:** 5160-59-03.2

Rule Type: New

Rule Title/Tagline: OhioRISE: care coordination.

**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? 5162.03, 5167.02
- 5. What statute(s) does the rule implement or amplify? 5167.02, 5167.03, 5167.04, 5167.10
- 6. What are the reasons for proposing the rule?

As part of its Next Generation of Managed Care, and in partnership with the Governor's Children's Initiative and other child-serving state agencies, the Ohio Department of Medicaid (ODM) is designing a reimagined Medicaid system and structure to better serve children and youth who have complex behavioral health and multi-system needs through the Ohio Resilience through Integrated Systems and Excellence (OhioRISE) Program.

The OhioRISE Program, operated by ODM, is a managed care prepaid inpatient health plan (PIHP) for children with behavioral health needs who are often served by multiple

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delivery systems in the state. As part of the implementation of the OhioRISE Program, ODM is implementing a new chapter of rules for the OhioRISE Program.

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

Administrative code rule 5160-59-03.2, entitled "OhioRISE: Care Coordination (ICC/MCC)," sets forth the tiers of OhioRISE care coordination and how the different tiers are determined for the members of OhioRISE. This new rule also defines the care management entities and their responsibilities over care coordination of an OhioRISE member.

- 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 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). OAC Medicaid rules may be found online at: http://codes.ohio.gov/oac/5160.

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 a reference to an Ohio child and adolescent needs and strengths (CANS) assessment. The cited assessment is dated and is generally available to persons affected by this rule via the 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.

5/19/2022 - changes include:

Paragraph (B)(2)(j) allow for two business days instead of one for outreach

Paragraph (C)(1)(a)(i) and (C)(2)(a)(i) update to clarify initial outreach

Paragraph (K) was added to indicate where the CANS assessment reimbursement is found

Paragraph (M) was added to delay timeframes in paragraphs (B) and (C) to be enforced

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#### 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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Not Applicable

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

Not Applicable

- 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? Yes

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Care coordinators and supervisors will complete training for high-fidelity wraparound and complete skill and competency-based programs.

- 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

Care management entities to maintain records and service plans for members, record the circumstances regarding transition, record progress notes detailing care coordination activities, complete the care plan within specified timeframes, and submit to the OhioRISE plan for approval. They will also to report incidents that are not consistent with the routine care of, and/or service delivery to an individual to ODM or the OhioRISE plan. This is a federal requirement and is necessary to ensure the health and safety of individuals enrolled in OhioRISE program.

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

Care coordinators and supervisors will complete training for high-fidelity wraparound and complete skill and competency-based programs. The cost of training will increase expenses.

## 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