

Secretary of State
NOTICE OF PROPOSED RULEMAKING
A Statement of Need and Fiscal Impact accompanies this form.

Oregon Health Authority (Authority), Health Systems Division, Medical Assistance Programs (Division)	410	
Agency and Division	Administrative Rules Chapter Number	
Sandy Cafourek	500 Summer St. NE, Salem, OR 97301	503-945-6430
Rules Coordinator	Address	Telephone

RULE CAPTION

Prioritized List Effective October 1, 2016

Not more than 15 words that reasonably identifies the subject matter of the agency's intended action.

RULEMAKING ACTION

Secure approval of new rule numbers (Adopted or Renumbered rules) with the Administrative Rules Unit prior to filing

ADOPT:

AMEND: OAR 410-141-0520

REPEAL: OAR 410-141-0520(T)

RENUMBER:

AMEND & RENUMBER:

Stat. Auth.: ORS 413.042 & 414.065

Other Auth.:

Stats. Implemented: ORS 414.065 & 414.727

RULE SUMMARY

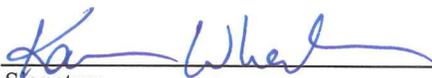
The OHP program administrative rules govern the Division's payments for services provided to clients. The Authority needs to amend 410-141-0520. This change references the new interim modifications to the Centers for Medicare and Medicaid Services' (CMS) approved biennial January 1, 2016–December 31, 2017, Prioritized List funded through line 475. These modifications include revised condition treatment pairings approved at the January 14, 2016, through August 11, 2016, HERC meetings not involving the changes to the prioritization of treatments for conditions of the back and spine already reflected in the July 1, 2016, Prioritized List. The October 1, 2016, Prioritized List includes revised line items and new/revised guideline notes and multisector interventions that supersede those found in the July 1, 2016, Prioritized List.

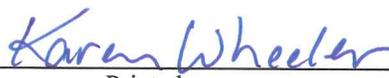
The agency requests public comment on whether other options should be considered for achieving the rule's substantive goals while reducing the negative economic impact of the rule on business.

November 17, 2016, by 5 p.m.

Send comments to: hsd.rules@state.or.us

Last Day for Public Comment (Last day to submit written comments to the Rules Coordinator)


Signature


Printed name


Date

Secretary of State
STATEMENT OF NEED AND FISCAL IMPACT

A Notice of Proposed Rulemaking Hearing or a Notice of Proposed Rulemaking accompanies this form.

Oregon Health Authority, Health Systems Division, Medical Assistance Programs (Division)	410
Agency and Division	Administrative Rules Chapter Number

Prioritized List Effective October 1, 2016

Rule Caption (Not more than 15 words that reasonably identifies the subject matter of the agency's intended action.)

In the Matter of: The amendment of OAR 410-141-0520 and the repeal of OAR 410-141-0520(T)

Statutory Authority: ORS 413.042 and 414.065

Other Authority:

Stats. Implemented: ORS 414.065 and 414.727

Need for the Rule(s): The OHP program administrative rules govern the Division's payments for services provided to clients. The Authority needs to amend 410-141-0520. This change references the new interim modifications to the Centers for Medicare and Medicaid Services' (CMS) approved biennial January 1, 2016–December 31, 2017, Prioritized List funded through line 475. These modifications include revised condition treatment pairings approved at the January 14, 2016, through August 11, 2016, HERC meetings not involving the changes to the prioritization of treatments for conditions of the back and spine already reflected in the July 1, 2016, Prioritized List. The October 1, 2016, Prioritized List includes revised line items and new/revised guideline notes and multisector interventions that supersede those found in the July 1, 2016, Prioritized List.

Documents Relied Upon, and where they are available: June 8, 2016, cover letter from HERC to Oregon Legislative leadership reporting interim modifications and technical changes. HERC Prioritized List of Health Services found at:

- Pending List <http://www.oregon.gov/oha/herc/Pages/Prioritized-List-Pending.aspx>
- Current List <http://www.oregon.gov/oha/herc/Pages/PrioritizedList.aspx>

Fiscal and Economic Impact: See below.

Statement of Cost of Compliance:

1. Impact on state agencies, units of local government and the public (ORS 183.335(2)(b)(E)): Amending these rules will have no fiscal impact on the Authority, other state agencies, units of local government, the public, or businesses, including small businesses. The interim modifications are adoption of national code set changes, funding lines 1-475 for the January 1, 2016-December 31, 2017, biennial Prioritized List. The HERC Prioritized List is legislatively funded. The Division does not anticipate significant impact on state agencies, units of local government, or the public.
2. Cost of compliance effect on small business (ORS 183.336):
 - a. Estimate the number of small businesses and types of business and industries with small businesses subject to the rule: The types of small businesses include doctor's offices, specialty groups, small clinics and community based providers; however, the Division's system does not flag which providers are part of a larger clinic or corporation; therefore, the Division is unable to estimate the number of small businesses that are subject to the rules. The Division does not anticipate a direct or indirect impact on small businesses.
 - b. Projected reporting, recordkeeping and other administrative activities required for compliance, including costs of professional services: The Division does not anticipate additional administrative activities required for compliance or costs of professional services.
 - c. Equipment, supplies, labor and increased administration required for compliance: The Division does not anticipate additional administrative activities required for compliance or costs of professional services.

How were small businesses involved in the development of this rule? The HERC Prioritized List is legislatively funded.

Administrative Rule Advisory Committee consulted?: No, RAC. If not, why?: These rules are vetted through the Health Evidence Review Commission (HERC), and as a result we do not hold RACs for these rules.

Signature 

Printed name Karon Wheeler Date 9/22/16

Prioritized List of Health Services

(1) The Health Evidence Review Commission (HERC) Prioritized List of Health Services (Prioritized List) is the listing of physical and mental health services with “expanded definitions” of practice guidelines and statements of intent as presented to the Oregon Legislative Assembly. The Prioritized List is generated and maintained by HERC. The HERC maintains the most current list on their website:

<http://www.oregon.gov/oha/herc/Pages/index.aspx>. For a hard copy, contact the Division within the Oregon Health Authority (Authority).

(2) This rule, effective October 1, 2016, incorporates by reference new interim modifications to the Centers for Medicare and Medicaid Services’ (CMS) approved biennial January 1, 2016–December 31, 2017, Prioritized List funded through line 475. These modifications include revised condition treatment pairings approved at the January 14, 2016, through August 11, 2016, HERC meetings not involving the changes to the prioritization of treatments for conditions of the back and spine already reflected in the July 1, 2016, Prioritized List. The October 1, 2016, Prioritized List includes revised line items and new/revised guideline notes and multisector interventions that supersede those found in the July 1, 2016, Prioritized List.

Stat. Auth.: ORS 413.042 & 414.065

Stats. Implemented: ORS 414.065 & 414.727

410-141-0520

Prioritized List of Health Services

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~~(2) This rule incorporates by reference new modifications effective July 1, 2016, to the Centers for Medicare and Medicaid Services' (CMS) approved biennial January 1, 2016–December 31, 2017 Prioritized List of condition treatment pairs funded through line 475, including interim modifications approved at the October 1, 2015 and November 12, 2015 HERC meetings. The July 1, 2016 Prioritized List includes previously delayed changes to the Prioritized List involving the treatments for conditions of the back and spine (mplementation of these changes had been delayed from its original planned date of January 1, 2016) In addition, several new interim modifications are included that were approved at the January 14, 2016 and May 19, 2016 HERC meetings, which represent conforming changes involving the pairing of treatments for conditions of the back and spine.~~

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