Office of Regulatory Management

Economic Review Form

Agency name	Department of Medical Assistance Services	
Virginia Administrative	N/A	
Code (VAC) Chapter		
citation(s)		
VAC Chapter title(s)	N/A	
Action title	Virginia Informed Choice Form – Guidance Document	
Date this document	5/31/2023	
prepared		
Regulatory Stage	Issuance of Guidance Document	
(including Issuance of		
Guidance Documents)		

Cost Benefit Analysis

Complete Tables 1a and 1b for all regulatory actions. You do not need to complete Table 1c if the regulatory action is required by state statute or federal statute or regulation and leaves no discretion in its implementation.

Table 1a should provide analysis for the regulatory approach you are taking. Table 1b should provide analysis for the approach of leaving the current regulations intact (i.e., no further change is implemented). Table 1c should provide analysis for at least one alternative approach. You should not limit yourself to one alternative, however, and can add additional charts as needed.

Report both direct and indirect costs and benefits that can be monetized in Boxes 1 and 2. Report direct and indirect costs and benefits that cannot be monetized in Box 4. See the ORM Regulatory Economic Analysis Manual for additional guidance.

Table 1a: Costs and Benefits of the Proposed Changes (Primary Option)

(1) Direct	This document provides guidance to Medicaid members who have a home and
& Indirect	community based waiver to inform them about what waiver services are available
Costs &	to them and to make changes to the service choices.
Benefits	
(Monetize	The document is being amended to remove unnecessary text, add instructions, fix
d)	typographic errors, and to add two questions asking if the individual/family would
	like assistance with a referral. These questions are related to Department of
	Justice (DOJ) requirements. No new requirements are added in the instructions.
	They align with and elaborate on regulatory requirements.
	The specific changes are outlined below:
	In a center box on page 1, two questions were added per DOJ:
	The individual/family would like assistance with this referral?
	Yes \square No \square
	If you have questions about Peer Mentoring contact: The Arc of Virginia at 804-
	649-8481 thearcofva.org
	The individual/family would like assistance with this referral?
	Yes □ No □
	165 = 110 =
	In the table below that, there are [grey text] prompts in the fillable cells. (Note
	that these changes account for the bulk of the increase in the word count.)
	The footer on the form was updated for this month's date of 5/25/2023.
	The content of the original page 2 was condensed to fit on page 1.
	The text below that appeared on the original page 2 was deleted and replaced with
	instructions.
	Regional Support Team referral is REQUIRED if any of the following criteria apply:
	Community:
	☐ Difficulty finding services in the community within 3 months of receiving a slot ☐ Moving to a group home of five or more individuals
	☐ Moving to a nursing home or ICF
	☐ Pattern of repeatedly being removed from home
	<u>Training Center:</u> ☐ Moving to a nursing home, ICF/ID or group home with five or more individuals
	☐ Difficulty finding particular type of community supports within 30 days of discharge plan
	□ PST cannot agree on a discharge plan outcome within 15 days of the annual PST meeting, or within 30 days after the a Training Center
	☐ Individual or AR opposes moving despite PST recommendation
	☐ Individual or AR refuses to participate in the discharge planning process
	☐ Hasn't moved within three months of selecting a provider ☐ Recommendation to remain in a Training Center
	There are no costs tied to the document or the changes. There is an unquantifiable indirect benefit in amending the form to remove unnecessary text, add
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	instructions, fix typographic errors to help ensure clarity, and add questions to conform with DOJ requirements.			
(2) Present Monetize d Values	Direct	& Indirect Costs	Direct & Indirect Benefits	
u values	(a)	x munect Costs	(b)	
(3) Net Monetize d Benefit				
(4) Other Costs & Benefits (Non- Monetize d)				
(5) Informati on Sources				
Table 1b: C	osts and	Benefits under the Statu	s Quo (No change to the regulation)	
(1) Direct & The costs and/or benefits under the Status Quo will be included in Economic Review Form that accompanies any regulatory action result from the guidance document.		that accompanies any regulatory action that may		
(2) Present Monetized Values		Direct & Indirect Costs (a)	Direct & Indirect Benefits (b)	
(3) Net Mo Benefit	netized			
(4) Other C Benefits (N Monetized)	lon-			
(5) Informa	ition			

Table 1c: Costs and Benefits under Alternative Approach(es)

Sources

(1) Direct &	The costs and/or benefits under an Alternative Approach(es) will be		
Indirect Costs &	included in the Economic Review Form that accompanies any regulatory		
Benefits	action that may result from the guidance document.		
(Monetized)			
(2) Present			
Monetized Values	Direct & Indirect Costs	Direct & Indirect Benefits	
	(a)	(b)	
(3) Net Monetized Benefit			
(4) Other Costs &			
Benefits (Non-			
Monetized)			
(5) Information			
Sources			

Impact on Local Partners

Use this chart to describe impacts on local partners. See Part 8 of the ORM Cost Impact Analysis Guidance for additional guidance.

Table 2: Impact on Local Partners

(1) Direct &	The costs and/or benefits on local partners will be included in the		
Indirect Costs &	Economic Review Form that accompanies any regulatory action that may		
Benefits	result from the guidance document.		
(Monetized)			
(2) Present			
Monetized Values	Direct & Indirect Costs	Direct & Indirect Benefits	
	(a)	(b)	
(3) Other Costs &			
Benefits (Non-			
Monetized)			
(4) Assistance			
(5) Information			
Sources			

Impacts on Families

Use this chart to describe impacts on families. See Part 8 of the ORM Cost Impact Analysis Guidance for additional guidance.

Table 3: Impact on Families

(1) Direct & Indirect Costs & Benefits (Monetized)	The costs and/or benefits on families will be included in the Economic Review Form that accompanies any regulatory action that may result from the guidance document.		
(2) Present Monetized Values	Direct & Indirect Costs (a)	Direct & Indirect Benefits (b)	
(3) Other Costs & Benefits (Non- Monetized)			
(4) Information Sources			

Impacts on Small Businesses

Use this chart to describe impacts on small businesses. See Part 8 of the ORM Cost Impact Analysis Guidance for additional guidance.

Table 4: Impact on Small Businesses

The costs and/or benefits on small businesses will be included in the Economic Review Form that accompanies any regulatory action that may result from the guidance document.		
Direct & Indirect Costs	Direct & Indirect Benefits	
(a)	(b)	
	Economic Review Form that accompresult from the guidance document. Direct & Indirect Costs	

(5) Information	
Sources	

Changes to Number of Regulatory Requirements

Table 5: Regulatory Reduction

For each individual action, please fill out the appropriate chart to reflect any change in regulatory requirements, costs, regulatory stringency, or the overall length of any guidance documents.

Length of Guidance Documents (only applicable if guidance document is being revised)

Title of Guidance	Original Length	New Length	Net Change in
Document			Length
Informed Choice	814 words	1250 words	+ 436 words
Form			