MEMORANDUM

TO: Tommi Potter, Ohio Department of Medicaid

FROM: Sophia Papadimos, Regulatory Policy Assistant

DATE: April 13, 2015

RE: **CSI Review – Laboratory-Related Services (OAC 5160-11-02, 5160-11-03, 5160-11-04, 5160-11-06, 5160-11-07, 5160-11-10, 5160-11-02 and 5160-11-03.1)**

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 eight rules being proposed by the Ohio Department of Medicaid (ODM) pursuant to the five-year review requirement in statute. Six of the rules are being proposed for rescission and two new rules are being proposed. The rule package was submitted to the CSI Office on February 13, 2015 and the public comment period was held open through February 20, 2015. No comments were received during this time.

The rules in this package pertain to general operating procedures for laboratory-related services. The draft rules in this chapter are being reorganized. Some of the major changes brought forth in the new rules include allowing physicians to sign forms electronically, and diagnosis codes (as opposed to narratives) can now be used for portable X-ray services. The proposed new rules also require X-ray suppliers to be enrolled in Medicare as suppliers of portable X-ray services. Lastly, the draft rules remove urine samples by catheterization from the list of procedures that are treated as laboratory-related services.

ODM describes the impacted business community as laboratories, independent diagnostic testing facilities (IDTFs), mammography suppliers, and portable X-ray suppliers. The adverse impact of the proposed rules is time for compliance. ODM explained that the provision that portable X-ray suppliers must be enrolled in Medicare is being implemented for purposes of payment coordination. Other changes being made to the rules are intended to simplify requirements for providers. No comments were received that the requirements are overly burdensome. Therefore, after reviewing the proposed rules and associated BIA, the CSI Office has determined the purpose of the rules is justified.

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.