

The proposed rulemaking clarifies that the AHCCCS Outpatient Capped Fee-For-Service Schedule delineated in A.A.C. R9-22-712.10 through R9-22-712.50 shall apply only to payments for outpatient hospital services provided by non-IHS acute hospitals and not to payments for outpatient services of freestanding outpatient treatment centers that are affiliated with hospitals (“provider-based”) and provide emergency services. Outpatient treatment centers are a class of health care institutions without inpatient beds as defined in A.A.C. R9-10-101(130). A subclass of outpatient treatment centers provides emergency services under A.A.C R9-10-1019 and may be subject to 42 CFR 489.24, implementing the Emergency Medical Treatment and Active Labor Act (EMTALA). Such institutions are also referred to as freestanding emergency rooms or freestanding emergency departments. Some are licensed separately from the hospital they are affiliated with while others operate under a single group license with the hospital. This proposed rulemaking clarifies that services provided by outpatient treatment centers, including provider-based freestanding outpatient treatment centers, are not outpatient hospital services which are reimbursed as specified in A.A.C. R9-22-712.10 through R9-22-712.50. Instead, those services are reimbursed under the capped fee schedule established by the AHCCCS Administration which schedule is exempt from the requirements of rule-making under A.R.S. 41-1005(A)(9).

6. A reference to any study relevant to the rule that the agency reviewed and proposes either to rely on or not to rely on in its evaluation of or justification for the rule, where the public may obtain or review each study, all data underlying each study, and any analysis of each study and other supporting material:

A study was not referenced or relied upon when revising these regulations.

7. A showing of good cause why the rulemaking is necessary to promote a statewide interest if the rulemaking will diminish a previous grant of authority of a political subdivision of this state:

Not applicable.

8. The preliminary summary of the economic, small business, and consumer impact:

The Administration does not anticipate an economic impact on the implementing Agency, small businesses, or consumers. Freestanding outpatient treatment centers, which are

relatively new to Arizona, are subclasses of outpatient treatment centers. Approximately five such facilities currently exist although additional freestanding outpatient treatment centers are planned for the future. The AHCCCS Administration has not paid these facilities as specified in A.A.C. R9-22-712.10 through R9-22-712.50. The payment methodology specified in these regulations applies only to payments for outpatient hospital services provided by non-IHS acute hospitals.

9. The agency's contact person who can answer questions about the economic, small business and consumer impact statement:

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10. The time, place, and nature of the proceedings to make, amend, repeal, or renumber the rule, or if no proceeding is scheduled, where, when, and how persons may request an oral proceeding on the proposed rule:

Proposed rule language will be available on the AHCCCS website www.azahcccs.gov the week of March 18, 2016. Please send written or email comments to the above address by the close of the comment period, 5:00 p.m., May 9, 2016.

Date: May 9, 2016

Time: 10:00 a.m.

Location: AHCCCS
701 East Jefferson
Phoenix, AZ 85034

Nature: Public Hearing

Date: May 9, 2016

Time: 10:00 a.m.

Location: ALTCS: Arizona Long-Term Care System
1010 N. Finance Center Dr, Suite 201
Tucson, AZ 85710

Nature: Public Hearing

Date: May 9, 2016

Time: 10:00 a.m.

Location: 2717 N. 4th St. STE 130
Flagstaff, AZ 86004

Nature: Public Hearing

11. All agencies shall list other matters prescribed by statute applicable to the specific agency or to any specific rule or class of rules. Additionally, an agency subject to Council review under A.R.S. §§ 41-1052 and 41-1055 shall respond to the following questions:

No other matters have been prescribed.

a. Whether the rule requires a permit, whether a general permit is used and if not, the reasons why a general permit is not used:

Not applicable

b. Whether a federal law is applicable to the subject of the rule, whether the rule is more stringent than federal law and if so, citation to the statutory authority to exceed the requirements of federal law:

Not applicable

c. Whether a person submitted an analysis to the agency that compares the rule's impact of the competitiveness of business in this state to the impact on business in other states:

No analysis was submitted.

12. A list of any incorporated by reference material as specified in A.R.S. § 41-1028 and its location in the rules:

None

13. The full text of the rules follows:

ARTICLE 7. STANDARDS FOR PAYMENTS

Section

R9-22-712.15. Outpatient Hospital Reimbursement: Affected Hospitals

ARTICLE 7. STANDARDS FOR PAYMENTS

R9-22-712.15. Outpatient Hospital Reimbursement: Affected Hospitals

~~Except as provided in R9-22-712(G), the AHCCCS Outpatient Capped Fee-For-Service Schedule shall apply to AHCCCS payments for outpatient services in all non-IHS acute hospitals.~~

The AHCCCS Outpatient Capped Fee-For-Service Schedule shall apply to AHCCCS payments for outpatient hospital services in all non-IHS acute hospitals. Services provided by an Outpatient Treatment Center (OTC) as defined in R9-10-101 that provides emergency room services under R9-10-1019 and that is subject to the requirements of 42 CFR 489.24, shall not be reimbursed as set forth in this Article regardless of whether the OTC operates under a hospital's single group license.