



DELBERT HOSEMAN
Secretary of State

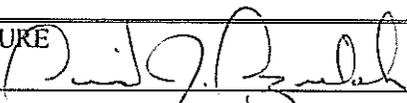
ECONOMIC IMPACT STATEMENT

An Economic Impact Statement is required for this proposed rule by Section 25-43-3.105 of the Administrative Procedures Act. An Agency is encouraged to use as much space as will adequately answer all questions. A PDF version of this executed Form must be filed with any proposed rule, if required by the aforementioned statute.

AGENCY NAME Division of Medicaid	CONTACT PERSON Margaret Wilson		TELEPHONE NUMBER 601-359-5241
ADDRESS 550 High Street 1000	CITY Jackson	STATE MS	ZIP 39201
EMAIL Margaret.Wilson@medicaid.ms.gov	DESCRIPTIVE TITLE OF PROPOSED RULE Administrative Code Title 23: Division of Medicaid Part 202 Hospital Services, Chapter 2 Outpatient Services, Rule 2.3 Emergency Room Outpatient Visits		
Specific Legal Authority Authorizing the promulgation of Rule: MS Code § 43-13-117; § 43-13-117; 42 CFR § 440.230; 42 CFR § 447.204	Reference to Rules repealed, amended or suspended by the Proposed Rule: Rule 2.3 Emergency Room Outpatient Visits		

1. Describe the need for the proposed action: To ensure adequate access to care for all Medicaid beneficiaries.
2. Describe the benefits which will likely accrue as the result of the proposed action: Adequate access to care for all Medicaid beneficiaries.
3. Describe the effect the proposed action will have on the public health, safety, and welfare: Adequate access to care for all Medicaid beneficiaries.
4. Estimate the cost to the agency and to any other state or local government entities, of implementing and enforcing the proposed action, including the estimated amount of paperwork, and any anticipated effect on state or local revenues: \$600,000 annually to the Division of Medicaid. There is no anticipated cost to any other state or local government entities.
5. Estimate the cost or economic benefit to all persons directly affected by the proposed action: None.
6. Provide an analysis of the impact of the proposed rule on small business: There is no impact on small business.
 - a. Identify and estimate the number of small businesses subject to the proposed regulation:

- b. Provide the projected reporting, recordkeeping, and other administrative costs required for compliance with the proposed regulation, including the type of professional skills necessary for preparation of the report or record:
 - c. State the probable effect on impacted small businesses:
 - d. Describe any less intrusive or less costly alternative methods of achieving the purpose of the proposed regulation including the following regulatory flexibility analysis:
 - i. The establishment of less stringent compliance or reporting requirements for small businesses;
 - ii. The establishment of less stringent schedules or deadlines for compliance or reporting requirements for small businesses;
 - iii. The consolidation or simplification of compliance or reporting requirements for small businesses;
 - iv. The establishment of performance standards for small businesses to replace design or operational standards required in the proposed regulation; and
 - v. The exemption of some or all small businesses from all or any part of the requirements contained in the proposed regulations:
7. Compare the costs and benefits of the proposed rule to the probable costs and benefits of not adopting the proposed rule or significantly amending an existing rule: Hospitals will receive reimbursement for all covered Medicaid services and ancillaries for all emergency room visits.
 8. Determine whether less costly methods or less intrusive methods exist for achieving the purpose of the proposed rule where reasonable alternative methods exist which are not precluded by law: The previous method that bundled adult emergency room services affected access to care.
 9. Describe reasonable alternative methods, where applicable, for achieving the purpose of the proposed action which were considered by the agency: The previous method that bundled adult emergency room services affected access to care.
 10. State reasons for rejecting alternative methods that were described in #9 above: Alternative method as describe in 9 above affected access to care.
 11. Provide a detailed statement of the data and methodology used in making estimates required by this subsection: Outpatient Medicaid claims for adult emergency room visits using the two lowest evaluation and management codes were analyzed for September 1, 2012 – November 30, 2012 to compute payments for unbundled services.

SIGNATURE 	TITLE Executive Director
DATE 12/20/12	PROPOSED EFFECTIVE DATE OF RULE September 1, 2012