Form: TH-07 August 2022



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# Periodic Review and Small Business Impact Review Report of Findings

Agency name	Department of Health
Virginia Administrative Code (VAC) Chapter citation(s)	12VAC5-200
VAC Chapter title(s)	Regulations Governing Eligibility Standards and Charges for Medical Care Services to Individuals
Date this document prepared	10/18/2022

This information is required for executive branch review and the Virginia Registrar of Regulations, pursuant to the Virginia Administrative Process Act (APA), Executive Order 19 (2022) (EO 19), any instructions or procedures issued by the Office of Regulatory Management (ORM) or the Department of Planning and Budget (DPB) pursuant to EO 19, the Regulations for Filing and Publishing Agency Regulations (1 VAC 7-10), and the Form and Style Requirements for the Virginia Register of Regulations and Virginia Administrative Code.

## **Acronyms and Definitions**

Define all acronyms used in this Report, and any technical terms that are not also defined in the "Definitions" section of the regulation.

No acronyms used and not technical terms undefined.

### **Legal Basis**

Identify (1) the promulgating agency, and (2) the state and/or federal legal authority for the regulatory change, including the most relevant citations to the Code of Virginia or Acts of Assembly chapter number(s), if applicable. Your citation must include a specific provision, if any, authorizing the promulgating agency to regulate this specific subject or program, as well as a reference to the agency's overall regulatory authority.

Section 32.1-11 of the Code of Virginia establishes the authority of the State Board of Health to formulate a program of environmental health services, laboratory services and preventive, curative and restorative medical care services, including home and clinic health services described in Titles V, XVIII, and XIX of the United States Social Security Act and amendments thereto, to be provided by the Department of Health on a regional, district, or local basis. It also establishes the authority of the Board to define the income limitations for medically indigent persons; prescribe the charges to be paid for medical care services of the Department; prescribe a scale of charges based on the ability to pay; authorize the Department to charge an amount equal to the allowable charge of an insurer for persons who have private health insurance.

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Section 32.1-12 establishes the authority of the Board to make, adopt, promulgate and enforce such regulations and provide for reasonable variances and exemptions that may be necessary to carry out these provisions and other laws of the Commonwealth administered by the Board, the Commissioner of Health, or the Department of Health.

## **Alternatives to Regulation**

Describe any viable alternatives for achieving the purpose of the regulation that were considered as part of the periodic review. Include an explanation of why such alternatives were rejected and why this regulation is the least burdensome alternative available for achieving its purpose.

No alternatives were considered. This regulation addresses the provisions of §§ 32.1-11 and 32.1-12 with no undue burdens.

### **Public Comment**

<u>Summarize</u> all comments received during the public comment period following the publication of the Notice of Periodic Review, and provide the agency's response. Be sure to include all comments submitted: including those received on Town Hall, in a public hearing, or submitted directly to the agency. Indicate if an informal advisory group was formed for purposes of assisting in the periodic review.

No public comments were received during the public comment period.

#### **Effectiveness**

Pursuant to § 2.2-4017 of the Code of Virginia, indicate whether the regulation meets the criteria set out in the ORM procedures, including why the regulation is (a) necessary for the protection of public health, safety, and welfare, and (b) is clearly written and easily understandable.

The regulation is necessary for the protection of public health, safety, and welfare by establishing a means to identify an individual as medically indigent for the purposes of receiving no cost medical services by the Department of Health. It also establishes a framework of charges and an incremental charge scale based on a person's ability to pay, which will be consistently applied throughout the Department and its local offices. In addition, it allows services to reduce vaccine-preventable and other communicable diseases to be provided at low or no cost to individuals with limited ability to pay for them. The regulation includes extensive definitions of the most basic terms, references to the Code of Virginia where applicable, and is clearly worded without undefined acronyms or technical terms.

#### **Decision**

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Explain the basis for the promulgating agency's decision (retain the regulation as is without making changes, amend the regulation, or repeal the regulation).

If the result of the periodic review is to retain the regulation as is, complete the ORM Economic Impact form.

The agency's decision is to amend the regulation to make format and style changes, procedural updates, add reference to a change made to the Code, add clarifying language and remove any unnecessary, duplicative, or non-regulatory language.

#### **Small Business Impact**

As required by § 2.2-4007.1 E and F of the Code of Virginia, discuss the agency's consideration of: (1) the continued need for the regulation; (2) the nature of complaints or comments received concerning the regulation; (3) the complexity of the regulation; (4) the extent to the which the regulation overlaps, duplicates, or conflicts with federal or state law or regulation; and (5) the length of time since the regulation has been evaluated or the degree to which technology, economic conditions, or other factors have changed in the area affected by the regulation. Also, discuss why the agency's decision, consistent with applicable law, will minimize the economic impact of regulations on small businesses.

The regulation is necessary to provide details to local health department offices on the structure for charging for medical services and assessing a client's ability to pay in a consistent manner statewide. There were no public comments or complaints submitted concerning this regulation. The regulation is not complex. The regulation does not duplicate or conflict with federal or state law or regulation. The regulation is assessed on a continual basis to evaluate if changes in technology, economic conditions, or other factors in the area affected by the regulation indicate a need for an amendment to reflect current state.