

## MEMORANDUM

TO:	Tommi Potter, Ohio Department of Medicaid
FROM:	Sophia Papadimos, Regulatory Policy Advocate
DATE:	March 11, 2016
RE:	CSI Review – Wheelchairs (OAC 5160-10-16 and 5160-10-16.1)

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.

## <u>Analysis</u>

This rule package consists of two rules (one amended<sup>1</sup> and one rescinded) proposed by the Ohio Department of Medicaid (ODM) pursuant to the five-year review requirement in statute. The rule package was submitted to the CSI Office on September 24, 2015 and the public comment period was held open through October 1, 2015. Two comments were received during this time.

Ohio Administrative Code (OAC) 5160-10-16 sets forth coverage and payment policies for wheelchairs, related accessories, and seating options. Medicaid has indicated in the BIA that substantive changes have been made to the rule. For example, the Medicare wheelchair groupings for power mobility devices have been adopted, as well as the concept of a basic equipment package. Additionally, payments will be allowed for a manual wheelchair in addition to a power mobility device. A replacement schedule for equipment, parts, and accessories has also been established in the proposed rule. Amendments have also been made to the wheelchair certificates

<sup>&</sup>lt;sup>1</sup>OAC 5160-10-16 is being amended by more than 50 percent. Therefore, the Legislative Service Commission requires the rule be rescinded and replaced with a new rule with the same number.

for medical necessity. OAC 5160-10-16.1 sets forth the coverage and payment policies for wheelchair rentals. This rule is being rescinded and the contents will be placed in OAC 5160-10-16.

The adverse impact described in the BIA is the time necessary to fill out paperwork which includes prior authorization requests and certificates of medical necessity. ODM explained that the reporting requirements in the proposed rules help substantiate the appropriateness of the equipment dispensed to Medicaid-eligible individuals.

ODM worked with the Ohio Association of Medical Equipment Services (OAMES) throughout the rule-making process. However, OAMES still had several concerns which were expressed during the public comment period, specifically with the certificate of medical necessity forms. The other comment received during the public comment period focused on reimbursement rates and the CSI Office does not dictate the percentages at which ODM can reimburse providers. Subsequent to the comment period ending, ODM continued to work with OAMES to reach an agreement regarding the certificates of medical necessity. OAMES and ODM contacted the CSI Office on February 29, 2016, explaining that a consensus had been reached. Therefore, after reviewing the rule package, 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.