#### REGULATORY REVIEW SUMMARY

### Amendment to the Plan for Medical Assistance

## I. IDENTIFICATION INFORMATION

<u>Title of Final Regulation</u>: Amount, Duration, and Scope of Services: Technical

Correction to Organ Transplantation Coverage

<u>Director's Adoption</u>: July 12, 1999

Effective Date: September 15, 1999

Agency Contact: Moses Adiele, M.D., Manager

Medical Support, Div. of Program Operations

Dept. of Medical Assistance Services

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## II. SYNOPSIS

Basis and Authority: The Code of Virginia (1950) as amended, §32.1-325, grants to the Board of Medical Assistance Services the authority to administer and amend the Plan for Medical Assistance. The Code of Virginia (1950) as amended, §32.1-324, authorizes the Director of the Department of Medical Assistance Services (DMAS) to administer and amend the Plan for Medical Assistance according to the Board's requirements. The Code also provides, in the Administrative Process Act (APA) §9-6.14:4.1(C)(3) for the exemption of certain regulatory actions by state agencies which consist only of changes in style or form or corrections of technical errors.

<u>Purpose</u>: The purpose of this action is to amend the Plan for Medical Assistance concerning correction of technical errors and internal inconsistencies in the Medicaid coverage of organ transplantation. This action is not expected to affect the public's health, safety, or welfare.

<u>Substance and Analysis:</u> The sections of the State Plan affected by this action are the Narrative for the Amount, Duration, and Scope of Services (Attachment 3.1 A&B, Supplement 1 (12 VAC 30-50-100, 12 VAC 30-50-105, and 12 VAC 30-50-140)) for inpatient hospital and physician services.

The 1999 General Assembly mandated that the Department provide bone marrow/stem cell transplantation coverage to individuals who have diagnoses of leukemia. This was in addition to the already existing coverage for breast cancer and lymphoma diagnoses. DMAS modified its 12 VAC 30-50-570 to provide for this coverage to be effective July 1, 1999, in conformance to the legislative mandate.

Subsequently, it has been realized that additional sections of the State Plan required modification to incorporate this change. Those sections are 12 VAC 30-50-100 (inpatient hospital services-participating providers), 12 VAC 30-50-105 (inpatient hospital services-non-participating providers), and 12 VAC 30-50-140 (physician services). The coverage of organ transplantation for adult individuals with diagnoses of leukemia is provided for here.

<u>Issues</u>: Since this regulatory action effects no changes to Medicaid's service coverage, there are no advantages nor disadvantages to the public. Therefore, the agency projects no negative issues involved in implementing this regulatory change.

<u>Impact</u>: As this is a technical language correction, there are no provider or fiscal impacts to report.

DMAS reported previously, in the original regulatory package referenced above, that the 1999 Appropriations Act provided \$241,000 (GF) and \$256,000 (NGF) in FY 2000 for these transplants based on an estimated five transplant recipients per year.

There are no localities that are uniquely affected by these regulations as they apply statewide.

Forms: No new forms will be required for implementation of this regulation.

<u>Evaluation</u>: The Department of Medical Assistance Services routinely evaluates its State Plan amendments as part of its ongoing Plan management activities. This change will become part of those Plan monitoring activities.

# III. STATEMENT OF AGENCY FINAL ACTION

I hereby approve the foregoing Regulatory Review Summary and take the adoption action stated herein. Because this final regulation is exempt from the public notice and comment requirements of the Administrative Process Act (Code 9-6.14:4.1 C), the Department of Medical Assistance Services will receive, consider and respond to petitions by any interested person at any time with respect to reconsideration or revision.

7/12/99	/s/ Dennis G. Smith_
Date	Dennis G. Smith, Director
	Dept. of Medical Assistance Services

# **REGULATORY REVIEW CHECKLIST**

# To accompany Regulatory Review Package

Ager	тсу	Department of Medical Assistance Services					
Regulation title Amount, Duration, and Scope of Services							
Purpose of the regulation To make technical corrections to the organ transplantation coverage in the State Plan.							
Sum	mary o	f items attached:					
X	Item	1: A copy of the proposed new regulation or revision to existing regulation.					
X	<b>Item 2:</b> A copy of the proposed regulation submission package required by the Virginia Administrative Process Act (Virginia Code Section 9-6.14:7.I.G [redesignated Section 9-6.14:7.I.H after January 1, 1995]). These requirements are:						
	X	(i) the basis of the regulation, defined as the statutory authority for promulgating the regulations, including the identification of the section number and a brief statement relating the content of the statutory authority to the specific regulation proposed.					
	X	(ii) the purpose of the regulation, defined as the rationale or justification for the new provisions of the regulation, from the standpoint of the public's health, safety and welfare.					
	X	(iii) the substance of the regulation, defined as the identification and explanation of the key provisions of the regulation that make changes to the current status of the law.					
	$\boxtimes$	(iv) the issues of the regulation, defined as the primary advantages and disadvantages for the public, and as applicable for the agency or the state, of implementing the new regulatory provisions.					
	X	(v) the estimated impact, defined as the projected number of persons affected, the projected costs, expressed as a dollar figure or range, for the implementation and compliance thereof, and the identity of any localities particularly affected by that regulation.					
X	Item	3: A statement from the Attorney General that the agency possesses, and					

has not exceeded, its statutory authority to promulgate the proposed regulation.

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- Item 4: A statement disclosing whether the contemplated regulation is mandated by state law or federal law or regulation, and, if mandated in whole or in part, a succinct statement of the source (including legal citation) and scope of the mandate, together with an attached copy of all cited legal provisions.
- Item 5: For any proposed regulation that exceeds the specific minimum requirements of a legally binding state or federal mandate, a specific rather than conclusory statement setting forth the reasoning by which the agency has concluded that the proposed regulation is essential to protect the health, safety or welfare of citizens or for the efficient and economical performance of an important governmental function.
- Item 6: For any proposed regulation that exceeds the specific minimum requirements of a legally binding state or federal mandate, a specific rather than conclusory statement describing the process by which the agency has considered less burdensome and less intrusive alternatives for achieving the essential purpose, the alternatives considered, and the reasoning by which the agency has rejected such alternatives.
- Item 7: A schedule setting forth when, no later than three (3) years after the proposed regulation is effective, the agency will initiate a review and reevaluation of the regulation to determine if it should be continued, amended, or terminated. Include a description of the specific and measurable goals the proposed regulation is intended to achieve, if practical.
- Item 8: A detailed fiscal impact analysis prepared in coordination with DPB that includes: (a) the projected cost to the state to implement and enforce the proposed regulation and (b) the source of funds to meet this projected cost.

<u>/s/</u>	s/ Dennis G. Smith 7/1			VPS 7/14/99	
	Signature of Agency head	Date		Date forwarded to	
				DPB & Secretary	